

Raith Manor Care Home Service

1 Sunny Braes Court
Ferrard Road
Kirkcaldy
KY2 5ES

Telephone: 01595 642 008

Type of inspection:
Unannounced

Completed on:
26 November 2024

Service provided by:
ABBOTSFORD CARE LTD

Service provider number:
SP2010010867

Service no:
CS2014334458

About the service

Raith Manor is a purpose built care home which was opened in 2015. The care home forms part of the Abbotsford Care group and is located in a residential area of Kirkcaldy, close to the railway station and town centre.

The service is registered to provide 24 hour care and support to a maximum of 60 people, including older people, people living with dementia, and people with other physical and mental health needs.

Accommodation is provided over three floors with communal lounges, dining areas and bathrooms on each floor. Each bedroom has an ensuite. The home has a well maintained garden and car park to the front.

There was a fire at Raith Manor in December 2023. No one was hurt but the service had to deal with significant disruption. People were relocated to various care homes in the area to allow for renovations to take place. People moved back to Raith Manor in April 2024.

About the inspection

This was a follow up inspection which took place on 19 November 2024. The inspection was carried out by one inspector.

To prepare for the inspection, we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with three people using the service
- spoke with six staff and management
- spoke with two visiting professionals
- observed practice and daily life
- reviewed documents.

Key messages

- The service had made improvements since our last inspection.
- Staff received formal supervision and observations of practice.
- New keypad locks had been installed to ensure potentially dangerous areas of the home were closed and locked.
- Two outstanding requirements were met.

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 2 September 2024, the provider must support good outcomes for people by implementing a system of regular formal staff supervision.

To do this, the provider must, at a minimum:

- a) ensure that learning needs are assessed, reviewed and addressed;
- b) ensure that observations of practice are undertaken and discussed; and
- c) ensure that staff have the opportunity to formally discuss their views.

This is to comply with Section 7(1)(a), (b) and (c) of the Health and Care (Staffing) (Scotland) Act 2019 (as substituted for regulation 15(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210)).

This is to comply with Regulation 4(1)(a) (Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is in order to ensure care and support is consistent with Health and Social Care Standards (HSCS) which state that:

'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

This requirement was made on 10 June 2024.

Action taken on previous requirement

We found that the service had made progress in providing formal supervision for staff. The vast majority of staff had received at least one formal supervision meeting since our initial inspection and this was tracked using a tool to ensure meetings were scheduled in line with organisational policy. Staff and service leaders had the option to increase the frequency of meetings if needed. We were confident that staff had the opportunity to reflect on their practice and discuss any concerns.

Learning needs were discussed at supervision meetings and additional training was provided where needed. We found that supervisors were knowledgeable about the learning needs of staff. This included required learning to comply with SSSC registration requirements and learning needs which had been identified during observations of practice. We could be confident that staff were supported to follow their professional codes.

We felt that the recording of some supervision meetings could be more detailed. While some recorded discussion in a good level of detail, others did not. The service should increase consistency in this area to ensure that all pertinent discussion points are recorded.

Observations of practice were being undertaken on a variety of practice areas, including infection prevention and control, and moving and handling. Feedback was given to staff as soon as possible and we saw examples where talking points from observations were discussed at the next supervision meeting. Some additional exercises had taken place where it was felt these were required, including learning needs analysis and performance evaluations. We were confident that observations of practice were identifying areas for improvement and addressing these.

Staff told us that the supervision process had been a positive experience. We heard that supervisors and service leaders had been constructive in their feedback on practice observations. We also saw examples where good practice was celebrated. We were told that supervisors and service leaders were supportive and approachable.

This requirement has been met.

Met - within timescales

Requirement 2

By 2 September 2024, the provider must make safe all areas of the home which have been identified as posing a potential risk to people.

This should include, but is not limited to:

- a) storage areas for cleaning products; and
- b) electrical cupboards.

This is to comply with Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My environment is secure and safe' (HSCS 5.19).

This requirement was made on 10 June 2024.

Action taken on previous requirement

We checked cupboard doors where there were potentially hazardous materials and areas inside throughout the inspection. We found these locked at all times. There were new keypads installed on each door which locked on closing and did not require a key. We could be confident that the environment was safe and secure.

This requirement has been met.

Met - within timescales

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

To promote the health and wellbeing of people using the service, the provider should ensure that activities are planned, recorded and evaluated on a regular basis.

This should include, but is not limited to, ensuring people who prefer not to take part in group activities are given the opportunity to experience a meaningful day in other ways.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that:

'I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors' (HSCS 1.25)

and

'I can maintain and develop my interests, activities and what matters to me in the way that I like' (HSCS 2.22).

This area for improvement was made on 10 June 2024.

Action taken since then

This area for improvement has not been assessed and remains in place.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com

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