

Buckreddan Care Centre Care Home Service

Irvine Road
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Telephone: 01294 542 700

Type of inspection:
Unannounced

Completed on:
27 February 2025

Service provided by:
Buckreddan Partnership

Service provider number:
SP2003002258

Service no:
CS2003010255

About the service

Buckreddan Care Centre is a care home for older people, situated in a residential area of Kilwinning close to local transport links, shops, and community services.

The service provides nursing and residential care for residents who can be accommodated in Eglinton Unit and Garnock Unit.

The provider is Buckreddan Partnership.

Residents have single rooms, most of which have en-suite facilities, with many incorporating a sitting area. Each building has its own kitchen and laundry service areas. Residents have access to a number of lounges, dining areas and an on-site hairdresser. The home further benefits from some secure outdoor spaces. Parking space for visitors is available within the grounds of the home.

About the inspection

This was a follow up inspection which took place on 27 February 2025. The inspection was focussed on the progress made by the service in response to requirements made following a complaint investigation, which took place on 10 December 2024. This inspection was carried out by two inspectors from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service via notifications and intelligence gathered since the last inspection. In making our evaluations of the service, we spoke with management and reviewed documentation.

Key messages

Positive progress had been made regarding falls management and medication management. Consistent oversight and reviews of falls management and medication management were taking place at both staff and management level.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	3 - Adequate
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Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

3 - Adequate

This was a follow up inspection following a recent complaint, with a focus on falls management and medication management.

We observed improvement in both areas, with more robust auditing and management oversight.

Following discussions with management, it was agreed that further progress can be made with regard to the timeous updating of falls management care plans and risk assessments. This is to ensure that appropriate, continued responsive care and support can be provided to a person who has sustained a fall. Post falls reports and reflections should also be more person centred, to reflect the individual's needs moving forward. This will be an area for improvement.

Areas for improvement

1. To ensure that people experiencing care receive the right care and support following a fall, the provider should ensure that staff timeously accurately record the events surrounding a fall within a person experiencing care's care plan and update their risk assessment accordingly. This should include, but is not limited to, staff having knowledge and understanding of the falls management protocol and ensuring that post falls reflections are person centred to meet the individual's needs.

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

Requirements

Requirement 1

By 14 February 2025, the provider must ensure the safety and wellbeing of people experiencing care. To do this, the provider must, at a minimum:

- a) ensure that staff are familiar with, and adhere to, the prevention and management of falls strategy
- b) ensure that staff are trained in falls prevention and management
- c) ensure that staff complete and update falls risk assessments and falls management care plans when necessary
- d) ensure that the monitoring and auditing of falls is conducted to provide robust falls analysis. This is to enable mitigating measures to be put in place where appropriate.

This requirement was made on 10 December 2024.

Action taken on previous requirement

We observed improvement in the management of falls within the service.

We could see that most staff had undertaken relevant falls management training.

The service had sought relevant input from external health professionals in the revision of their falls management policy and procedures.

There is now consistent management oversight and auditing into the factors surrounding falls sustained by the people experiencing care, with more robust follow up actions to help mitigate the risk of further falls.

Following discussions with management, it was agreed that further progress can be made with regard to the timeous updating of falls management care plans and risk assessments. This is to ensure that continued, responsive care and support can be provided to a person who has sustained a fall. Post falls reports and reflections should also be more person centred to reflect the individual's needs moving forward. This will be an area for improvement.

Met - within timescales

Requirement 2

By 14 February 2025, the provider must ensure the safety and wellbeing of people experiencing care by ensuring that people get the right medication at the right time. To do this, the provider must, at a minimum:

- a) ensure that an up-to-date care plan is in place for people supported with medication, which accurately reflects their support needs
- b) ensure that staff respond efficiently and effectively to any suspected ailment so that people receive timely medical intervention when needed
- c) ensure that regular medication audits are completed and recorded
- d) ensure that appropriate notifications for any missed medication or medication errors are submitted through the eforms system in accordance with the notification guidance, publication date February 2012 as amended 30 April 2020.

This requirement was made on 10 December 2024.

Action taken on previous requirement

We observed significant improvement in medication management overall.

From random samples selected, we could see that health and medication care plans were up to date and reviewed regularly to reflect any change in circumstances. Staff had been responsive to incidents requiring medical input and clinical observations, and had been responsive to changes in the presentation in health of people experiencing care. Staff had timeously consulted with relevant health professionals when appropriate.

We observed a robust medication audit process, displaying consistent senior staff and management oversight. This offered assurance that people experiencing care receive the right medication, at the right time.

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 ensure that people are receiving consistent, daily personal care and support, the provider should ensure that personal care plans are reflective of the person's care and support needs. This should include, but is not limited to, detailed recording of when personal care and support have been provided, including the content of the support given.

This area for improvement was made on 10 December 2024.

Action taken since then

This was not assessed at this time.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Detailed evaluations

How well do we support people's wellbeing?	3 - Adequate
1.3 People's health and wellbeing benefits from their care and support	3 - Adequate

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