

# Glenfairn House Nursing Home Care Home Service

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Ayr  
KA7 2UX

Telephone: 01292 610770

**Type of inspection:**

Unannounced

**Completed on:**

31 January 2020

**Service provided by:**

Glenfairn Limited

**Service provider number:**

SP2003000269

**Service no:**

CS2003001322

## About the service

Glenfairn House Nursing Home is registered for 75 older people who may have physical needs and/or dementia. A maximum of 10 of these places can be used to provide respite/short break places. At the time of inspection 54 people were living in the care home.

There has been a very recent change in ownership of the service. The new owners, Sanctuary Care Limited, have intimated their intention to complete a programme of environmental improvements, introduce new quality assurance processes and management systems.

The service is located in Ayr and consists of a detached original stone property with a large modern extension to the side and rear. The bedrooms are either single or double rooms, the majority with en suite. There is access to the accommodation on all floors by means of stairs, passenger lift and the service has disabled ramp access. The service is situated within its own secure, well maintained grounds.

The service's stated aim is;

'To ensure that all residents are given good quality care based on basic values such as privacy, dignity, independence, choice, rights and fulfilment'.

## What people told us

An inspection volunteer was involved in this inspection. This is someone who uses, or has used services or an unpaid carer, who volunteer to take part in inspections. They talk to people who use the service, relatives and friends and make observations based on their own personal experience. This information is used by the inspector to report on the service and award grades. The inspection volunteer spoke with residents in communal sitting and dining areas and in residents own rooms.

We received feedback from 28 people who experience care and their relatives via Care Standards Questionnaires and contact during the inspection process.

Overall, people expressed high levels of satisfaction with the quality of the service. Several individuals commented that the staff were very busy.

Comments made included:

"Very happy, brilliant staff, good food, kept well informed, always clean and tidy".

"Can't find fault, food very good, good cook, girls are very helpful, (named individual) takes an interest in you. Like dancing and Zumba something for everyone".

"Very happy, very good at supporting family, staff great, slight miscommunication - anything is actioned, food brilliant, go above and beyond".

"Most of the carers great".

"Look after me well, food is fair but good at changing".

"Was on a bus outing, food is very good, staff all nice, press the buzzer and sometimes have to wait".

"Food nice, I am not bored".

"Decoration doesn't matter its staff".

**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?	5 - Very Good
How good is our leadership?	not assessed
How good is our staffing?	not assessed
How good is our setting?	not assessed
How well is our care and support planned?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

**How well do we support people's wellbeing?**

**5 - Very Good**

We concluded that Glenfairn performed well with regard to supporting people's wellbeing.

People who experience care can expect to be supported by staff who are respectful and compassionate. We saw that staff were kind and patient in their approach.

Individuals benefited from a responsive management and stable staff team. Staff knew people well and could respond to their needs, choices and any changes in their health and wellbeing. To help people stay well managers used an effective system to monitor key areas of health and wellbeing, this took account of unplanned weight loss, falls and skin integrity. Support from external health professional was sought where needed. Health and wellbeing was further supported by a range of relevant aids and equipment.

Overall, medication was appropriately managed. A staff training programme was underway to support a more person-centred approach to administering medication in line with each individual's daily routine. We noted an occasion where medication was not administered in accordance with the dosage prescribed. The service management responded appropriately to this, therefore, no areas of improvement have been made.

People who experience care can expect to have enjoyable meals that meet their needs and preferences. Catering staff knew of people's dietary requirements and accommodated choices outwith the planned menu. A visual choice at mealtimes supported individuals with a cognitive impairment to choose their preferred option. Residents expressed satisfaction regarding their meals.

Health and wellbeing is known to benefit from physical activity and meaningful occupation. Dedicated staff were employed to promote social opportunities. We saw photographs of residents enjoying many outings in the local area and further afield. Residents benefited from a beautifully maintained garden, enhanced by the recent addition of a large summer-house to accommodate additional social events. The varied activity schedule took account of regular Zumba classes, musical entertainment, themed nights, games and quizzes, arts and crafts and visits from various animal petting groups. Birthdays, holidays and special days were celebrated. Activity staff were aware of the importance of scheduling individual time with those whose physical or cognitive frailty prevented them from participating in organised group events. Management and staff demonstrated a commitment to ongoing development to support people to get the most out of life. Ongoing development of the key worker role would support improvement in this area.

The bi-monthly Glenfairn Community Café continues to invite people who experience care and their relatives to meet to obtain information and share their experiences and feelings about living with dementia in a supportive environment.

To ensure that individuals needs were met at the right time by the right number of people the management had reviewed the shift pattern and were piloting a new housekeeping role to support the direct care staff team. This was to be evaluated. There was a good staff presence around the care home which helped to ensure staff could respond to people's needs.

## How good is our leadership?

This key question was not assessed.

## How good is our staff team?

This key question was not assessed.

## How good is our setting?

This key question was not assessed.

## How well is our care and support planned?

**4 - Good**

To help staff to deliver effective person-led support individuals should be involved in setting out how their needs, wishes and choices will be met.

Overall, we found the quality of care planning was good. Care plans were outcome based and gave good detail about each person's care and support needs. Staff were knowledgeable about people's needs and preferences and this was reflected within individual plans. To ensure personal plans could be relied upon as an accurate account of the care and support provided staff must ensure that they are consistently updated in accordance with people's changing needs.

Care plans were evaluated regularly as expected, however, ongoing improvement was needed to evaluations and formal care reviews to fully capture how planned interventions impacted on outcomes and experiences for individuals, including how they get the most out of life.

Care plans were informed by a range of clinical risk assessments based on best practice guidance. These were regularly reviewed as expected.

Appropriate documentation was in place to support decision making where people's capacity for informed decision making was reduced.

A change in ownership occurred recently, the new owner intends to implement an electronic care planning and recording system.

## 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

The provider should improve personal plans and six monthly reviews to reflect residents' needs, choices and personal preferences and how these are being met in sufficient detail with a strong focus on promoting independence and personal outcomes. There should also be guidance for staff in relation to appropriate strategies to use when supporting people in times of stress and distress.

This is to ensure care and support is consistent with the Health and Social Care Standards which states: "My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices". (HSCS 1.15)

**This area for improvement was made on 22 February 2019.**

#### Action taken since then

Improvement had been made. The personal planning model was outcome based. Strategies to support the management of people's stress and distress were recorded and individuals preferences and choices were noted.

Personal plans and reviews would benefit from being more evaluative with a stronger focus on each residents experience. Some personal plans would benefit from being updated to reflect changes in people's care needs.

The new provider planned to implement an electronic care planning model.

On balance, this area for improvement is: met.

#### Previous area for improvement 2

To ensure people's nutritional needs are met and evidence appropriate monitoring of dietary and fluid intake where required, records should be improved to indicate the quantities of meals and snacks taken and the way in which they are fortified.

This is to ensure care and support is consistent with the Health and Social Care Standards which states: "My meals and snacks meet my cultural and dietary needs". (HSCS 1.37)

**This area for improvement was made on 22 February 2019.**

### Action taken since then

Improvements in recording nutritional intake were noted.

This area for improvement is: met.

### Previous area for improvement 3

To evidence appropriate monitoring and review of individuals health and well being the frequency and content of nurses clinical notes should be improved.

This is to ensure care and support is consistent with the Health and Social Care Standards which states: "I experience high quality care and support based on relevant evidence, guidance and best practice". (HSCS 4.11)

**This area for improvement was made on 22 February 2019.**

### Action taken since then

Health related information was recorded across a number different records. Although the clinical notes were not always completed we were satisfied that health issues were followed up. The provider planned to implement a new electronic recording system. It is anticipated that this will support ongoing improvement in this area.

This area for improvement is: met.

### Previous area for improvement 4

To evidence that people get the most out of life, care records should demonstrate that social activities have clear links to individuals' interests and preferences as stated in care plans.

This is to ensure care and support is consistent with the Health and Social Care Standards which states: "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)

**This area for improvement was made on 22 February 2019.**

### Action taken since then

We found improvement in this area. There were many photographs of individuals enjoying recreational activities, some of these were published in the services Newsletter. Key worker notes helped to evidence activities that people had participated in. We heard nice examples of individuals being supported to visit places and attend activities they had expressed an interest in.

This area for improvement is: met.

### Previous area for improvement 5

To ensure that individuals get the most out of life the provider must ensure that;

- People who experience care have the opportunity to participate in activities that are meaningful to them and

that every effort is made by staff to ensure that individuals are not socially or emotionally isolated by improving the frequency and quality of engagement with individuals throughout the day.

- Activity records must be improved to reflect the activities individuals have participated in and how positive engagement enhancing people's overall health and wellbeing.

This is to ensure care and support is consistent with the Health and Social Care Standards which states: "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)

and

"I take part in daily routines such as setting up activities and mealtimes, if this is what I want". (HSCS 2.21)

**This area for improvement was made on 22 February 2019.**

### Action taken since then

We found improvement in this area. There were many photographs of individuals enjoying recreational activities, some of these were published in the services Newsletter. Key worker notes helped to evidence activities that people had participated in. We heard nice examples of individuals being supported to visit places and attend activities they had expressed an interest in.

This area for improvement is: met.

### Previous area for improvement 6

To promote health, wellbeing and good skin care and to comply with best practice guidance, medication records must be improved to accurately reflect when prescribed medication has been administered and the reason for any omission.

This is to ensure care and support is consistent with the Health and Social Care Standards which states: "I experience high quality care and support based on relevant evidence, guidance, and best practice". (HSCS 4.11)

**This area for improvement was made on 22 February 2019.**

### Action taken since then

We saw improvements in this area.

This area for improvement is: met.

### Previous area for improvement 7

To promote positive outcomes for people who experience care, management should review and improve staff deployment. Life story work and development of the key worker role may support a more person-led approach.

This is to ensure care and support is consistent with the Health and Social Care Standards which states: "My needs are met by the right number of people". (HSCS 3.15)

This area for improvement was made on 22 February 2019.

## Action taken since then

The management had introduced a revised shift pattern for the night duty staff. We spoke with night duty staff who confirmed that this new arrangement was working well and that they were able to support individuals routines.

A household support role was being piloted to support the direct care staff team with non-care related tasks. This was to be evaluated.

Training was underway to support some of the care staff with extended roles to support registered nursing staff with medication administration. The expected outcome of this would be a more person-centred approach to medication administration in line with individuals routines.

The management team were reviewing the key worker role and allocations to ensure that staff and individuals who experience care benefited from this.

This area for improvement is: met.

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## Detailed evaluations

How well do we support people's wellbeing?	5 - Very Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	5 - Very Good
1.3 People's health benefits from their care and support	5 - Very Good
How well is our care and support planned?	4 - Good
5.1 Assessment and care planning reflects people's planning needs and wishes	4 - Good



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