

The Meadows (Care Home) Care Home Service

Meadow Road
Dornoch
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Telephone: 01862 811133

Type of inspection:

Unannounced

Completed on:

22 January 2020

Service provided by:

Dornoch Medical Care Ltd

Service provider number:

SP2004005108

Service no:

CS2003048911

About the service

This service has been registered since 2004.

The Meadows (Care Home) provides a care home service to a maximum of 40 older people. The care home provides long-term care, as well as short breaks and respite placements. At the time of this inspection there were 39 people using the service.

The Meadows (Care Home) is a purpose-built, two storey, privately operated care home set in spacious gardens in the coastal town of Dornoch, Sutherland.

The service is provided by Dornoch Medical Care Ltd.

The Meadows (Care Home) aims to:

"Offer elderly people the opportunity to enhance their quality of life by providing a safe, manageable and comfortable environment, plus support and stimulation, to help them to maximise their potential physical, intellectual, emotional and social capacity."

What people told us

We spoke with six people who used the service during the inspection and seven relatives/carers. People who used the service told us they were happy living in The Meadows. We received the following comments when we asked questions in relation to the quality of the care and support they received:

- "I tend to sit upstairs, its my choice. I like to chat to the staff and I enjoy my visitors coming in."
- "I am ok, I would like to go home. The food is good. I like the staff they are very good to me."
- "I am quite content here. The staff are nice and I like the food very much."

The relatives/carers we spoke with were very positive about the quality of the service their family member received. We received the following comments:

- "I can't fault the staff, everyone of them is kind and caring."
- "I am so happy with the care my mother gets here. She is really well looked after. The communication is very good. I am told if there are any changes to my mother's health. I am invited in to reviews and I would be very comfortable to approach the manager of the deputy if i had any issues."
- "The staff are kind and caring and treat my family member with respect. They are very patient in some very difficult situations."
- "I can't speak highly enough about all the staff. They are all very professional. The standard of care here is very good."

We received eleven Care Standard Questionnaires from people who used the service prior to the inspection. Comments in these indicated that seven people strongly agreed and four agreed that overall they were happy with the quality of care they received in The Meadows care home.

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

There were some major strengths which supported positive outcomes for people.

People who use the service should experience care and support where they are respected and valued.

People who use the service told us that: "The staff are kind and caring", "We are treated very well here" and "I am treated with respect and looked after very well."

People should experience warmth, kindness and compassion. The atmosphere in the home was relaxed and homely. We could see from our observations that staff obviously knew people and their needs very well. Staff were noted to be kind, caring and treated people with warmth and compassion. There were lots of conversations going on between staff and people who used the service throughout the day. We noted that when staff spoke with people they called them by their preferred name and made the effort to include other people who were seated near by in their conversations. This helped people to feel included, reinforced personhood and gave them a sense of belonging.

People should be able to choose to have an active life and participate in a range of activities every day, both indoors and outdoors. The service was making really good progress in this area. Staff supported people to stay active and maintain their independence. People who used the service were involved in planning activities. This was done on an informal basis when people were gathered together for coffee mornings. We suggested that the activities coordinator take a record of these meetings to evidence people's involvement. People who used the service were encouraged to go for walks outside around the grounds and some people liked to go in to the town for coffee and some shopping. People were offered to take part in various activities from arts and crafts, games, community based activities, outings, community bikes and coffee mornings. People we spoke with told us about the different activities and how much they enjoyed them.

There were lots of photographs of people enjoying activities, parties and being out in the community. The activities coordinator was working hard to plan activities that were meaningful to people and took in to account the information gathered about people's interests and hobbies. We discussed how the activities coordinator could start to evaluate the activity provision each month. This would help ensure that the activities provided remained appropriate and were meaningful to all those who took part in them.

There was a secure garden area to the rear of the home. Relatives/carers we spoke with told us that they enjoyed the garden in the better weather. We noted that during the inspection several people were out for walks. Access to fresh air on a regular basis helps promote good health and well-being and positive outcomes for people. The service now had their own chickens. People who used the service could help look after the chickens if they wished. The chicken coup and run were positioned outside the lounges so that people could watch them and talk about them with staff.

People should have a suitable choice of healthy meals and snacks, including fresh fruit and vegetables. There were many positive comments made about the food from both people who use the service and relatives/carers. We were told that the food was good quality and there was always plenty of choice. We saw some lovely home baking being offered during the inspection. There was a menu board outside of the main dining room. We heard many people asking what was for lunch and we suggested to the manager that menus on the table or a menu board in the dining room (with pictures and words) may be a better option. Staff should also use 'show and tell' menu plates to help support people to make choices independently especially those who live with dementia or have communication difficulties. **(See area for improvement 1)**

We carried out an observation at lunch time and we found that people who required support with their meals were offered this in a dignified and respectful manner. The dining room was relaxed and there was no sense of anyone being rushed. The staffing levels were good and it was noted that people were all eating together and no one was having to wait for assistance. This resulted in a very positive and pleasant lunchtime experience.

The care and support people experience should meet their needs and be right for them. We could see that people were looked after and cared for and that staff knew people's health needs well. People who used the service had access to health professional input where necessary and relatives/carers told us that the service were very quick to act when there was any changes to people's health.

During the inspection the community dentist visited the home. He came to find us to tell us that he was really pleased how the service had embraced the caring for smiles training. He was happy that the support that people received from staff with their oral care was of a very good standard. There was also some very positive feedback from the community pharmacist. This was in relation to improvements the service had made to the medication systems in the home. We attended a meeting with a group of health professionals during the inspection. They all agreed that the management were very keen to receive any support, advice and training that would help them make further improvements to the service.

Any treatment or intervention that people experience should be safe and effective. A lot of work had been carried out since the last inspection to ensure that the system for supporting people with their medication was safe. We sampled some of the 'as required' medications and found the amounts to be correct. Staff need to ensure that where medications are left at the end of each month that the amounts are carried forward on the new medication administration record (mar). This will help ensure that there is a complete audit trail of all medications stored in the home.

Areas for improvement

1. To ensure that people are supported to make individual food choices there should be menu information available each day in an appropriate format e.g. menus on tables and menu boards on the wall with pictures/ words. Staff should also use 'show and tell' menu plates to support those people who live with dementia or have communication difficulties.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that "If I need help with eating and drinking, this is carried out in a dignified way and my personal preferences are respected." (HSCS 1.34)

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

We found there were a number of important strengths which, taken together, clearly outweigh areas for improvement. The strengths will have a significant positive impact on people's experiences and outcomes. However, improvements are needed to maximise wellbeing and ensure that people consistently have experiences and outcomes which are as positive as possible.

People should be fully involved in assessing their emotional, psychology, social and physical needs at an early stage, regularly and when their needs changed.

Each person had an initial assessment carried out when they were admitted to the home. Information from these assessments were used to develop people's care plans. Staff reviewed people's health assessments each month to ensure that the care provided remained appropriate for each person. We could see evidence and were told by relatives/carers that they were very involved in their family member's care and were consulted on any changes where this was appropriate.

People's care plans should be right for them because they set out how their needs will be met, as well as their wishes and choices.

People's care plans generally contained some very person centred information, however we found that they were not as detailed as they were at the last inspection. When we spoke with the manager and staff it was obvious that they were aware of people's individual health needs, however it would appear that some of this very important information was in the staff's head rather than in people's care plans. It is important that details of each person's care needs and the levels of support required from staff are recorded in their care plan. This will give all staff the information they need to provide the right level of care. Regular evaluations of the person's care plan will ensure that levels of support provided by staff remain appropriate and will support positive outcomes for each person.

We looked at some of the tissue viability and prevention of pressure ulcer care plans. These needed to be completed with a more consistent approach. Although outcomes were good for people and we could see that wounds were healing, some of the records did not reflect this. The deputy manager was able to evidence that the planned care for people had been carried out, however in some instances the home's records did not support this. We were satisfied that this was a recording issue as we were able to see good evidence of health professional input for those people with wounds. We also saw photographic evidence to support good progress in healing of wounds in the sample we looked at. **(See area for improvement 1)**

People were offered a regular review of their care plan with family involvement if they wished. Relatives/carers we spoke with confirmed that they were invited to attend reviews and they mostly found them a positive experience. Relatives/carers told us they were happy that if they raised issues through the review process that the service took their views on board and took necessary actions where possible. Management need to ensure that they take detailed minutes of each review and update each person's care plan to reflect any necessary changes that have come about through this process taking place. This will help support positive outcome for people and ensure that people's care and support continues to be provided at a level that is right for them.

Areas for improvement

1. To ensure that the service evidence the good care they provide to people with tissue viability needs they should complete all assessment and wound treatment care plans as planned. This will provide a consistent and accurate record and support a regular evaluation to be carried out of each person's wound/pressure ulcer. This will help ensure that the care provided remains appropriate to support good healing and positive outcomes for people.

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

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

Where people receive 'as required' medications to manage their pain, staff should consistently evaluate each medication given. This will ensure that people's pain medications remain appropriate and that their levels of pain continue to be well managed.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that "Any treatment or intervention that I experience is safe and effective." (HSCS 1.24)

This area for improvement was made on 13 December 2018.

Action taken since then

We found that the evaluation of 'as required' medications were much better at this inspection. In the sample of five that we looked at four had been regularly evaluated. A lot of work had been carried out to make improvements to the medication system and staff practice over the last few months. There had been a lot of support provided to the home by NHS health professionals. This was due to some medication errors made by staff (agency and the home's own staff) since the last inspection. We were told by NHS that the management and staff had been very receptive to the support they provided. We attended a meeting with NHS and the home's manager and deputy during the inspection and there were very positive comments made about the home's progress in relation to this matter. This area for improvement has now been met.

Previous area for improvement 2

The provider should ensure that staff have the appropriate skills and knowledge to enable them to carry out their roles confidently and competently. The manager should ensure that staff are provided with training/refresher training in the following areas. Adult support and protection, moving and handling, palliative care and tissue viability.

National Care Standards Care Homes for Older People - Standard 5 - Management and staffing arrangements.

This area for improvement was made on 30 August 2017.

Action taken since then

The service had made some progress in relation to this area for improvement, however we noted during the inspection that new staff had not received all mandatory training before commencing employment. We were told that this issue would be rectified very quickly as the service was now under Sanctuary Care Ltd who would be providing electronic training for new staff prior to commencing work with people who used the service. We would suggest that the most recent employees undergo this training as soon as possible. All training carried out as part of the induction process should be evaluated to ensure that each member of staff is confident and able to safely carry out all aspects of their role. Some staff still needed to have training in tissue viability and pressure prevention. This had been planned however due to availability of trainers this had not taken place at the time of the inspection. Due to the issues found with the inconsistent recording in people's tissue viability/wound management care plans we would suggest that staff receive this training as a matter of priority. This area for improvement has not been met.

Complaints

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