

Inspection report

Greenbank Nursing Home Care Home Service

Ayr Road
Irvine KA12 8DF

Inspected by: Sharon Laurie
(Care Commission Officer)

Type of inspection: Unannounced

Inspection completed on: 3 November 2008

Service Number

CS2003034596

Service name

Greenbank Nursing Home

Service addressAyr Road
Irvine KA12 8DF**Provider Number**

SP2003002353

Provider NameBUPA Care Homes (Carrick) Limited, a member of
the BUPA Care Homes group of companies**Inspected By**Sharon Laurie
Care Commission Officer**Inspection Type**

Unannounced

Inspection Completed

3 November 2008

Period since last inspection

3 Months

Local Office AddressSuite 3
Sovereign House
Academy Road
Irvine
KA12 8RL

Introduction

Greenbank Care Home is a modern facility which provides care for up to 40 older people, some of whom may have dementia. The home is located close to Irvine town centre with amenities nearby. It shares the grounds and landscaped gardens with its sister service Fullarton Care home. The service has been registered with the Care Commission since April 2002.

The Manager and Clinical Service Manager for both services are supported by a team of nursing, care and ancillary staff specific to each service.

The residential facilities are located on two floors and accessed by a passenger lift. The accommodation consists of single bedrooms with en-suite facilities: most have views of the landscaped garden areas and drive ways. There is also an enclosed sensory garden for the residents.

The organisation states that its vision is:

“Taking care of the lives in our hands.”

This was the second inspection of the year and this report should be read alongside the previous report where all quality themes were graded.

Based on the findings of this inspection the service has been awarded the following grades:

Quality of Care and Support - 5 - Very Good

Quality of Environment - 5 - Very Good

Quality of Staffing - 5 - Very Good

Quality of Management and Leadership - 4 - Good

This inspection report and grades represent the Care Commission’s assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. Please refer to the care services register on the Care Commission’s website (www.carecommission.com) for the most up-to-date grades for this service.

Basis of Report

Before the Inspection

The Annual Return

The service submitted a completed Annual Return as requested by the Care Commission.

The Self-Assessment Form

The service submitted a self-assessment form as requested by the Care Commission.

The following is automatic text so no input is required by either admin or CCO’s:

Views of service users

There were 4 service users spoken with as part of the inspection and another 13 completed and returned the Care Commission’s Care Standards Questionnaire. Most people were satisfied with the quality of Care which they received but there were a few people who said that they were unaware of who their key worker was or what the homes or Care

Commission's complaint procedure was.

One person complained that the night staff were sometimes slow to respond to their buzzer. This was discussed with the Manager on the day who will discuss with relevant staff.

The Manager will remind Service users and their families of the services and Care Commission's complaints procedure. Service users and carers agreed or strongly agreed with the following statements included in the Care Commission's questionnaires;

Quality of Care and Support:

Privacy:

- They were happy they had their own room

Respect:

- They were happy that they got to choose how their place was decorated.
- They were happy that they had enough say in writing their personal

Plan

- They had a copy of their care plan
- It was easy to understand
- They were happy that they had a Key worker
- They were referred to by their preferred name

Choice:

- They said that they had chosen to live here
- They had the chance to visit the service and meet the staff before coming here

Having a Say: Service users said that they;

- They felt that staff listened to them
- We have a say in how the service was run
- The service encourages them to use advocates
- They felt safe living here
- They said that they could speak to someone if they felt worried or scared
- Sometimes my Mother has other peoples clothes on

Equality:

- Service users said that they were supported to go to a place of worship if they wanted to.

Realising potential:

- Service users said that they were supported to do anything which they wanted to do

Overall comments:

I am very happy with the quality of service which I receive.

Regulation Support Assessment

The inspection plan for this service was decided after a Regulation Support Assessment (RSA) was carried out to determine the intensity of inspection necessary. The RSA is an assessment undertaken by the Care Commission Officer (CCO) which considers complaints activity, changes in the provision of the service, nature of notifications made to the Care Commission by the service (such as absence of a manager) and action taken upon requirements. The CCO will also have considered how the service responded to situations and issues as part of the RSA.

This assessment resulted in this service receiving a low RSA score and so a low intensity inspection was required. The inspection was based on the relevant Inspection Focus Areas and associated National Care Standards, recommendations and requirements from previous inspections and complaints or other regulatory activity.

During the inspection process

Staff at inspection

The inspection was undertaken on the 3rd of November 2008, between the hours of 10:30am and 18:00 pm and was carried out by Sharon Laurie, the Care Commission Officer, with lead responsibility for regulating the service who was accompanied by:

Charmaine Dickson, Locum, Care Commission Officer

Evidence

The Care Commission staff examined:

Quest Documentation

Care plans x 4

Review minutes

Quality assurance systems

Key worker system

Staff supervision records

Staff minutes of meetings

Accident and incident records

Communication book

Maintenance records

Registration certificate

Staffing schedule

Staff training records

Off Duty – last 3 weeks

Cleaning records

Activity records

COSH – cleaning records

The Care home environment – Walk around the building

Interview with the following:

Clinical Service Manager

Unit Manger

Senior Carer

Staff x 2

Service Users x 4

Carer x 1

Care Commission Questionnaires returned x 13

Cook

House keeper

Inspection Focus Areas and links to Quality Themes and Statements for 2008/09

Details of the inspection focus and associated Quality Themes to be used in inspecting each type of care service in 2008/09 and supporting inspection guidance, can be found at:

<http://www.carecommission.com/>

Fire Safety Issues

The Fire (Scotland) Act 2005 introduced new regulatory arrangements in respect of fire safety, on 1 October 2006. In terms of those arrangements, responsibility for enforcing the statutory provisions in relation to fire safety now lies with the Fire and Rescue service for the

area in which a care service is located. Accordingly, the Care Commission will no longer report on matters of fire safety as part of its regulatory function, but, where significant fire safety issues become apparent, will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Further advice on your responsibilities is available at www.infoscotland.com/firelaw

Action taken on requirements since last Inspection

Action taken on requirements in last Inspection Report

There were no requirements made in the last inspection report

The Care Commission received an action plan in response to the 3 recommendations made in the last inspection report and it outlined how the service planned to action these within specific timescales most of these recommendations were now met or were work in progress.

Comments on Self Assessment

The self assessment received was very detailed and included examples of best practice which were seen on the day of the inspection.

View of Service Users

There were 13 Care Commission standard questionnaires completed and returned. Those respondents said that they were happy living here. They said that staff treated them with dignity and respect. They said that the cook was always willing to make them alternatives if they did not like what was on the menu.

View of Carers

There were two carers who spoke to the Care Commission officers at the time of inspection. They said that their parents were very well looked after. There were

Quality Theme 1: Quality of Care and Support

Overall CCO Theme Grading: 5 - Very Good

Statement 1: We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service Strengths

The grade achieved at the last inspection on the 7th of Aug was 5 - Very Good. Elements of the evidence considered for this statement were revisited. The service had maintained its performance for this statement therefore the statement remains graded as 5 - Very Good. Care Commission officers sampled the Quest documentation which included care plans and other examples of evidence which had been highlighted within the services self assessment which included service users social needs and how these were met. We found the evidence sampled to be of a very good standard. Examples of best practice noted, included the following:

The Quest Care Planning system, Care Commission officers' noted that the Care Plans were completed to a high standard and were reviewed six monthly or as required.

The Essential Lifestyle Plan (ELP) were written in a person centred way and included service users likes and dislikes these were reviewed 6 monthly or as required.

The culture within this service was an inclusive one. There were many examples of how service users and carers' views had been listened to and followed through to make a difference to the quality care they received and the quality of the service provided.

The Manager and staff are to be commended for the range of ways it had involved service users and their carers at different levels within the service and the differences noted in the quality of care which had resulted.

Areas for Development

The manager and staff continue to plan how they can develop methods and tools to further involve service users and carers including tools to enable those service users with dementia to make their views known. How this continues to develop will be looked at as part of future inspections

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Statement 3: We ensure that service user's health and wellbeing needs are met.

Service Strengths

The grade achieved at the last inspection on the 7th of Aug was 5 - Very Good. Elements of the evidence considered for this statement were revisited. The service had maintained its performance for this statement therefore the statement remains the same 5 - Very Good. Care Commission Officers noted from care plans sampled that service users' health and well being needs were formally assessed, monitored and reviewed. Meaningful activities were now included in the care planning process. There were a range of health care checks carried out and records were kept for weights and body mass index (BMI), nutrition, mobility, medication, and personal care preferences. Referrals were made to a range of health care professionals as required. The service had liaised with the local GP practices to develop Adults with Incapacity paperwork. They had implemented this into the care planning system and this took account of The Mental Welfare Commission's Best practice "Working with the Adults with Incapacity (Scotland) Act."

Where service users have displayed behavioural problems there was a protocol in place on how to assess risks and the interventions which could be invoked. There was input from local specialist services to support staff to ensure service user's needs were met.

Service users wellbeing needs continued to be met with a range of meaningful activities taking place both within and out with the care home. Service users were supported to maintain links with their local community. Relatives and friends were encouraged to visit and to support in the care of their relative. Carers were seen to be made welcome.

The service had developed a range of very good ways to illicit the views of service users and their carers. These were listened to and followed through, and as a result, changes had been made to a variety of policies, procedures and practices within the care home. This had resulted in an ongoing improvement in the quality of care provided.

The service within its self assessment had stated that they needed to develop monitoring tools which would provide an early warning monitoring system. These had been developed and implemented.

Areas for Development

The manager had identified within their self assessment that staff needed to be provided with training on the management of lifelong enduring illnesses such as strokes. Also the introduction of the Liverpool Care Pathway in partnership with Marie Curie after appropriate training would be implemented. How this is progressed will be looked at as part of future inspections. The Manager should continue to develop the good practice seen on the day.

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Quality Theme 2: Quality of Environment

Overall CCO Theme Grading: 5 - Very Good

Statement 1: We ensure that service users and carers participate in assessing and improving the quality of the environment within the service.

Service Strengths

The grade achieved at the last inspection on the 7th of Aug was 4 - Good. Elements of the evidence considered for this statement were revisited. The service had improved its performance for this statement therefore the statement was regarded to 5 - Very Good The service continues to seek the views of residents and carers using questionnaires / surveys, and focus groups such as, gardening group, meaningful activities etc. People's views were aggregated and analysed and action plans were used to plan how to further improve the service.

There was a homely welcoming environment within the service. The care home was designed; using best practice guidelines for designing care homes for people with dementia. Examples of how the design of the building helped service users to orientate themselves around the building, with the use of pictorial signage and memory boxes displaying photographs and personal items. This helped those service users with cognitive impairment to identify their bedrooms.

Bedrooms were seen to be personalised with service users being encouraged to bring in furniture and display photographs and memorabilia. Items of value were kept safe within lockable drawers in each bedroom.

The home is purpose built and offers a range of sitting and meeting areas including a Bistro. There are separate dining facilities.

The home was clean, well maintained and free from odour.

There was a designated smoking room for service users.

Areas for Development

Within the services self assessment the manager identified some areas which they wanted to develop to further improve the service these included:

To continue to find ways to evidence participation and manger aims to undertake this and to continually discover how to capture views of all residents and relatives to improve the quality of care.

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Statement 2: We make sure that the environment is safe and service users are protected

Service Strengths

The grade achieved at the last inspection on the 7th of Aug was 4 - Good. Elements of the evidence considered for this statement were revisited. The service had improved its performance for this statement as it had met the previous recommendation; therefore the statement was regarded to 5 - Very Good. The Quest paper work had been developed. It now included information which follows best practice for Working with the Adults with Incapacity (Scotland) Act, Mental Welfare Commission.

The service had a previous recommendation regarding the service should enhance the assessment and care planning system in place to ensure all staff use clear and consistent methods of recording how to manage individuals mental wellbeing, limits to freedom and safety.

The service had responded to this recommendation by reviewing the personal plans and where there is a risk identified in ELP that requires more evidence than a risk assessment a risk management plan has been put in place. This plan takes cogniscence of the Mental Welfare Commission documentation Rights, Risks and limits to Freedom and supports the ELP. The plan were indicated is also further supported by challenging behaviour documentation identifying triggers and responses.

There were risk assessment in place for when mechanical restraints were used e.g. bed rails and lap straps, consent forms were signed when it was deemed these should be used to keep people safe and they were regularly reviewed and updated.

Care Commission officers spent time walking around the service. Staff were seen to be diligent in checking who was coming and going from the building and a signing in and out book was in use. There was a key pad system in use at the front door to prevent unwanted intruders.

Areas for Development

The service should continue to develop the existing good practice.

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Quality Theme 3: Quality of Staffing

Overall CCO Theme Grading: 5 - Very Good

Statement 1: We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service Strengths

The grade achieved at the last inspection on the 7th of Aug was 4 - Good. Elements of the evidence considered for this statement were revisited. The service had improved its performance for this statement, having met the previous recommendation. Therefore the statement was regarded to 5 - Very Good. Since the last inspection the Manager had carried out a survey of how service users and carers would like to be involved in improving the quality of staffing in the service. The results of this consultation exercise had resulted in the development of the following:

- * The services interview record sheet has been amended to include the qualities they would like to see in potential staff members.
- * Some of the questions asked at interview have been amended to reflect their suggestions.
- * Residents and relatives who expressed an interest in the recruitment process will be contacted when interviews are scheduled and offered the opportunity to meet with applicants.
- * Residents and relatives can be involved in the induction process by being offered the opportunity to participate in a tea and a chat with new staff.

The previous inspection report included a recommendation about the above which has now been met. As a result of the improvements made since the last inspection this statement has been regraded.

Areas for Development

The manager will fully implement the above developments and continue to develop the existing good practices.

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Statement 3: We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Service Strengths

The grade achieved at the last inspection on the 7th of Aug was 5 - Very Good. Elements of the evidence considered for this statement were revisited. The service had maintained its

performance for this statement therefore the statement was regarded to 5 - Very Good The recruitment policy and procedure for employing staff has been improved with the increased involvement of service users and carers.

The service follows best practice for the safe recruitment of staff ensuring disclosure checks are carried out and two references one from the last employer are sought before staffs commence employment. As previously mentioned the induction of staff will now involve service users and carers.

The services participation policy included within the supervision process and the services vision and culture reflects this. Staff received regular supervision and were asked how they could contribute their ideas in how to involve service users and their families to improve the quality of the service.

Care Commission officers noted on the day that there was a culture of involvement and this was seen in how staff and service users related to each other with dignity and respect.

Service users were referred to in person and in written accounts in an appropriate and respectful way.

The service operates a One Life idea's programme for rewarding staff for sharing their ideas, delivering excellence, leadership and for improving standards. All awards are celebrated and there is an ongoing training and development plan for individual staff members and the team.

Care Commission officers found that records of staff meetings were kept and action plans were drawn up to follow through on ideas shared from meeting to meeting which resulted in improvements in the quality of the care service.

Areas for Development

There was ongoing planned management training opportunities to support Seniors with Scottish Social Services Council (SSSC) registration.

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Quality Theme 4: Quality of Management and Leadership

Overall CCO Theme Grading: 4 - Good

Statement 1: We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Service Strengths

The grade achieved at the last inspection on the 7th of Aug was 4 - Good. Elements of the evidence considered for this statement were revisited. The service had maintained its performance for this statement therefore the statement remains graded as a 4 - Good. Since the last inspection the service has continued to use a range of ways to involve service users and carers in the Management and Leadership of the service. These included:

- * Quality assurance system which now includes service users and carers in the self assessment of the quality themes
- * Review planning - more involvement by service users their carers and relevant others, including using pre review questionnaires
- * One life process - residents and carers can nominate staff for awards
- * Questionnaires- covering a range of topics; food, activities, and gardening
- * Staff Interview questions and procedures have been changed to take account of service user and carer views.
- * Feed back systems are now in place to provide outcomes of service users, carers and staff consultation

The service had a complaints and compliments system which most service users said they were aware of how to use it.

There were both service and organisational newsletters which allowed service users and their carers to keep informed of what was happening within BUPA care homes.

Areas for Development

The service has stated within its self assessment that they will continue to develop ways to involve service users and carers. How this is progressed will be looked at as part of the next inspection

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

0

Statement 4: We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide.

Service Strengths

The grade achieved at the last inspection on the 7th of Aug was 4 - Good. Elements of the evidence considered for this statement were revisited. The service had maintained its performance for this statement therefore the statement remains graded as a 4 - Good

There were internal and external quality assurance systems in use to continue to improve the quality of care which service users received.

The service had begun to implement an early warning system audit tool that had picked up on some inconsistencies in practice at the early stages.

Action plans were being developed to plan what actions were needed to address some of the issues highlighted by stakeholders within agreed timescales. However, not sufficient time had elapsed for the full spectrum of stake holder participation occurrences to be audited analysed and outcomes progressed. This was a previous recommendation which is ongoing.

The Clinical Service Manager continued to co - ordinate care and communication of all units to promote consistency of quality and standards.

Areas for Development

The service highlighted within their self assessment some areas of development within timescales which they wanted to implement, these included: provide staff access to training and up to date research. Information from quality assurance returns to be made more timeously to relevant departments. The manager should continue to develop the already very good standards of management and leadership seen on the day.

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

0

Regulations / Principles

National Care Standards

Enforcement

There has been no enforcement action against this service since the last inspection.

Other Information

The previous recommendation was partially met. The manager should centrally collate and analyse the feedback and suggestions from residents, relatives and staff to identify where participation is working well to improve the service and also where participation needs to be improved. National Care Standards for Care homes for Older People, Standard 5: Management and Staffing, Standard 11: Expressing your views.

Requirements**Recommendations**

Sharon Laurie
Care Commission Officer