

Glens Nursing Home Care Home Service

18 - 20 Church Street
Edzell
Brechin
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Telephone: 01356 648888

Type of inspection:

Unannounced

Completed on:

17 August 2018

Service provided by:

Balhousie Care Limited

Service provider number:

SP2010011109

Service no:

CS2010272012

About the service

Glens Nursing Home is centrally situated in the small Angus village of Edzell. The service is owned by the Balhousie Care Group and it provides both residential and nursing care on both a permanent and short-term basis. Accommodation in the main building is on two floors and the home is an adjacent respite apartment.

The home is registered for a maximum of 32 older people. The service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

The organisation states:

"We truly strive to capture the true essence of person-centred care by recognising that people come first - by looking after the care of people, the rest will follow."

What people told us

We received back 19 out of 36 Care Standards Questionnaires (CSQs) we sent to the service to randomly distribute to residents and their families and friends. We asked their views on twenty-five quality statements about the service's Care, Environment, Staffing and Management. Most returns highlighted that people strongly agreed or agreed that the quality of care was of a good standard.

We spent time speaking with people during the two days. The views of people who responded to our care standard questionnaires, and who spoke to us are reflected here. We also spoke with members of the staff team.

Residents' comments included:

- "I have patio doors leading to a small bedroom veranda which I like to open and get the fresh air in."
- "If there were more staff I feel I might get the help I need quicker as the staff are sometimes busy."
- "I like having access to the garden whenever I please - I enjoy the interaction with the nursery children when they come for activities."
- "Everything is fine."

Relatives commented as follows:

- "Since the last inspection there has been a big improvement in leisure activities and outings."
- "The majority of staff across all grades and disciplines are very pleasant and sociable and appear to enjoy their work at the Glens."
- "The care is definitely improving."

A relative had raised a concern about care, however, we noted that the concerns had been addressed during a review meeting.

Staff commented:

- "It's a good place to work and the training is really good."
- "It's friendly - that's what I like about it."
- "Things are much better now."

We spoke with many of the people who lived at the Glens during the inspection. Everyone said they were happy with the quality of the service and the support provided by the staff and management.

Positive comments were also made about the quality of the meals and how people's interests were supported.

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?	4 - Good
How good is our leadership?	4 - Good
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?

4 - Good

We found the performance of the service to be good. We reached this conclusion after we spoke with the people living at the Glens, relatives, manager, and staff. We also observed interactions of staff and looked at a number of care records.

Staff demonstrated a good understanding of people's specific needs. We saw that there had been a good improvement with the detailing and recording of information and saw that most care plan records highlighted the assessment, planning and evaluation of care.

We found that staff supported people with respect and kindness. We saw that staff were busy, however, care was delivered at a relaxed pace which created a homely atmosphere.

We used the Short Observational Framework for Inspection (SOFI2) to directly observe the experience and outcomes for people who were unable to tell us their views. We observed people who were in the lounge/dining area during an afternoon for over an hour. We saw that staff were friendly and welcoming and we observed interactions, which were warm, supportive and sensitive to people's needs.

The people we spoke with were relaxed and comfortable in their surroundings whilst the groups were in operation. We evidenced nice friendly banter between staff and people in the home.

We saw good care being provided by all the staff team. We saw staff listening to people's requests and responding within an appropriate time. We also saw that the new manager was holding resident and relatives' meetings and was creating opportunities for all stakeholders to be involved in shaping and improving the service.

We saw that the service strived to promote opportunities to support activities and interests, community involvement and maintaining links. We discussed the interim plans to support activities and interests due to the activity co-ordinator vacancy. We were reassured that systems were in place to enable a smooth transition. We spoke with the staff team about the continued need for everyone to support meaningful days and opportunities.

How good is our leadership? 4 - Good

We saw that there had been a good improvement in the management of the service. We received very positive feedback from people in the service, relatives, staff and a visiting professional. The new manager had brought more structure and continuity to the service.

We noted that team meetings, staff supervision and catch-ups are held more regularly. Audits systems are in place to ensure the safety of stakeholders and to monitor the quality of care being provided; this also included including regular walkabouts.

There was a more positive culture and approach among the staff team. We saw that the manager encouraged good practice and challenged where improvements were needed. Communication across the team was improving.

We saw that in addition to regular supervision, the manager and senior staff carried out direct observations of staff practice, in order to support staff, and to ensure that standards were maintained, this work continues.

The manager had a good system in place; ensuring notifiable issues were reported quickly. We found that frequent checks were carried out of the registration status of all staff, with their regulatory bodies.

The manager encouraged staff to feedback about how the service could be improved through regular team meetings. This gave staff the facility to submit ideas and suggestions of how the service could be improved. Although we saw improvements, there is a need for the service to embed system and consistent practice.

We have made an area of improvement.

The management and staff team were very keen to further develop and improve practice to ensure care was person-centred.

Areas for improvement

1. The present systems, including practice, should continue to be further developed, embedded and regularly monitored and outcomes 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 the performance of the service to be good. We reached this conclusion after we spoke with the people living at the Glens, relatives, manager, staff and a visiting professional. We also observed interactions of staff and looked at a number of care records.

Staff demonstrated a good understanding of people's specific needs. We saw that there had been an improvement with the detailing and recording of information and saw that most care plan records highlighted the assessment, planning and evaluation of care.

Medications were being managed in line with good practice guidance. People were supported to remain well through the safe use of medications. This was because they were being managed in line with good practice guidance. We discussed with the management team that although six monthly reviews were being held, they did not always capture the nice outcomes being achieved. The manager agreed to further develop this with the team.

Our discussions with staff demonstrated a good understanding of people's individual assessed needs and their plan of care. People were assisted to maintain their identity and were treated with dignity and respect. Support plans recording has improved and were more person-centred.

The manager said the team were keen to further develop the plans and we gave examples how recordings could be further enhanced. We saw staff taking time with people, often sitting down and spending one to one time, having a 'blether.' Staff were responsive to people's needs.

A risk-based approach was taken to manage people's varied needs. Risk assessment were regularly reviewed and updated. We saw that accidents and incidents were managed well.

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

Requirements

Requirement 1

The Provider must ensure records demonstrate safer recruitment practice in line with the company policy and the Scottish Government's safer recruitment practice.

This requirement was made on 11 August 2017.

Action taken on previous requirement

We noted that the service was following best practice recruitment processes.

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

It is recommended that the management team provides training and support to staff in the management of care plans and the supporting recording systems.

This area for improvement was made on 11 August 2017.

Action taken since then

We saw that the present training was appropriate to meet the needs of the people at the Glens. We noted that the training statistics had improved and that the company was further developing care plans and care plan training.

Staff also told us that the training was good and that it was helpful in their caring roles, tasks and duties.

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?	4 - Good
1.1 People experience compassion, dignity and respect	4 - Good
1.2 People get the most out of life	4 - Good
1.3 People's health benefits from their care and support	4 - Good
How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - 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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