

Haddington Care Home Care Home Service

Mill Wynd Haddington EH41 4EU

Telephone: 01620 674 880

Type of inspection:

Unannounced

Completed on:

15 September 2023

Service provided by:

Haddington Care Ltd

Service no:

CS2017361356

Service provider number:

SP2017013005



Inspection report

About the service

Haddington Care Home is a privately owned care home registered in June 2018 to provide a care service to a maximum of 68 older people of whom 1 may be receiving respite care and 1 specific younger service user, as agreed at registration. The service provider is Haddington Care Ltd.

Accommodation is provided over three floors. There is lift access to the upper floors. The accommodation includes, 68 bedrooms, with en-suite facilities including wet rooms. A call system is in place for each room and at points throughout the home including bathrooms and toilets. There is access to an outside raised terrace and lower terrace with gardens. Sitting and dining areas are on each floor and there are other small sitting areas throughout the home.

There is a reception area with a manager's office and a visitors toilet. Nursing stations/offices are on each floor as are bathing and toilet facilities. Kitchen, laundry and staff areas are on the ground floor.

About the inspection

This was an unannounced follow up inspection which took place on 12, 13 and 15 September 2023. The 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 and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with or observed the majority of people using the service and three of their family members
- spoke with approximately 20 staff and management
- · observed practice and daily life and
- · reviewed documents.

Key messages

- · Activity had increased in the service which helped people remain stimulated and engaged
- Staff completed a variety of training which helped them care for people
- Peoples' health benefitted from the care and support that they received
- · Staff worked well together
- There needs to be a review of housekeeping staff to ensure that the environment can be kept clean and fresh.

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
How well is our care and support planned?	3 - Adequate

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

We evaluated this service as performing at an adequate level. This means that there were a number of strengths but these must be built on and sustained to make sure that people experience positive outcomes at all times.

There had been sufficient improvements in care provision, particularly nutrition and activity.

Staff training had improved and this meant that people received better care and support from a skilled and knowledgeable team. Outcomes for people had improved.

We have re- evaluated this statement to reflect the improvements.

How well is our care and support planned?

3 - Adequate

This was a follow up inspection which meant that we focussed on Requirements and Areas for Improvement (AFI) since the last inspection.

Details can be found in the outstanding areas for improvement.

Areas for improvement

1. To support people's wellbeing the manager must ensure that staff practice is informed by accurate and up to date information there should be a system in place to check that all areas of care plans relevant to the care of the individual have been completed. Improvements to the recording of the clarity and details of discussions and agreements to care should be made.

This is to ensure that care and support is consistent with Health and Social Care standards (HSCS) "My personal plan (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)

"My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event" (HSCS 4.14) and "I experience stability in my care and support from people who know my needs, choices and wishes, even if there are changes in the service or organisation". (HSCS 4.15)

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

Requirements

Requirement 1

By 5 September 2023, the provider must ensure staff have the right competence and development to support people to maximise their nutrition during mealtimes, support falls management strategies, recognise deteriorating health and act appropriately and manage medicines, to maintain their health and wellbeing.

To do this, the provider must, at a minimum:

- a) carry out a training needs analysis for staff
- b) ensure a clear structure of training for each role, which includes values, standards and codes as well as best practice
- c) ensure each member of staff has an individualised training plan to meet their specific needs and learning gaps
- d) provide a structured supportive supervision and appraisal system to support staff personal and professional development
- e) provide sufficient staff in sufficient numbers to effectively direct, guide, supervise and support staff to put their learning into practice.

This is to comply with Regulation 4(1)(a) and (d) (Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that:

'My care and support meets my needs and is right for me' (HSCS 1.19) and

'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

This requirement was made on 11 May 2023.

Action taken on previous requirement

Since the last inspection staff training needs have been assessed and each member of staff has an individual development plan. This includes subjects identified as needing addressed from the last inspection such as the mealtime experience and moving and handling. Information included the training delivery method (whether in house/external/distance learning), frequency the designation by role and whether mandatory or desirable for that role.

The plan was good and well thought through about what staff need to do their job with each member of staff having an individualised training plan to meet their specific needs and learning gaps.

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Managers had concluded the first session for all staff of supervision and appraisal to support the staff member's personal and professional development. The sessions gave encouragement and praise recognising what they had achieved in training and working together.

Practice issues were discussed, such as, the deteriorating resident, CPR, verification of death. This helped give staff confidence and a better understanding of to carry out these roles.

Further training events that staff could undertake through eLearning including anaphylaxis awareness, continence care, delirium awareness, dementia informed and skilled, dignity, oral care practiced and skilled, pressure ulcer awareness, stress and distress, dysphagia, GPDR and meaningful activity. These were planned.

Managers had plans to evaluate by discussion and observation but this has not been completed yet as training dates have not passed.

Supportive discussions meant that staff knew about holiday entitlements, health supports and attendance.

Competency assessments have been carried out and recorded by senior managers covering aspects of care such as infection prevention and control, engagement and dignity.

Mealtime observations have also taken place and moving and handling observations. Practice was being refined after the observations.

Incorrect practices were being rectified at source with staff reminding each other.

There were sufficient numbers of staff working in the service to meet the needs of residents and to support each other.

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 support people's wellbeing the manager must ensure that staff practice is informed by accurate and up to date information there should be a system in place to check that all areas of care plans relevant to the care of the individual have been completed. Improvements to the recording of the clarity and details of discussions and agreements to care should be made.

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This area for improvement was made on 11 May 2023.

Action taken since then

Old and new style care plans were both sampled. The new style was more person-centred and focused on abilities of the individual. Some auditing needed to ensure staff include needs in obvious sections. For example making sure knee pain which requires application of Ibuprofen gel is included in the pain section. Seen in washing and dressing section probably because the gel is applied at that time.

The service was making progress in transferring information to the new format. It is acknowledge that this is a big job with an opportunity to review the entire content. This will need more time to complete therefore we have carried this forward.

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?	3 - Adequate
1.1 People experience compassion, dignity and respect	3 - Adequate
1.2 People get the most out of life	3 - Adequate
1.3 People's health and wellbeing benefits from their care and support	3 - Adequate

How well is our care and support planned?	3 - Adequate
5.1 Assessment and personal planning reflects people's outcomes and wishes	3 - Adequate

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