

Care service inspection report

Full inspection

Nightingale House Care Home Service

154 - 158 Main Street
Auchinleck
Cumnock

Service provided by: Mohammad Shafique

Service provider number: SP2003000144

Care service number: CS2003000771

Inspection Visit Type: Unannounced

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and set out improvements that must be made. We also investigate complaints about care services and take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

Contact Us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

www.careinspectorate.com

 [@careinspect](https://twitter.com/careinspect)

Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

We gave the service these grades

Quality of care and support	5	Very Good
Quality of environment	5	Very Good
Quality of staffing	4	Good
Quality of management and leadership	4	Good

What the service does well

Nightingale House is a residential service for older people, which provides a warm, friendly and welcoming atmosphere throughout. People we spoke during our inspection including: residents, relatives, staff and other visiting professionals all expressed positive sentiments and comments about the homely environment and quality of the care and support provided by the staff team.

The home was clean, tidy and well presented due to the inspiration and ideas of the staff who took pride in their work. This created a sense of value for the home environment, which reflected and enhanced the recognition of the value of the people living there.

From the evidence and information gathered during our inspection visits, we found the staff team had a natural disposition towards providing a person centred approach.

The owner/provider has invested in improvements to the internal and external areas of the home, which have further enhanced the standard of the service.

What the service could do better

The service needs to continue to develop the content of the support plans system. We saw examples of good work within the documentation and the service continues to develop this.

The service needs to ensure that all staff have the appropriate level of training in dementia which is reflected against the framework for excellence modules.

What the service has done since the last inspection

The service has made promising progress with the improvements we saw since the last inspection. The garden areas have seen some very good developments with wheelchair accessible pathways throughout the garden with raised flower beds, wooden benches and a central band stand style feature. The overall standard of the workmanship and quality of this was very good.

The refurbishment of the internal areas of the home such as the lounge dining areas, corridors and creation of a café area for residents to relax has also been very good. The front foyer has two small comfortable chairs with fireplace display, creating a nice homely welcome and place to sit.

These improvements and investment by the owner/provider has greatly enhanced and improved the overall standard at Nightingale House.

Residents, relatives and staff we spoke were very happy with the improvements and looking forward to enjoying the new garden areas in the coming summer months.

Conclusion

Nightingale House continues to develop and improve the quality of the service provided. This has relied on the very good reputation of the staff team. The owner/provider has invested in the internal and external areas of the home to enhance the quality of the overall service.

The quality of care and support provided by the staff team has been widely praised by people we spoke to. From the evidence and information we gathered during our inspection visits, we found the staff team had a natural disposition towards providing a person centred approach. The management were actively improving the documentation to capture and reflect the ethos of the staff team.

1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Information in relation to all care services is available on our website at www.careinspectorate.com

This service was registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

Nightingale House is a privately run residential care home located on the main street in Auchinleck, which facilitates easy access to shops, public transport and local community facilities.

The home was registered with the Care Inspectorate on 1 April 2011 to provide a care service without nursing care to a maximum of 30 older people, who may have dementia, of which 4 places may be used for respite care.

Accommodation is provided across two floors, connected by a passenger lift. There are 23 single and 6 twin rooms, 19 of which have en suite facilities. The double rooms are many being used by single occupants. The home has a choice of sitting room, lounge areas and an enclosed garden area to the rear of the home.

Nightingale House brochure states that, it aims to provide:

"A warm, secure haven where each of its residents will enjoy a friendly, positive and caring environment at all times with the minimum of fuss".

Recommendations

A recommendation is a statement that sets out actions that a care service provider should take to improve or develop the quality of the service, but where failure to do so would not directly result in enforcement.

Recommendations are based on the National Care Standards, SSSC codes of practice and recognised good practice. These must also be outcomes-based and if the provider meets the recommendation this would improve outcomes for people receiving the service.

Requirements

A requirement is a statement which sets out what a care service must do to improve outcomes for people who use services and must be linked to a breach in the Public Services Reform (Scotland) Act 2010 (the "Act"), its regulations, or orders made under the Act, or a condition of registration. Requirements are enforceable in law.

We make requirements where (a) there is evidence of poor outcomes for people using the service or (b) there is the potential for poor outcomes which would affect people's health, safety or welfare.

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

Quality of care and support - Grade 5 - Very Good

Quality of environment - Grade 5 - Very Good

Quality of staffing - Grade 4 - Good

Quality of management and leadership - Grade 4 - Good

This report and grades represent our 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. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0345 600 9527 or visiting one of our offices.

2 How we inspected this service

The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What we did during the inspection

We undertook unannounced inspection visits on the following days:

Wednesday 1 April 2015 between 11 and 4pm

Thursday 2 April 12.30pm and 5pm

Friday 3 April 2015 between 10.50am and 4pm

During these inspection visits we conducted a walk round of the premises, spoke with the manager and observed practice at various times during the day throughout the care home environment.

We reviewed the relevant documentation the manager had provided. We looked at the comments and feedback from residents and relatives in their returned Care Inspectorate questionnaires.

We gathered evidence from a number of sources including:

- certificate of registration
- employer's liability insurance
- staffing schedules and rotas
- participation strategy
- minutes of residents meetings
- minutes of relatives meetings
- minutes of staff meetings
- care plans and review meetings
- risk assessments
- staff training records
- staff supervision schedule
- staffing rotas and numbers

- adult support and protection procedures
- medication records
- maintenance records
- accident and incident records
- notifications and action plans
- self-assessment return
- annual return
- care inspectorate questionnaires

During these inspection visits, we spoke to the following people:

- 6 residents
- 5 relatives
- 5 care staff
- 1 manager
- 1 owner/provider

We reviewed the content and comments in the returned Care Inspectorate questionnaires. We received five from residents and four from relatives.

When asked overall if they were happy with the quality of service provided. Three residents strongly agreed and one agreed with this statement. One resident answered 'don't know' to the question but stated they were:

"Quite happy with treatment and care provided".

Two people answered that they did not know about the service complaints procedure or that they could contact the Care Inspectorate.

When we asked the relatives three strongly agreed and one agreed with the statement.

Grading the service against quality themes and statements

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe

what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

Inspection Focus Areas (IFAs)

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

Fire safety issues

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at www.firescotland.gov.uk

The annual return

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

Annual Return Received: Yes - Electronic

Comments on Self Assessment

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

The Care Inspectorate received a fully completed self assessment document from the service manager. The service had identified what they thought they did well, and some areas for development.

Taking the views of people using the care service into account

Comments from Care Inspectorate questionnaires.

We received five completed Care Inspectorate questionnaires from residents. When asked if they were overall happy with the quality of care provided; three strongly agreed and one agreed with this statement.

One resident answered 'don't know' to this question but also stated that they were:

"Quite happy with treatment and care provided".

Two people did not know the service complaints procedure nor that they could contact the Care Inspectorate.

Whilst another wrote:

"First class staff they are always there to meet my needs".

Taking carers' views into account

We received four completed Care Inspectorate questionnaires from relatives. When asked if they were overall happy with the quality of care provided; three strongly agreed and one agreed with this statement.

Some relatives made written comments including:

"Excellent staff who are well informed and an amazing source of knowledge and help in caring for my relative".

"Know my parent well and always keep me informed about what they have been doing etc between my visits. Cannot praise the staff and home highly enough".

3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 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 awarded for this quality statement in the last inspection report on 14 April 2014 was 5 - Very Good.

After we had reviewed the evidence and information gathered during our inspection visits, we decided the service had maintained their standards under this quality statement.

We therefore maintained this grade at 5 - Very Good.

During our inspection visits, we spoke to residents, relatives, various members of staff and other professionals.

We discussed with the manager and senior carer about how the service had developed and encouraged participation of residents and relatives.

We reviewed the relevant documentation the service presented in support of the strengths in this quality statement. We looked at the comments and responses from Care Inspectorate questionnaires completed by residents, relatives and staff.

The registration certificates, insurance and staffing schedules were appropriately displayed. The care home was neat, tidy and gave a good first impression.

The service had a well-written participation policy and we saw evidence of this in the practices and interactions between staff and residents during our visits. This was also reflected in the content of some of the documentation we inspected.

The residents we met during our visits expressed a great deal of satisfaction with the standard of the service they received, in particular special mention and positive comments about the personal qualities of the staff team.

The overall atmosphere throughout the home was friendly, welcoming and warm. Relatives also spoke of the way they felt involved and welcomed when they visited. This helped to make the experience a pleasant one.

We saw that residents were involved in the redecoration and refurbishment programme by choosing from various swatches and samples of fabrics and decor. This gave people a sense of involvement with considerate participation.

Relatives meetings took place and we noted from the minutes this included feedback on the quality of the care and support provided.

Relatives we spoke to and received feedback from in the returned Care Inspectorate questionnaires indicated a great deal of satisfaction with the service. They stated they felt more than able to bring any concerns to the manager or senior's attention if required.

Comments we received from relatives included;

"Excellent staff, who are well informed and an amazing source of knowledge and help in caring for my relative".

"Know my parent well and always keep me informed about what they have

been doing etc. between my visits. Cannot praise the staff and home highly enough".

Areas for improvement

The service should continue to maintain the very good standards they have achieved under this quality statement. They should continue to evidence how they ensure residents and relatives are kept involved in the developments within the service.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

Statement 3

“We ensure that service users' health and wellbeing needs are met.”

Service strengths

The grade awarded for this quality statement at the last inspection on 14 April 2014 was 5 - Very Good.

During our inspection visits, we spoke to residents, relatives, various members of staff and other professionals. We reviewed the relevant documentation the service produced to support the strengths in this quality statement and we looked at the questionnaires completed by residents, relatives and staff had returned to the Care Inspectorate.

After we had reviewed the evidence and information gathered we decided the service had maintained this grade at 5 - Very Good.

The manager completed a monthly dependency tool, which details the varying levels of need of the residents. This ensures the service maintains the appropriate staffing levels to meet the needs of the residents.

We reviewed the support plans and saw that staff had implemented proper procedures to meet any identified needs highlighted by the various health assessments utilised. This included referrals to dieticians or other health professionals and follow up of any subsequent treatment regimes prescribed.

We spoke to the chef, reviewed the menus and sampled the food on both visits. We noted that the care home had their meat provided by a local farm butcher; the standard of quality was very good. The overall dining experience was further improved since the last inspection by the refurbishment of the dining/ lounge areas of the home.

People we spoke to during our visits were very happy with the standard and quality of the meals provided. Alternatives were on offer if people changed their

minds or wanted something different to the planned menu. We noted that staff had completed training on nutritional skills for care workers.

We reviewed the staff training records and noted that the manager had undertaken training with the staff team covering areas of pressure sore assessment, moving and handling, medication administration, challenging behaviour,

We noted that some support plans, staff had completed to a very good standard with background histories, personal contact details and clear explanations of the type of support and assistance each person required.

There is a monthly medication audit completed to identify any issues or concerns. The service has provided staff with various training opportunities. We reviewed the medication recording sheets. We were satisfied the service had implemented appropriate procedures to ensure residents got the correct medication at the proper times.

We saw staff interacting with residents in addressing their health and well being needs. This support was provided in a dignified manner with respect to their personal needs. We received many positive comments about the way staff engaged with the residents.

Areas for improvement

Where there is a need for medication as required then an appropriate 'PRN Protocol' should be written up with the clear descriptions of the reasons and when this should be administered.

The manager and staff should continue to develop the support plan documentation to ensure that this is person centred in approach and is up to date and accurate with the descriptions and content.

Grade

5 – Very Good

Number of requirements – 0

Number of recommendations – 0

Quality Theme 2: Quality of environment

Grade awarded for this theme: 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 awarded for this quality statement in the last inspection report on 14 April 2014 was 5 - Very Good.

After we reviewed the relevant information and documentation to support the strengths in this quality statement, we decided the service had maintained this grade at 5 - Very Good.

Please also refer to comments we have made in quality theme 1 statement 1 for additional information to support the grade we have awarded for this quality statement.

Since the last inspection, we noted some very good improvements and developments within the service. The foyer entrance was nicely presented with a fireside display and two comfortable chairs to sit and relax. This gave a warm homely welcome and did not feel like walking into a care establishment.

They had created a new café area with access to the outside garden area, which had also undergone some transformation. The garden had a complete landscaping restyling and completed to a very high standard of workmanship and quality.

There was a wheelchair friendly surface, which allowed access round the garden and raised flowerbeds, with a central bandstand style feature. The overall presentation was very good and everyone we spoke to told us they could not

wait until the better weather arrived and they could enjoy getting out in the garden areas. Getting more access to the outside with fresh air and sun will also help to improve resident's quality of life at Nightingale House.

Relatives commented on how nice it was visiting the home and spending time with their relatives in the improved areas. Residents could decorate and furnish their bedrooms to their own style and choice. We noted that one resident had assistance of staff to go out with their keyworker and purchase furniture and other items for their bedroom.

We noted from minutes of resident's meetings that they had been involved in selecting the fabrics and fittings for the new refurbishment programme. This included choosing names for the different corridors of the home, which residents now refer to as their addresses with their room numbers and corridor name as the street. This gave people their own address when sending or receiving mail, rather than just 'care of' then care home. This made people feel they had a home and involved in the developments relating to the environment.

We found the home environment to be very clean and tidy; the lounges were comfortable, warm and welcoming. We spent time sitting talking with residents who enjoyed using the lounges, there was a relaxed and friendly atmosphere for residents to engage with each other, staff and visitors.

Areas for improvement

The service should continue to maintain the very good standard they have worked hard to achieve in the developments and improvements to the overall service. This should continue to involve residents and relative sin this process and maintain this progress and forward movement.

Grade

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 awarded in the last inspection report on 14 April 2014 was 4 - Good.

After we saw the improvements and developments that had taken place since the last inspection, we therefore decided to increase this grade to 5 - Very Good.

We inspected the home and conducted a walk round. We found the home to be clean, tidy and well presented. The improvements we noted to the garden areas and the internal lounge/dining areas, corridors, café and other developments were very good and this has been reflected in the increased grade for the overall service.

The owner/provider has invested and improved the environment for the residents and the feedback we have received has been very positive and appreciative.

The domestic staff demonstrated a good knowledge of infection controls issues. They were committed to maintaining good standards of hygiene and cleanliness throughout the home and took pride in their work.

During this inspection we reviewed the following documentation relating to maintaining a safe environment:

- registration certificate
- insurance certificate
- accident and incident records
- notifications to the care inspectorate
- adults with incapacity documentation
- risk assessments
- repairs and maintenance records

- prevention of falls
- medication administration records
- staff training records

We saw that there were systems in place to keep the environment safe and residents protected. Staff had training in health and safety, infection control, food safety, fire safety, moving and handling and adult support and protection. Staff we spoke with could demonstrate good knowledge of how to keep the environment and people safe.

We noted that staff, residents and relatives could report repairs or concerns and these would be dealt with. We saw that moving and handling equipment was serviced according to guidelines and best practice. This ensured that any equipment used for residents was functioning properly and safe to use.

We also noted that there was a very good attitude towards residents who wander, for example, having access to wander in the secure garden areas. This gave people a sense of freedom and ability to go round the garden areas of the home, which helped to maintain levels of independence and reduce agitation.

Areas for improvement

The service owner/provider should continue to implement the very positive improvements and developments we saw during our inspection visits. These improvements have helped to raise the standards of the care home.

Any future developments and improvements should continue to involve the residents and relatives in this process and we were pleased to see a very good ethos of participation developing within the service. They are now seeing some of the benefits of this type of practice in action.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

Quality Theme 3: Quality of staffing

Grade awarded for this theme: 4 - 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 awarded for this quality statement in the last inspection report on 14 April 2014 was 5 - Very Good.

After we reviewed the relevant evidence and information gathered during our this inspection process. We decided the service had maintained this grade at 5 - Very Good.

Please refer to the strengths detailed in quality statements 1.1 and 2.1 for additional information to support the grade we have awarded for this quality statement.

We observed some excellent engagement between residents and staff and there was clear respect and dignity shown to residents during these interactions. Staff presented as being dedicated and they clearly knew their residents well.

The service conducted regular meetings with residents and relatives to help them voice their opinions of the quality of the care and support they received from the staff team. As a result, people felt able to speak up and make suggestions that led to improvements in the service.

Relatives meetings had also been undertaken and this allowed people to provide feedback on how satisfied they were with the quality of the service and the staff team. This inclusive style, encouraged people to take part in ensuring the service continued to develop and improve.

The service had developed resident's appraisal input forms using photographs of the staff team and keyworkers. This helped residents to identify staff and with the help of pictorial smiling faces and thumbs up or down signs, created a user friendly feedback form. This helped to engage residents in evaluating the quality of the staff.

Areas for improvement

The service needs to continue to maintain the standards of training and supervision of the staff team to ensure that they are competent and able to support the residents and meet their needs.

Grade

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 awarded in the last inspection report on 14 April 2014 was 4 - Good.

We discussed with the manager and senior carer how the service ensured they had a professional, trained and motivated staff team.

We reviewed the relevant documentation the service had produced in relation to this quality statement and concluded that the service had maintained this grade at 4 - Good.

We reviewed the staff records and inspected the training, supervision and appraisal documentation. Staff we spoke to demonstrated a strong commitment to ensuring they provided residents with the necessary support required. Residents and relatives expressed a great deal of satisfaction with the quality of the staff.

We checked several weeks of rotas and the staff on duty throughout the day and night. We were satisfied that the service had maintained agreed staffing levels required to meet the needs of the residents.

From discussions with residents, relatives and feedback we received in returned Care Inspectorate questionnaires there was a great deal of satisfaction with the quality and standard of the staff team. They described the staff team as friendly, welcoming and helpful.

There was a strong sense of commitment and team spirit evident. Staff told us they liked working in the home and felt they had a good team that helped each other out for the benefit of the residents in the home.

The manager and senior carer were responsible for delivering much of the

training staff had undertaken. The manager and senior carer had completed externally certified training in areas such as, palliative care, safe handling of medications, challenging behaviour and fundamentals of nutrition. These topics were then cascaded to the staff team in small group sessions or on a one to one basis.

Other training undertaken by the staff team included; caring for smiles, tena continence products, nutritional skills, medication administration, falls management, RNIB sight loss and management, fire training and customer care delivered by the owner/provider.

Each member of staff has their own training folder with a training log, the manager and senior staff ensure that all staff have their mandatory training requirements addressed and updated as required.

The manager conducted meetings for staff; we reviewed the minutes and saw staff had contributed to the developments within the home. The staff team worked well together and there was a good level of communication and interaction to ensure that resident's needs were met appropriately.

The manager arranged for staff meetings in the afternoon and then again in the evening to catch all the staff team early, late and nightshift workers. This considered the personal commitments of the staff team and showed a level of respect and appreciation.

The manager implemented a policy of the week system, which staff had to read and sign, this included any minutes from team meetings staff had to sign they had read them. This ensured that all staff were kept up to date with events within the service and any responsibilities they had, such as registration with appropriate regulatory agencies.

Areas for improvement

The manager and senior carer provided most of the staff training through internal sessions and one to ones with the staff team. The service should continue to develop this good work.

They should also investigate and utilise external training opportunities for all

levels of staff. This will further enhance the skills and knowledge of the staff team and help to develop people within their job roles and responsibilities. This should include the collation of verified training certificates and documentation to evidence and support this has been undertaken.

The service is investigating various e learning courses and other distance learning programmes. This would help to compliment the existing training opportunities currently available to the staff team.

The service needs to ensure they are implementing dementia training for all staff, based round the framework for excellence modules. The manager has already started to implement this programme of training and should continue with this positive progress.

Grade

4 - Good

Number of requirements - 0

Number of recommendations - 0

Quality Theme 4: Quality of management and leadership

Grade awarded for this theme: 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 awarded for this quality statement in the last inspection report on 14 April 2014 was 4 - Good.

After we had gathered and reviewed the evidence and information relevant to support the strengths in this quality statement. We decided the service has maintained this grade at 4 - Good.

Please refer to the strengths detailed in quality statements 1.1, 2.1 and 3.1 for additional information to support the grade we have awarded for this quality statement.

We saw that the service had used several methods including meetings, satisfaction surveys, telephone contacts and emails to capture information and gather feedback from residents and relatives about the quality of the service.

The manager used this information to inform on any decisions taken to implement changes and future developments within the service.

The manager implemented an open door policy that people we spoke to commented positively about. Residents and relatives we spoke to confirmed they felt able to raise issues and make comments about the quality of the management and leadership of the service.

We saw good interactions with the manager and the owner/provider with professional respect shown in their working practices. This helped to support the good work of the staff team and help the service to gel together.

Areas for improvement

The manager should continue to maintain and document the evidence and information with respect to ensuring that residents and relatives can contribute to assessing the quality of the management and leadership of the service.

This should also include how any of this information is utilised to implement any changes in response to feedback the service had received.

Grade

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 awarded in the last inspection report on 14 April 2014 was 4 - Good.

We discussed with the manager and senior staff how they ensured the involvement of residents, relatives and stakeholders in assessing the quality of the service. We also reviewed the relevant documentation the service had produced in relation to their quality assurance processes.

After we had considered the evidence and information we had gathered, we decided the service had maintained this grade at 4 - Good.

We reviewed several of the quality assurance systems in place such as, medication administration, accident and incident recordings and environmental. We saw that manager had undertaken to review the information from these audits and this resulted in changes and improvements they had implemented.

We found that a variety of quality assurance processes and systems in place to assess and improve the quality of service.

Quality monitoring systems in place included:

- audits of questionnaires
- feedback from meetings
- direct observation and feedback of staff competencies
- evaluation of comments and complaints
- supervision and support for staff
- performance appraisal for staff
- feedback from other professionals
- feedback from residents and carers

The service had a range of relevant policies and procedures which helped the manager to appropriately administer and oversee the proper running of the service.

The manager was approachable and available to everyone involved with the service. People recognised them and knew that they could go to them with any concerns or issues.

Areas for improvement

The management should continue to develop and maintain their quality assurance procedures they have implemented. This should include evidence of any issues that have arisen that have resulted in any changes, developments and improvements to the quality and standard of the service provided.

Grade

4 - Good

Number of requirements - 0

Number of recommendations - 0

4 What the service has done to meet any requirements we made at our last inspection

Previous requirements

There are no outstanding requirements.

5 What the service has done to meet any recommendations we made at our last inspection

Previous recommendations

There are no outstanding recommendations.

6 Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

7 Enforcements

We have taken no enforcement action against this care service since the last inspection.

8 Additional Information

9 Inspection and grading history

Date	Type	Gradings	
14 Apr 2014	Unannounced	Care and support	5 - Very Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and Leadership	4 - Good
24 Apr 2013	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and Leadership	4 - Good
18 Mar 2013	Unannounced	Care and support	4 - Good
		Environment	Not Assessed
		Staffing	Not Assessed

		Management and Leadership	4 - Good
23 Apr 2012	Unannounced	Care and support Environment Staffing Management and Leadership	4 - Good 4 - Good 4 - Good Not Assessed
23 Nov 2011	Unannounced	Care and support Environment Staffing Management and Leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
30 May 2011	Unannounced	Care and support Environment Staffing Management and Leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
23 Nov 2010	Unannounced	Care and support Environment Staffing Management and Leadership	2 - Weak 2 - Weak 2 - Weak 2 - Weak
9 Sep 2010	Announced	Care and support Environment Staffing Management and Leadership	3 - Adequate 3 - Adequate 3 - Adequate 2 - Weak
24 Jun 2010	Re-grade	Care and support Environment Staffing Management and Leadership	Not Assessed Not Assessed Not Assessed 2 - Weak
2 Nov 2009	Announced	Care and support Environment Staffing Management and Leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
1 May 2009	Unannounced	Care and support	1 - Unsatisfactory

		Environment Staffing Management and Leadership	2 - Weak 2 - Weak 1 - Unsatisfactory
1 Dec 2008		Care and support Environment Staffing Management and Leadership	2 - Weak 3 - Adequate 3 - Adequate 3 - Adequate
5 Sep 2008		Care and support Environment Staffing Management and Leadership	3 - Adequate 3 - Adequate 2 - Weak 2 - Weak

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

You can also read more about our work online.

Contact Us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

www.careinspectorate.com

 @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is c?nain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.