

Clinton House Nursing Home Care Home Service

Ayr Road
Shawsburn
Larkhall
ML9 3AD

Telephone: 01698 883043

Type of inspection: Unannounced
Inspection completed on: 21 September 2016

Service provided by:

Clinton House Strathclyde (Care Homes)
Ltd

Service provider number:

SP2003002417

Care service number:

CS2003010566

About the service

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

Clinton House Nursing Home is a care home in Shawsburn near Larkhall. Whilst it is located in a rural setting there are local transport links near to the home. The home has twenty-four bedrooms with the majority of rooms benefitting from en-suite facilities. There is an upstairs which is accessible by passenger lift or stairs. There is an enclosed garden space and a large car parking facility for visitors. The service is registered to provide care and support for twenty-six older people, including up to eight younger adults. At the time of this inspection, twenty-four people were living there.

The home aims "to deliver care in a professional manner and adopt a holistic approach to care, while affording dignity and respect to each individual resident."

The inspection focused on standards of care for people living with dementia. We are using a sample of 150 care home services to look in detail at the standards of care for people living with dementia and this service is one of those selected as part of the sample.

The areas looked at were informed by the Scottish Government's Promoting Excellence: A framework for health and social care staff working with people with dementia and their carers and the associated dementia standards. It is our intention to publish a national report on some of these standards during 2017.

What people told us

We received seven completed Care Standard Questionnaires and spoke to service users and relatives during the inspection.

From the returned Care Standard Questionnaires we were able to establish that 100% of the residents strongly agreed or agreed with the following statements:-

- 'Encouraged to discuss any views about the care home'
- 'Feel safe and secure in the home'
- 'Confident that staff have the knowledge and skills to care for me'
- 'Happy with quality of care I receive at this home'

Some of the comments received from residents were as follows:

- 'They consult me on everything'
- 'They always ask me about my family, they show an interest'
- 'I am very content here'
- 'I feel safe'

Some of the comments received from relatives were as follows:

- 'I'm happy with [name] being here'
- 'Staff are respectful'

Self assessment

The Care Inspectorate received a fully completed self-assessment document from the provider. We were satisfied with the way the service provider had completed this and with the relevant information they had given us for each of the headings that we grade them under.

The provider identified what it thought the service did well, some areas for development and any changes it had planned. The provider told us how the people who used the care service had taken part in the self-assessment process.

From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of environment	4 - Good
Quality of staffing	4 - Good
Quality of management and leadership	4 - Good

Quality of care and support

Findings from the inspection

During the inspection we observed caring interactions between staff and residents. Residents and relatives told us that the staff knew the residents well and were responsive to their individual needs and preferences. Despite the competing demands for staff involvement we observed that staff took time to ensure that residents were not rushed and encouraged residents mobilise with appropriate supports.

Care plans contained some good person-centred information in relation to service user's health and wellbeing needs and how they were to be supported by staff. We made a few observations and recommendations for improvement.

- When restraint is used, the service needs to demonstrate greater compliance with the Mental Welfare Commissions good practice guidelines as outlined in 'Rights, risks and limits to freedom' - (http://www.mwscot.org.uk/media/125247/rights_risks_2013_edition_web_version.pdf). The care plan should demonstrate that alternative approaches have been exhausted and all relevant parties have been consulted (recommendation 1).
- Care plans should contain accurate information and certificates in relation to legislative requirements such as Data Protection Act (consent to share information) and Adults With Incapacity Act 2000 (legal powers and treatment plans). The provider should consider also developing a legal powers register to provide an overview and to make it easy for the provider to be confident that all the information for every resident is up to date.
- Anticipatory care plans should be fully completed with appropriate signatures in place.
- There should be a care plan for all areas of care provision such as medication needs.
- The care plans need further scrutiny to ensure that they are clear, up to date and regularly evaluated.
- Qualitative audits of the care plans to improve the accuracy and relevance of documentation to ensure that staff are providing person-centred care to improve the outcomes for the residents.
- Staff need to develop a greater emphasis on the 'strengths' of service users.

Good arrangements were in place to support residents with any health and/or social care needs. This included promptly identifying any health concerns, making referrals to relevant health professionals and supporting health care plans. Residents were supported to access a range of external health professionals. In addition, the link social worker from the local Social Work Department meets regularly with the manager to discuss the residents' needs in-line with relevant legislation.

There is an activity coordinator and a range of planned activities on offer to enhance the residents' quality of life. These included small group activities, music, pampering and arts and crafts. Service users also testified to the benefits of going on day trips using the service's minibus. In addition, the service has developed links within the local community which had enhanced the experiences for residents. For example, through concerts and entertainment provided by local groups and school children. The service should ensure that all the residents have the opportunity to participate in meaningful activities that provide stimulation, maintain independence and promote a better quality of life. The management should continue to develop staff awareness of their role in supporting residents, to spend their time meaningfully taking account of the best practice guidance 'Make Every Moment Count' and 'Care...about physical activity' (<http://hub.careinspectorate.com/knowledge/good-practice/2014/03/careabout-physical-activity/>) which offers further suggestions, resources and a self-assessment tool.

The dining area of the home was homely and not too big. The residents benefit from a nutritious and varied diet and access to regular drinks and snacks. We encouraged the management to involve a variety of stakeholders to assess the dining experience.

In general we found that the residents' wellbeing and quality of life outcomes at Clinton House were good.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. Care plans should clearly outline areas of restraint and demonstrate greater compliance with the Mental Welfare Commissions good practice guidelines as outlined in 'Rights, risks and limits to freedom' - (http://www.mwscot.org.uk/media/125247/rights_risks_2013_edition_web_version.pdf). The care plan should demonstrate that alternative approaches have been exhausted and all relevant parties have been consulted.

National Care Standards Care Homes for Older People: Standard 6 - support Arrangements.

Grade: 4 - good

Quality of environment

Findings from the inspection

The environment was found to be clean and tidy and residents and family members were observed to enjoy free movement around the care home, making use of own bedrooms, communal areas and the secured garden. The culture within the staff group was to enable, facilitate and support the residents to be as independent as possible.

We would encourage the service to develop this further and encourage residents to participate in everyday activities.

We could see that the service were progressing with the signage, refurbishment and redecoration around the home. Service user's confirmed that they were involved in making decisions with regard to any changes. The corridors of the home contained many pictures and art work of the residents.

The service employs a maintenance person who ensures that safety checks and maintenance works are carried out routinely and promptly. We looked at the accident/incident reporting and found this to be of a good standard.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 - good

Quality of staffing

Findings from the inspection

People who use the service told us that the staff worked hard and were kind and caring towards them.

Staff were encouraged to undertake a SVQ qualification at a level appropriate to the work they performed and the manager monitors compliance with registration requirements. All staff were registered with the Scottish Social Services Council (SSSC) or the Nursing and Midwifery Council (NMC). We found that staff have undertaken some training and developmental training in-line with good practice and that they have regular supervision with their line managers.

This dementia training should be linked to the 'promoting excellence framework'. The manager should ensure that all staff are trained to an appropriate level including non-direct care staff. This will ensure improved outcomes for those residents with dementia. We found that the direct care staff had a good understanding of the residents and their needs and expressed understanding and compassion when dealing with residents with dementia.

We had some concerns around the staffing levels in the home. Although the staff were knowledgeable, skilled and knew the residents well, there was not enough staff at times. The home uses a dependency tool to establish staffing levels however, we observed staff missing rest breaks in order to meet the direct care needs of residents, the dining experience could be much improved with greater staff support and we saw little evidence of staff involvement in day-to-day activities. While some residents were able to access the garden independently, other's indicated that they needed support to do so and felt inhibited to request support due to staff 'being busy'. These aspects of support in the care home have a significant impact on an individual's wellbeing and we would encourage the management to fully assess the staffing levels and we will monitor this at our next inspection.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 - good

Quality of management and leadership

Findings from the inspection

We found that the quality assurance systems were being used effectively to identify concerns and further develop good practice. There were good policies in place for staff guidance and care provision.

The service is able to demonstrate resident and relative participation in evaluating care provision, activities, staff performance, menu selection and environment factors and management and leadership. The methods of participation that the service had put in place. For example, questionnaires, care plans, reviews and meetings continued and we found evidence that the information gathered was used to make improvements to the service.

There was a complaints policy in place and the manager demonstrates a willingness to learn from any investigations.

The manager operated an open door policy and residents and relatives told us that the manager of the home was accessible to them and that they could easily approach her and a range of other staff to discuss any matters they were concerned about.

The management team were starting to empower staff to take on responsibilities and develop leadership skills, this is particularly evident where staff have become champions for specific areas of care.

The service had a development plan in place which highlighted how it planned to move the service forward in the coming months. This had been developed and shared with those living in the service their relatives and staff.

We found the management receptive to feedback and keen to improve the service. They worked with us in a positive manner providing all the information we requested. The management were committed to improving the outcomes for their residents.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 - good

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

Previous requirements

There are no outstanding requirements.

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

Previous recommendations

There are no outstanding recommendations.

Complaints

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

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

Date	Type	Gradings	
4 Feb 2016	Unannounced	Care and support	Not assessed
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed

Date	Type	Gradings	
18 Sep 2015	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
20 Feb 2015	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
2 Sep 2014	Unannounced	Care and support	2 - Weak
		Environment	2 - Weak
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
28 Mar 2014	Unannounced	Care and support	4 - Good
		Environment	3 - Adequate
		Staffing	4 - Good
		Management and leadership	3 - Adequate
31 Jul 2013	Unannounced	Care and support	4 - Good
		Environment	2 - Weak
		Staffing	4 - Good
		Management and leadership	4 - Good
20 Feb 2013	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
27 Nov 2012	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
30 Mar 2012	Unannounced	Care and support	4 - Good
		Environment	3 - Adequate
		Staffing	Not assessed
		Management and leadership	Not assessed

Date	Type	Gradings	
12 Dec 2010	Unannounced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
18 Oct 2010	Announced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
10 Mar 2010	Unannounced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	Not assessed
28 Oct 2009	Announced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	Not assessed
30 Mar 2009	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
20 Mar 2009	Announced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good

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