

Darnley Court Care Home Service

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Unannounced

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Service provided by:
HC - One Oval Limited

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About the service

Darnley Court Care Home provides accommodation and nursing care for up to 120 older people. This includes the provision of continuing care for up to 30 older people with mental health problems and intermediate care for up to 30 older people who have been discharged from hospital.

The building is purpose-built with accommodation at ground level at the front and two levels to the rear. There are four separate units which have access to their own enclosed garden areas and a car park to the front.

The home is situated in the Darnley area of Glasgow and is near to public transport facilities.

The service is part of the HC - One group, one of whose mission statement is:

"Our company is built on the principles of involvement, accountability and partnership. We want HC - One homes to be the kindest homes in the UK with the kindest HC - staff, where each and everyone matters and each and everyone can make a difference".

At the time of the inspection there were 85 people living in the service and 30 people receiving intermediate care.

What people told us

Residents and their relatives, we had contact with, were happy with the quality of care received and in particular we received positive comments about the staff and the difference they made to the quality of their lives:

'I love staying here, they are all so kind.'

'My care plan provides the information about all my care, staff speak to me daily and continue to promote my independence, I feel safe within the care home, staff are excellent and all great at their job, they don't get enough credit for the job they do.'

'The staff support me really well and my support plan was completed with the help of my family and myself. I feel very safe and I know the staff are always there when I need them. Every member of staff in the care home are good and always brighten up my day.'

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?	not assessed
How good is our staffing?	not assessed
How good is our setting?	not assessed

How well is our care and support planned?	4 - Good
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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

People told us that they were well supported by staff who knew them. We received positive feedback from the residents and relatives about living in the home and how staff treated them, 'staff are brand new', 'the girls are very respectful to you', 'it's a lovely place and staff are lovely'. We saw very genuine and heartfelt interactions between staff, residents and relatives which showed the level of care and compassion provided by staff.

People told us that they were kept up to date and knew who to speak to if they had any complaints or concerns, 'if I am unhappy I tell the staff and they will deal with it', 'when I said I didn't like my room, staff resolved this straight away. If I had any issues I would speak to my family who would speak to the staff'.

How people spend their day is important in maintaining people's physical and mental wellbeing. Some people told us that there was 'plenty to do during the day' however the majority of residents we spoke with commented about 'it can be a long day', 'can be a bit boring', 'not much to do here' and 'don't get out much'. During our visit we saw that a lot of residents spent time either in the lounge or their bedrooms with the television on, one resident said 'the television is on but I'm not really watching it' **(see Area for Improvement 1)**.

Some residents spent their day walking along the corridors which provided various points of interest and some seating areas where people could rest. We felt that the residents in Beaton and Seaton Houses would benefit from more corridor seating.

People should be sure that their health needs are well supported. We saw that residents' health needs were reviewed on a regular basis by a range of healthcare professionals who visited the home. This included optician, chiropodist, care home liaison nurses, falls team, psychiatrist and GP.

People living in the home should feel safe and we were satisfied with the maintenance of equipment used within the home and the monitoring of accidents and incidents to keep people safe.

People should expect to have confidence in the staff who care and support them. We saw that the home had a training schedule which reflected planned training for staff to attend and staff spoken with felt that they had the training they needed to do their job, 'I've not long started but really enjoying my job. Staff have been great and everyone works well together. Looking forward to doing my SVQ and developing in my career'.

We discussed, with management, the increasing resident care needs in Beaton and Seaton Houses. We could see that staffing levels had been increased during the day to support this but felt that the staffing levels during the night also needed to be reviewed to support the higher dependencies of their current residents **(see Area for Improvement 2)**.

The service should have a culture of continuous improvement with robust quality assurance processes. We saw that there were good systems in place to monitor the quality of staff practice and resident care through meetings, regular audits and any compliments or complaints received. However, we asked management to ensure that the action taken demonstrated improved outcomes **(see Area for Improvement 3)**.

Areas for improvement

1. In order that people spend their day doing what they enjoy and want to do, the manager should ensure that staff have the relevant information and support to deliver more meaningful activities for people living in the home.

This ensures care and support is consistent with the Health and Social Care Standards, which state that 'I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors' (HSCS 1.25); 'I take part in daily routines, such as setting up activities and mealtimes, if this is what I want' (HSCS 2.21) and 'I can maintain and develop interests, activities and what matters to me in a way that I like' (HSCS 2.22).

2. In order to ensure that resident care needs are met in Beaton and Seaton Houses, staffing levels should be reviewed during the night to support the higher dependencies of their current residents.

This ensures care and support is consistent with the Health and Social Care Standards, which state that, 'My needs are met by the right number of people' (HSCS 3.15).

3. In order to ensure that the quality of the service improves outcomes for residents, the manager should ensure that the organisation's quality assurance processes involve residents, relatives and staff and demonstrates how outcomes for people have improved as a result.

This ensures care and support is consistent with the Health and Social Care Standards, which state that, 'I have confidence in the organisation providing my care and support' (HSCS 4).

How good is our leadership?

This key question was not 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

Care records should give clear direction about how to deliver each person's care and support as well as details of personal interests and preferences. Care documentation, that we viewed, was found to be overall well completed with up to date care plans, risk assessments and personal preferences. However, recording throughout needed to be more person-centred and outcome focused, reflecting what the person can do for themselves, 'what is working', 'what is not working' and 'what needs to be changed' (**see Area of Improvement 1**).

We found daily notes often very clinical and not reflective of a more holistic approach, capturing people's day to day quality of life, what's important to them and how they spend their day.

Care review document was seen to be fully completed however again these could be more person-centred and focus on what the person can do and the support needed to achieve their goals even if this is the maintenance of their current quality of life.

We acknowledged that new care planning documentation was being introduced and it was hoped that this would address some of the areas highlighted.

Areas for improvement

1. In order to ensure that people receive care and support which is personal to them, the manager should ensure that care records reflect a person-centred and outcome focused approach. Care reviews should also help to identify future plans and goals.

This ensures care and support is consistent with the Health and Social Care Standards, which state that 'My personal plan (sometimes referred to as a 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 needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected (HSCS 1.23).'

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

In order to ensure that the quality of the service improves outcomes for residents, the manager should ensure that the organisation's quality assurance processes involve residents, relatives and staff and demonstrates how outcomes for people have improved as a result.

This area for improvement was made on 23 March 2018.

Action taken since then

Although we found that there were good systems in place to monitor the quality of staff practice and resident care, we asked management to ensure that the action taken demonstrated improved outcomes.

This Area for Improvement has not met. See 'How well do we support people's wellbeing?' Area for Improvement 1.

Previous area for improvement 2

In order to ensure that people receive care and support which is personal to them, the manager should ensure that care records reflect a person-centred and outcome focused approach. Care reviews should also help to identify future plans and goals.

This area for improvement was made on 23 March 2018.

Action taken since then

We found that recording in care records needed to be more person-centred and outcome focused.

This Area for Improvement was not met. See 'How well is our care planned?', Area for Improvement 1.

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 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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