Darnley Court
Care Home Service

787 Nitshill Road
Darnley
Glasgow
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Telephone: 0141 876 0144

Type of inspection:
Unannounced

Completed on:
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Service provided by:
HC - One Oval Limited

Service provider number:
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Service no:
CS2016349791

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 120 people using the service.

What people told us

Almost all the comments that we received from the people that we spoke with during the inspection and from the questionnaires that we received prior to the inspection, were positive about the service.

Some of the comments made were;

'Overall I am very happy with Darnley Court.'

'The food is lovely and we get a good choice, they ask what you want to eat.'

'There is not much to do, sometimes I get bored.'

'Staff are very nice.'

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

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

From observation we could see that people were treated with dignity and respect and that they experienced compassion and love from those who supported them. We read a touching compliment from someone whose mother was resident in one of the units where they had walked in unannounced and found a staff member playing Frank Sinatra to her as she sang along. This filled the person with joy as they saw how relaxed this made their mother. We saw genuine and warm relationships between staff, residents and relatives.

From the people we spoke with, we received comments about how staff were always rushed off their feet yet always had time for people. We spoke to the manager about the importance of staff ensuring that they always observe confidentiality and always use language that demonstrates respect when talking about people.

People told us they felt listened to and that their views on things about their care and support were sought. We saw evidence of this within the review minutes and residents meetings too. This made people feel they were in control of what care they were receiving.

On the whole, people felt safe here. Staff had been recruited safely following best practice. Residents and relatives trusted the staff, some of whom they knew well and could refer to them by name. We noted that some staff did not have their identification badges on. We feel that having an identification badge on would help people know the names of the people that are supporting them and help build better relations.

We noted that there was still a fair percentage of staff who were not regular but were from agencies. We were assured that the service was actively recruiting for more permanent staff. This would ensure continuity of care and lead to better outcomes for people.

While we were aware that the service regularly calculated people's dependency levels, we were not convinced that staffing levels were a true reflection of these calculations. People that we spoke with told us that they felt more staff would be of benefit to residents. Staff that we spoke with also told us that often they felt quite stretched to meet people's needs. We observed staff working hard. We have discussed with the manager where we felt some practice could have been a result of staff shortage. The issue of staffing levels was highlighted as an area for improvement at the last inspection. We will be repeating this on this report. (See Area for improvement 1 under Key question 1)

On the day of the inspection there was a buzz and excitement in the place which even the wet weather outside could not dampen. Santa and his reindeers were visiting and special visitors in the form of children from a local nursery were also paying a visit to the service. We saw beautiful interactions between the residents and the children. As the residents helped the children write their letters to Santa, they felt 'useful' and valued. There was a clear benefit of this inter generational exchange, to all involved.

We were told about local members of parliament being invited to the service to answer questions about why people should vote for them. The residents enjoyed this experience with two local MPs that came. People also told us that they were looking forward to voting in the coming general election. They felt supported to participate fully as citizens in their local community.

We observed two different incidents of unsatisfactory infection control practice. When we spoke with staff about infection control we could see that they knew what the correct procedures were. We discussed what we had observed with the manager during feedback and were satisfied that this would be dealt with. (See Area for Improvement 2 under Key question 1)

Areas for improvement

1.
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).

2. In order to ensure that people are protected from risk of infection, staff must always follow the correct procedures for disposal of used continence aids and also for moving used linen from one place to another.

This ensures care and support is consistent with the Health and Social Care Standards, which state that, I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes (HSCS 3.4)

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

We thought that the care plans we looked at informed all aspects of care and support experienced by people. We observed some staff using the care plans to deliver effective care and support. Because the care plans set out how the individual's needs would be met, as well as their wishes and choices, they were right for the individuals. Structured care plans that people had agreed to, also helped people go through their daily living tasks better.

We saw detailed life histories and one page profiles about people. These gave a clear picture of the person's past and what was important to them. We also saw the handover sheets that the service used to hand over from one shift to another. These helped staff, and others who had an input in the person's care and support, to understand them better.

Supporting legal documentation such as certificates for Adults with Incapacity (AWI), Power of Attorney (POA) and Do Not Attempt Cardiopulmonary Resuscitation (DNACPR) were in place within the care file for those people for whom they were required. Knowing that their final wishes were in order, gave people and their relatives a sense of inner peace.

People should be fully involved in assessing their emotional, psychological, social and physical needs at an early stage, regularly and when needs change. We noted that the service used recognised assessment tools to ensure that people's weights remained within healthy limits and that their skin remained healthy too.

Care plans were evaluated with people on a regular basis and reviewed six monthly or sooner if their needs changed. We noted that following any review, care plans were updated to reflect any changes. People, or their representatives, were involved in the care planning and in the reviews. This gave them a sense of ownership and of being in control of their care and support.

We shared our concern about missing risk assessments for some forms of restraint that we observed being used in one unit, for example; the use of Kirton chairs tilted back. Having risk assessments that have been agreed with individuals and/or their representatives, would demonstrate that people are making informed choices and decisions about risks they take in their daily life.

While there was evidence of the service having adopted principles of CAPA in some units, information within the social care plans which should inform what people have been involved in was very limited. Some people that we spoke with told us that they were sometimes bored, with nothing to do. This had been raised as an area for improvement at the last inspection. We will repeat it within this report. (See Area for Improvement 1 under 5.1)

After reviewing the care plans and speaking with people, we concluded that care plans were good and that to an extent, they reflected people's needs and wishes.

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)

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 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).

This area for improvement was made on 23 January 2019.

Action taken since then

Within some units we noted that CAPA principles had been adopted and that this had positive impact on people.

The service also shared that they had recruited two more activities coordinators who were due to start as soon as all the relevant checks came through.

Information within the social care plans which should inform what people have been involved in was very limited. Some people that we spoke with told us that they were sometimes bored, with nothing to do.

The Area for Improvement remains outstanding.

Previous area for improvement 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).

This area for improvement was made on 23 January 2019.

Action taken since then

The inspection started at 7am in the morning, in order that we could observe and speak with night staff. From observations in most of the units including the two mentioned, we concluded that staffing levels still required to be reviewed. While the service carries out dependency levels monthly, we did not feel these reflected on the staffing. We concluded that some of the practice we observed was due to the fact that staff were rushing to get through the tasks they had to get through. This had an impact on the outcomes for people.

The staff that we spoke with told us that additional staff would make a big difference in the delivery of the service.

This Area for Improvement remains outstanding.

Previous area for improvement 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).

This area for improvement was made on 23 January 2019.

Action taken since then

We looked at the service's development/improvement plan. We were satisfied that residents and relatives views on improving quality in the service, had been sought and was being implemented.

This Area for Improvement has been met.

Previous area for improvement 4

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).

This area for improvement was made on 23 January 2019.

Action taken since then

At the time of the inspection, the service was changing to new care plans. We looked at some that had already been changed and were satisfied that they were person centred and outcome focused.

This Area for Improvement has been met.

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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