

# Marchglen Care Centre Care Home Service

2 Gannel Hill View Fishcross Alloa FK10 3GN

Telephone: 01259750703

### Type of inspection:

Unannounced

## Completed on:

21 February 2019

## Service provided by:

Service provider number:

Caring Homes Healthcare Group Limited SP2013012090

Service no:

CS2013318121



## Inspection report

#### About the service

This service registered with the Care Inspectorate on 30 August 2013.

Marchglen Care Centre is a purpose-built care home in the Fishcross area of Clackmannanshire providing care for up to 37 people with a wide range of needs. The service is provided in four separate units, three of which have single room accommodation. The fourth unit can accommodate six people in bed-sit type accommodation with en-suite shower facilities.

At the time of inspection 36 people were being supported by the service.

## What people told us

"Staff are good they talk to me when I need a chat".

"Staff are nice people".

"Of course staff treat me well".

"No complaints, I'm quite happy".

"I like it here"

"Staff are busy but always make time for me and don't rush any care".

"Lots of staff changes, makes me a bit anxious".

"More consistency in staff and that there is enough of them".

#### Self assessment

We did not request a self-assessment but did discuss the service's development and improvement plan as part of our inspection.

## From this inspection we graded this service as:

Quality of care and support4 - GoodQuality of environmentnot assessedQuality of staffing4 - GoodQuality of management and leadership4 - Good

## Quality of care and support

#### Findings from the inspection

We saw that people experienced warm and compassionate care and support from staff that were sensitive to their needs. The vast majority of feedback we received, and from our own observations, was that people were being treated with dignity and respect as individuals.

The service ensured that the health needs of the people they supported were closely monitored and there was regular input from a range of health professionals, and, in addition, they also employed their own occupational therapist. They were also pro-active in supporting people to have regular medical appointments, health checks and screening. This meant that people had positive health experiences and that the service was aware of any changes in people's health and well-being.

People's support needs were assessed and reviewed regularly, although, we felt that the service should do more in terms of assessing future care and support needs. We also recommended that they develop their review template to include more discussion and thought regarding social experiences and opportunities.

The service told us that they were currently developing their support plans and we felt that these would be improved by being streamlined with regular archiving of out-of-date information. In addition, we thought that the 'my life story' section could be enhanced and provide more information about the person's life, key events, achievements and so on. This information would facilitate more staff interaction with people, promote good communication and help to understand the person and their needs more.

In order to ensure that people can make more informed choices we would encourage the service to continue to develop the staff team's knowledge and skills in supporting people with a variety of communication needs. This would mean that people's views would always be sought and their choices respected. Therefore, we were pleased to hear about plans to have some staff trained in 'talking mats'. In addition, regular input from speech and language professionals would enhance learning and care delivery.

To support people to be active in their local community the service needed to be very adaptable and creative because of the diversity of people's support needs. It was evident that this was an area that they were committed to and were making substantial progress with. They had introduced a life-style coordinator role and, also, well-being champions in each of the separate units in the centre. This was having a very positive impact and during our inspection we saw and heard about a number of stimulating activities and events that took place both in the Marchglen, and also in the local community.

#### Requirements

Number of requirements: 0

#### Recommendations

Number of recommendations: 0

Grade: 4 - good

## **Inspection report**

## Quality of environment

This quality theme was not assessed.

## Quality of staffing

#### Findings from the inspection

There had been a high turnover of staff and the service had recruited a number of new staff who had varying degrees of experience in health and social care. However, there was less reliance on agency cover than before, staffing levels had increased and team morale appeared to have improved significantly in recent months as a result.

We discussed dependency assessments with the manager and how staffing levels were being informed. The service should progress with how they can evidence and analyse the needs of people, taking into account social and psychological needs and how the staff numbers delivering care are meeting these needs. This would ensure that people who develop additional health conditions, or have fluctuating needs, are taken into account and that staff have the expertise to support them.

New staff had a formal induction who all received an induction booklet. This was completed with support from their mentors who were allocated to support them throughout the induction process. However, we felt that quality of inductions could be more consistent for all new staff, and in addition, more protected time should be in place for line managers to oversee them.

Good quality training and development opportunities were provided that were a mixture of both class room based teaching and e-learning. Management were regularly adding new training resources as well as sourcing external development opportunities. To further enhance this we would recommend that the management team carry out regular training needs analysis for each unit based on supporting people's individual needs assessments. We also discussed the need for staff to have training and support on responding to emotionally challenging situations.

The majority of staff we spoke with said that they had regular supervision meetings and the service had a template to facilitate these discussions. However, bearing in mind the recent turnover of staff the service should re-look at their supervision policy and templates to ensure that supervision is a supportive event for staff where any issues are discussed at an early stage.

Overall, we found that the staff team really cared about the people they supported and had positive relationships with them. We saw a number of examples of staff interacting with the people they supported in a warm, friendly and respectful manner. This meant that people's care was provided by staff who were sensitive to their needs and wishes.

#### Requirements

Number of requirements: 0

#### Recommendations

Number of recommendations: 0

Grade: 4 - good

## Quality of management and leadership

#### Findings from the inspection

We found the management team to be responsive, supportive of their staff team, and committed to the continuous improvement and development of the service. As well as the registered manager there were two deputies who also provided management support day to day.

We noted that the deputies were not allocated protected time to undertake their additional supervisory duties or the development of the service in order to support the manager. Going forward this will be now considered by the service. It was positive to note that due to the creation of a clinical lead role, development work had already been undertaken in relation to care planning.

Staff champion roles were being developed with some already in place including areas such as nutrition, continence and wellbeing. We would encourage the management team to continue to look at additional areas where staff, at all levels, are encouraged and supported to take on more leadership roles and responsibilities. This would mean that the staff team were being encouraged to be innovative in the way they support and care for people.

In terms of internal communication, there were daily update meetings involving senior staff from each unit who provided information and updates on current clinical needs, appointments, activities, events and other relevant areas. This meant that care and support was consistent and stable because each unit communicated and worked together well.

They also had team meetings and resident meetings approximately every three months where people discussed potential improvements in each unit as well as activities and events they would like to see planned. External communication was an area that the service recognised they needed to improve and they had begun to make progress with this. For example, they have recently introduced a relatives' support meeting and we thought that this was a really positive development.

Quality assurance audits covered areas such as medication, environment, and infection control amongst others we would expect to see. Clinical data was analysed every week and accidents and incidents were recorded well. The audits could be enhanced by undertaking observations of staff practice in a variety of areas; this could include the delivery of personal care, meal times and how people are assisted with their mobility or medication. This would be an opportunity to confirm and evidence staff competency, highlight if additional training was needed, and also to discuss and reflect on practice during supervision.

The service's improvement plan showed that they had already identified priority areas to develop and what level of responsibility each of the management team have in delivering this. This gave us confidence that they had a real focus on continuous service development and that people had good quality care and support based on relevant evidence, guidance and best practice.

## **Inspection report**

#### 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

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

## **Enforcement**

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

## Inspection and grading history

Date	Туре	Gradings	
5 Feb 2018	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good 6 - Excellent 5 - Very good 5 - Very good
5 Oct 2016	Unannounced	Care and support Environment Staffing Management and leadership	6 - Excellent Not assessed Not assessed 6 - Excellent
1 Jun 2015	Unannounced	Care and support Environment Staffing Management and leadership	6 - Excellent 6 - Excellent 6 - Excellent 6 - Excellent
12 Jun 2014	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good 5 - Very good 5 - Very good 5 - Very good
18 Feb 2014	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 5 - Very good 5 - Very good 5 - Very good

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