

Northcare Manor Care Home Service

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Type of inspection:

Unannounced

Completed on:

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Service provided by:

Northcare (Scotland) Ltd

Service provider number:

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Service no:

CS2017357866

About the service

Northcare Manor is a care home registered for 74 older people within the south-west of the city of Edinburgh. The provider is Northcare (Scotland) Limited.

The care home is a purpose-built care home, comprising of three wings, on two storeys. Two wings having a spacious lounge and dining area. All bedrooms are single, with en suite facilities. There are balconies on the upper floors, which overlook attractively laid out, secure gardens which are accessible from the ground floor.

The service's stated aims and objectives are "to improve and make a difference to the lives we touch through the delivery of high-quality care and a deep sense of compassion. Our vision is to make a real and lasting difference to the people we support by achieving positive outcomes and enabling as normal and fulfilling a life as possible."

During this inspection the new quality framework for care homes for older people and the Health and Social Care Standards were used to look at the care people received. These standards focus on the experience of people using services and describe what they should expect, these can be found at <http://www.gov.scot/Publications/2017/06/1327/downloads>

What people told us

At the time of the inspection there were 73 people using the service.

We issued care standard questionnaires to the service for residents, relatives and staff. We received six completed questionnaires from residents, no responses were received from relatives.

We spoke with 21 residents in some detail about their experience and we chatted with or observed the care of the other residents. All of the residents told us they had a good or very good experience of receiving care at Northcare Manor. The residents spoke highly about the staff. We saw that staff knew residents well and used their knowledge of each individual to have positive and warm interactions at every opportunity. Some of the comments we received included:

" Everything is good about here",

"Staff are very caring and kind, there are always people around although you might have to wait sometimes. The manager has been very helpful. There is something on everyday and I enjoy lots of the activities."

We spoke with 11 family members during this inspection. Families we spoke with were pleased with the care their relative received. All felt that the care given was of a high standard and communication with them was good and appropriate. Some relatives told us that their family members health had improved since moving into the home.

Some comments which reflected relatives views were: "My relatives pain is managed well now. They are getting good care for someone in their situation. There are consistent staff here, a very stable staff group though it would be nice to have more staff"

Another relative said: "All staff are lovely, the hospitality staff are delightful, staff are cheerful and not frustrated. The manager has been fabulous, very responsive."

The need for more staff was highlighted by some relatives who said their relative said they had to wait too long for the toilet at times. One resident wrote about "staff shortages" in their questionnaire. Some family members spoke with us about the laundry service, cleaning and staffing as areas where the service could be improved. We

looked at these issues and discussed our findings with the manager and provider as part of the inspection. The providers response to feedback was positive and action was taken to address any concerns raised.

We also spoke with professional visitors to the home who told us that the standards of care were high and the quality of the experience was good for people living in Northcare Manor.

To make sure we involved as many people as possible in the inspection we also used the short observational framework for inspection. This observes staff interactions with people and helps us evaluate experiences of people who cannot always verbally tell us what it is like to live in the care home. During our observations we saw that residents were highly regarded by the staff who took time to help them in a discreet and dignified way. We saw residents have fun with the staff which included impromptu singing and dancing. In addition we saw the positive effects of interactions with staff during some shared activities provided by the home such as yoga, a singing group and an arts and craft session.

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

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| How well do we support people's wellbeing? | 4 - Good |
| How good is our leadership? | 5 - Very Good |
| How good is our staffing? | 4 - Good |
| How good is our setting? | 5 - Very Good |
| How well is our care and support planned? | 5 - Very 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

Residents experienced gentle, compassionate care that protected their dignity. We observed warmth and kindness between staff and residents and genuine affection was evident in the way residents were cared for. Staff demonstrated the principles of the Health and Social Care Standards both in their practice and interactions. On the ground floor we saw appropriate fun and humour used to comfort residents and help them find enjoyable things to do. Dementia care mapping was used to good effect to help staff reflect on how to best help individual residents.

Residents enjoyed pleasant meal times where assistance was given promptly and discreetly by hospitality and care staff. People were encouraged to take their time and enjoy the well-presented meals. This was important to make sure that meals would be enjoyed in a sociable atmosphere. Setting up an additional smaller dining space had been beneficial in improving meal times for some residents who preferred a quieter, less busy

environment. Overall, we saw meal times and snack times were positive experiences. A better understanding of food fortification at point of service could help some high risk residents to maintain their weight and the manager agreed to take this forward.

Residents should expect to be able to choose to have an active life and we saw there were opportunities for residents to become involved in planned activities. Times of activities were displayed to help residents plan their day. We saw residents enjoy a range of activities and they spoke positively about the sense of achievement that taking part gave them. We discussed with the service how they could take forward ideas to help those residents who chose to spend time in their bedrooms or found communication difficult to also have a full and active life.

Residents could be confident that health needs were monitored and that external healthcare professionals would be contacted when necessary. Staff were committed to providing good care. Staff knew residents' care needs well and we saw them use their knowledge to offer residents comfort and support.

Medication was safely managed. We made some suggestions for further improvement. **See area for improvement 1.**

Residents admitted with skin damage had their wounds healed as a result of good attentive care from staff. We have identified some areas for improvement to ensure the level of care is consistently good. **See area for improvement 2.**

We identified that some residents could benefit from a seating assessment to ensure that they can comfortably spend time out of bed in a suitable chair. **See area for improvement 3.**

Care record charts were not consistently completed. These had been previously completed to a very high standard but had recently deteriorated. While it appeared that the care was carried out, it is essential to keep accurate records of this. We discussed this with the manager and also suggested ways to help re-establish the high level of completion.

A system was in place to record and monitor all accidents and incidents which occurred at the service, to maximise residents' safety. The manager appropriately reported matters to the Care Inspectorate as they were required to do.

This service was not involved in managing finances for any residents. most services were included in the fees, with an invoice system in operation for any additional costs.

Areas for improvement

1. To help ensure treatments and interventions are consistently safe and effective some aspects of medicines management could benefit from improvement.

- An effective system of temperature monitoring of bedrooms was needed to ensure temperatures did not exceed the manufacturers maximum storage temperatures.
- The outcome of the administration of as required medicines needed to be clearly and consistently documented.
- Where homely remedies were in use a medicine dosage needed to be recorded for each resident.
- All residents would benefit from an individual protocol for all as required medicine prescribed.
- The instructions on the as required protocol and the medicine administration record (MAR) need to match.
- Medicines given by a skin patch needed to have the time of application recorded and needed closer monitoring on the days between application and removal.

- Allergy information on resident identifier page and the medicines administration record needed to match.
- Topical applications needed to be dated when opened to ensure they are not used beyond their shelf life.

This is to ensure 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 3.14) and "I experience high quality care and support based on relevant evidence, guidance and best practice" (HSCS 4.11).

2. To help staff consistently prevent skin damage the provider should improve how staff record if, and when, residents position should be changed and whether they can do this independently or need help. The type of mattress in use and, depending on type, the mattress setting should be clearly recorded. Where signs of skin damage are noted, records also need to show what subsequent action was taken.

This is to ensure 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 3.14).

3. To help residents who are known to be vulnerable or frail, seating assessments should be carried out to find suitable comfortable seating which meets their needs.

This is to ensure 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 3.14) and "I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability or frailty" (HSCS 3.18).

How good is our leadership?

5 - Very Good

Quality assurance and improvement was led well. The manager had an overview of all aspects of the service. Audits and evaluations routinely contributed to improvements and on-going development of this service.

The manager had a development plan which was regularly reviewed and discussed with the providers of the service.

Both the manager and owners were visible in the home and sought the views of residents and relatives regularly. This approach, and the action taken on these suggestions, continued to improve the quality of life for individuals by providing an individualised service and contributed to the overall quality of care experienced by all of the residents in the home.

Staff employed in different roles throughout the home demonstrated leadership skills. Care staff used their initiative to support residents and their families in ways which enhanced the quality of their lives.

Staff told us that they felt supported in their role in the home and that team working was promoted. Staff also said that the manager and owner were open to suggestions which enhanced the life or care of residents.

We discussed the high volume of unclaimed laundry and comments we received about the delay in clothing being returned. The provider had acted on feedback which they had received through their quality assurance systems and had employed a laundry worker for overnight to prevent back logs and were looking at different systems to ensure residents clothing could be more easily identified and returned to them.

The provider and manager had a positive response to our feedback about staffing and agreed to increase staff and review how staffing is calculated.

To enhance the very good leadership we saw we have made some suggestions. **See area for improvement 1.**

Areas for improvement

1. To ensure residents receive the maximum benefit from quality assurance processes we have made the following suggestions:

- Adding time frames for action, responsibility for completion and indicating when actions are completed would enhance the current action plans and clearly track improvements.
- Observational tools could be enhanced by being more specific about which staff had been observed and how any feedback on their performance had been discussed with them and followed up.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes (HSCS 4.19).

How good is our staff team?

4 - Good

The provider and manager used a recognised tool to approximate how many hours of care residents needed and to help calculate staffing. This system was not effective enough to make sure there were enough staff especially at night. The provider immediately increased the staff at night when we pointed this out. We had a comprehensive discussion with the provider about staffing and all of the factors which need to be taken into account to make sure there are enough staff with the right skills at the right time. Following our discussion the provider and the manager said that a review of how residents needs and staffing is calculated will take place to make sure all of the factors which may affect staffing are considered. In the evaluation of this grade we have taken into account that an immediate increase in night staffing was agreed and implemented and a comprehensive review of staffing was pledged. **See area for improvement 1.**

Staff were flexible and supported each other well. We found staff were resident-focused and this meant they worked together to fully understand the needs and wishes of the residents. Nurses and care staff were supported by trained hospitality staff. This enhanced the mealtime experience and allowed carers additional time to spend with residents.

Staff were recruited safely. All staff had a period of induction to prepare them for their role and clarify their responsibilities. There were some areas for improvement we identified. **See area for improvement 2.**

Regular checks were carried out to make sure staff were registered appropriately with their professional body. This helped to keep residents safe and promoted the provision of a competent and professional care staff team. Staff employed in the home as carers, that are also training to become qualified nurses must be registered under the appropriate part of the Scottish Social Services Council (SSSC) register. **See area for improvement 3.**

Staff benefitted from regular support from a line manager, by way of supervision meetings, to discuss their work and learning and development opportunities. An appraisal system was in use. These systems encouraged reflective practice and reinforced best practice and the culture of improvement in the organisation. We saw well motivated staff demonstrating care which enhanced the residents experience.

The provider was committed to learning and development. Training records showed that a high number of staff kept up to date with mandatory and other training to develop their skills and knowledge. This helps ensure staff are equipped with the right skills and knowledge to meet residents needs.

Areas for improvement

1. The provider and manager should review staffing to ensure residents needs are met both during the day and at night.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state: "My needs are met by the right number of people" (HSCS 3.15), "People have the time to support and care for me and to speak with me (HSCS 3.16) and "I am confident that people respond promptly, including when I ask for help (HSCS 3.17).

2. To ensure records support safe recruitment practice the service needs to ensure the following:

- Staff recruitment files contain a record of all references received
- A full employment history with dates is recorded and any employment gaps are fully explored and recorded.
- The method to verify identification is recorded in line with home office right to work guidance.
- A copy of the contract of employment is held for each employee.
- To ensure that clear records are kept of decision-making the manager should consider using a risk assessment to explain what additional checks were carried out or support offered where the usual employment checks could not be obtained prior to commencing work.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state: "I am confident that people who support and care for me have been appropriately and safely recruited" (HSCS 4.24).

3. The provider and manager need to be aware of the registration status of all employees and ensure that those who need to be registered do so. Registrants names should match with the name which they are known by at work. This ensures the public can easily check their registration status.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state: "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional codes" (HSCS 3.14).

How good is our setting?

5 - Very Good

Residents benefitted from the high quality facilities, spacious accommodation and a comfortable, clean and well maintained environment.

Northcare Manor is a purpose-built care home designed to care for older people. It was spacious throughout and had furnishings, pictures and objects of interest designed to stimulate memories and discussion. Most residents were able to easily move between their personal space and communal areas. Some residents used the lift to access additional communal space including a café, hairdressing saloon, nail bar, cinema and family dining room on the top floor. The provision of these additional facilities allowed residents to spend quality time with their family and friends. Residents and relatives spoke very movingly of the life-enhancing times and the creation of positive memories through use of the family dining room and café. There were good examples of residents

keeping connections with, and inviting in, their community through hosting book groups and such like within the home.

Residents and relatives were very complimentary about the comfort, cleanliness and facilities provided in the home. Residents were able to furnish their room as they wished with their own belongings. Having a comfortable bedroom with familiar and personal items at hand may also give residents a sense of comfort and reassurance. The en-suite facilities and being able to control the heating, lighting and ventilation also encouraged residents to be as independent as possible in their own bedroom. Some residents we met told us that they preferred to stay in their bedroom and not join in any group events such as dining and activities. They confirmed that their choice for privacy was respected.

The home was set in well-kept grounds. There was unrestricted access to the garden from the communal space and some bedrooms on the ground floor. On the first floor residents could access the outdoor balcony areas and there was also access to fresh air on the terrace from the café area. We saw the garden being used for activities and for residents to enjoy on their own.

The environment was well maintained and there were systems in place for reporting and following up of any remedial work identified. Systems were also in place to record the safety checks of appliances and installations including specialist equipment under Lifting Operations and Lifting Equipment Regulations 1998. (LOLER). These checks were up to date.

The handyman undertook daily safety checks in and around the building and minor remedial works. He was aware of his responsibility to keep the home safe for residents.

We have made some observations and suggestions to enhance the very good setting that we saw, these included improvements to allow residents to move around the communal space more freely, independently and safely. **See area for improvement 1.**

Areas for improvement

1. In order to further enhance the setting the provider should:

- consult with residents and relatives and consider removing the restrictions to movement that the key pad posed for some residents who liked to walk around the unit.
- look at how to improve way-finding between the three corridors of each unit.
- consider how to ensure staff know when a resident has accessed the balcony area on the first floor of the home.
- install a suitable alert system for residents using communal sitting areas and other spaces to enable them to alert staff when they need assistance.
- use colour contrast for toilet seats and grab rails to help residents with a cognitive or visual impairment more easily locate the toilet.
- ensure all staff are aware of the waste management policy and procedure in the home.
- make hand towels and pedal bins available at all hand-washing facilities.
- improve the storage of personal protective equipment in en-suite bathrooms.
- ensure any chemicals are held securely.
- review the size and access to wash hand basins in communal bathrooms.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state:

"I experience high quality care and support based on relevant guidance and best practice (HSCS 4.11) and

"I can independently access the parts of the premises I use and the environment has been designed to promote this. (HSCS 5.11).

How well is our care and support planned?

5 - Very Good

Residents should expect their care plans to reflect all aspects of their wishes and care needs and give clear direction to staff about how to deliver their care. They should expect their plans to contain accurate information that is updated when their care needs change. This is important in helping staff give consistent and safe care in the way residents want.

Overall, care planning was very good. There were very good systems to assess residents' care needs. Some plans we examined contained very good person-centred information about residents' choices and preferences which would help staff give care the way the residents wanted.

Healthcare assessment tools to identify the risk of falls, promote skin health and oral healthcare were used by staff to promote residents' care. Where residents had specific conditions we saw that there was a relevant healthcare plan to help staff give safe and consistent care.

Accurate information about residents' legal status helped protect them if they were unable to make decisions about their healthcare.

When equipment or medication was used which could be considered restrictive, these were supported by risk assessments and consents. This all helped to maintain residents' health, safety and ensure their human rights were protected.

There were good outcomes for residents who needed as required medicine for symptoms of stress and distress. Care plans were highly individualised and evaluated frequently, good records of observation and use of the care plan meant that some residents experienced a gradual reduction in their symptoms as staff recognised early signs and intervened promptly. This had resulted in a reduction in the use of as required medicines alongside a corresponding decrease in any unwanted side effects from use of these treatments. We identified that some residents did not have as detailed a protocol for as required medicines. This is an area for improvement in **How well do we support people's wellbeing?**

An "At a glance" document allowed staff a simple and effective way to list important information about each resident. This was especially useful for new or agency staff and helped them know what was important to know about each resident.

Records showed regular involvement of the relevant family members and those with a legal proxy such as power of attorney or guardianship responsibilities. Six monthly reviews were carried out and contained details of the discussion on various aspects of care. Each section allowed residents and families to express their views of what was going well and what could be improved and show a commitment to continuous feedback for improvement.

There were a few areas where we thought the service could improve care planning. There were two care plan documents for each resident, one in the bedroom used by the carers and a more detailed record held in the central area. Attention was needed to ensure the information in both plans matched so that care was consistent, up to date and accurate.

Some care plans could benefit from more detail for example skin care plans had no information about the type of specialist mattress in place and the setting of this. We found a few airflow mattresses set incorrectly. The use of equipment set incorrectly could mean care was not as effective or could potentially cause pressure damage. There was no information in some skin care plans about the topical creams being used to prevent skin damage. This means that there is the potential for staff to miss essential preventative treatment.

The completion of charts could be improved as this helps to evaluate the effectiveness of treatments and planned care. This is included in **How well do we support people's wellbeing?**

Overall care planning was completed to a very good standard. The provider, manager and staff were responsive to our comments and took corrective action to improve the areas which were identified.

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

Requirements

Requirement 1

In order to ensure that people get the right care and treatment they require, the provider must demonstrate that the service has systems in place to ensure that staff will take appropriate responsive action when a resident's health raises a concern. In order to do this you must:

- demonstrate that staff will contact a General Practitioner(GP) or other relevant healthcare team member when people who use the service require treatment or their health condition is not improving. This is to ensure care and support is consistent with the Health and Social Care Standards which state that "I am confident that people respond promptly, including when I ask for help." (HSCS 3.17) and in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations Scottish Statutory Instruments 2011 No 210: regulation 4(1)(a)- a requirement for the health and welfare of service users.

This requirement was made on 14 January 2019.

Action taken on previous requirement

This requirement was made as a result of a complaint investigation.

In order to check this we looked at daily care records, accident and incident records, listened to staff, spoke with residents and relatives. We also spoke with the GP.

We concluded that staff seek appropriate responsive action when a residents health raises a concern.

Met - within timescales

Complaints

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

Detailed evaluations

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| How well do we support people's wellbeing? | 4 - Good |
| 1.1 People experience compassion, dignity and respect | 5 - Very Good |
| 1.2 People get the most out of life | 5 - Very Good |
| 1.3 People's health benefits from their care and support | 4 - Good |

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| How good is our leadership? | 5 - Very Good |
| 2.2 Quality assurance and improvement is led well | 5 - Very Good |

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| How good is our staff team? | 4 - Good |
| 3.3 Staffing levels and mix meet people's needs, with staff working well together | 4 - Good |

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| How good is our setting? | 5 - Very Good |
| 4.2 The setting promotes and enables people's independence | 5 - Very Good |

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| How well is our care and support planned? | 5 - Very Good |
| 5.1 Assessment and care planning reflects people's planning needs and wishes | 5 - Very Good |

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