

Glenburnie Care Home Care Home Service

Lower Scoonie
Leven
KY8 4SX

Telephone: 01333 422 243

Type of inspection:
Unannounced

Completed on:
6 June 2022

Service provided by:
Glenburnie Care Ltd

Service provider number:
SP2004006919

Service no:
CS2003039139

About the service

Glenburnie Care Ltd is a small family-owned care home and registered to provide 24-hour residential care and support for up to 23 older people. The home is all on the ground floor, providing single occupancy rooms with en suite facilities. Located in a residential area of Leven, Glenburnie has adequate onsite parking and there is easy access to public transport, the town centre, and local social resources.

About the inspection

This was an unannounced inspection which took place on 1 June 2022 between 09:30 Hours and 18:30 Hours. The inspection was carried out by two inspectors from the Care Inspectorate alongside an inspection volunteer who gathered family views via telephone. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service, and intelligence gathered since the last inspection. In making our evaluations of the service we:

- spoke with four people using the service and six of their family and friends
- spoke with five staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

People had warm relationships with the staff.

People were treated as individuals and their care planned accordingly.

The care home had a homely and welcoming environment.

People were able to remain connected to their families and communities.

Management and leadership were stable and effective.

Management and administration of medication required improvement.

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?	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

We made an overall evaluation of good for this key question as the areas of strengths clearly outweighed any identified weaknesses.

We observed a warm, homely atmosphere in Glenburnie. There was evidence of positive interactions between staff and people living there. Staff spoke to people with respect, demonstrating the principles of the Health and Social Care Standards in their daily practice.

Care planning was person-centred with consideration being given to individual needs and preferences. Staff demonstrated good knowledge of the care needs of the people they were caring for. Care plans were held on an electronic system and included appropriate risk assessments which were regularly reviewed. People's health care conditions and needs were monitored on a regular basis and referrals were made to relevant health professionals both proactively and responsively. This meant that people's care and support could be flexible and responsive.

Observations during mealtimes evidenced high quality food. The dining experience was relaxed with music playing in the background and people experiencing a positive dining experience. People were provided with excellent quality fresh food which was sourced locally. People had access to a variety of meals, catering to individual tastes and choices. Staff provided appropriate support where required, including provision of aids such as plate guards. People were positive about the food provided, 'the food is lovely here.' People who required a modified diet were provided with this. This meant that people's nutritional needs were met.

People had access to a variety of meaningful activities throughout the day. Evidence of art activities, dominoes, pamper sessions and people accessing the garden areas. Activities were integral to the daily routine with staff responding to individual interests. People were supported to access the wider community by staff and their families. One person commented on enjoying a trip to a local hotel for lunch. A hairdresser attends weekly with some people choosing to still use their own hairdresser. We observed doll therapy being provided for a person with dementia. This demonstrated that staff had an awareness of individual needs and abilities and tailored support accordingly, resulting in meaningful activities for people.

Of the six families spoken to all felt that the staff cared about their family members with comments such as the staff are 'conscientious and hard working' and 'they go over and above'. One person expressed concern about the cleanliness of a family member's room, but felt this had improved lately. Views on how well management communicated to families were mixed and the reintroduction of regular reviews and relatives' meetings was welcomed. Staffing levels and continuity of staff were a concern for some families and remains an area of pressure for the care home, reflecting the current pressures across the care sector as a whole. The care home was actively recruiting and doing all they could to mitigate staffing risks.

Glenburnie had followed Scottish Government guidance 'Open with Care' resulting in good connections being facilitated for people and their families. We saw evidence of five different families visiting, with relaxed interactions between families and staff. During our inspection one person was supported by family to the local café for a coffee, demonstrating active links to the wider community. The care home posted updates of activities on their Facebook page and a family member commented on how helpful this was. Families have access to some aspects of the electronic care records. This aided communication and partnership working, improving opportunities for developing person-centred care.

Appropriate infection and prevention control was evident with staff washing their hands and using PPE appropriately. Staff supported people to maintain their hygiene with evidence of regular hand washing. Staff supported visitors with appropriate Covid-19 precautions. Resulting in reduced risk of infection spreading and people being kept safe.

Staff were observed administering medication safely, discreetly and as suited to the people in their care. We found medication was regularly reviewed and where staff recognised significant changes to an individual's wellbeing, healthcare advice was sought. The provider had recently changed pharmacies resulting in a more responsive service, improving people's health and wellbeing. Since the previous inspection, the provider has changed where the medication is stored with a larger room now being used. This has resulted in improved management of medication, benefitting the people who live at Glenburnie.

The provider had made some positive changes to managing people's medication but we found record keeping that did not consistently reflect good practice. The systems in place to support medication management should be reviewed and developed to ensure people receive the right medication at the right time, including "as required" medication.

See Area for Improvement recorded under Key Question 2.

How good is our leadership?

4 - Good

We made an evaluation of good for this key question as the areas of strengths outweighed the areas of improvement.

People who rely on registered care services should be confident that staff have been recruited well. We found safer recruitment systems were in place supporting the provision of good quality care and support. Staff did not start work until all the necessary pre-employment checks were undertaken, helping to keep people safe. The provider had a centralised system which held all staff details, policies and procedures as well as access to training opportunities. Staff commented positively, 'I am able to access the training at home or work.' With easing Covid restrictions the provider is now able to also provide onsite training which staff welcomed. As a result, staff have access to appropriate training to support and develop their knowledge and skills, informing their ability to provide good quality care. There was evidence of good leadership with staff reporting they felt supported and able to approach management with any issues.

Staff were held in high regard by families and people living at Glenburnie with one person commenting 'they can't do enough for you.' One person stated, 'I don't think there is always enough staff, and they work so hard.' Ongoing staffing pressures were evident, and the provider is actively recruiting. Despite the staffing pressures we observed people still receiving person-centred care.

The physical environment was of a good standard with effective use of different areas of the care home. We observed ongoing improvements within the home, with bedrooms and communal living spaces being gradually upgraded. There was evidence of people being involved in these changes with choices of wallpaper hanging in the lounge for people to express their preference. The provider and senior team were aware of needing to carry out any work in as non-intrusive manner as possible to reduce any anxiety for the people living at Glenburnie. This demonstrated good practice in line with the principles informing the Health and Social Care Standards.

As detailed in key question one the management and administration of people's medication required to be reviewed as not always reflecting good practice. See Area for Improvement 1.

We found the management team to have the skills and capacity to identify risks, plan appropriate actions to address these and improve their service. They were responsive to feedback and open to learning and development. They had recently sent out anonymous questionnaires to relatives to inform their development plan. As a result, people could have confidence in the provider's commitment to supporting improvement. We have made an area of improvement in this area to allow the capture of the good practice that is evident and to document continuous improvement of the service. See Area for Improvement 2.

Areas for improvement

1. In order that people experience good outcomes the provider should ensure a consistently high standard of medication management to support safe and effective treatment or interventions. This should include a review of:

- Current systems for storage and audit
- Staff performance and
- Quality of medication administration records

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

'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11), and 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

2. For people to remain confident in the quality of service they and their loved ones receive, the provider could develop the home's improvement plan to ensure that everyone involved can improve the quality of care experienced in a planned and structured way.

The improvement plan could include details of:

- what areas need to be improved
- what the desired outcomes will be for residents
- how the improvements will be made
- when the improvements will be implemented
- who will be responsible for making improvements and
- how will improvements be measured

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

'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11), and 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

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

The provider should ensure that all planned replacement and maintenance issues including damaged surfaces are carried out in a timely manner to allow for effective cleaning.

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

'I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment' (HSCS 5.22).

This area for improvement was made on 2 February 2021.

Action taken since then

We found a clean and well-maintained home. Planned replacement had been carried out and maintenance issues addressed. A programme of refurbishment was ongoing. Effective cleaning was being conducted. As a result, this area for improvement has been met.

Previous area for improvement 2

The provider should ensure that processes of cleaning, checking and audit of all equipment is effective to assure them that all equipment is fit for purpose.

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

'I experience an environment that is well looked after with clean, tidy, and well-maintained premises, furnishings, and equipment' (HSCS 5.22).

This area for improvement was made on 2 February 2021.

Action taken since then

We found a clean and well-maintained home. Effective cleaning was being carried out. Processes for cleaning, checking and audit of equipment were in place. We found equipment was fit for purpose. As a result, 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
1.3 People's health and wellbeing benefits from their care and support	4 - Good
1.4 People experience meaningful contact that meets their outcomes, needs and wishes	5 - Very Good
How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iarrrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.