

St. Andrew's Care Home Care Home Service

Stirches
Hawick
TD9 7NS

Telephone: 01450 372360

Type of inspection:

Unannounced

Completed on:

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Service provided by:

Park Homes (UK) Ltd

Service provider number:

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CS2006131208

About the service

St. Andrew's Care Home has been registered since 2007.

It provides both residential and nursing support to 40 older people including short breaks and respite. St. Andrew's Care Home is owned by Park Homes (UK) limited whose base is in Bradford. This is their only home operating in Scotland.

The home is situated in its own grounds on the outskirts of Hawick in the Scottish Borders and provides ample parking for visitors. As the home is situated out with the town access to transport is advised.

Accommodation is provided over three floors. All floors have access to sitting areas and dining rooms. Rooms are single however there are larger rooms that can accommodate couples who are looking for on-going care and support. Some rooms have full en-suite facilities which include toilet, wash hand basin and shower. Other rooms are standard with no facilities but with toilet and bathroom facilities close by.

All floors are accessed by stairs and a lift is available for those that are unable to manage stairs.

St. Andrew's Care Home objective is: "to provide a high standard of individualised care to all its residents. It is the object of Saint Andrews that all residents will live in a clean comfortable, safe environment and be treated with care, dignity, respect and sensitivity to meet the individual needs and abilities of the resident"

What people told us

For this inspection, we received views from eight of the 35 people using the service. We also received views from 14 relatives and carers of people who were supported at St. Andrew's. People spoke highly about the staff that supported them. Four relatives highlighted issues about the laundry. However, they also commented that this had greatly improved. We agreed that this is the case.

Other comments we received included :

"The staff are great with my relative and are always very pleasant when we are there to visit. They are so busy but make time to speak to me and answer any questions I may have. My relative always looks clean and tidy and happy so we as a family can't ask for more"

"I am very happy with the care my mother receives. She is very contented which is a reflection on the staff and the environment"

"We are very much appreciative of the service which shows thoughtfulness by the management"

"The care home has strong management and leadership who strive to make overall care the best it can be. My relative is safe and generally happy and well cared for this in turn gives me great peace of mind"

"Staff are very good to my relatives, nurses always phone if there is a problem, very professional and all they do. A happy place to be"

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?	5 - Very 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?	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?

5 - Very Good

There were very good caring interactions from a staff team that demonstrated the principles of the Health and Social Care Standards. People experienced care and support which demonstrated dignity and respect. We could see positive relationships between the staff and the residents they supported. We observed interactions between staff and residents especially for those who were unable to verbalise their views. Staff showed a genuine interest in the people they supported and wanted to ensure that their needs were being met.

There was good attendance at the monthly residents' meetings. People took part in discussion about what activities people would like to be involved with and up and coming events. There was a very good programme of activities that people could choose to involve themselves in. The programme had a good balance of one to one events as well as in social groups. Activities that were available for people to attend included baking, gardening, arts and crafts, and visiting musical groups. However, we discussed how this could be developed regarding technology that is specific to the needs of people living with dementia. We also discussed the importance of reviewing the outcomes for people when participating in the different activities on offer.

There was a very good culture of positive risk taking regarding maintaining people's mobility. People were encouraged to maintain their independence for as long as they could. We observed good risk assessments to reflect this. This ensured that people experiencing care were enabled to get the most out of life and stay as independent as they could.

The nursing staff team had a very good overview and knowledge of people's health needs. This ensured confidence with residents and their families/carers that the staff team could respond promptly to any changing health needs and be reassured that these could be dealt with promptly. Health assessments were completed on a regular basis. The staff team were very responsive should a person's health change or deteriorate. There was good links with the GP who visited on a regular basis.

People benefited from a comprehensive medicine management system. Medication that was given on occasion had clear protocols in place. For those that experienced distressed behaviour and required medication to help with this, there was a comprehensive plan in place. This was to ensure that peoples support needs were right for them and that any intervention was safe and effective.

People could choose well presented meals, snacks and drinks which reflected their cultural and dietary needs including fresh fruit and vegetables. The people we observed appeared to enjoy the food and drinks provided to them in an unhurried relaxed atmosphere. People benefited from a wide range of specialist cutlery and aids and had the required support from the staff to ensure they maintained a healthy diet.

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?

5 - Very Good

Care plans contained very good assessments where people's choices and preferences were well documented. Staff were able to be led by what was written within the care plan to meet their health and social care needs. Individual choices were recorded and from our observations we could see that staff were aware of people's needs and did their utmost to meet those needs with kindness and care.

The information we observed in the care plans showed how staff achieved outcomes for people. This meant that how people's preferences and choices were being met were evaluated and information from the evaluation was updated in the care plan. This demonstrated that there was a sustained approach to ensuring care plans were up to date with relevant information to deliver the right care and support for that person.

People benefited from care plans which were regularly reviewed, evaluated and updated. Peoples relatives / carers/friends and other professionals took part in regular key reviews. This ensured that the relevant people were kept up to date with the individual's wellbeing and could be involved in their care. This supported residents to feel confident that the service had an enabling attitude and that people get the most out of life.

Where people were unable to make choices or decisions, supporting legal documentation was in place. This meant that staff were clear about their responsibilities and supporting people with any decisions to be made or needed to support to make.

Anticipatory care and ensuring that people are helped to live well right to the end of their life is important. The provider has developed their anticipatory care plans to reflect this. These plans we observed detailed peoples wishes and preferences should an emergency or unexpected event happen. This ensured that the staff team knew what to do or who to contact in such a case.

Overall, we felt there was very good information within the care plan which inform staff on how people's wishes, choices and preferences should be met. We observed staff discussing an interacting with residents in a way that demonstrated their knowledge of the person and their needs.

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

To reassure people that agency nurses have the right skills, training, experience and qualifications to care and support them well when in a palliative stage of their lives the service should;

- Develop a pathway that ensures that resident's wishes are identified
- There is a clear pathway to follow
- There is a clear assessment pathway to ensure there are no changes to that individuals needs that require to be addressed.
- There is the opportunity to review documentation to ensure that all the needs are reviewed and updated to ensure the plan is responsive to the needs of the resident.

This area for improvement was made on 23 May 2018.

Action taken since then

The provider has introduced mini care plans. These are kept with all the other daily notes for each person. This mini care plan identifies the needs of each individual and ensures that any new staff have a good understanding of how to support them.

We have observed enough evidence to meet this area for improvement.

Previous area for improvement 2

To reassure people that the manager has the correct knowledge and skills to develop the service the manager should look to develop their skills by undertaking leadership and management training.

This area for improvement was made on 23 May 2018.

Action taken since then

Since we last inspected the manager has undertaken train the trainer courses and various other courses which enables her to gain more management experience. There is also plans for them to formalise further management training in the forthcoming year.

We have observed enough evidence to meet this area for improvement.

Previous area for improvement 3

To ensure that people have confidence in the service systems should be developed where documentation:

- Updated as required
- Is signed, dated and countersigned.
- An audit of anticipatory or end of life plans is completed weekly and new documentation put in place if a residents care has changed.

This area for improvement was made on 23 May 2018.

Action taken since then

We observed improved quality assurance on documentation. Anticipatory care plans are now evidenced and we discussed some minor changes to these documents.

We have observed enough evidence to meet this area for improvement.

Complaints

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

Detailed evaluations

How well do we support people's wellbeing?	5 - Very 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	5 - Very Good
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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