

Chalmers Road Care Home Service

26 Chalmers Road
Ayr
KA7 2RQ

Telephone: 01292 288 242

Type of inspection:
Unannounced

Completed on:
17 January 2023

Service provided by:
South Ayrshire Council

Service provider number:
SP2003003269

Service no:
CS2003001299

About the service

Chalmers Road is a purpose-built bungalow close to Ayr town centre providing short break services for up to four adults with Learning Disabilities. The service is commissioned by South Ayrshire Council and currently provides a service to 18 individuals. The length and frequency of each stay is determined by the needs of those using the service and range from overnight to several weeks.

The stated aims for the Chalmers Road service are:

"To provide a high quality, needs led, person centred respite service for adults with a learning disability. The break should be a positive experience for both the person using the service and their carer. Thereby improving people's quality of life and supporting their relationship."

About the inspection

This was an unannounced inspection which took place on 16 and 17 January 2023. The inspection was carried out by two inspectors from the Care Inspectorate. 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 three people using the service and six relatives
- spoke with eight staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

- The health, wellbeing, care and support of people was very good.
- Communication was very good between the service, people experiencing care and their relatives.
- People were happy while at the service.
- The manager recognises that systems are required for quality assurance.
- The staff knew the people that they supported well.
- Care plans were very person centred.

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?	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?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

People experienced warmth, kindness and compassion in how they were supported and cared for within this respite service. They were happy and relaxed, and their right to make choices and direct their support was fully embedded within the culture of the service.

People were supported by staff who knew them really well. Staff demonstrated knowledge and understanding of the people they supported. Staff clearly knew the individual's health needs and the support that they required.

Care plans were very person centred with a range of detailed information in relation to the people supported. There were really nice bits of information captured within care plans relating to the health and wellbeing of people. This included detailed information on how best to support people ensuring their needs were met alongside their choices, likes and dislikes.

We were able to see good examples of guidance for staff in relation to supporting a person with their medication. This meant that there was a consistent approach from staff in ensuring the persons safety and wellbeing.

During the inspection we spoke with seven carers and four external professionals. Feedback was very positive in relation to the care and support provided by the staff at Chalmers Road. They told us that phased introductions were available for anyone new to the service. This meant that they could visit the service for a few hours to meet staff and engage in activities to allow them to familiarise themselves with the environment.

During our inspection we saw people going out and enjoying activities. We also observed activities taking place within the service, and found that the activities were tailored to people's wishes.

Infection prevention and control (IPC) systems and procedures were well established. There were good systems in place to ensure the cleanliness of the environment and all IPC measures were adhered to. PPE, clinical waste disposal bins and sanitiser stations were appropriately situated throughout the buildings. These measures demonstrated that people using the service and their families are being protected from the risk of infection.

The environment was clean, tidy and very well presented and all health and safety checks and requirements were undertaken appropriately.

How good is our leadership?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on people's experiences.

The service had an improvement plan in place, however this hasn't been updated since 2019. The manager and the senior are in process of updating this and waiting for questionnaires to be returned from families and professionals to inform the updated plan.

The manager and senior were visible within the service, providing support and guidance. Staff informed us there is an open-door policy and they feel supported by the management team at all times. We heard that supervisions, team meetings and observations of practice were taking place informally however only some were captured within recordings. The manager recognises this is an area that can be improved upon and plans to implement a quality assurance system to ensure these recordings take place. Once this is embedded and reviewed on a regular basis, this will improve quality and the managers overview of the service. This will also ensure that staff have an opportunity to reflect and develop their practice in a supportive environment.

(See area for improvement 1).

During the inspection we sampled training records. We observed that staff training is an area that the service should focus on improving to ensure that this is updated within the timeframes required. Compliance levels were high using the online system however this was not consistent with the external training required. We could see that training had been booked for staff in the near future. The service would benefit from service specific training relating to individual needs such as Autism, Diabetes and PEG training. This will support staff in their knowledge and understanding of peoples conditions when providing support. **(See area for improvement 2).**

The staff within the service have recently completed MAPPA training and this helped meet a previous area for improvement made at their last inspection.

We sampled a range of medication records. The system was robust and medication was appropriately stored. Appropriate checks were completed, and medication administration records in place with guidance attached for how best to administer medication relating to individual needs. This ensures people receive their prescribed medication at appropriate times.

We observed that there were effective processes in place for recording accidents and incidents and these were reported to the relevant authority and to the Care Inspectorate.

The service regularly captures feedback from relatives both informally and through questionnaires. Feedback is invaluable to the service. This helps the service meet their aims and objectives and informs how the service can be further developed with input from carers and people experiencing care.

Areas for improvement

1.

The service should ensure staff training is completed and updated within the required timeframe and would benefit from specific training relating to individual needs.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) 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. (3.14).

2.

The service should ensure that robust and effective quality assurance processes are in place. Systems for the monitoring of practice such as supervision, appraisal, team meetings and practice development should be implemented in accordance with corporate policies.

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

'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

To ensure that the rights of the person are maintained and that the safety of staff and the service user have been considered and assessed before approving any interventions, any documents instructing staff on the use of physical interventions to manage challenging behaviour should be clear and detailed as to the interventions to be used and under what circumstances. This should be accompanied by a risk assessment and clear evidence as to who has been involved and given consent to the use of physical interventions.

This ensures care and support is consistent with the Health and Social Care Standards which state that: "I am protected from harm because people are alert and respond to signs of significant deterioration in my health and wellbeing, that I may be unhappy or may be at risk of harm" (HSCS 3.21) And "My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event" (HSCS 4.14).

This area for improvement was made on 17 April 2018.

Action taken since then

The staff within the service have recently completed MAPPA training and we saw that any behavioural intervention is clearly documented. There will be an area for improvement ongoing in relation to staff supervision and training.

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?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
1.4 People experience meaningful contact that meets their outcomes, needs and wishes	5 - Very Good
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	5 - Very Good
How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good

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