

Chalmers Road Care Home Service

26 Chalmers Road
Ayr
KA7 2RQ

Telephone: 01292 288 242

Type of inspection:
Unannounced

Completed on:
9 January 2025

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 21 people. The length and frequency of each stay is determined by the needs of those using the service and range from overnight to several weeks. There were two people staying at Chalmers Road during our inspection.

About the inspection

This was an unannounced inspection which took place on 7 and 8 January 2025. The inspection was carried out by one inspector 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 one person using the service and four relatives
- spoke with seven staff and management
- observed practice and daily life
- reviewed documents

Key messages

- People received reliable and consistent support from a familiar staff team with whom they had positive, trusting and caring relationships.
- People experienced support that promoted their identity, independence and choice, from a kind, caring and competent staff group.
- Family members felt involved and well informed, telling us they were very satisfied with the standard of care and support provided.
- The service uses a variety of tools to assess the quality of the care provided, they should review how these are used and how they inform the service improvement plan.
- There were safe systems in place to keep the environment clean and safely maintained.

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
How good is our staff team?	5 - Very 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?

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 compassion, dignity and respect because there were, genuine connections with all staff. Care and support was very person-centred being provided by staff who knew people well. We saw that when people came into respite, they planned their week ahead; which could be subject to change if they chose to do something else instead. People felt respected and listened to because their wishes and preferences were used to shape how they were supported.

People experienced support that promoted their independence, dignity, privacy and choice. They felt connected, as they were supported to maintain and develop relationships within the unit and outside. People chose where and how they spent their time and benefitted from maintaining and developing their interests and what mattered to them.

People got the most out of their time in respite because they made decisions and choices about how they spent their time. They were supported to achieve their wishes and aspirations, in a way that made sense for them. Family members/carers were appropriately involved where required. People felt safe and protected whilst having the opportunity to take informed risks.

People's health and wellbeing were of utmost importance. The care and support was based on relevant evidence, guidance, good practice and standards. Anything noted as a concern was monitored and the right healthcare from the right person was requested. We saw evidence of input from health professionals where required.

The team planned ahead of peoples' dates to ensure choices were available. This meant there was food and drink that meets people's needs and wishes on offer throughout their stay. The team then prepared food in conjunction with SALT speech and language therapists' guidance.

Families told us they were very happy with the care and support their loved ones received. Comments included "It is an absolute godsend." "No issues at all, the staff and management are so approachable. She sees it as a home from home and thoroughly enjoys it." "At first it took me time to settle down but now I know that she loves it and is happy there." "We are very happy with the service; the staff are so caring. He loves his time there and we know he is well looked after." "Fantastic! It's been a god send, he loves it." "We are very impressed by them, she loves it. Very pleased by the workers and the care she gets."

People could choose to use private or communal areas and have the right to privacy when they wanted it. As four people can access respite at the one time, managers took the needs of each person into consideration when planning ahead for those accessing the service.

How good is our leadership?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Leaders demonstrated a good understanding about what was working well and what improvements were needed. They ensured that the needs, outcomes and wishes of people visiting the service were at the heart of every decision. This meant that people were supported in a person-centred way and treated as individuals with dignity and respect.

Senior staff were approachable and visible within the service, supporting staff to provide care and support with skill and competence. Feedback was gathered through conversations and post visit monitoring paperwork. People's families told us they felt well-informed, and their views had been listened to.

There were some quality assurance systems in place to audit the standards of care and support. However, it was not clear what the findings from audits were and what improvements had been made by action taken. It would be good to see any learning from audits with what was required to change in an action plan.

Managers learned from events and feedback to continue to improve the quality of care and support. It would be helpful to see a clear follow on from audit findings, detailing any learning from them and how actions impacted on support. Managers could use their improvement plan to better effect, this would drive change and improvement in the respite experience for people and their carers/families. See area for improvement 1. We were reassured that the service had begun to use self-evaluation, however, further work is required to develop this approach to support improvement.

Some feedback suggested the aims and objectives of the service were being impacted upon by pressure to take emergency admissions over respite clients. Although leaders had the skills, capacity and systems in place to identify risks, and plan appropriate actions, some families felt that their needs had not been acknowledged.

Staff told us they felt very well supported day to day; managers had an open door and worked closely with the team. Managers did direct observations and competency assessments linked to the improvement of outcomes for the people receiving support. Comments from staff include, "Managers are really supportive I'm never away from their door. Not had formal supervision but feel so supported." "The team have been so supportive of me." "Love working here, everyone is so down to earth and supportive." "I love being part of this team, they are so supportive. Open door with managers, they deal with anything we raise."

The service continually evaluated people's experiences to ensure that, as far as possible, they are getting the right care and support in the right place to meet their outcomes. This was noted in post visit audits, which are completed after each stay. Reflective practice was encouraged as was shared learning; the service used several tools to check in on people, their families and staff.

The management team worked closely with the team and knew people well. This meant they had a good overview of service provision and were alerted to any issues as they arose. This allowed for informed and quick resolutions to improve the service and positively impact on outcomes for people using the service.

Areas for improvement

1. To ensure that people experience consistently good outcomes, and that quality assurance and improvement is well led. Managers should continue to evaluate and monitor service provision which informs the improvement and development of the service. By introducing action planning they could track issues identified and also that actions are reviewed to ensure that they effectively improve outcomes for people supported.

This is to comply with Regulation 4 (1) (a) and (b) (Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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

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.

To ensure staff have the necessary skills to effectively support people, the provider must ensure that staff access training appropriate to their role and apply their training into practice to promote the safety and wellbeing of people supported. On speaking with staff, they said they had sufficient training for their role, and they could request additional training if required. We observed good practice and adherence to training, meaning that training was effective.

Staff were comfortable acknowledging their learning needs, as well as sharing good practice with colleagues. Any practice issues identified were confidently addressed promptly. Staff told us that their wellbeing was well catered for. Managers knew staff well and offered additional support where required. Staff had attended the appropriate level of training to their varying roles. This has had a positive impact on the teams understanding, resulting in better outcomes for people.

There were several learning and support opportunities available for staff. This meant that people were confident that staff had the necessary skills and competence to support them. Staff's competence and practice was monitored to improve outcomes for people. Staff observations were used to improve practice and promote a culture of learning. This meant that people were being cared for by staff who understood them and were knowledgeable to their needs and wishes.

Some staff had met with line managers for supervision, however, for those who had met more informally they told us they felt very well supported. Comments from staff were very positive about how they had felt welcomed and supported by the team and managers.

There was a positive culture of continuous learning, managers approached matters constructively and staff felt valued which supported their personal and professional development.

The team told us they worked very well together, our observations and feedback from carers/families backed that up. Managers took the skills and experience of the team into consideration when planning for future respite dates. The numbers and skill mix of staff are determined by a process of continuous assessment featuring a range of measures, and is linked to quality assurance. This includes taking account of the complexity of people's care and support.

Staffing arrangements allowed for more than basic care needs to be met, staff told us they had sufficient time to support people to get the most out of life. Staff had time to provide care and support with compassion and engage in meaningful conversations and interactions with people.

How good is our setting?**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 benefit from high quality facilities. Chalmers Road is homely and welcoming, the quality of facilities is high with a new kitchen and bathrooms being done last year. The four rooms have en suite toilets/ bathrooms. The standard of cleanliness and repair throughout the home is very good. The health, safety and maintenance records were up to date showing checks of the equipment and safety of the home were completed.

When in respite people had their bedrooms personalised and made up how they like it. They had specialist medical devices and equipment which best meets their changing needs and equipment is provided when required; which was regularly serviced. This meant that people felt more at home and could take confidence in their safety.

People benefit from a warm, comfortable, welcoming environment with plenty of fresh air, natural light and sufficient space to meet their needs and wishes. The environment is relaxed, clean, tidy and well looked-after. We saw that people were able to choose where they spend their time and to share space with their peers if they want to or not.

There is a large accessible and welcoming garden space to the rear that is safe for people to use.

We saw appropriate signage to support people's safety, independence, and orientation.

There are separate areas for staff so that they can have breaks and private conversations away from people's living spaces.

How well is our care and support planned?**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.

Care and support is planned very well because assessment and personal planning reflected people's outcomes and wishes. People and their carers views were at the heart of everything at Chalmers Road.

People accessing the service had a personal plan which detailed their current care and support needs. This ensured that staff were effectively directed to support the individual taking a consistent and agreed approach. We saw that there was good information within personal plans about the individual, what was important to them, their preferred routines, their choices and wishes regarding their care and support. This provided good information to guide staff to ensure that people were supported in an agreed and consistent way and that their wishes were respected.

All personal plans detailed individual's healthcare needs and contained information to guide staff how best to support each person in line with their needs and preferences. Risk assessments were in place and up-to-date; this meant staff knew if people required assistance with moving and assisting or eating and drinking etc. There was an overview of risks for individuals and clinical issues were discussed with families before and after respite.

Plans had been formally reviewed with families and relevant professionals. It was positive to hear from families that they were regularly consulted and kept up to date. Outcomes were noted for each person, the team approached support in a person-centred way and fully understood the impact meeting outcomes had on people.

Leaders and staff used personal plans to deliver care and support effectively. Personal plans were reviewed and updated regularly, and as people's outcomes change. It was heartening to see that some people were involved in their review meetings, this meant they were fully included in directing and leading their own care and support.

Where people are not able fully to express their wishes and preferences, individuals who are important to them, or have legal authority, are involved in shaping and directing the care and support plans.

Family members we spoke with said that their relatives were well looked after. Comments included; "She sees it as a home from home and thoroughly enjoys it." "The staff are so caring." "I'm very happy with the care and support, he's very happy there and so well looked after." "They really helped us out at short notice one time." "It's great for us too, we optimise our time."

The views, choices and wishes of people who visit the unit, and their family members, inform changes in how care and support is provided. Staff understood the value of positive relationships to support and improving outcomes for people.

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 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 that 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' (HSCS 3.14).

This area for improvement was made on 17 January 2023.

Action taken since then

All staff training had been completed and updated within the required timeframe. We also saw that a plan was in place for this to continue. Person specific training had also been arranged to ensure that individual needs were continually met to a high standard.

This area for improvement has been met.

Previous area for improvement 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 state that:

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

This area for improvement was made on 17 January 2023.

Action taken since then

The service had a positive culture of learning and improvement throughout the team. There were quality assurance processes in place where reflective practice was encouraged as was shared learning. Managers had recently started working on the Care Inspectorate self-evaluation toolkit for improvement.

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?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good
How good is our staff team?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good
How good is our setting?	5 - Very Good
4.1 People experience high quality facilities	5 - Very Good
How well is our care and support planned?	5 - Very Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	5 - Very 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 iarrtas.

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.