

# Larkfield View Care Centre Care Home Service

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Greenock  
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**Type of inspection:**

Unannounced

**Completed on:**

13 December 2019

**Service provided by:**

Flagship Tower (Greenock) Limited

**Service provider number:**

SP2006008026

**Service no:**

CS2004085044

## About the service

The Care Inspectorate regulates care services in Scotland. Information about all care services can be found on our website at [www.careinspectorate.com](http://www.careinspectorate.com)

The service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

Larkfield View Care Centre is a care home (with nursing) registered for 90 older people who may have dementia and/or physical disabilities. The provider is Flagship Tower (Greenock) Limited. This service registered with the Care Inspectorate in April 2011.

The care home is located in a residential area of Greenock. It is purpose-built with accommodation over three floors divided into four units. Bedrooms are all single with en-suite facilities including showers. Each unit has dining rooms, lounges and adapted bathrooms. There are other rooms and areas, such as a hairdressing salon and an enclosed garden space that residents can use. There were 85 residents living in the home at the time of the inspection.

Examples of the aims and objectives of the service were:

- to provide an environment that all service users can regard as their home.
- to offer care that is of the highest standard, tailored to meet the individual's specific wishes and choices .
- to provide care that is non-discriminatory and to treat service users with respect regardless of age, gender, sexual orientation, race or religious belief.
- to encourage and value input from relatives and actively encourage anyone involved in the home to express their opinion.
- to strive to create a home where, in comfort, safety and security, each service user can be the individual they are.

## What people told us

Before and during our visit, we received 24 completed care standards questionnaires from residents, 19 from relatives and 22 from staff.

There were 85 residents living in the home at the time of our inspection. During our visit, we spoke with 17 residents, 3 visiting relatives and 6 external professionals. We spoke with staff throughout our inspection and as part of our general observations. We also observed lunchtime and carried out a SOFI 2\* observation involving residents with limited communication abilities.

Overall residents, relatives and staff gave very positive feedback about the standard of care at Larkfield View Care Centre. When areas for improvement were identified we explored these further and communicated them anonymously to the manager with a view to supporting improvement. Comments included:

- 'Life is ok. I am enjoying myself and I get involved in many things'.
- 'Brilliant activity staff'.
- 'They do a very good job'.

- 'Lovely. Very caring and hard-working and they know all about my mum. They are so supportive of us all and go above and beyond'.
- 'Staff are warm and welcoming. Nothing is a bother to them'.
- 'The home has a very friendly and warm environment. We are always made to feel welcome and my father seems to have settled into the home and appears happy'.
- 'It's good. I've enjoyed the singing this morning with the children. I like it and staff are lovely and nice. They work so hard'.

\*SOFI 2 is a Short Observational Framework for Inspection. We use SOFI 2 as a tool to assist us in directly observing the experience and outcomes for people who may be unable to tell us their views.

## 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?	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**

Our observations and feedback received from people showed that staff treated residents with kindness, warmth and compassion. Staff appeared to know individual residents well and we saw that residents benefitted from good relationships with staff. The friendly and settled atmosphere in the service appeared to enable residents to feel content and safe, including people living with dementia.

Staff showed that they were competent and skilled in dementia care. Where we observed people living with dementia experiencing moments of distress, we saw that staff interacted with skill, respect and patience to enable the person to calm down and feel more secure again.

Residents were enabled to make choices and their preferences were respected. This promoted residents' abilities and mental well-being. The service carried out regular meetings to enable residents and families to get involved in decisions. A very good example of promoting individual rights and decision-making was a resident whom the service supported extensively to enable her to move back into her own accommodation.

Residents were not unduly restricted. Where restrictions were in place, appropriate consent was obtained and documented. This meant that residents' rights were protected. We discussed with managers that the service should ensure that where medication was given covertly, the service could improve how it documented the evidence of regular reviews.

Residents physical health benefitted from pro-active and effective health assessment and care. External health professionals provided very good feedback about the service. We found staff to be competent and reliable and saw that residents benefitted from the good and effective relationship between the service and the various external professionals. Some external professionals were also involved in providing learning opportunities for staff or supported the service with quality assurance.

The service had a very motivated and active team of activity coordinators. This meant that residents could experience a range of meaningful activity opportunities that promoted their mental and physical wellbeing. Staff were aware of the importance of physical activity and tried to offer opportunities for movement in daily life. A very useful garden space gave various opportunities to be active and allowed access throughout the year.

Residents were enabled to experience regular exchanges and contact with their local community. We saw several very good examples of inter-generational work, churches and other community organisations. This enabled people to experience meaningful activities inside and outside the home and helped them to feel connected to their community. A good example of the use of technology to keep residents and their community and families meaningfully connected was the service's Facebook page. This interactive platform enabled families and friends to stay informed about activities and events in the service.

We saw several well organised and enjoyable mealtimes. Staff provided a settled, unhurried and friendly atmosphere and showed skill in supporting people with their meals. Meal choices were sometimes made well before the meal, although there was evidence that people could make a choice at the table or were provided with alternatives if they wished. We encouraged managers to review how people living with dementia can make choices at mealtimes as part of their ongoing improvement plan.

## 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?****4 - Good**

We found that care plans and risk assessments were complete and up to date. Individual plans were regularly reviewed. Managers responded effectively to previous feedback by using quality assurance to drive compliance. This meant that care plans were generally completed with relevant details and showed that staff knew the residents well.

People confirmed that the service involved them in regularly scheduled reviews of the care and support plans. This meant that people felt informed and reassured. A relative told us: 'Communication is excellent between the care home, myself and other members of the family. We get all the information we require'.

The care plans contained information about people's wishes for care towards and at the end of their life. There was good evidence of this being connected to the NHS systems to ensure a seamless exchange of information with acute or emergency services. The documentation also showed that the service involved relevant external health professionals to meet the assessed needs of the residents.

Assessments and care plans included some good detail about residents' choices, likes and interests. Information about people's life story was included on 'getting to know me' and 'look it's me' forms. This provided useful conversation prompts and helped staff to build positive relationships with the residents.

We found that the care plans could be further improved by making the content more person-centred and by including clearly formulated personal outcomes. We discussed with managers that the current documentation system did not appear to fully reflect the person-centred and relationship focussed practice of the service that we were able to see. Managers showed us that they already had advanced plans for improving the format and content of the care plans. We encouraged the service to implement these plans as part of their ongoing improvement work.

**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**

Staff should be vigilant for any highlighted risks observed about residents in the home, these should be included in each individual's care plan and developed into clear strategies and advice that all staff should follow.

This is to ensure that care and support is consistent with Health and Social Care Standard 1.15: My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices.

**This area for improvement was made on 25 November 2019.**

## Action taken since then

The service made improvements to the way risk and in particular falls risk was assessed and to the way increased risk for individual people was highlighted. The service had appropriate action plans in place and supporting evidence, like accident forms, falls analysis forms and monthly accident & incident analysis and action planning, as well as minutes of meetings, showed that the service made appropriate progress.

This area for improvement was met and will not continue.

## Previous area for improvement 2

Management should ensure that any investigations into serious accidents and incidents are fully investigated, reported and can clearly evidence action taken in response.

This is to ensure care and support is consistent with Health and Social Care Standard 3.18: I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability or frailty.

**This area for improvement was made on 25 November 2019.**

## Action taken since then

The service's action plan and supporting evidence, like minutes of meetings and improved processes showed that the service has made appropriate improvements to the way serious accidents are investigated and followed up.

This area for improvement was met and will not continue.

## Complaints

Please see Care Inspectorate website ([www.careinspectorate.com](http://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?	4 - Good

<p>5.1 Assessment and care planning reflects people's planning needs and wishes</p>	<p>4 - Good</p>
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