

Three Towns Care Home Care Home Service

20 Afton Road
Stevenston
KA20 3HA

Telephone: 01294 469711

Type of inspection: Unannounced
Inspection completed on: 19 March 2018

Service provided by:
Lakewood Limited

Service provider number:
SP2011011672

Care service number:
CS2011300271

About the service we inspected

This service registered with the Care Inspectorate in October 2011.

Three Towns is a care home (with nursing) registered for 60 older people who may have dementia and/or physical disabilities. This includes the provision of respite care to a maximum of three older people on each floor at any one time. There were 56 residents living in the home at the time of our inspection. The provider is Lakewood Limited.

The service is located in a residential area of Stevenston, North Ayrshire close to local amenities, shops and transport links. The care home is purpose built with accommodation over two floors connected by a passenger lift. Ardeer unit, which is located on the first floor has 33 single en-suite bedrooms, a large lounge, dining area and designated smoke room. The ground floor Nobel Unit has 27 single en-suite bedrooms, a large lounge, dining room and the Poppy tearoom. Assisted bathing and showering facilities are provided on each floor. Residents also have access to an enclosed garden area with some bedrooms having patio doors leading onto this area.

The stated aim of the service is:

"To provide the level of care and support needed to ensure that, as far as possible, residents can maintain their independence and individuality."

How we inspected the service

We spoke to:

- 8 residents
- 5 relatives
- 3 carers
- a senior carer
- a nurse
- the housekeeper
- the maintenance officer
- the administrator
- the manager
- the head of service development

We observed:

- staff practice
- lunch
- an activity session

We looked at:

- participation evidence
- personal plans
- six monthly reviews
- medication records

- accidents and incidents
- activities records
- key-working
- staff training and development including supervision
- dementia training
- new staff inductions
- staff meeting minutes
- the complaints log
- the quality assurance framework and audits
- the environment, cleanliness and furnishings
- the registration certificate
- the staffing schedule
- the insurance certificate

Taking the views of people using the service into account

Inspectors spoke with three residents and a visiting relative. The inspection volunteer, whose role within the inspection is to seek the comments and views of residents and relatives and make observations of routines and staff interactions with residents, spoke with four residents and four visiting relatives. Comments included:

"I'm quite content."

"I might wait a wee while when I press my buzzer but not very often."

"No issues with the care."

"It's very nice."

"The food's very good on the whole."

"The staff are all good to me."

Taking carers' views into account

Comments from relatives included:

"The laundry has improved - I've not had any more issues."

"It's good - I like the staff."

"(Relative) looks well cared for."

"I see the staff sitting in the lounge doing paperwork - why are they not talking to the residents?"

"(Relative) doesn't need much to keep her happy which is why it's a shame when these things don't happen, like looking after her hearing aid and her glasses."

"I feel (relative) is settled."

"They're all very nice - very attentive to (relative)."

"Staff are good at reassuring (relative)."

"We can't fault the care."

"Staff are very helpful and obliging - all lovely."

"Staff have gone over and above for (relative)."

What the service has done to meet any requirements we made at or since the last inspection

Previous requirements

Requirement 1

The provider must devise and implement a targeted and evidence based strategy to meet the health and welfare needs of residents living with dementia.

In order to do this the provider must:

- take account of good practice
- involve residents, relatives and staff in developing the strategy
- ensure staff have the required knowledge and skills
- implement each stage of the strategy within agreed timescales
- review and measure the impact of the strategy in improving outcomes.

This is in order to comply with:

- The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210), Regulation 3 Principles
- The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210), Regulation 4(1)(a) Welfare of users
- The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210), Regulation 15(b)(i) Staffing

The following National Care Standards were taken into account when making this requirement:

National Care Standards - Care Homes for Older People, Standard 5: Management and staffing arrangements.

This requirement was made on 5 July 2017.

Action taken on previous requirement

The dementia strategy was under development and progress had been made towards achieving this since the last inspection. A working group consisting of relatives and staff had been set up with a view to agreeing actions and timescales for progressing the initial priorities for improvement which were:

- staff skills and knowledge
- the management of stress and distress
- meaningful activity
- the care home environment.

The strategy was being informed by good practice guidance including the 'Promoting Excellence' framework for staff working with people with dementia and the 'King's Fund' environmental assessment tool. Plans were underway to add an additional lounge and quiet room in Ardeer Unit with consideration being given to reviewing the existing lounge and dining room into two lounge/diners which would offer residents more options as to where they could spend their time. Reviewing and measuring the impact of the strategy in improving outcomes was being considered and we were satisfied that there was a commitment to progressing this initiative in a meaningful way. Given the progress made and the commitment demonstrated, we extended the timescale for developing the dementia strategy to 30 June 2018.

Not met

Requirement 2

The provider must take action to review and improve the continuous learning framework in place to support the training and development of the staff team in order to ensure that staff are supported to gain the skills, knowledge and competence to meet the needs of service users.

In order to do this the provider must:

- fully implement the revised induction procedure including the staff skills competency assessments
- implement a localised training plan informed by the health and welfare needs of residents, the service's aims and objectives and staff learning and development needs
- ensure staff are provided with regular, planned supervision that supports continuous learning and development
- develop a system that supports access to up to date records of staff training.

This is in order to comply with:

- The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210), Regulation 3 Principles
- The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210), Regulation 4(1)(a) Welfare of users
- The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210), Regulation 15(b)(i) Staffing

The following National Care Standards were taken into account when making this requirement:

National Care Standards - Care Homes for Older People, Standard 5: Management and staffing arrangements.

This requirement was made on 5 July 2017.

Action taken on previous requirement

The revised induction procedure that included the staff skills competency assessments had been introduced and we saw some instances where these had been well completed. However, this was variable and more work is needed to support staff to complete the reflective accounts in a meaningful way that shows they have considered the impact of what they have learned on their practice.

The manager still needed to develop a localised training plan which she agreed to do, taking account of the health and welfare needs of residents, the service's aims and objectives and staff learning and development needs. However, we saw that a range of training relevant to the needs of residents had been planned including adult support and protection, delirium and diabetes.

The content of staff supervision, although taking place, was variable and needed more of a focus on learning and reflective practice. We directed the manager to the Scottish Social Services Council (SSSC) 'Common Core of Skills, Knowledge and Values' to help inform and support this process.

A system had been implemented to monitor staff training more closely. We saw that staff had been prompted to undertake the scheduled training with more targeted action being taken where required to ensure compliance.

Overall, we concluded that the continuous learning framework had improved sufficiently for this requirement to be met and we made the following recommendation:

- In order to ensure that staff have the knowledge and support they need to carry out their duties in accordance with professional standards and good practice, the management team should review and improve the way that staff supervision and reflective accounts contribute to the learning and development framework. A localised training policy should also be developed in response to the care and support needs of residents and staff competencies.

National Care Standards - Care Homes for Older People, Standard 5: Management and staffing arrangements.

Met - within timescales

What the service has done to meet any recommendations we made at or since the last inspection

Previous recommendations

Recommendation 1

Personal plans should reflect residents' abilities, personal preferences, choices and routines in detail. Daily notes, evaluations of care plans and the minutes of six monthly reviews should fully reflect residents' experiences and the impact of care planning in promoting positive outcomes.

National Care Standards - Care Homes for Older People, Standard 5: Management and staffing arrangements; Standard 6: Support arrangements.

This recommendation was made on 5 July 2017.

Action taken on previous recommendation

Although there was a good level of detail recorded in the personal plans we looked at and this demonstrated that staff knew residents well, care plan evaluations and six monthly reviews still needed to be improved to reflect the impact and outcomes of the interventions planned by staff to meet residents' needs. Some records also needed to be updated to reflect changes. Information about the decisions arrived at during six monthly care reviews were brief and it was not always clear how these would be followed through. It is important to explore and discuss what is important to the person and what they want, in addition to the assessed support they need to maintain safety and wellbeing, and to record this. This helps to ensure that personal plans are used in a meaningful way that informs and delivers personal outcomes as well as responsive care. We continued this recommendation.

Recommendation 2

The activities programme should be reviewed to offer a wider range of options including more opportunities for getting outside, accessing the community and activities suitable for residents living with dementia.

National Care Standards - Care Homes for Older People, Standard 5: Management and staffing arrangements; Standard 6: Support arrangements; Standard 12: Lifestyle - social, cultural and religious belief or faith; Standard 17: Daily life.

This recommendation was made on 5 July 2017.

Action taken on previous recommendation

We found that opportunities to participate in meaningful activities that take account of residents' preferences and any barriers to inclusion and involvement were limited. Feedback from residents and relatives was negative with comments about being bored with nothing to do to pass the time:

"To tell you the truth I don't do anything."

"There's nothing to do - that's the worst of it."

"They could do with more to stimulate them."

"They don't get out often enough."

People were also dissatisfied with the recreational activities on offer. Being able to enjoy an active life and participate in a range of recreational, social, creative, physical and learning activities on a regular basis, both indoors and outdoors is essential for residents' wellbeing and quality of life. Opportunities to experience companionship and maintain and develop personal interests in a way that matters to each individual must be supported. We made the following requirement:

A programme of meaningful activities that engage residents in purposeful ways must be developed and implemented to promote positive outcomes and experiences, quality of life and wellbeing. In order to achieve this the provider must:

- explore good practice in relation to delivering meaningful activities, including activities for individuals living with dementia
- consult with residents, their families and staff, taking account of individual preferences and addressing any barriers to inclusion and involvement
- enable residents to enjoy an active life and participate in a range of recreational, social, creative, physical and learning activities on a regular basis, both indoors and outdoors

- provide opportunities to experience companionship and maintain and develop personal interests in a way that matters to each individual
- develop the role of key workers and the wider staff team in developing, supporting and delivering the activities programme
- review the activities programme regularly with residents, relatives and staff to maintain good practice.

This in order to comply with:

- The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210), Regulation 3 Principles
- The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210), Regulation 4(1)(a) Welfare of users
- The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210), Regulation 5(1) Personal plans
- The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210), Regulation 15(b)(i) Staffing

Timescale for achievement: A reviewed programme of meaningful activity must be developed and submitted to the Care Inspectorate by 14 May 2018.

Recommendation 3

Carpets and furniture that are worn or can no longer be adequately cleaned should be replaced and a more proactive approach should be taken in future to maintain the overall home environment to a high standard using regular environmental audits.

National Care Standards - Care Homes for Older People, Standard 4: Your environment; Standard 5: Management and staffing arrangements.

This recommendation was made on 5 July 2017.

Action taken on previous recommendation

Overall, the environment was clean and comfortable. There were plans to develop the environment as part of the emerging dementia strategy and some decorating and carpet replacement had taken place since the last inspection. Although some carpets still needed to be replaced, we were satisfied that the provider had plans in place to address this. We continued this recommendation for review at the next inspection.

Recommendation 4

The role of the keyworker should be fully established ensuring that residents, relatives and staff are familiar with the purpose and remit of this role.

National Care Standards - Care Homes for Older People, Standard 5: Management and staffing arrangements; Standard 7: Moving in; Standard 11: Expressing your views.

This recommendation was made on 5 July 2017.

Action taken on previous recommendation

More work was needed to continue to fully develop the key working role in a meaningful way. We observed staff being focussed on tasks at times and they did not routinely engage residents in activities that they could participate in and enjoy as they did not recognise this as an integral part of the care and support they provide each day. Key workers should also familiarise themselves with the content of residents' personal plans as some staff told us they did not read these records. We continued this recommendation.

Recommendation 5

Staff should be knowledgeable about the definition and use of restraint as well as having a clear understanding of the provider's restraint policy.

National Care Standards – Care Homes for Older People, Standard 5: Management and staffing arrangements; Standard 9: Feeling safe and secure.

This recommendation was made on 5 July 2017.

Action taken on previous recommendation

Training on this topic was planned and this was going to be delivered by the community psychiatric nurses linked to the service. Whilst awaiting this training, we encouraged the manager to use the good practice resources 'Rights, risks and limits to freedom' and 'Safe to wander' published by the Mental Welfare Commission to inform staff. We suggested that this could be done using themed supervision and, following this, staff should reflect on the relevance and impact of what they have learned on their practice. We continued this recommendation.

Recommendation 6

An effective quality assurance framework should be devised and implemented to inform, monitor, maintain and improve quality across the service in a more planned and pro-active way.

National Care Standards – Care Homes for Older People, Standard 5: Management and staffing arrangements.

This recommendation was made on 5 July 2017.

Action taken on previous recommendation

An annual schedule of audits had been developed and implemented. However, action plans demonstrating how the areas for improvement identified would be addressed still had to become established as standard practice. We continued this recommendation.

Recommendation 7

A formal development plan should be devised to inform the future direction and improvement of the service in a purposeful and structured way.

National Care Standards – Care Homes for Older People, Standard 5: Management and staffing arrangements.

This recommendation was made on 5 July 2017.

Action taken on previous recommendation

A development plan was under consideration with the intention of focussing on the priorities being set out in the dementia strategy. We continued this recommendation.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

Date	Type	Gradings
4 Apr 2018	Re-grade	Care and support Environment Staffing Management and leadership
		3 - Adequate Not assessed Not assessed Not assessed
5 Jul 2017	Unannounced	Care and support Environment Staffing Management and leadership
		3 - Adequate 4 - Good 3 - Adequate 4 - Good
8 Mar 2017	Unannounced	Care and support Environment Staffing Management and leadership
		Not assessed Not assessed Not assessed Not assessed
11 Aug 2016	Unannounced	Care and support Environment Staffing Management and leadership
		3 - Adequate 4 - Good 3 - Adequate 4 - Good
4 Feb 2016	Unannounced	Care and support Environment Staffing Management and leadership
		Not assessed Not assessed Not assessed Not assessed
9 Jul 2015	Unannounced	Care and support Environment Staffing Management and leadership
		3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
27 Oct 2014	Unannounced	Care and support Environment
		4 - Good 3 - Adequate

Date	Type	Gradings	
		Staffing Management and leadership	3 - Adequate 4 - Good
19 May 2014	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
31 Oct 2013	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 3 - Adequate 3 - Adequate 4 - Good
18 Apr 2013	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
25 Oct 2012	Unannounced	Care and support Environment Staffing Management and leadership	2 - Weak 1 - Unsatisfactory 3 - Adequate 2 - Weak
4 May 2012	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 1 - Unsatisfactory 3 - Adequate 2 - Weak

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