

Almond Court Care Home Care Home Service

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Type of inspection:

Unannounced

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Service provided by:

Tower Bridge Homes Care Limited

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About the service

Almond Court Care Home provides accommodation and nursing care for up to 42 older people who may have dementia. During the inspection the service had 41 residents.

The building consists of two floors with accommodation for 21 people on each floor. All bedrooms are provided on a single basis with en-suite toilet and wash hand basin. Shared bathing/shower facilities are available. Communal lounges and dining rooms are also available on both floors. Garden space is located to the front and rear of the home with car parking also available. The home is located in Drumchapel, Glasgow and is near to local transport and amenities.

The service is managed by Tower Bridges Homes Care Limited and the service states in its aims and objectives that Almond Court Care Home aims to provide a high standard of person centred care.

What people told us

Residents and their relatives, we had contact with, were happy with the quality of care received and in particular we received positive comments about the staff and the difference they made to the quality of their lives:

'My relative has Alzhiemers and has been in care since March. I have been very impressed by the care they have received and with the way they have been treated by all staff. Senior staff always seem to know what has been happening about their care. I am delighted with the home.'

'When my relative had to go into care I was very worried but I have to say the care home made it very easy for my relative, myself and family. The home is very relaxed and feels comfortable for the residents. The management and staff look as though they really care and try to make their stay as good as it can be.'

'I would like to say that the care and support for my relative is exceptional. I cannot praise Lorna and her staff enough for what they do. My relative, has a lovely room, with all their personal items round about them.'

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?	4 - 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?

4 - Good

People told us that they were well supported by staff who knew them. We received positive feedback from the residents and relatives about living in the home and how staff treated them, 'they're nice to you in here and I've got friends in here too, I just enjoy myself'. We saw positive interactions between staff and residents which created a friendly and relaxed atmosphere within the home.

People told us that they were kept up to date and knew who to speak to if they had any complaints or concerns, 'no complaints at all', 'any problems would speak to David or the nurse'.

We saw that meetings were held with residents and relatives to get feedback and discuss any changes within the home. Staff had supported a resident to chair the latest residents' meeting and relatives commented, 'we have meetings to ask what you think and if you have any suggestions for improvements' and 'families get to know each other'.

How people spend their day is important in maintaining people's physical and mental wellbeing. People told us that there was always something going on, 'we get entertainers with music and dancing, trips down the coast, 'I like reading murder mysteries, get books from my friends or the library', 'sometimes get out into the garden, when my relative comes, had lunch outside in the good weather', 'staff sit and have a chat'. One relative also mentioned that they had joined their relative on one of the outings on the canal boat.

While we saw the activity co-ordinator and care staff engaged in different activities with residents throughout the day and the obvious joy that the interactions gave individuals, some people stated that they wished that there were some more interactions and access to outside on a more regular basis. It was evident that the downstairs unit was quieter than the upstairs unit and we asked management to ensure that all individuals were enabled to spend time doing things that they enjoyed and wanted to do. We will review this at future inspections.

Several residents spent their day walking along the very colourful corridors which provided various points of interest and seating areas where people could enjoy a rest, watch others passing and listen to pleasant music. A café area, which had been recently redecorated by one of the relatives, was available at the entrance to home for the use of relatives for tea or coffee when they visited and a small group of residents at mealtimes.

People should be sure that their health needs are well supported. We saw that residents' health needs were reviewed on a regular basis by a range of healthcare professionals who visited the home. This included optician, chiropodist, dentist, dietitian and GP.

The majority of residents told us that they enjoyed the food served at mealtimes and that alternatives were available to choose from if not to their taste. We saw that residents had access to fresh fruit and vegetables at meal and snack times and a variety of drinks were available throughout the day. However, some people told us that the quality of food was variable at times and took sandwiches a lot of the time. We asked management to monitor this and we will review this at future inspections.

People living in the home should feel safe and we were satisfied with the maintenance of equipment used within the home and the monitoring of accidents and incidents to keep people safe. However, it was evident that the decor and furnishings in some communal areas were in need of upgrading. One relative told us, 'I feel the home in general could be doing with a revamp especially the television lounge and eating areas'. This was acknowledged by management and plans were in place to start redecoration **(see Area for Improvement 1)**.

People should expect to have confidence in the staff who care and support them. We saw that the home had a training schedule which reflected planned training for staff to attend and staff spoken with felt that they had the training they needed to do their job. Training records showed that there was an overall high compliance with staff training and the manager's development plan identified four priority areas in relation to dementia care which included enhancing staff skills and knowledge.

We discussed with management about their planned support for care staff to achieve relevant qualifications for their Scottish Social Service Council (SSSC) registrations and found that the majority of staff had already achieved these.

We also discussed with management the lack of awareness their staff had in relation to the new Health and Social care standards and the use of SSSC open badges to help staff learn about these and use them in their day to day work.

The service should have a culture of continuous improvement with robust quality assurance processes. We saw that there were good systems in place to monitor the quality of staff practice and resident care through meetings, regular audits and any compliments or complaints received. However, we asked management to ensure that the action taken and outcomes achieved were clearly recorded and that the home's development plan be used for all areas for improvement highlighted through their quality assurance systems.

Areas for improvement

1. In order that people experience living in a high quality environment which meets people's individual needs, the manager should ensure that:

- the lounge and dining areas worn furnishings are replaced
- any torn or marked wallpapered and painted areas within the home are renewed
- contrasting accessories are provided in toilet areas to aid people's independence
- people requiring the use of a hoist are provided with their own sling
- people's continence products are kept in their own bedrooms and not left in communal or store areas.

This ensures care and support is consistent with the Health and Social Care Standards, which state that 'the premises have been adapted, equipped and furnished to my needs and wishes' (HSCS 5.16); 'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment' (HSCS 5.22).

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

Care records should give clear direction about how to deliver each person's care and support as well as details of personal interests and preferences. Care documentation, that we viewed, was found to be overall well completed with up to date care plans, risk assessments and personal preferences. However, recording throughout needed to be more person-centred and outcome focused, reflecting what the person can do for themselves, 'what is working', 'what is not working' and 'what needs to be changed' (**see Area of Improvement 1**).

We found daily notes often very clinical and not reflective of a more holistic approach, capturing people's day to day quality of life, what's important to them and how they spend their day.

Care review document was seen to be fully completed however again these could be more person-centred and focus on what the person can do and the support needed to achieve their goals even if this is the maintenance of their current quality of life. New documentation, 'A day in the life' was being introduced to provide an overview of people's needs and how these would be met.

Areas for improvement

1. In order to ensure that people receive care and support which is personal to them, the manager should ensure that care records reflect a person-centred and outcome focused approach. Care reviews should also help to identify future plans and goals.

This ensures care and support is consistent with the Health and Social Care Standards, which state that '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 (HSCS 1.15); 'My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected (HSCS 1.23).

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?	4 - Good
1.1 People experience compassion, dignity and respect	4 - Good
1.2 People get the most out of life	4 - Good
1.3 People's health benefits from their care and support	4 - Good
How well is our care and support planned?	4 - Good
5.1 Assessment and care planning reflects people's planning needs and wishes	4 - Good

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