

Bandrum Nursing Home Care Home Service

Saline
by Dunfermline
KY12 9HR

Telephone: 01383 851 030

Type of inspection:
Unannounced

Completed on:
6 May 2022

Service provided by:
Bandrum Nursing Home Limited

Service provider number:
SP2003002299

Service no:
CS2003010321

About the service

Bandrum Nursing Home is situated in a rural setting near the village of Saline in Fife. The home is privately owned and consists of two separate buildings within extensive garden grounds. Five units exist within the buildings, accommodating adults with mental health issues, physical disabilities and complex care needs as well as older adults who are frail or are experiencing dementia. A variety of outside areas are accessible from the individual units and the home benefit from a large community cafe space. The home is currently registered to provide care for 85 adults and is undergoing an extension and refurbishment.

This service has been registered since 2002.

About the inspection

This was an unannounced inspection which took place on 4 and 5 May 2022. The inspection was carried out by three 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 ten people using the service and seven of their family and friends
- spoke with 12 staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

People were supported by a staff team who knew them very well.

People were treated as individuals and their care planned accordingly.

Families reported being very happy with the care and support their loved one received.

People were able to stay connected to their families and the local community.

Staff were well supported and encouraged to contribute their opinions and ideas.

The environment provided a number of pleasant indoor and outdoor spaces which were in regular use.

Management and leadership was stable and effective.

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?	4 - Good
How good is our staff team?	5 - Very Good
How good is our setting?	4 - Good
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

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

People were supported by a staff group who knew them well and treated them with kindness and respect. People enjoyed friendly, good natured and humorous interactions with staff. This put people at ease and enhanced the homely atmosphere. Staff demonstrated the principles of the Health and Social Care Standards in their day-to-day practice, which promoted a culture of respect. People were supported to get the most out of their day by dedicated lifestyle staff and care staff. There were lots of friendly interactions between staff and residents which helped mitigate the risk of stress and distress.

People enjoyed their meals and snacks. We found people were given choice and were supported in a dignified manner. Mealtimes were unhurried and there was a very relaxed atmosphere. Care plans included relevant risk assessments that were then used to inform care. Overall, there was good detail to guide staff in how best to offer care and support to each person.

People benefited from regular access to relevant professionals to support their health and wellbeing and in relation to medication reviews. Medication was given as prescribed and there were protocols in place to guide staff to the appropriate administration of "as required" medication. This is particularly important in relation to the administration of psychoactive and pain medication.

People told us that their families visit regularly and that there are no restrictions on this. Both residents and families were complimentary of the efforts the care home went to during lockdowns to ensure that people could see their family. We were told about the staff team facilitating video calls quickly when visits were initially not permitted. We were told about regular phone calls, video calls and window visits. There had been a clear commitment to facilitating visits. We could be confident that people were supported to experience meaningful contact.

Regular trips were facilitated by staff meaning that residents could access the community. We heard about positive examples where residents were able to make meaningful contact with those in the local community. Residents spoke very positively of meals out, trips to the bingo and to the seaside. We also heard of one resident leaving the home to spend a long weekend with her daughter which was a particularly important and positive experience for her.

Within the building we saw a number of communal spaces which were all open and inviting. Residents were able to access these spaces without supervision if able and use them for whatever purpose they chose. We saw a number of warm interactions between residents happening in these spaces. One resident told us that they were not a sociable person but did enjoy having access to a smoking area where she often spoke with other residents every day. Another resident told us about friends they had made through the wide range of social activities organised within the care home. We were also told about birthday parties which take place regularly and are always a source of communal interaction and fun.

We saw that staff were correctly wearing personal protective equipment (PPE) and undertaking regular handwashing between tasks. Personal protective equipment was stored and disposed of correctly. Staff had received regular training in infection prevention and control meaning that they could be confident they were following the most up to date guidance. Senior staff and managers undertook regular spot checks and

observations to ensure that standards of practice remained high. People living in the service could be confident that the risk of infection spread had been reduced.

Some areas of the home would benefit from further maintenance to improve standards. In some cases surfaces and equipment were compromised. This meant that they could not always be effectively cleaned. The manager was aware of the areas of the home which required attention and a programme of maintenance was in place.

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.

The service were focused on improving standards and developing care. A comprehensive development plan outlined the next steps and improvements for the service. Staff told us that their feedback and input was often sought and that they felt listened to and respected. We could be confident that leaders were responsive to feedback and would use learning to improve the service.

A number of systems and audits were in place to monitor aspects of the service. These provided information on topics including care planning, medication, the environment and falls. There had been some slippage of audits during recent outbreaks at the home. We could see that information from audits contributed to the development of the service. A process of reflection and review meant that people could be confident that Bandrum was a service focused on change and improvement.

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.

Staff training was mostly delivered online and completion rate was currently 81%. There was flexibility in that it could be completed via phone, tablet or computer. Staff spoke positively of the training and felt it was informative and useful. We observed learning in practice over the course of inspection, particularly in relation to personal protective equipment (PPE) and infection prevention and control (IPC). We spoke to one staff member who shared that she had found the role challenging at first and was very thankful to the care home for providing ongoing practical and emotional support.

Staff supervision records were consistent but basic. We saw examples of informal supervision throughout the inspection where staff were supported by colleagues in terms of advice and guidance. There was warmth and compassion evident and this was also expressed to us by staff. All staff members we spoke to were very complimentary of the entire staff and management group. The environment was described as "like a family" by more than one staff member.

We saw evidence of evaluation of training. One of the "house managers" conducted spot checks and discussions with staff, specifically around PPE and IPC. We could therefore be confident that people were kept safe as a result of good quality training and evaluation of training.

We saw evidence of up to date guidance being shared with the staff group as soon as it was available both through formal notices within the home and on a staff Facebook page. Flash meetings took place daily and during our inspection there was a long service award ceremony where all staff were encouraged to give

feedback.

We were confident that staff had the right knowledge to care for the people in the service. In addition to training it was clear that staff knew individual residents very well, including their needs and preferences as well as close family contacts. We observed warmth and kindness in many interactions over the course of the inspection which gave us confidence that people felt safe and well cared for.

How good is our setting?

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 benefits from a good number of indoor and outdoor spaces where people could choose to spend their time. These include access to outside spaces for those living on the upper floors. We saw that people had free access to these and were supported to go outside if they needed assistance. This meant that people were able to benefit from physical activity in safe and attractive spaces.

There were some missed opportunities to promote independence during the mealtime experience. Some residents had the ability to make or pour their own drinks or to access their meals in a more independent way. We saw good practice in some units of the home, however, the service would benefit from considering further ways to promote mobility and independence throughout all units.

How well is our care and support planned?

4 – Good

We evaluated how well people's health and wellbeing was supported by record keeping. We concluded that this was good as there were several important strengths which, taken together, clearly outweigh the areas for improvement.

At this inspection we looked at the extent to which people experienced care and support that reflected their needs and wishes.

Personal plans contained appropriate information that showed that care needs were assessed and planned for. They detailed guidance on people's wishes and preferences and how these should be met. These included key support needs such as an assessment of health needs, managing stress or distress and preferences and interests. We found good detail held with care plans which could guide staff in the provision of meals and snacks and ensure people could have the food, snacks and drinks they enjoy. There was some evidence of consultation which could be further developed to reflect people's involvement in reviews.

We found staff knew the people in their care and recognised the individual nature of the care and support needed. As a result, they could describe the significance of changes, impact on people's health and wellbeing and the involvement of community healthcare teams.

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

Requirements

Requirement 1

By 4 May 2022, the provider must support service users to maintain their health, wellbeing, safety and quality of life. To do this, the provider must, at a minimum:

- a) Ensure service users' needs are assessed using recognised assessment tools.
- b) Ensure people have an appropriate personal plan which sets out how their health, welfare and safety needs are to be met.
- c) Ensure consultation with each service user and their representative to inform their assessment and care plans.

To be completed by: 04 May 2022.

This is to ensure 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 is in order to comply with:

Regulation 4(1)(b) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This requirement was made on 28 March 2022.

Action taken on previous requirement

We received an action plan 05 May 2022 describing what was being done to meet the requirement. This included initial audits and remedial action. At this inspection we found basic audits had been completed and care records were being rewritten as needed. There was a good standard of record keeping which included the use of recognised tools and set out how people's health, welfare and safety needs were to be met. There was some evidence of consultation which could be further developed to reflect people's involvement in reviews.

Met - within timescales

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 manager should develop a respite policy and procedure, to promote clarity around assessment and care planning being adequate to meet people's needs and to support good health and wellbeing outcomes.

This is to ensure care and support is consistent with Health and Social Care Standard 4.14: My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event.

This area for improvement was made on 28 March 2022.

Action taken since then

At this inspection we were given a copy of the newly developed respite policy. We were reassured that it clearly reflected the existing admission policy and included a checklist with timescales regarding what records were to be completed and timescales. No one was accessing respite at the time we inspected and we suggested the provider evaluates the effectiveness of this new guide for staff, at the next opportunity before signing it off for routine review.

Previous area for improvement 2

The manager should ensure that people can have the food they enjoy. People's choices and preferences should be gathered and used to inform their care plan.

This is to ensure care and support is consistent with Health and Social Care Standard 2.11: My views will always be sought and my choices respected, including when I have reduced capacity to fully make my own decision.

This area for improvement was made on 28 March 2022.

Action taken since then

We found good detail held within care plans which could guide staff in the provision of meals and snacks and ensure people could have the food, snacks and drinks they enjoy. We could see that this was identified as an area for further development. The appointment of a new hospitality manager is an opportunity to update the menu and review the dining experience. We saw lots of choice offered during the lunchtime observation and were confident that the service would continue to improve in this area of care.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Detailed evaluations

How well do we support people's wellbeing?	4 - 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	4 - 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
3.2 Staff have the right knowledge, competence and development to care for and support people	5 - Very Good
How good is our setting?	4 - Good
4.2 The setting promotes people's independence	4 - Good
How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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