

Grandholm Care Home Care Home Service

Grandholm Drive
Bridge of Don
Aberdeen
AB22 8BE

Telephone: 01224 708712

Type of inspection: Unannounced
Inspection completed on: 5 January 2017

Service provided by:
Aviemore Homes Limited

Service provider number:
SP2007008957

Care service number:
CS2007145182

About the service we inspected

Grandholm Care Home is a three-storey purpose-built home, in a quiet residential area within the city of Aberdeen. The provider is Aviemore Homes Ltd. The service is registered to provide nursing and residential care to a maximum of 79 older people, of whom 29 may have dementia/mental health problems. The home had recently opened an interim care unit for up to six people on the ground floor. At the time of inspection there were 56 people living in the service.

The service employs a team of nursing, care, domestic, and catering staff with varying degrees of skills, expertise and qualifications.

It is the objective of Grandholm Care Home "that all service users will enjoy a clean, smoke-free, safe environment in private spaces and communal areas within the home and be treated with the care, dignity respect and sensitivity to meet the individual needs and abilities of the service user".

The service registered with the Care Inspectorate on 1 April 2011.

How we inspected the service

The focus of this inspection was to follow up on recommendations, requirements and areas for development made at the last inspection on 5 July 2016.

One inspector carried out an unannounced inspection over one day. We provided feedback to the acting manager of the service. We also provided feedback to the contacts and commissioning officer by email.

We observed practice in Laurel unit and Millview unit. We spoke with residents and staff during our inspection. We completed a visual check of the environment. We looked at a variety of documents and records relevant to the inspection.

Taking the views of people using the service into account

We spoke with ten people who use the service during our inspection. Their views were used to inform our findings. Their comments included:

"Too much to eat but the food is good."

"nothing to complain about"

"can't fault it"

"like the music (entertainment), would like more of it"

"very happy"

Taking carers' views into account

We spoke with two visiting relatives visiting the service during our inspection. Their views were used to inform our findings. Their comments included:

"took all clothes home to name them"

"cleanliness good"

"usually sitting sleeping"

We spoke with six staff members during our inspection. Their views were used to inform our findings. Their comments included:

"now a nice place to work in"

"big change to before"

"good team work now. I have regular supervision"

"management more visible"

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

Previous requirements

Requirement 1

The service provider must ensure that all people are treated with dignity and respect. In order to do so, the provider must:

- a. Use only the preferred name of the person.
- b. Demonstrate that all people have been included in home life, including mealtimes and activities, irrespective of their abilities.
- c. Enable people the choice of being able to lock their door.
- d. Ensure all staff have completed dementia training, with emphasis on dignity and respect. Reflective accounts to be completed to reflect on how this learning will influence practice.

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 4(1)(a) - Welfare of Users.

Timescale: to be implemented by 1 October 2016.

This requirement was made on 17 August 2016.

Action taken on previous requirement

During our inspection we observed staff treating people with dignity and respect. Staff were discrete when attending to care needs. All staff had completed resident experience training and the essentials of dementia training. The impact of this training on staff practice could be seen by the improved outcomes for people.

Met - outwith timescales

Requirement 2

The service provider must ensure that staff are aware of people's nutritional needs and these needs are met safely. In order to do so, the provider must:

- a. Ensure all nutrition care plans reflect people's current nutritional requirements including altered textured and fortified diets.
- b. Ensure people's individual nutritional needs are met.
- c. Complete an overview of all people's current nutritional requirements and ensure that copies of this are available in the relevant unit.
- d. Complete a review of the menu and ensure that fresh fruit, a choice of vegetables and improved variety of meals are provided.
- e. Enable people to have independent access to snacks at all times.
- f. Demonstrate an enablement approach to meals and for this approach to be monitored through observation of staff practice.
- g. Carry out regular mealtime experience audits and evidence that issues identified have been met.

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 4(1)(a) - Welfare of Users.

Timescale: to be fully implemented by 1 October 2016.

This requirement was made on 17 August 2016.

Action taken on previous requirement

Nutrition care plans we reviewed reflected the current needs of the person. By completing monthly audits of all care plans, the service ensured that care plans were updated as people's needs changed. Staff demonstrated good insight into the nutritional needs of people. People we spoke with said that they enjoyed the new menu and the dining experience. The service has re-arranged dining areas, creating smaller dining areas in units. This has promoted a calmer, more relaxed dining experience for people. We observed people accessing snacks and juice throughout our inspection and we saw that fresh fruit was available.

The service should continue to monitor and improve the dining experience of people by regular dining experience audits, thus identifying that practices are in bedded and to establish further areas for development.

Met - outwith timescales

Requirement 3

The service provider must ensure that the hydration needs of all people are met. In order to do so, the provider must:

- a. Ensure that people have access to drinks at all times.
- b. Encourage people through enablement, to obtain their own drinks.
- c. Demonstrate through observed practice and training that staff are aware of how all people can indicate they require a drink.

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 4(1)(a) - Welfare of Users.

Timescale: to be in place immediately and for the provider to provide written evidence of how the hydration needs of high risk individuals are met, in an action plan by 1 September 2016.

This requirement was made on 17 August 2016.

Action taken on previous requirement

During our inspection we saw people having easy access to fluids in all main areas of the units. We saw people helping themselves to fluids. Jugs and glasses were available in bedrooms for people who chose to spend most of their time there. Staff had completed training on dehydration and the effects this can have on people. Staff demonstrated insight into the importance of assisting people to maintain hydration needs in relation to health and wellbeing.

Met - outwith timescales

Requirement 4

The service provider must ensure that people's belongings are properly cared for at all times. In order to do so, the provider must:

- a. Obtain updated and detailed inventories of people's clothes and belongings.
- b. Provide a laundry service that cares for people's clothes properly and ensures all items belonging to that person are returned.
- c. Put a system in place to prevent items being lost while waiting for clothes to be labelled.
- d. Adhere to the company's lost belongings policy when people's clothes are lost.
- e. Ensure all staff have received training in dignity and respect and have completed reflective accounts to demonstrate how this learning will influence practice.

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 4(1)(a) - Welfare of Users.

Timescale: to be fully implemented by 1 October 2016.

This requirement was made on 17 August 2016.

Action taken on previous requirement

In the care notes we reviewed we saw that up-to-date inventories of people's clothes had been completed. Any new admissions to the home were asked to have clothes named prior to admission. For people with unnamed clothes, these were laundered separately. We read clear guidelines on notice boards on how people could obtain labels for clothes. We saw that the amount of unclaimed items of clothing had greatly reduced. We checked several wardrobes and chests of drawers and found only clothing belonging to that person. Staff were now aware of the importance of respecting people's clothes and belongings and the impact that wearing other people's clothes has on the person and their families. This was achieved through all staff attending training in maintaining dignity and respect and resident experience.

Met - outwith timescales

Requirement 5

The provider must ensure that all equipment is clean to reduce the risk of cross infection to people. In order to do this, the provider must:

- a. Put a system in place to ensure equipment is cleaned after each use.
- b. Ensure all staff have completed infection control training and completed reflective accounts to demonstrate how this learning will then influence practice.
- c. During daily walk around, the service needs to demonstrate that spot checks on the cleanliness of equipment have been done.

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 4(1)(a) - Welfare of Users.

Timescale: to be fully implemented by 1 October 2016.

This requirement was made on 17 August 2016.

Action taken on previous requirement

The manager completes daily walk around of all units and spot checks equipment. We saw that all moving and handling equipment was stored safely and was clean. The service had put in place antiseptic wipes that were easy to access, these we saw being used to clean equipment between use. Staff had completed infection control training and the service was in process of identifying a cleanliness champion with enhanced knowledge and skills to oversee infection control practices in the home.

Met - outwith timescales

Requirement 6

The provider must ensure that environmental factors, such as heat, light and noise are at appropriate levels and do not restrict people. In order to do this, the provider must:

- a. Complete daily walk around to identify if noise is too loud.
- b. Attach wall thermometers to shared corridors, lounges and dining rooms and monitor temperatures to establish if they are at comfort levels.
- c. Complete environment audit to identify high risk areas, such as corridors with no natural light and improve lighting to areas identified.

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 4(1)(a) - Welfare of Users.

Timescale: to be fully implemented by 1 October 2016.

This requirement was made on 17 August 2016.

Action taken on previous requirement

The manager of the service completes daily walk around of the units monitoring the noise and temperature levels of the units. During our inspection we found heat levels satisfactory, with fresh air circulating. Thermometers were present so room temperatures could be monitored to ensure that rooms did not become too warm.

Throughout our inspection noise levels were at a comfortable level and we found no conflicting noises from different sources. The service was currently in process of upgrading the décor to areas to help with improving light quality in the home. We saw during our inspection that the quality of light in some areas had been improved following upgrades to décor. The service was in the process on completing further upgrades on a rolling programme to minimise disruption to the people who live in the home.

We are satisfied that the measures put in place and the ongoing development and enhancement of the environment, will continue to improve outcomes for people.

Met - outwith timescales

Requirement 7

The provider must ensure that all essential repairs are completed promptly to minimise the risks to people and to maintain privacy and dignity. In order to do this, the provider must:

- a. Carry out regular and planned environmental audits to establish an overview of the service.
- b. At the daily flash meeting staff to report repairs that remain outstanding.
- c. Source a replacement if an essential piece of equipment is awaiting repair.
- d. During daily walk around, check all maintenance repair books to ensure repairs are completed timeously.

e. Ensure all staff have completed health and safety training with reflective accounts completed to demonstrate how this learning will influence practice.

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 4(1)(a) - Welfare of Users.

Timescale: to be fully implemented by 1 October 2016.

This requirement was made on 17 August 2017.

Action taken on previous requirement

We read the maintenance request book and saw that essential repairs were reported appropriately and that repairs were completed promptly. The service had employed a second maintenance man to ensure that the environment remained safe and in a good state of repair. We saw evidence that external tradesmen had been requested to complete repairs that were outwith the skills of the maintenance men. The service implemented daily flash meetings where heads of departments met. This gave the manager and staff the opportunity to discuss any repairs outstanding.

We are satisfied that the measures the service have taken and the systems that are in place, have reduced the risks to people through broken equipment or damages to the environment.

Met - outwith timescales

Requirement 8

The provider must reduce the risk to the effectiveness of medication by ensuring that all medications are stored in an environment that does not exceed 25 degrees C. In order to do this the provider must:

- a. Improve ventilation to all treatment rooms and rooms used to store medicines and source alternative storage area if temperatures exceed 25 degrees C.
- b. Have wall thermometers in all treatment areas and monitor temperature of room daily for at least three months.

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 4(1)(a) - Welfare of Users.

Timescale: to be in place immediately and for the provider to provide written evidence in an action plan by 1 September 2016.

This requirement was made on 17 August 2016.

Action taken on previous requirement

The provider has provided ventilation units to medication storage areas. We saw that temperatures had been within the normal range to ensure safe storage of medication. Thermometers remained in place to ensure that temperature monitoring continued in these areas.

Met - outwith timescales

Requirement 9

The provider must ensure that all staff working in the service receive the appropriate training which will equip them with the knowledge, competency and skills required to meet the care and welfare needs of people. Any staff member who is working in an extended role, must have completed the necessary training to fulfil all aspects of that role safely. In order to do this, the service must:

- a. Ensure that all staff have completed mandatory training as per provider's policy.
- b. Have detailed and appropriate training and competency based assessment programme in place prior to a staff member extending their role to ensure they are suitably trained and skilled in that role.
- c. Demonstrate that training undertaken has improved outcomes for people in the service.
- d. Maintain an accurate, up-to-date training matrix of the staff working in the service.
- e. Show awareness and provide the training and development requirements that staff require to enable them to register with their relevant body.

This is in order to comply with:

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations, Scottish Statutory Instruments 2011/210: Regulation 4 (1)(a) - a requirement for the health and welfare of service users: Regulation 9(2)(b) - a requirement about fitness of employees: Regulation 15(b)(i) - a requirement about training.

This requirement was made on 17 August 2016.

Action taken on previous requirement

The provider was in the process of formulating a detailed induction and training package for staff that are promoted into an extended role. There are no staff currently practising in the extended roles until this package has been approved. The provider is consulting with Scottish Social Services Council (SSSC) with regards the induction and training package.

We saw that completion of mandatory training was high and the service had sourced numerous external training opportunities for staff. This ensured that the staff who attended were up to date with current practices in that field.

We saw that the resident experience and dementia awareness training had resulted in changes to staff practice. As a result outcomes for people had improved.

The service had a detailed training matrix that was used to ensure that the training completed by staff was recorded accurately and that any outstanding training, could be quickly identified.

Met - outwith timescales

Requirement 10

The provider must ensure that all staff working in the service receive structured and meaningful supervision and appraisal so that areas of development can be identified. In order to do this, the service must:

- a. Maintain an accurate, up-to-date supervision and appraisal matrix of the staff working in the service.
- b. Ensure that all staff receive supervision and appraisal and that they are completed as per policy to support on going professional development.
- c. Retain all completed supervision and appraisal documents for staff records.

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations, Scottish Statutory Instruments 2011/210: Regulation 9(2)(b) - a requirement about fitness of employees and Regulation 15(b)(i) - a requirement about training.

Timescale: to be completed by 1 October 2016.

This requirement was made on 17 August 2016.

Action taken on previous requirement

We spoke with staff who informed us that formal supervisions had taken place and that they had improved their practices as a result.

We saw that each unit had a clear supervision planner in place and that each unit lead and senior had input into each supervision. We saw on the planner that supervisions had occurred three monthly and that appraisals were timetabled to take place.

Met - outwith timescales

Requirement 11

The service provider must make significant improvements to ensure that there is effective concern and complaint management. In order to do this the provider must:

- a. Ensure that the complaints policy available is the most current policy and is accessible to everyone.
- b. Respond to all written and verbal complaints as per the provider's complaints policy and retain accurate records of the investigation and outcomes of complaints raised.
- c. Put in place system to audit concerns and complaints.

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 4(1)(a) - requirement for the health and welfare of service users.

This requirement was made on 17 August 2016.

Action taken on previous requirement

Good evidence of clear communication with relatives and involving them in the service. Concerns raised to staff and management reduced. Evidence that concerns are dealt with promptly and appropriately. The record keeping of the complaints requires improving however approached as an area for development during inspection and will be followed up at the next inspection.

Met - outwith timescales

Requirement 12

The service provider must make significant improvements to quality assurance processes to ensure that areas of poor practice are identified and then measures taken for improvement. The processes must be focused on improving the outcomes for people. In order to do this, the provider must:

- a. Implement the provider's quality assurance processes, highlighting any areas of concern or development in relevant action plans.
- b. Include all key stakeholders in the quality assurance process.

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 4(1)(a) - requirement for the health and welfare of service users.

This requirement was made on 17 August 2016.

Action taken on previous requirement

We reviewed quality assurance that had been completed. We found this to be of relevance to the ongoing development of the service. We read clear matrix used in units to ensure that team leaders were completing review of care profiles to ensure they accurately reflect the current care needs of people. We were informed that the manager had developed new medication audits that were due to come into place. We were informed by staff and residents that management is visible in the service, obtaining views from people on a daily basis. We are confident that the management team have a good overview of the service.

Met - outwith timescales

Requirement 13

The service provider must inform the Care Inspectorate of any significant events as per the records that all registered care services (except childminding) must keep and guidance on notification reporting.

This is to comply with:

The Social Care and Social Work Improvement Scotland (Requirement for Care Services) Regulations 2011, (SSI 2011/28) Regulation 4(1)(a) - Records, Notifications and Returns.

Timescale: immediate and ongoing. This will be followed up in six months.

This requirement was made on 17 August 2016.

Action taken on previous requirement

Since the previous inspection, notifications have been submitted appropriately. Submitted notifications are detailed, timely and appropriate.

Met - outwith timescales

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

Previous recommendations

Recommendation 1

It is recommended that people using the service are provided with the information and be assisted to make choices and participate in any changes to the environment in their home. This can be achieved by:

- a. Have a timetable of proposed changes and upgrades in place to inform people in a timely manner.
- b. Assist people to make choices by use of samples, pictures and surveys.
- c. Evidence of the inclusion of people in participating in choices should be retained.

National Care Standards Care Homes for Older People - Standard 8: You can make choices in all aspects of your life

This recommendation was made on 17 August 2016.

Action taken on previous recommendation

The service demonstrated that people were involved in the improvements to the service. We reviewed surveys which obtained feedback from people. Management was visible in the service and obtained feedback from the people who use the service on a daily basis; we discussed during this inspection the importance of capturing and evidencing this feedback.

Recommendation 2

It is recommended that bathing facilities are accessible and fit for purpose to enable people a choice. This can be achieved by:

- a. Having separate storage areas for equipment, chairs and bedding.
- b. Maintaining cleaning schedules to ensure that bathing facilities are clean and fit for use at all times.
- c. Complete regular audits of environment to ensure bathrooms are not used as storage areas and are clean.

National Care Standards Care Homes for Older People - Standard 8: You can make choices in all aspects of your life

This recommendation was made on 17 August 2016.

Action taken on previous recommendation

During our inspection we observed that all bathrooms were clean and fit for purpose. We saw that environment upgrades in bathrooms had commenced and was being completed on a rolling programme to minimise disruption to the people who use the service. The management had created appropriate storage areas and rooms for equipment, therefore preventing the storage of equipment in bathrooms.

Recommendation 3

The service provider must ensure that people who use the service, relatives and staff are given the opportunity to attend regular meetings. In order to do this, the provider must:

- a. Put in place a meetings matrix to ensure that meetings occur at regular intervals, with action plans compiled from areas identified from meetings.
- b. Have minutes of meetings available to the relevant people.
- c. Retain accurate minutes of meetings and action plans compiled from areas of improvement identified from the meeting.
- d. Inform people in advance if time or date of a planned meeting changes.

National Care Standards Care Homes for Older People - Standard 11: Expressing your views

This recommendation was made on 17 August 2016.

Action taken on previous recommendation

We reviewed minutes of relatives meetings and found that these were occurring at regular intervals. The agenda for these meetings was appropriate to the development of the service. Times for meetings were changed to enable as many people to attend as possible. Minutes of meetings were available on notice boards and copies were sent out to relatives by email or post.

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	
27 Jan 2017	Re-grade	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
11 Jul 2016	Unannounced	Care and support	2 - Weak
		Environment	2 - Weak
		Staffing	2 - Weak
		Management and leadership	2 - Weak
9 Dec 2015	Unannounced	Care and support	Not assessed
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
12 May 2015	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good

Date	Type	Gradings	
		Management and leadership	4 - Good
9 Dec 2014	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
6 Aug 2014	Unannounced	Care and support Environment Staffing Management and leadership	2 - Weak 3 - Adequate 3 - Adequate 2 - Weak
23 May 2014	Unannounced	Care and support Environment Staffing Management and leadership	2 - Weak 3 - Adequate 3 - Adequate 2 - Weak
21 Jan 2014	Unannounced	Care and support Environment Staffing Management and leadership	2 - Weak 3 - Adequate 3 - Adequate 2 - Weak
10 Sep 2013	Unannounced	Care and support Environment Staffing Management and leadership	1 - Unsatisfactory 2 - Weak 1 - Unsatisfactory 2 - Weak
30 Nov 2012	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 4 - Good
27 Aug 2012	Unannounced	Care and support Environment Staffing Management and leadership	2 - Weak 4 - Good 2 - Weak 2 - Weak
10 Aug 2011	Unannounced	Care and support Environment Staffing	5 - Very good 5 - Very good 5 - Very good

Date	Type	Gradings	
		Management and leadership	5 - Very good
4 Nov 2010	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed Not assessed Not assessed
19 Jul 2010	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good Not assessed
4 Nov 2009	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good Not assessed
28 Apr 2009	Announced	Care and support Environment Staffing Management and leadership	5 - Very good 5 - Very good 5 - Very good 5 - Very good

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