

Ashlea House Care Home Service

Bracklinn Road
Callander
FK17 8EH

Telephone: 01877 330325

Type of inspection: Unannounced
Inspection completed on: 27 January 2017

Service provided by:
Mauricare Ascot Care Limited

Service provider number:
SP2012011882

Care service number:
CS2012310159

About the service we inspected

Ashlea House registered with the Care Inspectorate on 3 October 2012. Ashlea House is a care home for older people situated in the rural Stirlingshire town of Callander. It is owned by Mauricare Ascot Care Limited, and is registered to provide care for a maximum of 21 older people. The home is an older property which has been extended. It is close to all amenities and transport in the town. The home is divided into three floors and access to all floors is by means of a lift. Ashlea House state their aim is to provide exceptional levels of care in smaller and more personalised care home surroundings, enjoying a relaxed, happy and friendly atmosphere.

How we inspected the service

This report was written following an unannounced inspection of the service to follow-up on progress made with the requirements and recommendations made at the last inspection visit in June 2016. This visit was carried out by two inspectors from the Care Inspectorate on Thursday 19 January 2017 between 9.30am and 4.30pm.

When we plan how we will inspect a service we review the intelligence we hold about the service. This will include:

- the self assessment we ask the service to complete where they evaluate how they are performing
- the annual return we ask the service to complete where they provide information about the needs of the people who use the service and details about members of the staff team
- notifications the service provides to us informing us about events that impact on the delivery of the service
- any complaints the Care Inspectorate has received
- recommendations and requirements made through inspection or complaints
- the risk assessment we complete.

This information informs the intensity of the inspection.

The manager of the service sent us an annual return and a self assessment form. We talked to the manager, staff on duty in the service and to people who were using the service during the inspection visit.

Taking the views of people using the service into account

We spoke with four people living in the care home and we observed how people spent their day. We found that people had very positive relationships with staff, in particular the activities person related well to people who were not actively engaged in what was going on around them.

People told us that they were comfortable in the home and that staff were kind. 'We are well looked after.'

Taking carers' views into account

We spoke with two visitors to the service. They confirmed that they were very happy with the care and support for their relative. They felt they had trust in the manager and the staff. They always felt welcomed when they visited the home.

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

Previous requirements

Requirement 1

The provider must make proper provision for the health, welfare and safety of service users. In order to do so, the provider must put in place a system to ensure that personal care plans:

- state individuals' specific health needs and associated risks.
- quickly identify the priority needs of an individual when they move into a care home.
- record under what circumstances relatives/friends are to be contacted if key events take place for an individual.
- provide clear and accurate information and guidance for staff on how to meet the identified needs and risks.
- **evidence** that assessment tools are used effectively and accurately to identify individual's needs are regularly updated as individual's circumstances change.
- are reviewed regularly and updated to include changes as a result of a planned care review or when there is a change to an individuals' needs.
- contain clear assessment and evaluation information regarding individuals' needs and planned interventions by staff to meet these needs.
- ensure people's manual handling needs are clearly identified through assessment tools, risk assessments and care planning.

This requirement was made on 29 June 2015.

Action taken on previous requirement

We found that the service had reviewed the format of the care plans and this helped to make the information more accessible for staff. Risk assessments were mainly clear and gave guidance for staff in the delivery of care and support. We were pleased to see that emotional and social support were included in the care and support plans. We felt that the completion of the dependency tool was variable quality and we shared an example with the senior on duty so she could understand what the error was.

We discussed with the manager about the quality of the information recorded. There is scope for more meaningful contributions in the daily records and monthly evaluations.

Since the last inspection the member of staff with a special interest in moving and handling has moved on and the manager plans to identify another person to fulfil this role.

Not met

Requirement 2

A provider must not employ any person in the provision of a care service unless that person is fit to be so employed. This includes a person who, in order to perform the duties for which the person is employed in the care service, is required by an enactment to be registered with any person or body and is not so registered.

This requirement was made on 29 June 2015.

Action taken on previous requirement

We were very concerned at the last inspection about the requirement to employ only care staff who were properly registered. The service has taken steps to ensure that only staff who could demonstrate their registration delivered care and support to the residents at Ashlea.

However, there should be a system to check registration and we will look for this at the next inspection.

Not met

Requirement 3

To safeguard people who use the service and meet legal requirements the provider must not employ any person in the provision of the care service unless that person is fit to be employed. In order to do this, you must:

- demonstrate a robust system to follow up references.
- ensure that managers know the policy and procedure.
- ensure that systems are audited regularly to improve practice.

This requirement was made on 29 June 2015.

Action taken on previous requirement

We sampled two recruitment files and found that attention to ensuring that references had sufficient weight in helping decide whether a post should be offered. This helps to support the safety of residents.

We spoke with the new manager to explain why the requirement was in place. We felt that an audit system would have picked up this issue through a good quality assurance system.

Not met

Requirement 4

The provider must ensure that a suitable training plan is implemented so that staff have the skills and knowledge to meet the changing needs of the people who live in the home. Managers must ensure that staff are competent in meeting the needs of people who use the service. Therefore competency following training is required.

This requirement was made on 29 June 2015.

Action taken on previous requirement

The senior manager showed us a training programme but this addressed general training topics only and was a list with some topics and timing 'to be confirmed'.

We expected a list of topics with names of who needs to attend and dates and agenda for each topic. We need a further record of who did attend, and a reflective account of how the training has informed their practice. The training plan should include topics for annual refreshers and topics which help staff meet the needs of individual residents receiving care and support.

Senior manager is developing this training programme and we could see some progress. We feel that attention to using the competency assessment would evidence this progress and ensure that competent staff are delivering good support.

Not met

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

Previous recommendations

Recommendation 1

We expect that services support people to regularly communicate their views and opinions using a variety of methods to meet the communication needs of individuals. Services should regularly seek views and feedback from those using services and their relatives/carers, using methods appropriate to individuals' needs.

This recommendation was made on 29 June 2015.

Action taken on previous recommendation

The manager has held meetings for relatives and residents to gather their views and to hear their opinions. Records of these meetings for sharing with residents and relatives is the next step.

Recommendation 2

There needs to be more effective lighting to help maintain and improve orientation in line with best practice and evidence based research.

This recommendation was made on 29 June 2015.

Action taken on previous recommendation

The manager ensured that the maintenance service upgraded lighting in the corridors and residents said it was an improvement for them. The new maintenance service.

Recommendation 3

The service should have proper provision for keeping confidential information properly stored.

This recommendation was made on 29 June 2015.

Action taken on previous recommendation

We found this had been addressed satisfactorily.

Recommendation 4

The service should ensure that they have an effective yearly training plan for its entire staff team. We expect that all staff working within the care home have received training appropriate to the work they are to perform and that all staff are appropriately trained in relevant aspects of the health needs of each individual using the service.

The training plan should include key areas such as:

- moving and handling.
- infection control.
- health and safety.
- first aid.
- nutrition and hydration.
- dementia care and support.
- adult support and protection.
- behaviours that can challenge.

This recommendation was made on 29 June 2015.

Action taken on previous recommendation

Our requirement noted above should take account of the detailed information we included to help the staff team make their plan. Some progress has been made and we will review at the next full inspection.

Recommendation 5

The service is recommended to:

- introduce a competency assessment framework to satisfy themselves that training which has been delivered to staff is being applied in practice and resulting in positive outcomes for people.
- this should incorporate observational monitoring of practice and could, for example, be included as part of the supervision process.
- the service must ensure staff have attended moving and handling training before supporting people and have an assessed level of competence.

This recommendation was made on 29 June 2015.

Action taken on previous recommendation

This recommendation ensures that the training has been effective in ensuring staff have the skills and knowledge needed. This recommendation has not been fully addressed.

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
9 Jun 2016	Unannounced	Care and support 3 - Adequate Environment 3 - Adequate Staffing 3 - Adequate Management and leadership 3 - Adequate
21 Nov 2015	Unannounced	Care and support Not assessed Environment Not assessed Staffing Not assessed Management and leadership Not assessed
29 Jun 2015	Unannounced	Care and support 3 - Adequate Environment 3 - Adequate Staffing 2 - Weak Management and leadership 2 - Weak
6 Nov 2014	Unannounced	Care and support 3 - Adequate Environment 2 - Weak Staffing 3 - Adequate Management and leadership 3 - Adequate
14 Jul 2014	Unannounced	Care and support 3 - Adequate Environment 2 - Weak Staffing 3 - Adequate Management and leadership 3 - Adequate
18 Feb 2014	Unannounced	Care and support 2 - Weak Environment 2 - Weak Staffing 2 - Weak Management and leadership 3 - Adequate
15 Oct 2013	Unannounced	Care and support 2 - Weak Environment 2 - Weak

Date	Type	Gradings	
		Staffing	2 - Weak
		Management and leadership	2 - Weak
24 May 2013	Unannounced	Care and support	2 - Weak
		Environment	2 - Weak
		Staffing	2 - Weak
		Management and leadership	2 - Weak

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.