

Mosswood Care Home

Care Home Service

1 Moss Road
Linwood
Paisley
PA3 3FA

Telephone: 01505 335042

Type of inspection: Unannounced
Inspection completed on: 18 July 2016

Service provided by:
Pacific Care Limited

Service provider number:
SP2003002346

Care service number:
CS2012312934

About the service

Mosswood Care Home was registered with the Care Inspectorate in February 2014. The home is purpose-built and is situated in Linwood close to community amenities and very good transport links.

The home provides support to 71 people who may have physical/sensory impairment and or memory impairment or dementia. There were 68 people living in the home at the time of the visit.

The home comprises three units, Clyde with 19 places, Gryffe with 21 places and Tay with 31 places. All of the rooms within the service are single en-suite. Each unit has one dining area and lounge, with Tay unit having two dining rooms and lounges and a cafe area.

The home is owned and operated by Pacific Care Ltd.

The inspection focused on standards of care for people living with dementia. We are using a sample of 150 care home services to look in detail at the standards of care for people living with dementia and this service is one of those selected as part of the sample.

The areas looked at were informed by the Scottish Government's Promoting Excellence: A framework for health and social care staff working with people with dementia and their carers and the associated dementia standards. It is our intention to publish a national report on some of these standards during 2017.

What people told us

For this inspection, we received views from 24 of the 68 people using the service.

All of them said they were very happy with the quality of the service. People spoke highly about the staff that supported them and all respondents said that staff treated them with respect. People could confirm that they knew who to speak to if they had any problems.

We received the views of four carers of people using the service who each told us they were very happy with the service. All four confirmed that they felt involved in the running of the service.

Self assessment

The Care Inspectorate received a fully completed self-assessment from the provider.

The self-assessment clearly identified some key areas that the provider believed can be improved and showed how the service intended to do this. The provider told us how the people who used the care service had taken part in the self-assessment process and how their feedback directed the development of their plans for improving the service.

From this inspection we graded this service as:

Quality of care and support	5 - Very Good
Quality of environment	6 - Excellent
Quality of staffing	6 - Excellent

Quality of management and leadership

6 - Excellent

Quality of care and support**Findings from the inspection**

Staff supported residents with warmth and genuine concern. The staff took time for residents to be as independent as possible making the most of their skills and not rushing them. The residents appeared interested and engaged in the activities throughout the home.

We sampled care plans which showed that people's needs were assessed and planned for. We saw very good input from other healthcare professionals. We spoke with some of these who told us they thought the care home offered very good healthcare outcomes for people.

This supported a responsive approach so that residents were able to stay as well as possible

We saw that staff used a person centred approach to supporting people. We saw some helpful person centred approaches. We saw evidence of good follow-up if a risk had been identified and required support from another agency. We saw that health concerns continued to be responded to efficiently and there was good liaison between the home and other professionals.

We believe that this approach is not fully reflected in the care planning system. We have made a recommendation about this.

Staff we spoke with were knowledgeable about adult protection and we saw this reflected in care planning and the service notification history.

We saw that activities were available each day, which were stimulating for people and were carried out in a relaxed and involving fashion.

We saw that residents and relatives were involved in care planning and risk assessments were discussed when they needed to be. We saw that formal reviews had been undertaken.

Copies of care plans were kept in each bedroom, as well as photographs of the person and their keyworkers. This is evidence of the welcoming and informing approach of the service.

We believe that the service should consider how to use reviews in ensuring that outcomes for people are actioned. They should also identify and encourage the abilities of the individual and how these can be developed. This should be done as part of the person centred planning system. We have made a recommendation about this.

Requirements

Number of requirements: 0

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Recommendations

Number of recommendations: 2

1. The service should consider how it can achieve a more person centred approach to care planning. The care plan recordings should reflect the choices and abilities of the resident .

This should describe and the enabling approach which is practiced by staff.

National Care Standards for Care Homes for Older People Standard 6 Support Arrangements.

2. The care plans should include a system of reviews which identifies and encourages the abilities and choices of people.This should more fully reflect the person centred and enabling practice of staff.

National Care Standards for Care Homes for Older People Standard 6 Support Arrangements.

Grade: 5 - very good

Quality of environment

Findings from the inspection

We found that dignity and privacy were well promoted within the home. Staff responded to residents with respect and discretion if they required assistance. We found that staff were visible and were engaged in a lot of low-level discussions and activities and the residents were responsive and engaged.

We found that people had the freedom to wander around the home to within safe limits. This included an enclosed garden area.There is a very well laid out garden area which is secure, allowing people to have safe access to the garden while being within sight of staff. On one day of the inspection, we saw that people chose to sit outside and staff were able to observe them. Others were encouraged by staff to use the garden. This was done in a very relaxed and encouraging way and we saw that people enjoyed the experience.

The service places a high priority on supporting people with access to outdoors and the wider community.

We saw a very attractively decorated and furnished environment.

There was a welcoming reception area with staff on during working hours. There were keypads at all appropriate doors and all bedroom doors had locks to be used by people if preferred. There was a call system in operation and staffing levels were above the assessed level. All of this ensured that people remained safe in an environment which was specifically built for their needs.

Relatives we spoke with were very happy with the home and felt it was a very pleasant and safe environment for their loved ones.

The provider had developed health and safety policies and procedures to inform and guide staff practice. This meant that staff had clear guidelines to follow in relation to the maintenance of a safe home environment.

Staff told us that there was on-going health and safety training that covered a range of topics like fire safety, food safety in care and infection control. Staff also had important training on Adult Protection and staff told us they were very much aware of their responsibility to keep residents safe . They felt that there was a positive ethos within the home to keep people safe.

The home has a service development plan which includes maintaining and enhancing the environment.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 6 - excellent

Quality of staffing

Findings from the inspection

Particular strengths were the enthusiastic, motivated and committed manager and staff team who worked hard to achieve positive outcomes for service users, monitoring of staff practice, training and staff involvement in service improvement.

Examples of very good practice were continuous professional development through Individual Learning Plans for staff which reflected their own personal interests, the service priorities and the individual needs of service users

We saw that staff were provided with opportunities to reflect upon their own individual practice and the service performance overall. This was done through "development days" and group and individual supervision.

We saw that staff were responsive and professional with a friendly and caring attitude. We could see that staff knew residents well. We saw many examples of genuine and warm interactions and staff also used humour well when supporting people.

Staff had clear roles and responsibilities and worked very well together as a team to meet people's needs and communicated effectively with each other. This meant that the day to day delivery of the service ran smoothly as it had been well organised. Staff were always around during the inspection and we saw that people got help quickly when they needed it.

The manager had used a dependency assessment tool to link people's support needs to the staffing numbers and skills provided. We saw that the staffing hours delivered were greater than the level of hours assessed as needed. This had been displayed in the home for people to see. we saw that staff were visible at all times and they were attentive to people's' needs.

We focussed on adult support and protection, dementia care and oral healthcare training at this visit. We were satisfied with staff knowledge and practice in relation to adult support and protection and oral healthcare. the service had developed roles for " dementia champions " who were responsible for delivering dementia awareness

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training. We believe that this training should be delivered at the appropriate levels for all support staff.

Staff had been registered with the relevant bodies whose aim is to support a qualified and regulated workforce.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. The service should ensure that all support staff have access to training aligned to their role within the "Promoting Excellence" Framework.

National Care Standards for Care Homes for Older People Standard 5:Management and Staffing.

Grade: 6 - excellent

Quality of management and leadership

Findings from the inspection

We found that the management team encouraged and valued input from the whole staff team. Staff told us they felt well supported by the management team who involved them in plans, changes and developments within the service.

We saw that the roles of team leaders had been developed, allowing them to be able to make immediate interventions on people's behalf. Staff had been identified as 'champions' in a number of specialist areas of practice. These are very important roles in supporting staff and developing their knowledge and practice. We saw that these staff were confident and assured in their roles, committed to improvement of the service.

Staff told us that they believed they were encouraged and supported to make decisions and to become more involved in the running of the service. They confirmed that they were therefore encouraged to take leadership and responsibility for their practice. We believe that this is a result of the management teams plans to develop leadership, as shown in the service development plan.

We saw that the service had developed their quality assurance methods to reflect the experience of people and their carers. Audits used to assess the quality of activities and the dining experience were used to identify areas for development. These findings were used in meetings and staff supervision to improve the areas concerned.

The service had developed person centred methods of assessing the experience of people such as the "Dementia Care Audit". This method used person centred principles to assess the quality of support offered to people living with dementia. We discussed with the management team that these principles are evident within the service and could be readily adopted within the care planning system .

We believe that this represents the clear intentions of the management team to improve the quality of life for people who live with dementia. It also supports their intentions to use reflective practice to improve staff knowledge and awareness of expected standards

Systems such as staff meetings, daily "flash meetings" are in place to ensure staff involvement and awareness.

In this way the management team are promoting a rights based, person centred approach.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 6 - excellent

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

Previous requirements

There are no outstanding requirements.

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

Previous recommendations

Recommendation 1

The service should continue to develop support plans to meet their stated aims and objectives of being person centred and outcome focused. The service should consider the models referenced in "Promoting Excellence" and in other models.

National Care Standards, Care Homes for Older People, Standard 6: Support Arrangements.

This recommendation was made on 24 July 2015.

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Action taken on previous recommendation

The model of care planning used by the service does not fully reflect the person centred practice and approach of the staff team. This enabling and supportive approach should form the basis of the care planning model. We are confident that the management team have embraced the need for this change. The recommendation will continue.

Recommendation 2

The service should continue to develop staff knowledge and skill in supporting people who live with dementia. Dementia awareness training which is compatible with the "Promoting Excellence" framework.

National Care Standards, Care Homes for Older People, Standard 5; Management and Staffing Arrangements.

This recommendation was made on 24 July 2015.

Action taken on previous recommendation

The service has provided staff with training in dementia awareness and has aligned some staff roles in response to this. These included continuing training carried out by staff within the home. We believe that this should be a priority for the service.

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	
25 Jun 2015	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good 6 - Excellent 5 - Very good 5 - Very good
25 Jun 2014	Unannounced	Care and support Environment	4 - Good 6 - Excellent

Date	Type	Gradings	
		Staffing Management and leadership	5 - Very good 5 - Very good

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