

Lillyburn Care Home Service

Birdston Road
Milton of Campsie
Glasgow
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Telephone: 0141 776 3366

Type of inspection:

Unannounced

Completed on:

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Service provided by:

Pacific Care Limited

Service provider number:

SP2003002346

Service no:

CS2003010431

About the service

The Care Inspectorate regulates care services in Scotland. Information about all care services can be found on our website at www.careinspectorate.com

The service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

Lillyburn Care Home is managed by Pacific Care Limited. The service is located in Milton of Campsie and provides care and support for up to 56 people within a purpose-built environment. The service has registered nursing staff on duty over a 24 hour period.

There are four units within Lillyburn's main building, with each unit accommodating up to 10 older people, with 40 residents in total.

A separate unit, Kintyre, is situated across from the main building and has been designed to cater for the care and support needs of up to 16 older people with dementia.

The grounds provide landscaped gardens that are easily accessible to people.

There were 56 people living in the home during the time of the inspection.

What people told us

Before and during our visit, we received four completed care standards questionnaires from residents, four from relatives and 17 from staff.

There were 56 residents living in the home at the time of our inspection. During our visit, we spoke with 14 residents and seven visiting relatives. We spoke with staff throughout our inspection and as part of our general observations. We also observed a lunchtime and carried out a SOFI 2* observation involving residents with limited communication abilities.

Overall residents, relatives and staff gave very positive feedback about the standard of care at Lillyburn care home. When areas for improvement were identified we explored these further and communicated them anonymously to the manager and with a view to supporting improvement if needed. Comments included:

'We very much appreciate the care and attention mum is receiving here'.

'Keep up the good work'.

'Since I have come here I have had nothing but kindness'.

'It is always clean'.

'Excellent care from staff'.

'I think there are small things in every organisation that can be improved, but overall they are doing very well and those small things get sorted'.

'Very good environment'.

*SOFI 2 is a Short Observational Framework for Inspection. We use SOFI 2 as a tool to assist us in directly observing the experience and outcomes for people who may be unable to tell us their views.

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?	6 - Excellent
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?	5 - Very Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

6 - Excellent

The service demonstrated some excellent and sector leading approaches of caring for people living with dementia. We were encouraged by evidence of very positive service user experiences gathered from observations, records and feedback from people. As a result, we were confident that people experienced very good outcomes while accessing care and support by the service.

We found that staff demonstrated very good knowledge and skill, particularly in caring for people living with dementia who experience stress or distress. Staff were able to demonstrate how they used best practice approaches for assessing and meeting the needs of people who are distressed. This included working together effectively with other healthcare professionals. The service also offered cognitive stimulation therapy groups to support the self-esteem and abilities of people living with dementia. Residents with stress and distress reactions benefitted from these person-centred, holistic and comprehensive approaches.

A particular area of strength and innovation was the systematic use of Playlist for Life. This approach used a playlist with a person's favourite music as an effective intervention, particularly in situations of stress and distress. The service engaged with recent research and implemented a project that aimed to reduce the use of medication through the use of music in a planned and evaluated way. This meant that residents benefitted from up to date best practice interventions aiming at a reduction in the use of psychoactive medication.

We saw that staff knew residents well and we observed staff acting with kindness and compassion. Restrictions were kept to a necessary minimum and people's rights were respected. Residents and relatives told us that they felt well-informed. A relative said: 'Staff are very diligent in informing us very timely and keep us in the loop'. Care reviews were carried out regularly and there was good evidence of the service acting on feedback. We also

found that managers acted effectively, openly and decisively when accidents or incidents occurred. This meant that people were safe and their rights were respected.

When we observed practice, we found that staff were aware of the importance of promoting people's abilities, independence and choices. The service provided a range of meaningful activities that also included outside activities and links to the local community. The overall feedback for activities was encouraging. One relative told us that they were unsure about the provision of activities at night time and the frequency of outings. We discussed this with managers who acknowledged that they found it sometimes difficult to involve everybody in the planning and evaluation of activities. In response, the service set up an 'activity and wellbeing group'. This aimed to increase involvement and to explore new ways of staying in touch with people to give them a regular voice in planning and evaluating activities. The service was aware of best practice and respected people's rights and choices.

We observed un-hurried and relaxed mealtimes. Staff gently encouraged residents to move to the dining area and enabled them to make choices in a way that supported their abilities. In particular in the Kintyre unit, music was used very well to set the scene and atmosphere for an enjoyable mealtime. Staff groups, including support staff, worked well and effectively together. This meant that residents' nutritional needs were met well and that their general wellbeing benefitted from well-organised mealtimes.

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?

5 - Very Good

We found that the service used a person-centred approach to fully understand the needs of people. The sampled support plans were detailed, relevant and consistently informed all aspects of people's care. Life story information and Playlist for Life were used well to support people living with dementia. We discussed with managers that the service could improve how personal outcomes were formulated and captured. People's individual choices and preferences were well documented. This showed that the service aimed to get to know each resident well in order to make them feel safe and comfortable and to meet their individual needs.

Care plans were regularly evaluated and care reviews were carried out with a good level of involvement from residents and relatives. We could see examples of the service reacting positively on feedback and suggestions as a result of care reviews. This meant that people were able to contribute to their care plans and that their rights were respected.

Individual assessments and risk assessments were up to date and detailed. In particular, the assessment and care planning for stress and distress in dementia showed that staff had a very good awareness of best practice. We found that the service worked very well, and effectively, together with external health professionals, like GPs and community psychiatric nurses. This meant that people's healthcare benefitted from robust systems and good practice.

The sampled care plans showed that the service was working towards further strengthening its practice for the use of anticipatory (advanced) care plans. A new section had been added to the current documentation system to support this. We saw that some advanced care plans were developing well and discussed with managers that we will evaluate further progress at the next inspection. Managers carried out regular quality assurance audits and were aware of the service's strengths and areas for improvement in this area. This ensured that people's assessments and care plans benefitted from good leadership and improvement work.

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?	6 - Excellent
1.1 People experience compassion, dignity and respect	6 - Excellent
1.2 People get the most out of life	6 - Excellent
1.3 People's health benefits from their care and support	6 - Excellent
How well is our care and support planned?	5 - Very Good
5.1 Assessment and care planning reflects people's planning needs and wishes	5 - Very Good

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