

Isobel Fraser Home Care Home Service

4A Mayfield Road
Inverness
IV2 4AE

Telephone: 01463 230149 01463 250178

Type of inspection:

Unannounced

Completed on:

26 August 2019

Service provided by:

Isobel Fraser Home a Scottish
Charitable Incorporated Organisation

Service provider number:

SP2017012984

Service no:

CS2017360080

About the service

Isobel Fraser Home has recently undergone a variation to its status in relation to its charitable status and was re-registered with the Care Inspectorate on 26 March 2018.

Isobel Fraser Home is a care home service registered for up to a maximum of 30 older people within the conditions of their registration.

The provider is Isobel Fraser Home, a Scottish Charitable Incorporated Organisation.

The home is situated in attractive grounds, providing people with a quiet, pleasant environment close to all amenities in the city of Inverness. There are 28 bedrooms, two of which can be used for shared occupancy. The bedrooms have en-suite facilities. In spite of limited space, people were encouraged to personalise their rooms with small pieces of furniture and possessions.

The service's aims include:

'Our aim is for you to continue to make your own choices and decisions, participate with the wider community, maintain and develop relationships, enjoy valued, meaningful activities and empower you to achieve your full potential and remain as independent as possible.'

There were 29 people using the service during the inspection.

What people told us

As part of the inspection process we gathered people's views in a variety of ways. We sent 12 Care Standard Questionnaires to the service to pass to people using the service and 12 to pass to their relatives and friends. People who used the service were invited to take part in the inspection by talking with the inspectors and inspection volunteer.

For this inspection, we received six completed questionnaire back from people experiencing care and six from relatives and friends. We spoke with 11 people experiencing care and four relatives during the inspection.

We received positive feedback in the questionnaires we received and when we spoke with people who experienced care and their relatives. Overall people were happy with the quality of care they or their relative received.

Comments included:

'The staff are very caring'

'Staff are very good'

'Extremely happy with the care'

'Staff are knowledgeable'

'It's a nice walk round the garden'

'The staff and management are very good'

'We are consulted, involved and included'

'They are very good to him in here, they keep me informed'

'The food is pretty good. The portions are fine and you can always ask for more'

' No complaints about the food'

' I asked for a hot plate with hot food and I got one'

'It's a lovely home'

'We have a say in what goes on. The staff are very nice and will help us if we are not sure of something'

'We are looked after exceptionally well'

'There's an extensive list of excursions we can do. It's something that has improved over the last year. Some people can go swimming. It's important that people don't feel confined to inside the home.'

' I can get out to most things'

' I would highly recommend this home'

'Wouldn't be looked after better in any other place.'

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?	5 - Very Good
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?	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?

5 - Very Good

We found there were major strengths in supporting positive outcomes for people. There were very few areas for improvement.

People should experience warmth, kindness and compassion. Staff had a kind and caring approach towards people using the service and this was evident across the whole staff team. Staff supported people in person centred and respectful way with warmth and compassion. This would have a positive impact on people's wellbeing. Staff knew people and their visitors well and we could see good relationships had been formed. Staff took time to speak with and include people in conversations. Staff offered support at the level the person needed and in a thoughtful and dignified way. Staff took the time to include people and give each person the opportunity and support to be involved in activities and day to day life within the home. Staff were motivated and committed to providing respectful care and displayed genuine kindness. Call bells were answered promptly and staff were very attentive to people's needs. People told us they were very happy with their care and people using the service and their relatives spoke highly of the staff who supported them.

People should be able to choose to have an active life and participate in a range of activities every day, both indoors and outdoors. It is important for people to stay connected. People were supported to retain links with their friends and families. Visitors were welcomed to the home and people could make use of the Wi-Fi service within the home to maintain connections with people who lived a distance away. People were supported to maintain an active life and there were a range of opportunities in and outwith the home which people could choose to be involved with. People spoke with us about the different things they liked to do and clearly benefited from these.

A weekly activity timetable was established and it was good to see contingency arrangements were in place to ensure that these took place if the activities person was not available and that all staff were involved in activities. We observed different activities during the inspection, people were supported well, having fun and there were very good examples of inclusion. People also enjoyed and benefited from the regular weekly cycle trips provided by 'Spokes for Folks Inverness.' People could access the safe enclosed area when they choose to and we saw people made good use of the garden. We admired the extensive improvement work that had been done to create the garden. This provided a very pleasant place for people to sit and walk in, to look at and to enjoy regular access to the outdoors and fresh air. The garden was made good use of and was beneficial to the overall wellbeing of people who used it. Keeping active helps people to maintain independence longer and have a better quality of life. The service was continuing to develop different activities to promote physical activity and to support people's needs and choices.

People should have a suitable choice of healthy meals and snacks, including fresh fruit and vegetables. People had a good choice of meals and drinks and snacks were readily available. The dining room was a bright pleasant area to dine, mealtimes were sociable occasions and people were very well supported. The catering staff were very much part of the staff care team and knew people's dietary needs and preferences well. There was a good choice of meals which looked appetising and meals were very nicely presented. Menus were displayed in different formats for people to choose from as well as people being offered the choice verbally and visibly. People gave positive feedback about the food and it was good to see that people's choices were accommodated when they preferred an alternative. People were offered support with their meals and also encouraged to be as independent as they could be. Staff were aware of the importance of hydration. People were supported to drink well and drinks were offered frequently.

People should feel safe and protected from neglect, abuse or avoidable harm. We were reassured that staff understood their responsibilities to protect people from harm. Any treatment or intervention that people experience should be safe and effective. There were good arrangements in place to support people with their

medication. We discussed some small areas where the arrangements could be improved and were confident that these would be addressed by the service.

The care and support people experience should meet their needs and be right for them. People looked well-presented and staff had good knowledge about the people they were supporting. There were suitable arrangements in place to support people with their finances. We discussed some small improvements that should be made to make the system more robust. We were confident that the service would put these in place. The management and staff recorded and monitored falls, accidents and incidents. The service introduced the falls safety cross during the inspection to provide them with a visual overview of the falls so they could identify more easily if there was action they could take to minimise falls. There were very good links with health professionals and people's support and health needs were very well-managed. The health care professionals we spoke with found the service worked well with them and carried out any care instructions they advised. Staff were staff knowledgeable about people's care and always treated people with dignity and respect.

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? 4 - Good

We found there were a number of important strengths which, taken together, clearly outweigh areas for improvement.

People should be fully involved in assessing their emotional, psychology, social and physical needs at an early stage, regularly and when their needs change. There was some very good information in care plans that was person centred and detailed. Where this was in place it gave staff the information they needed to provide the person with the right care and support. For example, the information in people's care plans relating to stress and distress was clear, person centred and could be used by staff to support the person.

Staff knew people's needs well and could describe the care provided in detail. There were some areas where this information could be reflected better in the person's care plan or review records. There were areas where the outcome statement could be clearer and where more information about how people's needs were to be met, this needs to be added. This would ensure that staff use care and support plans to deliver care and support effectively and that the information is reviewed and updated as people's needs change. Staff had worked on improving the care plan and were linking the relevant health and social care standard to the care plans to ensure they were written from the person's point of view and focussed on positive outcomes for people. The service was

still in the process of developing the information in care plans with people. Some risk assessments were in place however there were some areas where risk assessments should be developed further and linked to the person's care plan. People were involved in the review process and in the review of their care plans however this was not always evidenced well as review records were not always completed or carried out when planned. The service were improving the system they had to identify when care reviews were due and plan for these in advance to ensure they take place. We could see that a lot of work had been carried out to develop and review care plans and were confident that the manager and staff would make the necessary improvements in these areas and involve people using the service and their representatives. This should ensure people benefit from care plans which are right for them because they are current and set out how their needs will be met, as well as their wishes and choices.

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

It is important that all staff are supported to take opportunities to actively engage with people in their day to day work to promote positive outcomes. Therefore, the provider was to review how each shift was managed and how staff were allocated within their span of duty.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that; 'People have time to support and care for me and to speak with me' (HSCS 3.16).

This area for improvement was made on 24 July 2018.

Action taken since then

The management had reviewed the way the staff team worked and improvements had been made to the time people had to interact with people. Involvement and supporting people with activities was now seen as everyone's business and this was seen to be working well. There was a plan in place and suitable arrangements were in place to ensure that the activities that were planned took place.

Previous area for improvement 2

It is important that all the care plans in relation to managing people's stress and distress clearly set out how people were to be supported. They were to ensure that the information was person centred nature, thereby, ensuring that people were supported in line with their wishes, individual preferences and needs.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that; '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' (HSCS 1.15)

This area for improvement was made on 24 July 2018.

Action taken since then

The information we sampled in people's care plans relating to stress and distress was clear, person centred and could be used by staff to support the person. The information was current and up-to-date.

Previous area for improvement 3

It is important that all people are offered the same quality of mealtime experiences regardless of their wishes to have a later breakfast meal. Therefore, the provider was to review how the breakfast service was managed to ensure that people's wishes, choices and preferences were taken into account.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that; 'My meals and snacks meet my cultural and dietary needs, beliefs and preferences' (HSCS 1.37).

This area for improvement was made on 24 July 2018.

Action taken since then

The catering and meal arrangements had been reviewed and changed since the last inspection. The catering team were very much part of the whole staff team working towards the same positive outcomes for people experiencing care. The breakfast provision had been reviewed and improved. Although people were encouraged to use the dining room, each person had a choice of where and when they had their breakfast. A staff member was available every day to support people with breakfast in the dining room from 07:00 onwards.

Previous area for improvement 4

It is important that the physical environment meets the needs of the people living there and that recognition is paid to supporting people to maintain their safety, confidence and independence. The provider was to carry out an assessment of how dementia friendly the environment was and prepare a plan to address any areas for improvement.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that; 'My premises have been adapted, equipped and furnished to meet my needs and wishes' (HSCS 5.16) and 'I can independently access parts of the premises that I use and the environment has been designed to promote this' (HSCS 5.11).

This area for improvement was made on 24 July 2018.

Action taken since then

The service had carried out refurbishment and redecoration work since the last inspection which had enhanced the environment for people who lived there. The dining room, sun room and lounge had being nicely decorated and new furniture had been purchased. Call bells were available in the lounges and the garden had been nicely developed and landscaped. The refurbishment programme was continuing during the inspection and more improvements were planned. An assessment of how dementia friendly the environment was and plans to address any areas of improvement was still to be carried out by the board and should be progressed.

Previous area for improvement 5

It is important that people and relatives were easily able to summon staff from the communal areas. This was so that their needs were attended to in a timely fashion and that health and safety needs were addressed. The provider was to carry out an assessment of this and then put in place a suitable system, whereby, people were able to summon assistance when needed.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that; 'My premises have been adapted, equipped and furnished to meet my needs and wishes' (HSCS 5.16)

This area for improvement was made on 24 July 2018.

Action taken since then

Call points had been installed in the lounge and a number of call pendants had been purchased and were available for people to wear and use if they chose to.

Previous area for improvement 6

To ensure positive outcomes for the people who use the service the provider must implement an effective programme of induction to provide all staff with support, the opportunity to raise individual issues and as a means of monitoring staff awareness of working practices.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that; 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

This area for improvement was made on 24 July 2018.

Action taken since then

The management had made good progress to address this area for improvement. They had introduced an individual folder for each member of staff and inductions were being carried out. A mentoring system was in place for new staff. Supervision and appraisal arrangements were in place and training records were being kept and linked to these. Staff felt well supported.

Previous area for improvement 7

To ensure positive outcomes for the people who use the service the provider must ensure that all staff took part in dementia training that supports staffs knowledge and understanding of how to effectively plan and support those who suffered from stress and distress.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that; 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

This area for improvement was made on 24 July 2018.

Action taken since then

It was very positive to see that staff across the whole staff team had received training about dementia and this was progressing well. This had been beneficial in increasing staff awareness, knowledge and understanding and how they supported people.

Previous area for improvement 8

The provider should ensure that they further develop effective and measurable systems, by which they could assure themselves that they were assessing, reviewing and improving the overall provision of the service. They were to involve people who lived in, visited and worked in the service as part of this work. This was to ensure that there were continued and positive outcomes for people who use the service and their relatives. Action plans were to be developed and shared to evidence how improvements had been, or were being fully addressed.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that; 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

This area for improvement was made on 24 July 2018.

Action taken since then

The service had made some progress to address this area for improvement. They had recently carried out questionnaires and hoped there would be more returns before collating the findings. Internal audits had been taking place and we could see that areas identified for improvement were used to inform action plans. To develop this further, the management plan to use the quality framework for care homes for older people as a self-assessment tool with the involvement of people using the service, relatives, visitors, staff, stakeholders and the members of the board.

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?	5 - Very Good
1.1 People experience compassion, dignity and respect	6 - Excellent
1.2 People get the most out of life	5 - Very Good
1.3 People's health benefits from their care and support	5 - Very Good
How well is our care and support planned?	4 - Good
5.1 Assessment and care planning reflects people's planning needs and wishes	4 - Good

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

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