

# Inspection Report

**Name of Service:** Craigdun Care Home

**Provider:** Sped Trading Ltd

**Date of Inspection:** 12 September 2024

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>

## 1.0 Service information

<b>Organisation:</b>	Sped Trading Ltd
<b>Responsible Individual:</b>	Mrs Susan Morgan
<b>Registered Manager:</b>	Mrs Margaret Helen Jess
<b>Service Profile</b> This home is a registered nursing home which provides nursing care for up to 30 patients. The home is divided over two floors with bedrooms and bathrooms on both floors. A communal dining room and lounges are located on the ground floor. The patients have access to outside space with both an accessible mature garden and patio area available.	

## 2.0 Inspection summary

An unannounced inspection took place on 12 September 2024, from 9.35 am to 4.40 pm by a care inspector.

The inspection was undertaken to evidence how the home is performing in relation to the regulations and standards; and to assess progress with the areas for improvement identified, by RQIA, during the last care inspection on 5 October 2023; and to determine if the home is delivering safe, effective and compassionate care and if the service is well led.

The inspection evidenced that safe, effective and compassionate care was delivered to patients and that the home was well led. Details and examples of the inspection findings can be found in the main body of the report.

It was established that staff promoted the dignity and well-being of patients and that staff were knowledgeable and well trained to deliver safe and effective care.

Patients said that living in the home was a good experience. Patients unable to voice their opinions were observed to be relaxed and comfortable in their surroundings and in their interactions with staff.

As a result of this inspection all of the previous areas for improvement were assessed as having been addressed by the provider and no new areas for improvement were identified. Details can be found in the main body of this report.

### 3.0 The inspection

#### 3.1 How we Inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how the home was performing against the regulations and standards, at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

To prepare for this inspection we reviewed information held by RQIA about this home. This included the previous areas for improvement issued, registration information, and any other written or verbal information received from patient's, relatives, staff or the commissioning trust.

Throughout the inspection process inspectors seek the views of those living, working and visiting the home; and review/examine a sample of records to evidence how the home is performing in relation to the regulations and standards.

Through actively listening to a broad range of service users, RQIA aims to ensure that the lived experience is reflected in our inspection reports and quality improvement plans.

#### 3.2 What people told us about the service

Patients spoke positively about their experience of life in the home; they said they felt well looked after by the staff who were helpful and friendly. Patients' comments included: "The staff are very good", "Staff are good, they can't do enough for you" and "Very nice people here".

Patients told us that staff offered choices to them throughout the day which included preferences for getting up and going to bed, what clothes they wanted to wear, food and drink options, and where and how they wished to spend their time. Three patients completed questionnaires and the comments included were; "The care is excellent", "I couldn't ask for better, the staff are very helpful" and "When I buzz, the staff come quickly".

Relatives spoken with on the day of the inspection confirmed they were very happy with the care their loved one receives in Craigdun. One relative completed and returned a questionnaire; the comments included were very positive, comments included; "All the carers are really nice and thoughtful, the nurses are always on hand and provide us with any information we need" and "The care my mother receives is second to none, everyone does everything in their power to keep my mum comfortable and happy".

One staff member completed the online survey and commented; "Well run home, management and directors very approachable. I feel well supported in my role. The residents are cared for to a high standard and the staff have compassion and genuinely care. The home manager is a credit to the home, she works tirelessly to run a happy, friendly, clean and fresh home for both service users to live and staff to work".

### 3.3 Inspection findings

#### 3.3.1 Staffing Arrangements

Safe staffing begins at the point of recruitment and continues through to staff induction, regular staff training and ensuring that the number and skill of staff on duty each day meets the needs of patients. There was evidence of robust systems in place to manage staffing.

Patients said that there was enough staff on duty to help them. Staff said there was good team work and that they felt well supported in their role and that they were satisfied with the staffing levels.

Observation of the delivery of care evidenced that patients' needs were met by the number and skills of the staff on duty and it was observed that staff responded to requests for assistance promptly in a caring and compassionate manner.

#### 3.3.2 Quality of Life and Care Delivery

Staff met at the beginning of each shift to discuss any changes in the needs of the patients. Staff interactions with patients were observed to be polite, friendly, warm and supportive and the atmosphere was relaxed, pleasant and friendly. Staff were knowledgeable of individual patients' needs, their daily routine, wishes and preferences.

It was observed that staff respected patients' privacy by their actions such as knocking on doors before entering, discussing patients' care in a confidential manner, and by offering personal care to patients discreetly. Staff were also observed offering patient choice in how and where they spent their day or how they wanted to engage socially with others.

At times some patients may require the use of equipment that could be considered restrictive or they may live in a unit that is secure to keep them safe. It was established that safe systems were in place to safeguard patients and to manage this aspect of care.

Patients may require special attention to their skin care. These patients were assisted by staff to change their position regularly and care records accurately reflected the patients' assessed needs. Some minor documentation errors were observed in the repositioning records; these were discussed with the manager who agreed to address.

Examination of care records and discussion with the manager confirmed that the risk of falling and falls were well managed and referrals were made to other healthcare professionals as needed. Review of records confirmed that staff took appropriate action in the event of a fall, for example, they commenced neurological observations and sought medical assistance if required.

Good nutrition and a positive dining experience are important to the health and social wellbeing of patients. Patients may need a range of support with meals; this may include simple encouragement through to full assistance from staff and their diet modified.

Observation of the lunchtime meal served in the main dining room confirmed that enough staff were present to support patients with their meal and that the food served smelt and looked appetising and nutritious. It was observed that staff had made an effort to ensure patients were comfortable, had a pleasant experience and had a meal that they enjoyed. The patients commented positively about the food in Craigdun.

The importance of engaging with patients was well understood by the manager and staff. A number of patients were observed enjoying a game of bingo in the dining room. Observation of this planned activity confirmed that staff knew and understood patients' preferences and wishes. The activity staff member helped patients to participate in the activity and the patients appeared to enjoy it. Other patients were observed in their bedrooms with their chosen activity such as reading, listening to music, watching television or waiting for their visitors to come.

The programme of social events was displayed in the foyer of the home; arrangements were in place to meet patients' social, religious and spiritual needs within the home.

### **3.3.3 Management of Care Records**

Patients' needs were assessed by a nurse at the time of their admission to the home. Following this initial assessment care plans were developed to direct staff on how to meet patients' needs and included any advice or recommendations made by other healthcare professionals.

Patients care records were held confidentially.

Care records were person centred, well maintained, regularly reviewed and updated to ensure they continued to meet the patients' needs. Nursing staff recorded regular evaluations about the delivery of care. Patients, where possible, were involved in planning their own care and the details of care plans were shared with patients' relatives, if this was appropriate.

### **3.3.4 Quality and Management of the Patients' Environment**

Examination of the home's environment included reviewing a sample of bedrooms, bathrooms, storage spaces and communal areas such as lounges. The home was warm, comfortable and welcoming. Patients' bedrooms were tidy and personalised with items of importance to each patient, such as family photos and sentimental items from home. Some areas of the home were seen in need of repainting; this was discussed with the manager who advised of an ongoing redecoration plan.

Review of records and discussion with the manager confirmed that environmental and safety checks were carried out, as required on a regular basis, to ensure the home's was safe to live in, work in and visit.

Review of records and observations confirmed that systems and processes were in place to manage infection prevention and control which included policies and procedures and regular monitoring of the environment and staff practice to ensure compliance.

### **3.3.4 Quality of Management Systems**

There has been no change in the management of the home since the last inspection. Mrs Margaret Jess has been the manager in this home since 9 June 2017.

Staff commented positively about the management team and described them as supportive, approachable and able to provide guidance.

Review of a sample of records evidenced that a robust system for reviewing the quality of care, other services and staff practices was in place. There was evidence that the management team responded to any concerns, raised with them or by their processes, and took measures to improve practice, the environment and/or the quality of services provided by the home.

## **4.0 Quality Improvement Plan/Areas for Improvement**

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Margaret Jess, Manager, as part of the inspection process and can be found in the main body of the report.



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