

St. Johns Care Home Service

11 High Cross Avenue
Melrose
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Telephone: 01896 822 168

Type of inspection:
Unannounced

Completed on:
4 July 2024

Service provided by:
Mansfield Care Limited

Service provider number:
SP2005007720

Service no:
CS2009195955

About the service

St. Johns is a care home registered to provide a care service to a maximum of 17 older people. Two of these placements can be used for emergency respite care. The provider is Mansfield Care Limited.

The service is situated in Melrose, within easy reach of local amenities including shops, cafes and transport.

The home has two parts: the original building, which is on two floors and a ground floor extension to the back of the building which looks out onto well-established gardens. The main house has a dining room, small lounge and main lounge. First floor bedrooms are accessed via the stairs or a stair lift.

About the inspection

This was an unannounced inspection of the service which took place on 26 - 27 June 2024. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service, we spoke with people using the service as well as feedback from relatives. We also spoke with management and staff, observed practice and daily life as well as reviewed a wide range of documents.

Key messages

- Staff were knowledgeable about people's care needs and showed genuine caring and respectful attitudes when supporting people.
- People experienced warmth, dignity and respect.
- Effective leadership ensured the right care and support was in place to meet the desired outcomes.
- There were good working relationships between management and staff.
- Support plans were person centred and reflected people's individual needs, intended outcomes and associated risks.
- Mealtime experience gave access to a variety of meals and drinks and choice promoted.

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 staff team?	5 - Very Good
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 significant strengths in aspects of the care provided and how those supported positive outcomes for people, therefore we evaluated this key question as very good.

People experienced care and support with compassion because there were warm, encouraging positive relationships between staff and people living in the home. Staff were very knowledgeable about those in their care and how to meet their needs. This meant that people could be confident that staff supporting them were well informed and worked consistently to help them achieve the outcomes that they had identified.

Feedback from those residing in the home was very good. One person told us "I love living at St. Johns. The staff are very good to me and look after me well. I really enjoy the bird table which has been erected outside my window."

People were not rushed and encouraged to make decisions and choices to how they would like to spend their day. An activity coordinator provided a range of events and activities for people. The home captured what people enjoyed doing as well as what they had no interest in. Activities included group activities as well as one-to-ones. The location of the service close to the town centre provided opportunities to access the local community as well as build links within the community, such as local schools who recently entertained those residing in St. Johns, with a dance show as part of the Melrose festival. The manager and activity coordinator had oversight of the activities people were doing to ensure everyone had an opportunity to be involved.

Medication administration is provided via paper medication administration records. Management monitored and audited medication to ensure any medication errors had been acted upon as well as stock control and storage of the medication. Staff received regular training to ensure safe practice which benefitted people's health, and this was followed up by observations of practice carried out by the manager to ensure that staff were competent and skilled. People could be confident that the staff who supported them to take their medication safely had the correct knowledge and training.

The mealtime experience was well organised, people had opportunities to sit with others and enjoy their meals together. Staff created a pleasant atmosphere with music playing softly in the background and appropriate interaction from the staff. People benefitted from access to tasty, varied and well balanced meals. The cook was familiar with the current dietary needs of each person. Staff encouraged and enabled people to eat their meals independently with the right level of support where needed. Support was offered in a respectful and dignified manner. People's wellbeing benefitted from an approach that enabled a healthy attitude to food and drink. Management and senior staff had a good overview of each person's nutrition and strategies were in place where anyone was at risk of malnutrition.

How good is our staff team?

5 - Very Good

We found significant strengths in aspects of the care provided and how those supported positive outcomes for people, therefore we evaluated this key question as very good.

The staff team were well established and worked well together. There was respectful communication within the team which created a warm atmosphere because of good working relationships.

People supported received care from consistent staff who knew them well and who had built up caring relationships with them. The staff appeared motivated and very good feedback was received from those they supported. One person told us the staff are lovely and take good care of her.

A training matrix was in place which offered a variety of training, both on an online system and face to face sessions with a trainer. This was monitored by the manager to ensure staff training was relevant, up to date and reflected best practice. Staff would be alerted when a refresher was due.

Staff competence was regularly assessed to ensure learning and development supported better outcomes for people, as well as staff and relative meetings to drive improvement.

There was a recently appointed manager who had already developed good working relationships with staff; good communication and clear leadership was evident. Staff morale was good. All feedback from staff was positive, stating they enjoyed their roles and team work was very good.

Staff told us they were receiving regular supervisions and felt able to discuss what training needs they had to better their practice. This ensured people are being cared for by staff who understand and are sensitive to their needs and wishes because they are learning and support measures are in place.

Staff arrangements were informed by assessments of people's needs. These were updated using the provider's tool. During our inspection, staffing levels appeared to provide staff with adequate time to offer compassionate care and support.

Staff were all registered with relevant professional bodies and had an understanding of their responsibilities.

People benefitted from safe recruitment and induction which reflected positive outcomes for people experiencing care.

How well is our care and support planned?

4 - Good

We evaluated this key question as good, where strengths impacted positively on outcomes for people and outweighed areas for improvement.

Support plans were well written, person centred and contained informative detailed information about the person. The plans were easy to follow and gave a good background on the person, their life, medical history and who and what was important to them. The plans were regularly updated and reviewed. This demonstrated there was a sustained approach to ensuring support plans had relevant information to deliver the right care and support for that person. The support plans are on an electronic system which allows management to have a good overview and highlights when support plans are needed to be reviewed. This ensures the most relevant and up to date information is available.

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

To ensure that people spend their time in a meaningful way and live in an environment which is stimulating, leaders should review the capacity for staff engagement and staff led activity so that these are more meaningful and equitable.

This is to ensure care and support is consistent with Health and Social Care Standards (HSCS) which state, 'I can maintain and develop my interests, activities and what matters to me in the way I like.' (HSCS 2.22)

This area for improvement was made on 23 August 2023.

Action taken since then

An activity coordinator and staff provided a range of events and activities for people. These included group activities, one-to-ones and outings. Improvement has been made to the activities available and the manager had a good overview of the activities to ensure no one is excluded.

This area for improvement has been met.

Previous area for improvement 2

Personal plans should accurately reflect care provided. Personal plans should be fully audited to ensure all the information held within them can be cross referenced as being accurate. Daily records of care should be improved to reflect the quality of care given, this includes activity records and one to one support.

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

'I experience high quality care and support because people have the necessary information and resources.' (HSCS 4.27)

This area for improvement was made on 20 June 2022.

Action taken since then

Care plans were well written, person centred and contained very informative detailed information about the person. The plans were regularly updated and reviewed. This demonstrated there was a sustained approach to ensuring support plans held relevant information to deliver the right care and support for that person.

This area for improvement has been met

Previous area for improvement 3

Any member of staff who undertakes laundry or cleaning duties should be confident in adhering to best practice guidance, as reflected in the National Infection Prevention and Control manual and Antimicrobial Resistance and Healthcare Associated Infection (ARHAI) safe management of linen. The management team should have an overview of this to ensure best practice is adhered to.

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

'My environment is secure and safe' (HSCS 5.17) and 'I experience high quality care and support because people have the necessary information and resources.' (HSCS 4.27)

This area for improvement was made on 20 June 2022.

Action taken since then

All staff complete an infection prevention and control module. The rota highlights coverage of the laundry and management carry out a robust audit regarding the laundry.

This area for improvement has been met.

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
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our staff team?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good
How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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