

Randolph Hill Nursing Home Care Home Service

Perth Road
Dunblane
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Type of inspection:
Unannounced

Completed on:
22 September 2022

Service provided by:
Randolph Hill Nursing Homes
(Scotland) Ltd

Service provider number:
SP2003002451

Service no:
CS2003011601

About the service

Randolph Hill is a care home for 60 older people and was registered with the Care Inspectorate 1 April 2011. The service is provided by Randolph Hill Nursing Homes (Scotland) Ltd who have other care homes in Scotland.

There are enclosed garden grounds and car parking is available at the front and side of the home. The home has two floors with stair and lift access. Each floor has three units. There is a lounge and dining areas in each unit, with two units sharing an L shaped lounge on the ground floor. There are various small sitting rooms available to people living in the home. The home has a hairdressing room for people to use.

About the inspection

This was an unannounced inspection which took place on 21 September 2022 from 09:20 until 18:10pm and on 22 September from 09:10 until 13:15. The inspection was carried out by two inspectors from the Care Inspectorate. An inspection volunteer was involved in the inspection. An inspection volunteer is a member of the public who volunteers to work alongside the inspectors. Inspection volunteers have a unique experience of either being a service user themselves or being a carer for someone who has used services. The inspection volunteer role is to speak with the families of people using the service being inspected and gathering their views.

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 20 people using the service and [number] of their family
- spoke with staff and management
- observed practice and daily life
- reviewed documents
- obtained feedback from visiting professionals.

Key messages

- The staff team knew residents very well.
- The management team were embracing 'Open with Care' guidance.
- People's health needs were escalated to other health professionals when needed.
- The staff team worked hard to ensure the care home was kept extremely clean.
- Communication was very good with families and friends.

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?	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?

5 - Very Good

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

Staff demonstrated the principles of the Health and Social Care Standards in their day-to-day practice, which promoted a culture of respect. There were lots of warm and friendly interactions between staff, residents and visitors. One person told us "The staff are all very good, there's not one that isn't". Whilst a relative said "They have friendly and helpful staff".

People benefited from there being a dedicated activity team who had arranged many in-house guests, including the local church, entertainer and pet therapy. They also supported people on weekly trips out and about. Activity staff worked weekends and some evenings to plan and deliver a varied weekly activity programme.

We received very good feedback about the quality and choice of meals and people who needed a specialist diet were catered for. Some aspects of the dining experience could be improved which we discussed with management and by the second day they had started to improve this. Some aspects of nutrition and hydration could be improved and we found the manager to be very proactive in considering how to address these (see area for improvement 1).

People were very well supported to maintain contact with their family and friends, as the home were working in line with Scottish Government's 'Open with Care' guidance. One person told us "I pop in most days to see my relative".

People benefited from regular access to relevant professionals to support their health and wellbeing. Staff had good links with local health professionals and relatives told us that they felt their loved ones' health needs were always met. One resident told us "I like it here, there's nothing that could be getting done differently", whilst a relative told us "It's the Gleneagles of care homes".

We found that infection prevention and control procedures helped to protect people from infection. The general environment was clean, tidy and free from any offensive odours. Cleaning schedules were in place to ensure that all areas of the care home were included in the domestic staffs' routine, which ensured that no areas were missed out. People could be assured that staff were very knowledgeable in their job roles. One person told us that "My room is always kept clean by staff".

Areas for improvement

1. To support people with their nutrition and hydration. The service should, at a minimum:
 - a) Ensure that those identified as requiring their fluid intake monitored are overseen by senior staff to ensure that charts and outcomes are meaningful.
 - b) Ensure that all staff are aware of the arrangements each day for ensuring people are offered a drink and snack between meals.
 - c) Ensure that personal plans clearly record the agreed level for food and drink and the rationale for anyone

on a texture modified diet.

This ensures care and support is consistent with the Health and Social Care Standards, which state: "My meals and snacks meet my cultural and dietary needs, beliefs and preferences." (HSCS 1.37)

How good is our leadership?

5 - Very Good

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

The manager was committed to ensuring people were well cared for. They were well supported by a very experienced staff team. Staff and management demonstrated that they had the skills, capacity and systems in place to identify risks and drive improvement. One relative told us "The manager is very efficient".

People could be assured that there were systems in place to monitor standards of care within Randolph Hill. We found that this included audits for key areas, including, nutrition and falls. The benefit of this was that any actions required were identified and worked through to make improvements.

As a result of the service responding to the pandemic, some aspects of their usual quality assurance had understandably been suspended. However, the management team were well on their way to getting these back up and running and had a clear action plan in place to achieve this.

On the first day of the inspection some staff training was taking place in a ground floor lounge which restricted usage for the residents. We asked the provider to review this and look at alternatives, which they agreed.

Feedback from staff indicated that management were very approachable and supportive and we heard that there was very good team working and that staff were very supportive to each other.

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 reassure people that the staff manage, administer and review medicines that people need to take to support them to stay well, some improvements would be important to consider.

These could include, but not be limited to:

- i) making sure reviews of medication that people receive covertly are undertaken when needed or at least six monthly;
- ii) having information about what to try before using as required medicines and evaluating the effect

of medication taken as required, for example for anxiety or pain;

iii) recording the administration of prescribed creams in accordance with the application instructions to ensure skin remains healthy;

iv) planning timely evaluation of new or changed doses of medication that also considers any possible side effects, for example increases in antidepressants and if they improve mood alongside a check of blood pressure for postural hypotension; and

v) make sure everyone who might wish to continue taking their medicine themselves is assessed and the right support put in place to help them self medicate.

This ensures care and support is consistent with the Health and Social Care Standards, which state: "If I need help with medication, I am able to have as much control as possible". (HSCS 2.23)

This area for improvement was made on 26 June 2019.

Action taken since then

People could be assured that they received their medication as prescribed and that management monitored this.

This area for improvement had been met.

Previous area for improvement 2

To make sure people's assessments and planned care reflects their strengths and things that are important to them they should be involved and central to planning and evaluating care and support. People should feel like the plan belongs to them, have easy access to the plan and determine who else can access and write in it. They should influence when and how often assessments and plans are reviewed and changed. The plans should focus on needs and wishes and be concise and easy to read.

The plans should include, but not be limited to supporting people to:

a) maintain hobbies or develop new ones which may involve positive risk taking;

b) be as independent as possible which will involve risk enablement; and

c) highlight what is important to them and understand care processes that staff feel must be included in their plan, like a need to monitor weight or skin integrity.

This ensures care and support is consistent with the Health and Social Care Standards, which state: "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 26 June 2019.

Action taken since then

People had a personalised plan in place that included relevant risk assessments. Residents and/or their families were included in devising these and six monthly reviews took place to discuss them.

This area for improvement had 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
1.4 People experience meaningful contact that meets their outcomes, needs and wishes	5 - Very Good
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	5 - Very Good
How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good

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