

Short Breaks, 32/34 Pickaquoy Loan Care Home Service

St. Colm's Complex
Pickaquoy Road
Kirkwall
KW15 1RP

Telephone: 01856 871 431

Type of inspection:
Unannounced

Completed on:
25 April 2024

Service provided by:
Orkney Islands Council

Service provider number:
SP2003001951

Service no:
CS2004060192

About the service

Short Breaks is based in a purpose-built short breaks and respite care facility in Pickaquoy Road, Kirkwall. It is registered to provide respite care to a maximum of four adults. The service is currently offering care and support to individuals who were awaiting transition to alternative and permanent care arrangements. The service had updated their aims and objectives to reflect this. Whilst this was responsive to meet individual needs, it had resulted in reduced capacity for respite stays at the service.

The facility aims to provide "a homely and welcoming atmosphere where people can feel comfortable and relaxed". The property comprises of four single en-suite bedrooms, a lounge, a large kitchen and separate laundry facilities. One bedroom is used by staff. A self-contained flat, comprising of an open plan living/ kitchen area, and a single ensuite bedroom is incorporated within the facility and is designed to promote independent living opportunities.

About the inspection

This was an unannounced inspection which took place on 17 April 2024 between 09:30 and 16:30 and 18 April 2024 between 09:30 and 15:00. The inspection continued remotely on 22 April 2024 and 23 April 2024. Feedback was provided to the service management team on 25 April 2024. The inspection was carried out by two inspectors 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 two people using the service and two of their family members
- spoke with eight staff and management
- spoke with one visiting professional
- received electronic feedback from two visiting professionals, one family member and two members of staff
- observed practice and daily life
- reviewed documents

Key messages

- The staff team were committed and knew people well.
- People had access to a good range of activities and local community links.
- People accessing the service were supported to maintain relationships with those important to them.
- There were plans to improve elements of the environment for those living at the service.
- The service had changed the way in which it was working to meet the needs of people.

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?	4 - Good
How good is our leadership?	4 - Good
How good is our staff team?	4 - Good
How good is our setting?	4 - 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?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant, positive impact on people's experiences.

In response to changing needs of individuals within the local community, at the time of the inspection the service was supporting individuals who were awaiting alternative and long term support arrangements. This has reduced the availability of the short breaks for other individuals. We saw evidence of routine and regular contact with external professionals to ascertain when new care arrangements would be in place.

Staff were knowledgeable about people's care and support needs. Staff responded to changes in physical and mental wellbeing for those supported by the service. There were good working relationships with external professionals. This helped to keep people well. We received positive feedback from external professionals. One person told us "The staff provide personalised support which meets people's health and social needs". Overall, the service had the required legal documentation in place. We asked the service to review one piece of documentation which contained conflicting information.

People benefited from access to a varied and well-balanced diet. Menu planning was complete on an individual basis with the individual and their preferences at the centre of the process. This meant that individuals preferences and dietary needs were catered for.

Medication was managed well, and individuals were supported to take the right medication at the right time. A review of the medication recording records was underway by the provider. This would allow a consistent approach to the recording of medication within the service. There was a need for more oversight of as required medication as some of these items required to be reviewed. This would ensure that medication records were reflective of individuals current health needs.

Meaningful connection and activity are important for people's health and wellbeing. People were supported to maintain relationships with those important to them. One person told us "I can visit any time at all, if he (relative) isn't out". The activity programme was individualised and included a range of activities important to the person. This included attending day opportunities, weekly community clubs, outings, arts and crafts and music activities. People enjoyed these and attendance helped keep people connected.

How good is our leadership?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant, positive impact on people's experiences.

Since the last inspection there had been some changes to the management arrangements within the service. The registered manager was supporting other services. The provider was advertising for a new registered manager. Named senior staff were fulfilling this role in the short term. The management team were working well together. One person told us "I know who to contact and have confidence that I will have a response".

People benefited from a culture of continuous improvement. A range of routine quality checks had been completed, including medication, health and safety, infection control, and documentation. Feedback was shared with the staff team and appropriate action plans developed where needed. Action plans were revisited to ensure that corrective actions had been taken. Daily and weekly checks of the environment could be formalised to demonstrate oversight in this area. Feedback was sought from those who use the service and their relatives through consultation meetings. This helped to shape service delivery. A previous area for improvement relating to quality assurance was met.

A service improvement plan informed by quality audits and feedback from others was in place. This was used as a live document which allowed the management team to have an overview of areas for development and what had been achieved. The service improvement plan would benefit from being condensed to ensure vital information was not missed. This would also increase its accessibility to those supported by the service.

An accident and incident overview document was in place. We suggested that old data could be moved to an alternative document. This would ensure that information was current. A lesson learned approach helped ensure learning was taken from unplanned incidents. Staff debriefing following adverse events demonstrated that staff had the opportunity to reflect on unplanned events. We highlighted guidance in respect of notifications to the Care Inspectorate. This would ensure that relevant notifications are made.

How good is our staff team?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant, positive impact on people's experiences.

Staffing arrangements were determined by regular assessment of people's care needs and expressed wishes. We saw that staffing was increased when required to support activities and accessing the local community. There were enough staff to meet the needs of individuals. The service benefitted from a small and stable staff team. When the service utilised internal relief staff, they were afforded the same opportunities for shadowing and training as the permanent staff. This meant that individuals were being supported by staff that knew their needs.

People should have confidence that the people who support them are trained, competent and skilled. The service had recently commenced a training overview. Training was based on a training needs analysis with the management team engaging with the staff to identify the most relevant training to support individuals. This meant that training available was reflective of the needs of people. A blended approach had been used with staff training. The staff team engaged with the training provided.

Feedback from staff indicated that the staff team felt that they worked well together and offered each other support. This allowed for informal peer support.

People could be confident that new staff had been recruited safely and the recruitment process reflected the principles of "Safer Recruitment, Through Better Recruitment". We saw that relatives of those supported were encouraged to be involved in the recruitment process where possible.

How good is our setting?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant, positive impact on people's experiences.

The service is located within a residential area in Kirkwall. Each individual who routinely accessed the service had their own box of personal belongings which the staff used to personalise their bedroom prior to their stay. This helped individuals settle into their stay. Those who were living at the service awaiting transition to alternative arrangement had been supported to personalise and maintain their bedroom.

We discussed with the management team how the environment within the "flat" element of the service could be improved. We were reassured that this had been identified. Plans were being considered to enhance the environment in accordance with the needs of the person living there.

The service benefited from an accessible large garden area to the rear. The garden was being maintained. The service were fundraising to make the garden area more inviting for those accessing the service.

Records confirmed that equipment checks were being completed routinely. This included external safety checks and also weekly checks by the staff team. We asked the service to formalise these checks to demonstrate oversight in this area.

How well is our care and support planned?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant, positive impact on people's experiences.

Personal plans helped to direct staff about peoples support needs and their choices and wishes. Personal plans were written in a person-centred way and involved those accessing the service and those closest to them. This had resulted in clear personal plans which included individuals wishes and preferences. We suggested that service review some of the older documentation located in the personal plan folders. This would ensure that information is easily accessible by the staff team.

Personal plans were informed by a range of well completed risk assessments. Guidance from external professionals informed personal plans. One external professional commented "I have confidence that my recommendations are taken forward by the staff to support individuals".

The service kept clear and accurate records on care delivery and what this meant for individuals. These were used to share information with external professionals and evaluate care arrangements. This helped ensure that people were receiving the right care for them.

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 improve people's experiences, the manager should improve how they implement quality assurance processes to support continuous improvements. These processes should support and influence the findings in the service's improvement and development plan.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) 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 23 June 2022.

Action taken since then

The management team had improved the quality assurance processes. The outcome of quality assurance resulted in a comprehensive service improvement and development plan.

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?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good
How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good
How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good
How good is our setting?	4 - Good
4.1 People experience high quality facilities	4 - 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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