

Manor Grange Care Home Care Home Service

31 Pinkhill
Edinburgh
EH12 7FB

Telephone: 0131 334 6462

Type of inspection: Unannounced
Inspection completed on: 27 March 2018

Service provided by:
Manor Grange Care Home LLP

Service provider number:
SP2016012760

Care service number:
CS2016349056

About the service

Manor Grange is a care home for older adults/people and was registered with the Care Inspectorate in October 2016. It is registered for 83 places and has nurses and carers who support and care for people, (referred to as residents in this report). The provider of the service is also associated with other care homes across Scotland.

Manor Grange is in Edinburgh, at the bottom of Pinkhill, near to the zoo and overlooking the golf course. The accommodation includes 83 ensuite rooms of three sizes, some which are large enough to accommodate double beds and seven with their own enclosed garden area. There are four units; Mull, Iona, Skye and Arran, over two floors which have lift access. Additional amenities include a cinema, private dining room, library, central area with café/bar, hairdressing and two communal lounges with dining areas. There are secure landscaped gardens, some still being established with an external covered seating area on ground floor.

The services aims and objectives include:

".....that Manor Grange feels like home and offers home comforts.....is more than meeting care needs....the wellbeing, happiness, and comfort of our residents is our first priority" .

What people told us

We spoke to 43 residents, 6 relatives, 1 visiting professional and 20 staff working in the home. We received responses to questionnaires from eight relatives and two staff.

Residents and relatives commented on a range of things in the home, from facilities to the staff caring and supporting them. Overall they felt staff were kind, caring and accommodating and the facilities in the home were very good. Comments included:

"Its outstanding service and care - they remember everything about everyone, from the chef (who makes excellent egg benedict) to the care staff who come quickly when you need them".

"The days are filled with things to do, I'm kept busy. It's warm and cosy and you can control the heat in your room - it's really lovely here".

"They are patient, caring and I trust them with the care of my wife".

"the signage could improve.....especially how to get in".

"It is a very big home, but once you get in its not as bad as you think. I'm very dependent on help.....my overall experience is good".

Other comments are highlighted in the report along with comments from staff that we spoke to.

Self assessment

We are not asking services to submit a self-assessment for this inspection year. During the inspection we discussed improvement plans. There was a development plan already in place. Continuing to involve residents and relatives in determining improvements would be a positive way to take forward future plans.

This inspection and the new health and social care standards should also inform the plan. The new standards can be accessed at <http://www.gov.scot/Publications/2017/06/1327/downloads>

From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of environment	5 - Very Good
Quality of staffing	5 - Very Good
Quality of management and leadership	5 - Very Good

Quality of care and support

Findings from the inspection

The quality of care and support was good. We saw warmth, compassion and fondness between staff and residents and their families. Residents and relatives told us that staff were very responsive to their needs and wishes. Many residents praised the staff, naming some who were particularly kind and caring;

"If you're not content here you wouldn't be anywhere, they make such an effort". (resident)

"We have built up relationships with the staff here....there is plenty of hugging and that's so important to us and to my mum". (relative)

Some felt there were one or two staff that could be a bit rushed or were less caring;

"carers are mainly pleasant and polite, you get the odd one....., but you can expect that because, well, it's a stressful job isn't it". (resident)

Staff were keen and motivated to develop and learn more, some recognising there were areas that they would like to improve;

"Some residents are quiet and reserved.....and we tend to focus on others"(referring to other residents who are more able to chat). (staff)

During observation we saw that a number of residents who were quiet and frail sometimes missed out on opportunities for positive interactions from staff. We felt that one focus for learning and development should be around dementia care so that staff could enhance how they cared and supported people. Promoting excellence in dementia care is a free resource for staff, available at <http://www.sssc.uk.com/workforce-development/supporting-your-development/promoting-excellence-in-dementia-care>.

The lead nurses and manager were very supportive, offering training opportunities for staff. We felt the development around dementia care was something they took seriously and welcomed their commitment to improving this.

The roles and responsibilities of staff were evolving and this offered opportunity to consider much more person centred care. For example, while the care plans were organised and generally helped staff know how best to care and support people, they were lengthy and kept in the office. Having care plans with the resident would mean they and if appropriate, their family, could "own" the plan. It could be shared with relevant people and care staff could read and write in them. The drug rounds were undertaken mainly by nurses and were reflective of a hospital setting. Over time we felt nurses could support carers to develop their roles to support people to take medication that could be kept securely in their room. Without drug rounds nurses' time could be used to undertake medication reviews, health check-ups and anticipatory care planning for residents. **(See Recommendation 1).**

The manager welcomed suggestions to improve the quality of care and support and had already planned developments in some of the areas we had suggested.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. In line with the services planned developments and to make care and support even more personalised we would recommend that roles and responsibilities of staff are developed. The development of roles should focus around the resident, considering that their room is their home; therefore care planning and medication administration could be undertaken in ways that are more person focused and give residents more control over their own care and support.

The meaningful and measurable work available at the personal outcomes collaboration could help develop planning and recording systems that reflect what is important to people Personal Outcomes Collaboration.

National Care Standards, Care Homes for Older People Standard 6, Support Arrangements.

Grade: 4 - good

Quality of environment

Findings from the inspection

Manor Grange was clean and well maintained. The home offered facilities that included a cinema, dining room for small private meals/functions, large library and an open foyer with café/bar facilities. This area extended outside to a covered seated area. Although the weather was cold some residents were still enjoying being outside, wrapped up and under cover from the snow.

The home is large and one resident told us;

"Its very big and frightening at first, but actually, when you move in its more homely than you think"

Many residents had personalised their rooms. Some had their own pieces of furniture making the room very homely. Some rooms had accessible enclosed gardens making it possible to extend the personalisation outside. One resident had a small table with chairs and a bird table in their garden. Rooms on the ground floor without their own garden still had access to an outside area and many of the rooms overlooked the golf course. Everyone spoke positively about their rooms;

"I have a large window/door in my bedroom and I can sit and watch everyone going about their business".
(resident)

The home had limited locked areas allowing residents to roam around freely. This included safe outside areas. There were plans to develop the gardens and a greenhouse had been ordered. The manager felt some residents would like to get involved with the outdoors and we would endorse this because keeping active is important to everyone's wellbeing. Care about physical activity is a project being promoted by the Care Inspectorate. There are ideas and suggestions about how care services can increase physical activity, see the link:
<http://hub.careinspectorate.com/improvement/care-about-physical-activity/>

We felt the home could improve signage, and the manager was considering this. Outside the signs were at a low level making it easier for people using wheelchairs, however, other people had difficulty finding the open door button. A resident commented on this;

"The staff member sits to the right of the front door so cannot see people trying to get in, I can see them trying.....they would benefit from a camera at the door to help".

One resident felt somewhere quiet to sit would be an advantage because the large dining and seated areas were noisy. While there are other rooms, like the library, we felt they were not used as well as they could be. The café and bar area were not operating while we were there, we felt opening times and volunteers and/or residents getting involved in running the café would be an improvement. The manager agreed to consider how to support residents to use the facilities offered more effectively. This might also help frailer quieter residents. They could have activities more focused on their needs in a different room to where they usually sit in the larger and busier lounge.

The development plan for the home was committed to improving connections with the local community and ways to support people to go out and enjoy things they used to do. We spoke about different ways to support people, including help to access additional support for outings. Domestic staff had training to do their work well and residents told us the staff worked hard to keep everywhere clean. One resident said;

"It really is lovely here, clean, fresh and a nice place to live".

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 5 - very good

Quality of staffing

Findings from the inspection

We saw staff being responsive to residents' needs and able to attend to them quickly when they asked for help. Staff told us they had time to do their job well and had support to undertake training and development. Residents felt staff were doing a very good job, one said;

"I'm very dependent on help.....they make such an effort for me and I'd say(when chatting about grading)....that I'd stretch their grade to a five".

Care staff had relevant registrations with the Nursing Midwifery Council and the Scottish Social Services Council and staff were demonstrating the professional codes of conduct. Recruitment practices meant staff were checked carefully before employment. This means residents could feel reassured about the professionalism of staff.

Kitchen staff and the head chef were aware of residents' likes and dietary needs. We saw minutes of meetings that involved residents in menu choices. There were pictorial menus to help people choose and presentation of food was very good. Everyone we spoke to felt the kitchen staff did a good job:

"The food is marvellous, they can get you just about anything you could want".

Residents also felt there was lots to do, the activity coordinators supported people in groups, individually and on outings and care staff had time to chat with residents.

"There is plenty to do, my days are filled with things to do".

Some areas to develop relate to those mentioned in the quality of care and support. We also felt that developing the named nurse/key worker role would help residents and staff to get to know each other more. Sensitive areas of care, like anticipatory care planning and supporting residents to make choices that include positive risk taking can be done when a key worker system is working well.

Residents, relatives and staff told us they felt valued and we saw that this meant there was a welcoming and warm atmosphere in the home, everyone was working together to make sure there was a positive experience for residents.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 5 - very good

Quality of management and leadership

Findings from the inspection

The quality of management and leadership was very good. This ranged from quality systems in place that included audit and action planning, to meetings and feedback from residents so that improvements centred on what really mattered. All this was collected into a development plan for the service.

The development plan could include more detailed areas like, for example, exactly what plans there were for developing the garden and which residents might like to be involved. There was pictorial participation to help encourage everyone's input, but we also asked the manager to think about ways to engage residents who were frail. He explained plans to use an approach that tells a story about a resident's experience. Story based approaches are good ways to support staff to think about residents' experiences and what they might do to improve them, more information about this approach is available at the Personal Outcomes Collaboration website (conversations section).

Some residents had ideas about how things could improve but were unsure how to raise them. (These mainly related to the environment and have been mentioned already). For example, one resident said;

"I don't know that it is my job to tell them how to improve things?"

The home had a participation strategy that demonstrated a desire to involve everyone in improvements. The majority of residents and relatives felt able to raise ideas and concerns if they had any. One relative commented;

".....the home does seem to take feedback on board which is encouraging".

Staff and residents felt enabled to raise and make suggestions. Staff said;

"Management is very visible, approachable and part of the team".

Some other quotes from residents capture the quality of management and leadership in the home and the experiences of people;

"Their kindness care and patiencehas been exemplary". (relative)

"Overall we could not have asked for more from Manor Grange". (relative)

"I've no complaints at all with this place.....in fact I've got my name down for a room in the future!" (relative)

"well, how can I say; the staff are out of this world, they really are wonderful". (resident)

By using this inspection report and the new Health and Social Care Standards we were confident that the manager and staff would continue to seek ways to improve experiences for people living in Manor Grange.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 5 - very good

What the service has done to meet any requirements we made at or since the last inspection

Previous requirements

There are no outstanding requirements.

What the service has done to meet any recommendations we made at or since the last inspection

Previous recommendations

Recommendation 1

The provider should ensure that all actions identified in the care homes medication audit are checked by management and signed off as being resolved.

This recommendation was made on 18 March 2017.

Action taken on previous recommendation

Medication audits were reviewed and signed off as being resolved.

Recommendation 2

The provider should ensure a consistent, accurate and complete audit trail for all medicines at all times.

This recommendation was made on 18 March 2017.

Action taken on previous recommendation

There was a consistent, accurate and complete audit trail for all medicines we looked at.

Recommendation 3

The provider should ensure that staff responsible for giving medication follow the correct instructions for each medicine.

This recommendation was made on 18 March 2017.

Action taken on previous recommendation

We spoke to staff, looked at medication administration records and observed medication administration and saw administration instructions were being followed.

Recommendation 4

The provider should ensure a system such that medicines are available when needed by the patient.

This recommendation was made on 18 March 2017.

Action taken on previous recommendation

We saw that systems were in place to make sure medicines were available to residents.

Recommendation 5

The provider should ensure that residents' medicines are stored securely and in line with good practice recommendations

This recommendation was made on 18 March 2017.

Action taken on previous recommendation

We saw that residents' medicines were stored securely and in line with good practice recommendations.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

This service does not have any prior inspection history or grades.

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Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

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