

# Marchglen Care Centre Care Home Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
16 November 2022

**Service provided by:**  
Caring Homes Healthcare Group  
Limited

**Service provider number:**  
SP2013012090

**Service no:**  
CS2013318121

## About the service

Marchglen Care Centre is provided by Caring Homes Healthcare Group Limited. The care home is registered to provide care for 37 people. The service provides support for adults who have learning disabilities and complex needs; learning disabilities and/or neurological and physical disabilities; physical disabilities and complex needs, or physical disabilities. The service registered with the Care Inspectorate on 30 August 2013.

The purpose built home is located in a small village a short distance from Alloa, Clackmannanshire. The home is separated into four units arranged over one floor. Three of the units were open at the time of the inspection. All the rooms have en-suite shower facilities and there are accessible garden areas. On the day of the inspection there were 26 people living in the care home.

## About the inspection

This was an unannounced inspection which took place on 15 and 16 November 2022. The inspection was carried out by three inspectors from the Care Inspectorate.

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

In making our evaluations of the service we:

- spoke informally with people living in the home
- received feedback from relatives of people who live in the home
- received feedback from a variety of healthcare professionals involved in the home
- spoke with the manager and staff from a variety of roles in the home
- observed practice and daily life
- checked infection prevention and control (IPC) procedures
- sampled care plans and a variety of other documents and recordings.

## Key messages

- The quality of care and support had improved since our last inspection.
- Staffing levels had improved.
- There were enough staff to safely meet people's support needs.
- People were leading active lives.
- Visits to the home were taking place in line with Scottish Government 'Open with Care' guidance.
- The environment was well maintained.

## 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 overall evaluation of good for this key question as there were strengths which clearly outweighed areas for improvement. The strengths had a significant positive impact on people's experiences and outcomes. However, improvements were required to maximise wellbeing and ensure that people consistently had experiences and outcomes which were as positive as possible.

Staffing levels had improved in the home. There were enough staff to safely meet people's individual needs and wishes. People experienced support at a relaxed and unhurried pace. People who needed one-to-one support received this quickly. This meant people experienced dignified care at the right time.

People's health benefitted from having access to a multi-disciplinary team of healthcare professionals. Feedback from visiting professionals was generally positive. Professionals commented that staff in the home communicated well and sought advice when necessary. Others stated that staff were receptive to feedback and took corrective action when asked to. A family member told us how well staff had supported their relative during a period of ill-health.

There were some concerns raised both by leaders in the home and visiting professionals around a person's specific support needs. We encouraged both parties to continue to work in partnership to overcome these issues, to secure the best possible outcomes for everyone involved.

Medication practices had improved in the home. Medication administration records we checked were generally well completed. The number of medication errors had reduced significantly, which had improved health outcomes for people. We discussed the importance of recording the outcome of 'as required' medications to establish whether the medication was effective. We were confident leaders would act upon this immediately.

Food choices had improved significantly. People were offered a variety of meal options and alternatives were always made available if people did not want the choices on offer. Staff actively encouraged people to make healthy choices and fruit was promoted throughout the day. As a result of this, people's wellbeing was enhanced.

People's right to a family life was promoted. Visits were taking place in line with current Scottish Government 'Open with Care' guidance. Some people were also benefitting from regular trips to their family home. We received feedback from several family members that staff were friendly, respectful, and supportive. One family member stated "we are able to come and go as much as we like. Staff are very accommodating." This ensured family relationships were maintained.

The service had systems and resources in place to support infection prevention and control (IPC). There was an ample supply of personal protective equipment (PPE) in the home. We gave advice on the availability of hand sanitiser. The home benefitted from having domestic staff. The environment was generally clean and tidy, although there were some areas of wear and tear that made effective cleaning more challenging.

Staff had received training and guidance in infection prevention and control. However, new staff did not always complete this immediately upon taking up post. This had the potential to result in best practice not always being followed. We discussed this with leaders in the home and were reassured they would take action to rectify this issue.

### How good is our leadership?

4 - Good

We made an evaluation of good for this key question, as there were strengths that clearly outweighed areas for improvement. However, improvements were needed to ensure that people had outcomes that were as positive as possible.

Staff we spoke with felt the management team had made significant improvements in the home since taking up post. Family members we spoke with felt the service had improved, with comments including "there have been very positive changes, most likely due to new management."

There were a number of quality assurance activities taking place. These were carried out by leaders and staff in the home, as well as external managers. There was an overall service improvement plan that brought together quality assurance and self-evaluation activities to drive improvements and shape the future direction of the home.

The quality assurance systems were effective but could be improved with further managerial oversight. We were told that quality assurance processes were currently being enhanced by the provider. We will check progress in this area at our next inspection.

Complaints management could also be improved to demonstrate that complaints had been fully investigated and followed through to a conclusion, with clearer evidence of communication between the relevant parties.

### How good is our staff team?

4 - Good

We made an evaluation of good for this key question, as there were strengths that clearly outweighed areas for improvement.

We recognise the current staffing issues in social care nationally. Marchglen Care Centre had successfully recruited a number of new staff in recent months. During our inspection there were enough staff working to safely meet people's needs and wishes. Rotas we sampled demonstrated that the home maintained safe staffing levels although there was at times some fluctuation in staffing levels. This had the potential to impact on the consistency of care people experienced. Recruitment processes for new staff were thorough. Staff went through an interview process.

Questions asked in interviews demonstrated that importance was placed on people demonstrating the right values to work in social care. At least two references were sought, along with a Protection of Vulnerable Groups (PVG) check before people took up post. These measures meant people could be confident staff were recruited in a safe way.

New staff undertook an induction programme which was a mixture of face to face and online training. They 'shadowed' existing staff before working with people on a one-to-one basis. New staff also had a designated 'buddy' they worked alongside during their 12 week induction period. This helped ensure staff were confident and skilled to deliver safe care. New staff we spoke with felt well supported by their managers and colleagues.

## How good is our setting?

4 - Good

We made an evaluation of good for this key question, as there were strengths that clearly outweighed areas for improvement.

The home offered people a variety of private and communal areas they could choose to use when they wanted. The size of the main home meant people had plenty of space if they wanted a quiet area. Bedrooms were a good size and people could decorate them to their personal tastes.

The home was maintained to a good standard and there had been investment in the home since our last inspection. Although some areas of the home would benefit from redecoration, we were confident this would happen. The service employed a maintenance person who ensured safety checks were completed within the correct timescales and any repairs were carried out quickly. Maintenance records were kept to a high standard. This ensured that people lived in an environment that was secure and safe.

## How well is our care and support planned?

4 - Good

We made an evaluation of good for this key question, as there were strengths that clearly outweighed areas for improvement.

Leaders in the home had made improvements to personal plans. They were written in a person-centred manner and contained a good level of detail to inform the care and support people received. This helped ensure people's wishes and choices were met.

Reviews had been taking place which ensured people, along with their families, were able to give their views on how well the service was meeting their needs and wishes.

There were some isolated occasions where information on some specific support needs would benefit from clearer guidance for staff. The monitoring of accidents and incidents in the home could also be enhanced. Documents did not always contain the right amount of detail or show actions taken to prevent a recurrence.

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

### Requirements

#### Requirement 1

The provider must ensure that people experiencing care receive compassionate and person centred care and support that is right for them and which meets their needs.

To do this, the provider must, as a minimum, ensure:

- a) A full audit requires to be undertaken to determine the correct numbers and skill mix of staff to ensure good outcomes for people living in the service.
- b) Staff require to be skilled, knowledgeable and competent and their skills aligned to support people's individual needs in the service.
- c) Staff have the time to meaningfully engage and interact with people which supports good emotional wellbeing for people.

To be completed by: 12 October 2022.

This is to ensure care and support is consistent with Health and Social Care Standard 3.15: My needs are met by the right number of people.

This is in order to comply with: Regulation 15(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

**This requirement was made on 16 September 2022.**

#### Action taken on previous requirement

Managers in the home had undertaken a review of the staffing levels and skill mix of staff working in each unit.

The service had been successful in recruiting staff into the vacant posts and there was minimal agency staff working in the service. Staff we spoke with stated this was making a difference and people experiencing care were now being supported by a more consistent staff team who knew their care and support needs.

People experiencing care gave very positive comments with regard to the compassion staff showed them and the care and support they were receiving.

We observed warm engagement between staff and people experiencing care.

Newly qualified nurses working in the service were being supported by senior staff in the home and external support was available from the complex care team.

The manager oversaw staff training through the electronic learning system. This helped ensure staff kept up to date with mandatory training and other training appropriate to their role.

There were still variances in numbers of staff working during the day. Leaders had recognised this and were currently trying to address it.

We were confident new staff were being supported well during their induction period as per the organisation's own policy.

**Met - within timescales**

## 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 people experiencing care are supported by care staff who are skilled, knowledgeable and safe in their practice, the provider should be ensuring agency staff working in the service have received the appropriate training relevant to their role and have been assessed as competent in their practice.

This is to ensure care and support is consistent with Health and Social Care Standard 3.14: I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes.

**This area for improvement was made on 16 September 2022.**

#### Action taken since then

The home had successfully recruited permanent staff and as a result, less agency staff were being used.

The provider had changed the agency it used. Those agency staff now working in the service had the appropriate skills and knowledge. This had improved the quality of care and support people experienced.

This area for improvement had been met.

#### Previous area for improvement 2

People should have the confidence that people providing their care and support are able to understand their requests and be able to communicate effectively with them. The provider should ensure people working in the service speak and understand the English language and have effective communication skills which would ensure good outcomes for people experiencing care.

This is to ensure care and support is consistent with Health and Social Care Standard 4.19: I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.

**This area for improvement was made on 16 September 2022.**



**Action taken since then**

Staff we spoke with informed us that less agency staff were being used. We were told that those agency staff working in the service had good English language skills and were able to communicate effectively with staff and people experiencing care.

This area for improvement had been met.

**Complaints**

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

## 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 |
| 1.4 People experience meaningful contact that meets their outcomes, needs and wishes                         | 4 - Good |
| 1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure | 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 |
| 3.1 Staff have been recruited well   | 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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