

# Glenfairn House Nursing Home Care Home Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
30 April 2024

**Service provided by:**  
Glenfairn Limited

**Service provider number:**  
SP2003000269

**Service no:**  
CS2003001322

## About the service

Glenfairn House Nursing Home is registered to provide a care home service to 65 older people. The provider is Gate Healthcare Ltd which is part of Sanctuary Care Limited.

The service is located near to Ayr town centre and consists of a detached, stone property with a large modern extension to the side and rear.

All the accommodation is single bedrooms, many with en-suite facilities. There are a choice of lounges and dining areas for people to use. There is a large, well maintained garden area for residents and their families to enjoy.

## About the inspection

This was an unannounced inspection which took place 23 and 24 April 2024. 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 information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with 18 people using the service and five family members
- spoke with staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

**Key messages**

We saw warm and caring relationships between residents and the staff teams.

People's health and wellbeing was supported well.

We saw good teamwork between the staff teams.

There was a need to improve access to meaningful activities.

Communication between staff and families could be improved by introducing a key worker system.

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

Engagement between staff and the people they supported was kind and friendly. Staff were familiar with people's care needs which helped to support the choices and preferences of people living in the home.

It is important that people have opportunities to be involved in meaningful activity which helps enhance their wellbeing and supports good mental health. We saw that staff were busy delivering care and had few opportunities to engage people in meaningful activities. We saw that for many people engagement from staff tended to be task driven. There were long periods of time when there was no engagement from staff. This was particularly evident for those people living with dementia or were spending the day in their bedroom. This could make people feel lonely and isolated.

People told us that there was little to do and said that "it can be a long day".

The provider has plans to increase the activity team. However, in the meantime they should make arrangements to ensure that people have access to activities that are meaningful to them.

**See Area for Improvement 1.**

We spent time observing mealtimes, we saw that staff were aware of people's dietary needs and offered choices of food and drink. People commented positively about the quality of food served and the range of menu choices.

There were differences between the management of mealtimes in the two dining rooms. There was a need to improve leadership and deployment of staff in the lower ground dining room. This would help support people's health needs through maintaining good nutrition and hydration.

We made an early morning visit to the home and saw there were a few people up early, we were able to confirm that this was their choice. However, we saw that no one who was up early had been offered a drink or an early breakfast. This should be improved to support people's nutrition and hydration.

**See Area for Improvement 2.**

Nursing staff and team leaders were knowledgeable about who to call on for support and advice regarding people's health needs. External healthcare professionals were called promptly for advice and support when needed. We saw records detailing the outcomes of these visits. Advice and changes to treatment were reflected into plans of care to ensure people's healthcare needs were supported. Medication was being managed safely and effectively to support people's health needs.

Personal plans were up to date which helped to guide staff about the agreed care for the person and ensured a consistent approach. Risk assessments were up to date and reflected into plans of care. This helped to safeguard people from harm. There was a good overview of the management of clinical issues and how risks were being minimised. There were systems in place to ensure that clinical issues were monitored, and plans of care updated. This ensured good outcomes for people's healthcare.

## Areas for improvement

1. To support better outcomes for people linked to their choices and preferences, the service provider should enhance the range and access to meaningful activities throughout the home.

This should include but not be limited to developing links with the local community.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: 'I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities, every day, both indoors and outdoors'. (HSCS 1.25).

I can maintain and develop my interests, activities and what matters to me in the way that I like.' (HSCS 2.22).

2. To ensure that peoples nutrition and hydration needs are effectively supported the provider should do the following

- improve the leadership of staff teams at mealtimes;
- ensure staff are effectively deployed at mealtimes to support people eating in dining rooms and in their bedrooms; and
- ensure that people who get up early have access to breakfast.

This is to ensure care and support is consistent with the Health and Social Care Standards which state:

'If I need help with eating and drinking, this is carried out in a dignified way and my personal preferences are respected.' (HSCS 1.34).

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19).

## How good is our leadership?

**4 - Good**

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

The home had a new management team who were getting to know people and their families.

People's views about the service were being gathered through resident and relative meetings. The comments and suggestions from people were being used to inform the service development plans and the outcomes communicated with stakeholders.

We saw that complaints were managed in line with the providers policy and procedure. This assured that concerns were being responded to and the lessons learned were used to improve people's outcomes.

It is important that services have effective systems to assess and monitor the quality of the service provision. This helps drive service improvement which results in better outcomes for people living in the home.

There were a range of quality audits being completed to assess and monitor the quality of the service provision. The actions from these audits were used to inform the service improvement plan with actions assigned to individuals. There was an effective system in place to monitor completion of these actions which ensured that positive outcomes for people were supported.

There were systems in place to ensure that clinical issues were being monitored and actioned to support people's health needs. This could be further enhanced by introducing regular clinical meetings to ensure that staff were kept up to date with any changes in the management of people's health needs. **See area for Improvement 1.**

The keyworker system needs to be further developed and re-established in the home. This would support individuals and their families by providing stronger communication pathways.

**See Area for Improvement 2.**

## Areas for improvement

1. To enhance the management of healthcare needs the provider should introduce regular clinical meetings involving nurses and team leaders.

This is to ensure care and support is consistent with the Health and Social Care Standards which state:

'My care and support meets my needs and is right for me' (HSCS 1.19).

'I am protected from harm because people are alert and respond to signs of significant

deterioration in my health and wellbeing, that I may be unhappy or may be at risk of harm' (HSCS 3.21).

2. To improve connections and communication between people, their families and staff the provider should develop a keyworker system in the home. Staff assigned as keyworkers should have clear guidance regarding their role and responsibilities.

'I get the most out of life because the people and organisation who support and care for me have an enabling attitude and believe in my potential.' (HSCS 1.61).

'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.' (HSCS 3.14).

## How good is our staff team?

**4 - Good**

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

People we spoke with commented positively about the skills and kindness of staff. We saw that staff were working hard to ensure good standards of care for the people they support. There was effective teamwork across the different teams working in the home which supported good outcomes for people.

The service was using a dependency tool to inform staffing levels. This helped to ensure that there were sufficient staff day to day to meet peoples care needs. The management team had recently reviewed the

way that they use the dependency tool, this had resulted in a change in the skill mix of teams working in the separate units of the home. This will help improve leadership in the units and ensure that people will receive the care they need to support their needs.

Staff we spoke with told us that they felt supported by the management team and their colleagues. Staff had regular supervision sessions which gave them opportunities to discuss their learning and development needs and reflect on their practice.

To make further improvement the service should continue to develop 'champions' within the staff teams to lead on specific aspects of care and support.

This would enhance the knowledge of staff, support ongoing assessment of staff practice and improve outcomes for people living in the home.

**See Area for Improvement 1.**

### Areas for improvement

1. To support effective assessment of staff development and provide role models within staff teams the provider should introduce 'champions' across the range of care and support provided in the service.

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

'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.' (HSCS 3.14).

### How good is our setting?

**4 - Good**

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

People told us that the Glenfairn House was comfortable and a nice place to live and visit.

Bedrooms were nicely decorated and personalised. Families were encouraged to bring in items from home to create a space that people would be familiar with.

The home had accessible, well maintained gardens. People told us how much they enjoyed getting out into the garden in the nice weather.

There were good standards of cleanliness throughout the home. The housekeeping team had good knowledge of their role and responsibilities to ensure that cleanliness of the home was maintained. There were effective systems in place to ensure that good standards of cleanliness were maintained.

The maintenance records were up to date to show that checks of the equipment and safety of the home were completed. The maintenance worker had a good understanding of their role in ensuring that the home was safe, and people were protected from harm.

The provider has plans for refurbishment of some bedrooms to improve the en-suite facilities.

## How well is our care and support planned?

4 - Good

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

People should have a personal plan which details their current care and support needs. This ensures that staff are effectively directed to support the individual taking a consistent and agreed approach.

We sampled several personal plans and found that they contained good information to ensure that staff were directed on how to support people's health and wellbeing needs. We found the standard of personal planning and recording was good, plans were person centred and reflected people's personal choices and preferences.

People and their representatives were involved in regular care reviews. This gives people opportunity to formally discuss their care and support and make decisions about their future care.

Appropriate documents were in place to ensure that individuals legal rights were being protected. This included information about who the home should contact regarding the care of the person.

We saw that people had a future care plan in place. This would guide staff to ensure that individuals choices regarding their end-of-life care were respected.

## 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 support better outcomes for people linked to their choices and preferences, the service provider should enhance the range and access to meaningful activities throughout the home.

This should include but not be limited to developing links with the local community.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: 'I can chose to have an active life and participate in a range of recreational, social, creative, physical and learning activities, every day, both indoors and outdoors'. (HSCS 1.25).

I can maintain and develop my interests, activities and what matters to me in the way that I like.' (HSCS 2.22).

**This area for improvement was made on 17 May 2023.**

#### Action taken since then

**This area for improvement has not been implemented and will continue. See Key Question 1 in this report for details.**



### Previous area for improvement 2

The provider should improve mealtime management by improving leadership for the staff team supporting people to eat and drink.

There should be ongoing assessment and monitoring of mealtimes to ensure that they are well managed.

This is to ensure care and support is consistent with the Health and Social Care Standards which state:

'If I need help with eating and drinking, this is carried out in a dignified way and my personal preferences are respected.' (HSCS 1.34).

'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 17 May 2023.**

#### Action taken since then

**This area for improvement has not been implemented and will continue. See Key Question 1 in this report for details.**

### Previous area for improvement 3

To support effective assessment of staff development and provide role models within staff teams the provider should introduce 'champions' across the range of care and support provided in the service.

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

'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.' (HSCS 3.14).

**This area for improvement was made on 17 May 2023.**

#### Action taken since then

**This area for improvement has not been implemented and will continue. See Key Question 2 in this report for details.**

### Previous area for improvement 4

To improve connections and communication between people, their families and staff the provider should develop a keyworker system in the home. Staff assigned as keyworkers should have clear guidance regarding their role and responsibilities.

'I get the most out of life because the people and organisation who support and care for me have an enabling attitude and believe in my potential.' (HSCS 1.61).

'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.' (HSCS 3.14).

**This area for improvement was made on 17 May 2023.**

## Action taken since then

This area for improvement has not been implemented and will continue. See Key Question 3 in this report for details.

## Previous area for improvement 5

The provider should ensure that personal plans are developed in consultation with the individual and their representative to reflect a responsive, person-centred approach, taking account of individuals choices, preferences and abilities.

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

'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 17 May 2023.**

## Action taken since then

We saw that personal plans reflected a responsive, person-centred approach, taking account of individuals choices, preferences and abilities.

**This area for improvement has been implemented.**

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://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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