

# South Grange Care Home Care Home Service

South Grange  
Grange Road  
Monifieth  
Dundee  
DD5 4HT

Telephone: 01382 535 111

**Type of inspection:**  
Unannounced

**Completed on:**  
19 June 2023

**Service provided by:**  
Barchester Healthcare Ltd

**Service provider number:**  
SP2003002454

**Service no:**  
CS2007142954

## About the service

South Grange Care Home is located in Monifieth, Angus. The home provides 24-hour residential and nursing care to a maximum of 64 older people. The service also provides rehabilitation, respite and long term care to a maximum of 21 people with physical and sensory impairment. This care is provided in a separate unit within the home called the Seven Arches.

All areas work to the same policies, procedures and principles as laid out by the registered provider Barchester Healthcare Ltd.

## About the inspection

This was a type one inspection which took place on 14 and 15 of June 2023. 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 15 people using the service and eight of their family;
- spoke with 12 staff and management;
- observed practice and daily life;
- reviewed documents; and
- spoke with visiting professionals.

## Key messages

People and their families valued the care and support they received.

There was a sociable atmosphere in South Grange.

The leadership of the home was visible.

Staff had a good understanding of people's needs.

People's care and support was not rushed.

## 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
How good is our staff team?	4 - Good
How good is our setting?	5 - Very Good
How well is our care and support planned?	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 how care and support was planned and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

People's care plans were detailed, clear and person centred. The plans were updated daily and noted essential information. This meant staff had current information regarding people and any changing needs or issues. People were able to direct their care and were involved in planning their care and support.

We observed that people's rooms were clean and personalised. People were well presented and told us their care and support were at their pace. This meant people were supported to look how they would like to look. One person told us "The staff are lovely and kind".

There were opportunities for most people to engage with a range of activities. People also had information about what activities were available. Staff were proactive in engaging people in events and activities. The home had a very sociable atmosphere and people knew each other well. The relationships and connections helped support good outcomes for people and enriched people's experiences. A relative told us "South Grange is a happy place". Families told us communication was very good and they were informed immediately of any issues.

People were involved in improving the service, for example one person had been able to direct and support the development of the garden area. People had access to independent advocacy and the service was proactive in responding to any issues. For example, one person felt they would benefit from more support and the manager acted on this immediately. The manager also reiterated to staff that any changes in people's presentation and responses needed to be reported to ensure care plans reflected all needs.

We observed there was very good clinical oversight of people's needs. The values of the Health and Social Care Standards were evident in the values of staff. For example, the kitchen staff were involved in clinical meetings to consider diet and nutrition. People told us the food was good. One person told us "If I don't like what it is today, I will be made something else, and it is never any trouble". Mealtimes were very sociable and were not rushed. This promoted good outcomes for people who enjoyed the social interactions.

Special occasions were celebrated, and families were welcomed and encouraged to visit. One relative told us about being able to use an area of the home for a family party.

There were clear policies and procedures in place and medication guidance was followed. We were able to track and follow people's changing needs. For example, wound care was closely monitored. People's daily notes were informative and reflective of all areas of people's wellbeing.

The service had good working relationships with the linked GP practice and other agencies. One relative told us that staff noticed a deterioration quickly and this resulted in rapid treatment and a shorter hospital stay. This was a very good outcome which also facilitated a change in how the care was managed in a way the person preferred.

There were appropriate stocks of Personal Protective Equipment (PPE) for staff and the home was very well organised.

**How good is our leadership?****5 - Very Good**

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

The leadership of the service was visible. South Grange is a large home and the management had very good oversight of people's needs. People told us they felt confident in raising any issues and that they believed they would be dealt with.

There was a range of quality assurance tools and processes in place which helped monitor and inform improvements in the service. These included observations of staff practice. This ensured staff were competent in their role. There was a service improvement plan which was current and reflected the development plans for the home.

Families told us they felt involved in their relative's care and that communication was very good. The service obtained feedback from people which influenced improvements. For example, the garden area and plans to extend the upstairs dining room were based on people's feedback and preferences. This meant that the service was working in partnership with people and there was a culture of continuous improvement. The manager should incorporate service user feedback into the existing service improvement plan.

We observed that there were comprehensive staff handovers and that there was a range of meetings throughout the home. This meant that staff were aware of issues or changes and people's needs were closely monitored.

Staffing levels were regularly assessed to ensure the correct staffing levels were working to meet people's needs. Due to some feedback during the inspection the manager plans to review some people's needs.

There was a culture of learning and development within the home. This included learning from incidents and complaints. A student was on placement during the inspection and provided positive feedback. For example, staff took time to help ensure there were appropriate learning opportunities for her.

The leadership had a clear overview of staff training which was regularly monitored. Staff also told us if they felt that they needed more training, it would be arranged.

We observed that staffing was stable, and staff were supported in gaining other qualifications. This meant people received care and support from people they knew which was consistent.

Staff had an appraisal and supervision. Some newer staff said they were still to have formal supervision but had feedback following completing an induction. There was an induction process for staff which included mandatory training.

**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.

The provider followed safer recruitment guidance. We observed that appropriate documentation was in place for this. The date staff complete essential training and shadowing should be documented to evidence it has taken place before staff provide care and support to people.

There was comprehensive induction paperwork and regular observations of staff practice. There were also probationary reviews throughout the first 12 weeks of employment. This helped ensure staff had the necessary skills, experience, and knowledge to support people.

The provider had an overview of people's training needs and registration with the Scottish Social Services Council (SSSC).

Although there was staff feedback on new staff's performance, we did not observe resident feedback formally recorded. The manager should record this as part of staff's review to ensure people receiving care and support are involved.

We observed that people living in the service are not currently involved in staff recruitment. We discussed this with the manager who is considering how to reintroduce this.

Staff reported that they felt supported in their role and that the leadership was visible. A new member of staff said "I just love my job".

## How good is our setting?

**5 - Very Good**

We found significant strengths in the setting, and this supported positive outcomes for people, therefore we evaluated this key question as very good.

People benefited from a warm, comfortable, and welcoming environment. There was fresh air and natural light. The environment was relaxed, clean and tidy. It was not noisy but still sociable.

Doors to the garden area were kept open which allowed people to access areas when they wanted to. A gazebo was available in the garden also and the garden area had been developed by people. There were raised flower beds which provided people with the opportunity to become involved in gardening. This promoted good outcomes for people as they were not restricted and could access outdoors whenever they wanted.

There was a café area in the home which families could also use. As stated previously, a family had been able to use this for a function. People were able to help themselves to drinks and snacks as they would in their own home.

People's bedrooms were clean and well maintained. The whole environment was fresh and clean. Maintenance and cleaning schedules ensured that this was maintained. People were involved in the environment and encouraged to provide their views in meetings. This enabled people to be involved in their home. For example, following consultation, there were plans for another dining area to be developed. A relative told us "Living at South Grange is like being at a nice hotel but with care".

The dining areas were clean and welcoming. People had menus on the tables and the tables were set nicely. The ongoing audit and checks on maintenance ensured areas that required attention were attended to quickly. This meant people's environment was nice and well maintained.

## How well is our care and support planned?

**5 - Very Good**

We found significant strengths in how care and support was planned and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

We observed that people and their families participated in planning their care and support. People were able to direct this as the experts of their situation. There were clear assessments of people's needs. For example, there was documentation on wound care, diet, risk, and mobility. A particular strength in people's plans was their daily notes. These were clear, informative but also reflected the outcomes for people. The notes were not task focused. This meant staff were evaluating how people were and sharing information about all aspects of their day.

The preadmission paperwork was thorough and there was a whole team approach to people's needs. Communication records were kept up to date. This meant that staff had the current information required to care for people and understand any issues. Staff and management knew people well and were very responsive to people's changing needs. This ensured people got the support they needed at the right time.

It was evident that people's wellbeing was central to their care and support. The Health and Social Care Standards were evident in the care plans and values of the service. People's views about their care and longer-term prognosis were documented clearly and all relevant paperwork was in place.

As stated previously in 1.3 'People's health and wellbeing benefits from their care and support,' there was a whole team approach with particularly good clinical oversight. We observed clinical meetings took place. Whilst this was good for information sharing, it always ended with a review of how the person felt about their support or any changes.

We observed that people were enabled to be as independent as possible and participated in all aspects of their care and their home. This meant people were valued.

## 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

In order to ensure people experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment, the service should:

- i) Continue to monitor the cleanliness of the environment.
- ii) Ensure internal auditing and investigation when weaknesses in domestic arrangements are identified.
- iii) Give priority to the refurbishment of the identified areas of need.

This is to ensure care and support is consistent with Health and Social Care Standards (HSCS) which state that 'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment' (HSCS 5.22).

**This area for improvement was made on 28 September 2022.**

## Action taken since then

Refurbishment and improvements have been made to the areas identified. The provider had submitted an action plan in relation to the area for improvement. There are regular maintenance audits and logs carried out. This is of a good standard and there are further changes planned to another area to make improvements which the provider has identified.

## 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?	5 - Very Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good
How good is our staff team?	4 - Good
3.1 Staff have been recruited well	4 - Good
How good is our setting?	5 - Very Good
4.1 People experience high quality facilities	5 - Very Good
How well is our care and support planned?	5 - Very Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	5 - Very Good

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