

# Torrance Lodge Care Home Service

Riccarton Road  
Hurlford  
Kilmarnock  
KA1 5LQ

Telephone: 01563 525 158

**Type of inspection:**  
Unannounced

**Completed on:**  
6 July 2023

**Service provided by:**  
Thorntoun (Ayrshire) Limited

**Service provider number:**  
SP2017012932

**Service no:**  
CS2017356925

## About the service

Torrance Lodge is registered to provide care to a maximum of 88 adults (aged 50 and above) and older people with assessed needs which can be met by the service. The provider is Thorntoun (Ayrshire) Limited.

The service is situated on the outskirts of Kilmarnock. Accommodation is all on one level with three separate units - Culzean, Arran and Buchanan. Each unit is laid out with lounge and dining areas. All bedrooms are single occupancy with the majority having en-suite shower facilities. Additional shared bathing and shower facilities are available within each unit.

Refurbishment works within the home have continued and we saw positive improvements and progress in the overall internal environment. We also noted they were in the process of making improvements to the garden and external areas of the home. We commend the provider for their continued on-going investment and refurbishment programme.

## About the inspection

This was an unannounced inspection which took place on 14, 16, 19, 20 and 22 June. The inspection was carried out by one inspector 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 nine people using the service and five of their relatives/visitors
- Spoke with 19 staff and management
- Observed practice and daily life
- Reviewed documents
- Spoke with seven visiting professionals

## Key messages

- Consistent management of the service being well led through challenging times during and post Covid pandemic periods.
- Caring, friendly and welcoming staff, with good feedback from people living in the home and their relatives
- Improvements to the overall internal and external environment, evidence of investment by the provider with refurbishment.
- Domestic team working hard to maintain the standard of the environment clean, tidy and well presented.
- Challenges for staffing large care home, continuity of care can at times be impacted by changes to staff such as absence, turnover and use of agency.
- Activity staff working very hard to implement programme of events, outings events and entertainment opportunities.
- Overall, service moving forward and making positive progress.

## 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?	3 - Adequate
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?

## 3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

We saw and heard from people who live in the home and their relatives that the staff were friendly and helpful. We observed some good standards of care and compassion being delivered to people in a dignified and respectful manner. The manager operated an open door policy and we saw that several people freely made use of this and felt comfortable and valued by this.

We observed mealtimes and noted tables were well set and presented with people enjoying their meals with some social engagement. Other people chose to have meals in bedrooms. For this we noted that food was transported appropriately. People were clearly offered choices and staff supported people with kindness and patience during these interactions, providing good standards of assistance in a caring and considerate manner.

Relatives and visitors we met spoke highly of the staff team and felt comfortable and able to approach management if they were not satisfied or needed to discuss any issues or concerns. These were dealt with by management in a professional and respectful manner.

The activity coordinators have worked for many years in the care home and have developed very good working relationships with the people who live in the care home and their relatives. This has helped to create a homely community spirit within the home and encourages people to get involved. We spent some time at a well attended residents meeting coordinated by an independent advocacy person and heard people having the opportunity to have their say and discuss activities and events as well as feedback on any issues or concerns.

We saw there was an inter-home olympic games organised between the other homes in the providers portfolio and this helped to bring together people from the different homes and socially and competitively engage with each other. This helped to generate good camaraderie and foster positive interactions and relationships.

People living in Torrance lodge should be confident that the care and support they received benefited their health and wellbeing. Staff we spoke to and observed during the four days of our inspection visits were knowledgeable about the individual care and support needs of the people in the care home, as well as being respectful of individual's choices & wishes.

Staff were quick to notice any deterioration or deviation in people's temperament, physical or mental that required further referral or input from external health professionals. Records we reviewed demonstrated these responses and actions being taken timeously to ensure people's health and wellbeing was maintained.

We spoke to several visiting professionals, who all commented on the fact that staff were responsive and followed advice when required to implement any prescribed treatment regimes. This also included talking to visiting social work staff who participated in the regular reviews for the people under their charge.

## Areas for improvement

1. To ensure accurate monitoring and support of people's hydration needs the service should continue to ensure the completion of fluid charts. This should include inclusion of fluid targets, accurate records regarding the amount of fluid taken and dating the charts.

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

'Any treatment or intervention that I experience is safe and effective.' (HSCS 1.24)

'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 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.

People who experience care should benefit from quality assurance processes that are well led and effective in identifying areas of improvement to ensure positive outcomes for people living in care.

We saw that the care home was supported by an area/quality manager and the care home manager had implemented a number of auditing tools used to gather quality assurance data. There was also a range of consultation methods used to engage with people in the care home and their relatives such as meetings, reviews and operating open door policy, that helped to inform the quality assurance process.

The quality assurance processes covered a number of important and key areas relating to the care of people living in the home. These were completed at appropriate intervals and included; audits of accident/incidents, falls, pressure care, tissue viability, medication administration, care planning, risk assessments and other relevant areas.

The provider was in the early stages of developing and improving the overall quality assurance procedures and we will continue to review the progress of these at future inspections. (See Area for Improvement 1) However, we were satisfied that they had achieved an overall good standard with respect to their quality assurance and demonstrated commitment and capacity for continuous improvement.

We found the management to be receptive when discussing issues within the service and demonstrated passion and commitment to delivering and continually improving the quality of the service they provide.

## Areas for improvement

1. The provider should continue to ensure there are effective quality assurance processes that identify deficits and areas where improvement are maintained and continually developed and implemented. The service should continue to maintain and further develop the good standards of auditing and quality assurance we found during this inspection.

This is to ensure that care and support is consistent with Health and Social Care Standards which states that: 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 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 receiving care and their relatives were confident in staff team because they were knowledgeable, competent and skilled. We received consistently positive feedback about the staff team.

We reviewed the provider's recruitment system and vetting procedures and found they were robust and comprehensive. This helped to ensure that anyone wishing to work with vulnerable adults were suitably checked and vetted. This included interview questions, notes, references, polices and right to work checks and also professional registration requirements. Overall, we found a good standard of documentation in place and the manager retained a good overview of these procedures.

We observed staff across all departments working well together in a supportive and respectful manner that helped to create a positive team spirit. Staff we spoke to demonstrated they were friendly, approachable and professional. They were motivated to provide positive outcomes and experiences for the people they cared for. Overall, staff told us they enjoyed their work and felt well supported by colleagues and the care home manager and deputy.

We met the provider's training coordinator who demonstrated there was a clear staff training structure in place that reflected the care and support needs of people experiencing care. We saw from their records that there was a good standard of compliance with training topics including mandatory courses. There were specific training topics covering fire drills training, mental health and others that had enhanced the knowledge of the staff team.

This showed the provider had invested in training and was keen to develop a learning culture where staff reflected on the training they had completed and how this informed their daily practice. There were good records kept of the training completed and a system in place to monitor when refresher training was due. This helped to ensure all mandatory training was updated.

## 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.

During the four days of inspection, we found a consistent standard of cleanliness throughout the care home. We saw that the domestic staff team and supervisor worked hard to ensure the care home was clean, tidy and well presented. Regular cleaning schedules and audits helped to ensure these standards were maintained and appropriate actions taken in response to any issues raised.

We saw that the provider had continued to invest in maintaining and upgrading both the internal and external environment.

Outside garden areas were in the process of being improved with easier access with level ground safe for wheelchair use and for people with mobility issues, raised flower beds and secure fencing to provide a safe secure and relaxing place to enjoy the outdoors.

We commend the provider for the improvements we noted in this care home and the ongoing refurbishment programme they have been implementing. This demonstrated their strong commitment to providing and delivering high standards of care within high quality facilities.

We reviewed the maintenance and servicing records and noted these were up to date and in place. This helped to ensure that all health and safety requirements regarding the environment were being properly attended to and made sure people living in the care home, staff and visitors were safe and secure.

### 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.

It's important that care and support plans reflect the needs, wishes and choices of people. This helps to ensure that all staff know the person and their support needs and can provide continuity of care and support to those individuals.

There was an area of improvement made at the previous inspection regarding the details and information regarding people exhibiting stress and distress behaviours. We noted on the plans we sampled some good detail and descriptions of these issues and clear guidelines and advice for staff to follow in the pursuit of reducing and calming people down in these situations.

We observed good standards of communication between staff at handovers and in the records we sampled that helped to ensure the continuity of care was being maintained. We spoke to several visiting social work staff who were in the process of undertaking review meetings and this again provided some good examples of the staff team at Torrance working well with people, their relatives and other professional staff to ensure care and support was being delivered to meet the needs of the individual in a person centred way. We will continue to review the progress of these plans at future inspections.

### Areas for improvement

1. 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 and preferences.

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)

## 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

Everyone within the service should support improvements to ensure people have the best quality of care and support. Delegation of audits to the wider staff team would support the management team. A development plan should be progressed on the overall audit findings.

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 15 June 2022.**

#### Action taken since then

We saw that the manager had implemented an array of quality assurance checks covering the important areas of the care home. This included falls, accidents, pressure care, bodyweights, care records and other documentation. The provider has also looked at implementing and making improvements to the quality assurance systems within the home and although these are in their infancy. There has been a good overview ensuring that any issues or areas of improvement are noted and addressed.

The quality assurance we inspected was of a good standard and the ongoing development of the system within the provider's care home will continue. This area of improvement has therefore been met.

We will continue to review the progress of this at future inspections.

#### Previous area for improvement 2

Care plans should evidence how people have been supported by staff in a meaningful way both with their care and socialisation. This supports staff to respond to any changes to a person's emotional, psychological, social and physical needs at an early stage.

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

"My personal 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 15 June 2022.**

#### Action taken since then

We met with the activity staff who have now been using an App to help them record and document activities for each individual and what has been happening within the home. We looked at the records and observed daily activities being organised across the home throughout the four days we were there inspecting.



We saw that the care plans contained some good information and detail about each person and this reflected their changing needs as required. Staff we met were competent and knew people well which helped them to alert nursing staff and the management to the changing needs of the individuals. We observed several interactions and communications between staff at handover times and throughout the day passing on vital details relating to each person.

This area of improvement has been met.

### Previous area for improvement 3

Discussions and planning should take place with people and relatives to ensure people's wishes are respected about their care and support should their health deteriorate.

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

"I am supported to discuss significant changes in my life, including death or dying, and this is handled sensitively." (HSCS 1.7).

**This area for improvement was made on 15 June 2022.**

#### Action taken since then

We spoke to three social workers involved in the review programme within the home and all spoke highly of the staff who attended reviews and their knowledge of the people in their care. They also mentioned the management being supportive and responsive in ensuring that reviews were undertaken and any actions or issues raised were dealt with accordingly.

We looked at the review records and noted plans in place to ensure these were undertaken at the intervals required and suitable notes and action plans were in place.

This area of improvement has 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?	3 - Adequate
1.1 People experience compassion, dignity and respect	4 - Good
1.2 People get the most out of life	4 - Good
1.3 People's health and wellbeing benefits from their care and support	3 - Adequate
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
4.2 The setting promotes people's independence	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

## To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at [www.careinspectorate.com](http://www.careinspectorate.com)

## Contact us

Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

0345 600 9527

Find us on Facebook

Twitter: @careinspect

## Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.