

# Maple Ridge Care Home Care Home Service

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**Type of inspection:**

Unannounced

**Completed on:**

6 August 2019

**Service provided by:**

Maple Ridge Care Home Limited

**Service provider number:**

SP2018013131

**Service no:**

CS2018367220

## About the service

Maple Ridge is registered to provide a care home service to a maximum of 18 adults with learning disabilities.

The home is situated in the suburbs of Inverness within easy reach of various community amenities.

The accommodation consists of three inter-connected units including a semi-independent unit for four residents, a core unit for nine residents and an additional unit for five people with high support needs. Each unit has a kitchen, dining room and sitting room. Four of the bedrooms have an en-suite toilet and wash basin.

The service aims to:

- Provide care, advice, guidance and support in an empowering and enabling way to maximise each individual's potential, whilst promoting their independence at all times
- Work with residents to achieve the quality of life they strive for
- Assist residents to access community-based activities, including restaurants, cinema and so on
- Ensure residents' health and welfare, by regular check up appointments with all healthcare professionals, as necessary.

The service was registered with the Care Inspectorate on 1 April 2011.

## What people told us

We issued six Care Standards Questionnaires (CSQs) to service users who used the service. We received six replies.

All six told us that staff listened to them and five of the respondents agreed that they felt they had a say about the way the service is run.

All six told us that they felt safe and that if they felt scared or worried, they had someone to talk to.

All six respondents also told us that, overall, they were happy with the quality of the service they received.

Comments included:

"The staff are all good".

"I am happy with everything".

The atmosphere throughout Maple Ridge was relaxed. People seemed content. We noted they had varied lifestyles both at home and in the community, including voluntary work.

Members of staff were welcoming, open and supportive of the inspection process. We had also received four CSQs from members of staff. Three 'strongly agreed' and one 'agreed' that overall the service provided good care and support to the people who used it.

## 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 staffing?	4 - Good
How good is our setting?	3 - Adequate
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**

The service was able to demonstrate some major strengths in the way members of staff engaged with people who lived at Maple Ridge. Members of staff were very familiar with the support needs of residents who they spoke with in a respectful, dignified and compassionate manner.

We saw some warm and genuine interactions which provided appropriate reassurance to residents when this was necessary.

A range of leisure opportunities and recreational activities both in the local community and at home were routinely supported by the service. Some residents also took part in volunteering placements which contributed to their overall self esteem and confidence.

People's rights were respected and residents had regular opportunities to meet with staff to discuss ideas, suggestions and any concerns that they may have.

Some of the residents were participating in a shared venture with a local primary school and this had led to constructive social interactions between school pupils and the residents.

People at Maple Ridge were, wherever possible, fully involved in decisions about their care and support. This included opportunities to maintain and develop their interests and issues that mattered to them.

We thought more could be done to develop an outcome focussed approach to support planning. Similarly we thought more could be done to ensure that care plan records were more evaluative and indicative of what progress was being made to achieve desired outcomes and personal goals.

We thought people had developed good lifestyles and that staff strove to further develop person-centred care and support. We would encourage the service to be more aspirational and innovative in its outcome-focussed goal planning.

The service was proactive in ensuring the residents' health support needs benefited from routine checks and assessments. Their healthcare appointments were well recorded. Support with medication was provided. The local pharmacy provided routine supports to the unit and annual staff training. Members of staff had also undertaken a 'safe handling of medication' online training course.

We examined some of the service's health passports, these facilitate admissions to hospital for people with cognitive and communication difficulties, and noted some needed updated, whilst one was not yet fully completed.

We would encourage Maple Ridge to develop more staff 'champions' within the service who could take a lead on health-related issues based on best practice and evidence-based guidance.

Overall we concluded the service's strengths had a significant positive impact on people's experiences and outcomes.

## How good is our leadership?

**4 - Good**

The service had recently gone through a period of major change. A new provider had taken over the business and a new registered manager had recently taken up post. The previous unit manager was now the overall general manager for local services.

We considered this transition period had gone well with minimum disruption to residents.

Meetings had been held with families to provide reassurance about the future development of the unit. We noted there were active plans to upgrade the facility.

The new providers were working closely with the Care Inspectorate with plans to deliver refurbished premises that better met the needs of residents. They were clear about their vision and the future direction for the care home.

The unit had a safe culture in which residents, their families and members of staff could confidently contribute their views, opinions and suggestions about the quality of service delivery.

During the inspection we provided advice about the further development of quality assurance arrangements within Maple Ridge which needed to be more evaluative and less of a tick box-type exercise.

Similarly we advised that an improvement - or development - plan needed to be devised and implemented. This plan needed to identify who was responsible for the delivery of a particular task or preferred outcome, and within a specified timescale.

We encouraged the service to adopt a more reflective and evaluative approach to its various practices to better drive change and improvements.

We found the new manager both keen and responsive to our suggestions which ensured we had confidence that the identified issues would be fully addressed.

Taking all of the above into account we concluded that were a number of important strengths which outweighed areas for improvement.

### How good is our staff team?

**4 - Good**

The staffing arrangements within the service were evaluated as good. This grade applies to performance where there are a number of important strengths which, taken together, clearly outweigh areas for improvement.

Staff highlighted a supportive culture within the service and were clear about their roles and responsibilities.

Staff worked well together and with the residents at Maple Ridge. We observed a warm atmosphere between staff and residents. This extended to visitors to the unit who were made welcome and encouraged to take part in various, shared activities with residents. Staff took pride in their work.

The manager had developed a dependency rating assessment tool to determine staffing levels based on the support needs of residents. Staffing levels appeared to be right. However this assessment tool was not being kept up to date and, therefore, did not reflect the current assessment of needs.

There was no formal process for staff performance to be observed and then used for feedback within supervision or within the dependency tool. Such an evaluative tool, if developed, could better contribute to ensuring the right skills mix, numbers and deployment of staff.

Similarly the development of support plans which better evaluated how to support people with their specific support needs could also usefully contribute to staff deployment.

The previous unit manager had developed an overview of staff training needs. However this plan needed to be updated from last year. The service should strive to develop a workforce with optimum, rather than minimum, Scottish Vocational Qualifications (SVQ).

Overall we thought that the staff group worked well together. They were compassionate and spoke and interacted meaningfully with residents.

## How good is our setting?

### 3 - Adequate

The service has recently been purchased by a new provider. They have been developing plans to carry out an extensive upgrade of the facilities at Maple Ridge.

Ultimately this will ensure that all residents have fully en-suite facilities in their bedrooms.

The plans, which include an extension, will also incorporate an additional lounge area whilst also ensuring the current space constraints within the building are redressed.

Part of the new plans will enable people to meet visitors in privacy.

Maple Ridge also has an ageing population which means that their future support needs will have to be taken into account. The proposed new layout and settings will greatly enhance the current facilities which are not best geared to the changing needs of people with mobility or physical disabilities.

The current building offers a warm and homely atmosphere but the lack of essential amenities is having a negative impact.

We were impressed that the new providers intend to deliver on their planning proposals within a relatively short timescale. We concluded that they recognised some of the limitations within the current building and were committed to ensuring that people benefit from high quality facilities.

## How well is our care and support planned?

### 4 - Good

The quality of the service's assessment and care planning was good.

The service's strengths in this area had a positive impact on people's experiences.

People, wherever possible, were involved in contributing to their overall care and support. They were recognised as experts in their own experiences, needs and wishes.

We advised that high quality care planning reflected a culture of promoting independence, including the potential for people to reduce support they receive (or a change of setting). During the inspection we discussed ways in which the service's care planning could better support some of these outcomes. Including, where applicable, supporting some individuals to move on to more independent living settings.

It was clear that the managers and members of staff within the service knew the residents well. We were

provided with details of the person-centred nature of their individual lifestyles, which, for some, included holidays at home and abroad as well as continuing to support local social networks.

We thought more could be done to give the support plans more of an outcome focus which would better contribute to the service's support planning arrangements. Similarly the care records needed to be more evaluative of what progress was being made to achieve preferred outcomes.

Overall we concluded the service had strong foundations to further develop its care planning arrangements. We did not doubt its capacity to improve and, indeed, were impressed by the commitment and enthusiasm of its managers to drive forwards standards of high quality care and support.

## 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
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	4 - Good
1.3 People's health 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 levels and mix meet people's needs, with staff working well together	4 - Good
How good is our setting?	3 - Adequate

4.1 People experience high quality facilities	3 - Adequate
How well is our care and support planned?	4 - Good
5.1 Assessment and care planning reflects people's planning needs and wishes	4 - Good



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