

## Westlea Care Home Care Home Service

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Type of inspection: Unannounced  
Inspection completed on: 28 June 2017

**Service provided by:**  
Third Life Care Limited

**Service provider number:**  
SP2003000159

**Care service number:**  
CS2003000820

## About the service

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at [www.careinspectorate.com](http://www.careinspectorate.com)

Westlea Care Home has been registered with the Care Inspectorate since 1 April 2011. The purpose built property provides residential and nursing care to 55 older people over three floors.

The home is situated in a quiet, secluded area surrounded by woodland close to Neilston, East Renfrewshire. The parking area leads to a small sensory garden and the main entrance.

The service's philosophy is to provide a safe and welcoming environment for residents.

## What people told us

Before the inspection we sent care standard questionnaires to the manager to distribute to residents and relatives. We received fourteen completed questionnaires and spoke to nine residents and one relative. They told us they were overall happy with the care provided by staff. Some of their comments were:

"family are delighted with care received"

"overall happy with the care home and all staff - only concern is items have gone missing from relative's room, presume because residents have dementia"

"all members of staff are helpful and caring, everyone at Westlea does their best to give care to the residents; in my opinion there should be more staff to help with the stress present staff members are under and improve the time they can spend with the residents"

"I have found Westlea Care Home to have a high quality of care - staff are excellent doing a very difficult job; the home is fresh and well run - a happy atmosphere"

"there can be staff shortages but to date it has not affected my care needs"

"very well looked after"

"it's alright - nothing to write home about; some staff are nice"

"food is not very good although I eat it; any time I have buzzed for help staff have answered quite quickly"

"there is not enough to keep you interested; you have to wait a long time for staff to come especially if they are short staffed"

"feel safe and well looked after - I enjoy getting out and about"

"the staff are excellent, very friendly and jovial"

## Self assessment

The service had not been asked to complete a self-assessment before the inspection. We looked at their own improvement plan and quality assurance paperwork. These demonstrated their priorities for development and how they were monitoring the quality of the provision within the service.

## From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of environment	5 - Very Good
Quality of staffing	4 - Good
Quality of management and leadership	4 - Good

## Quality of care and support

### Findings from the inspection

We saw that residents and their representatives were involved in agreeing and reviewing the care and support provided by staff. This could be further improved by the signing of care plans and review paperwork. The recording of residents' end of life wishes regarding their care could have more detail, and signed risk assessments should always be in place for sensor mats or similar equipment.

Some families had completed 'This is me' paperwork that gave good information about individual residents' personal history, likes and dislikes and what was important to them. Residency agreements were in place and appropriately signed.

There was good evidence of residents being seen by different community health care staff, for example, dentist, optician and community psychiatric nurse. The service also had good links with local GP practices and the liaison nurse who visited weekly.

Residents told us they were well looked after and described staff as kind and friendly. We observed that staff were attentive and caring in their interactions with residents.

Some residents felt there were not enough activities during the day. We also noted that, while a fortnightly afternoon tea outing to a local community resource had continued, there were only a few outings and entertainment events planned throughout the year.

While the care hours provided were more than those required to meet residents' dependency needs, they did not allow sufficient flexibility for any unforeseen event or incident. Staff again told us that, due to the level of residents' needs, morning routines were particularly challenging even when there was a full staff complement.

We identified a few days shifts where agreed minimum staffing levels were not met. This was due to short notice absences by staff and the service being unable to arrange alternative cover. The care staff on day shifts also needed to reflect the actual numbers detailed for each shift in the staffing schedule. (see recommendation 2)

Sampling of records of medication administration showed that the application of topical creams was not being recorded and handwritten entries did not follow best practice guidance. This was the subject of a previous recommendation that is repeated. (see recommendation 1)

Menu boards were a positive addition to residents' dining experience. The use of different colours should however be monitored to ensure that the writing was clear.

While the service was regularly monitoring residents' weights and Body Mass Index (BMI), daily food intake records seen were not fully completed and it was not clear if a resident who was experiencing weight loss had been referred to the dietician. (see recommendation 3)

To maintain residents' privacy and dignity, we again asked the manager to review the use of a diary where details of visits to individual residents by GPs and other health care staff were recorded.

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 3

1. The service should ensure that the recording of prescribed medication follows best practice in relation to medication management. National Care Standards - Care Homes for Older People, Standard 15 Keeping well - medication
2. The service should ensure that agreed minimum staffing levels and skill mix are met on all shifts. National Care Standards - Care Homes for Older People, Standard 5 Management and staffing arrangements
3. Records relating to individual residents' daily nutritional intake should be fully completed and the outcome of dietician or other community health care staff involvement should be clearly recorded. National Care Standards - Care Homes for Older People, Standard 14.6 Keeping well - healthcare

**Grade:** 4 - good

## Quality of environment

### Findings from the inspection

The service had a secure door entry system and visitors were expected to sign in when they arrived and left.

The accommodation offered residents a choice of sitting areas on each floor where they could participate in activities, watch television or have quiet time. Tea and coffee making facilities were available on each floor for relatives and other visitors.

We found the accommodation was clean and well maintained. As part of the refurbishment programme, residents had recently been involved in choosing new décor and curtains for the activities lounge. Some new lounge chairs were also being replaced.

The refurbishment of bedrooms was on going with vacant ones redecorated before a new resident moved in. Residents had a choice of décor and flooring with some choosing wood instead of carpets. Bedrooms were personalised and all had en suite facilities.

The sluices were in the process of being upgraded with stainless steel units to further improve infection prevention and control. There were plans to then redecorate corridor areas.

Residents talked about how much they enjoyed sitting in the front garden on nice days. Some had been involved in planting vegetables in the raised flower beds, and there were plans to start grow tomatoes. Equipment used to assist residents with mobility and bathing was regularly serviced and maintained.

We were satisfied with the systems in place to keep residents safe. There was an accountable reporting system for accidents and incidents and monthly audits identified any action needed to minimise risk for individual residents.

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 0

**Grade:** 5 - very good

## Quality of staffing

### Findings from the inspection

In the last few months, three new senior carer posts had been added to the staff team and a few new care assistants had been recruited. We were told that the service continued to have difficulties in recruiting nurses to vacant posts. There were also vacancies for care staff. While it tended to be mainly the same individuals, rotas showed regular use of agency staff to cover both day and night shifts.

Residents were being cared for by staff who were registered with the relevant professional bodies. A number of staff had yet to undertake the qualification required to support their registration.

The service had introduced daily meetings attended by the manager and senior staff where they discussed any issues and received updates about individual residents. Staff involved in the early afternoon meetings told us they were beneficial and had improved communication.

Records showed that most staff had received two formal supervisions this year and annual appraisals were up to date.

We noted from records that there had been only a few training opportunities in recent months, and there was no written training plan available.

As highlighted at previous inspections, the service should provide Promoting Excellence dementia training for all staff at the levels appropriate to their roles and responsibilities. This would help to further improve their understanding and knowledge when caring for people living with dementia. (see recommendation 1)

Staff we spoke to described team working and support from senior staff as overall good. They gave mixed views about staff morale and access to regular supervision. They told us they would like to be able to spend more individual time with residents but this was not always possible due to staffing levels and residents' higher care needs.

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 1

1. Dementia training should be provided for all staff. National Care Standards - Care Homes for Older People, Standard 5.4 Management and staffing arrangements

**Grade:** 4 - good

## Quality of management and leadership

### Findings from the inspection

The service continued to use annual questionnaires, meetings and care reviews to obtain feedback from residents and relatives about the quality of the service.

Questionnaires had also recently been sent to external agencies, who visited the service, to ask for their views and experiences.

As part of monitoring the quality of the service, management carried out monthly audits in relation to medication, accidents and incidents. Audits of care plans were also evident.

We asked the service to ensure that all relevant events were notified to the Care Inspectorate.

As well as the inspection process, the service continued to have regular visits from the local authority's contract and commissioning staff.

The service's development plan for 2017-2018 detailed the provider's overall aims and objectives and the actions needed to achieve those related to specific aspects of the service.

The service had received no complaints since the last inspection. The complaints procedure which was displayed in various locations needed to be amended in relation to the Care Inspectorate's local address. A suggestions box available at the main entrance had not been used for some time.

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 0

**Grade:** 4 - good

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

## Previous requirements

### Requirement 1

The provider must ensure:

1. At all times there are suitable and competent persons working in the care service in such numbers that are appropriate for the health, welfare and safety of service users.
2. The staffing schedule is fully adhered to at all times.

This is in order to comply with:

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulation 2011, Scottish Statutory Instrument 2011/210:

Regulation 4(1)(a) - make proper provision for the health, welfare and safety of service users

Regulation 15(a) - Staffing - ensure that at all times suitably qualified and competent persons are working in the care service in such numbers as are appropriate for the health, welfare and safety of service users

Timescale to address: to commence immediately and be completed 1 week from receipt of this letter

**This requirement was made on 8 July 2016.**

## Action taken on previous requirement

When we looked at staff rotas covering a period of weeks, we found that the skill mix in terms of nurses and senior carers was met on all day and night shifts. There were however some day shifts where the agreed minimum number of care staff was not met. The manager told us that this was due to short notice absences that the agency was unable to cover. At the time, the service did not have full occupancy.

As there was no indication that this was affecting residents' care, the requirement was met.

## Met - outwith timescales

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

## Previous recommendations

### Recommendation 1

The service should ensure that the recording of prescribed medication follows current best practice in relation to medication management. National Care Standards - Care Homes for Older People, Standard 15 Keeping well - medication.

**This recommendation was made on 21 June 2016.**

### Action taken on previous recommendation

When sampling medication administration records, we found that the application of topical creams was not being recorded and handwritten entries were not referenced to the prescriber, dated and initialled.

The recommendation was not met.

### Recommendation 2

The service should ensure that agreed minimum staffing levels and skill mix are met on all shifts. National Care Standards - Care Homes for Older People, Standard 5 Management and staffing arrangements

**This recommendation was made on 21 June 2016.**

### Action taken on previous recommendation

Rotas sampled showed that the skill mix was met. There were a few shifts where, due to short notice absences by staff and the agency being unable to provide cover, agreed minimum staffing levels were not met. The service also needed to ensure that the number of staff on early and late shifts were as detailed in the staffing schedule and not an overall total for the day.

The recommendation was not met.



## 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).

## Enforcement

No enforcement action has been taken against this care service since the last inspection.

## Inspection and grading history

Date	Type	Gradings	
22 Dec 2016	Re-grade	Care and support	3 - Adequate
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	3 - Adequate
18 Oct 2016	Unannounced	Care and support	Not assessed
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
30 Aug 2016	Re-grade	Care and support	2 - Weak
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	2 - Weak
21 Jun 2016	Unannounced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	4 - Good
7 Aug 2015	Unannounced	Care and support	4 - Good
		Environment	5 - Very good
		Staffing	4 - Good
		Management and leadership	4 - Good

Date	Type	Gradings	
19 Jan 2015	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
20 May 2014	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
13 Dec 2013	Unannounced	Care and support	3 - Adequate
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	3 - Adequate
16 Aug 2013	Announced (short notice)	Care and support	2 - Weak
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	2 - Weak
12 Feb 2013	Unannounced	Care and support	3 - Adequate
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	3 - Adequate
30 Aug 2012	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	Not assessed
		Management and leadership	Not assessed
8 Feb 2012	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	Not assessed
26 Aug 2011	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	Not assessed

Date	Type	Gradings	
23 Dec 2010	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	Not assessed
14 Jul 2010	Announced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
19 Feb 2010	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	4 - Good
		Management and leadership	4 - Good
28 Aug 2009	Announced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
19 Mar 2009	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	3 - Adequate
17 Oct 2008	Announced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	3 - Adequate

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