

Almond View Care Home Care Home Service

5 Drumchapel Place Drumchapel Road Glasgow G15 6BN

Telephone: 0141 944 8893

Type of inspection: Unannounced

Inspection completed on: 18 December 2017

Service provided by:

Tower Bridge Homes Care Limited

Service provider number:

SP2011011671

Care service number:

CS2011300204



About the service we inspected

Almond View Care Home provides accommodation and nursing care for up to 78 Older people. During the inspection the service had 76 residents.

The building consists of two floors with the ground floor providing accommodation for 38 people and the top floor providing accommodate for 40 people. All bedrooms are provided on a single basis with en-suite toilet and wash hand basin. Shared bathing/shower facilities are available. Communal lounges and dining rooms are also available on both floors. Garden space is located at the rear of the home and a courtyard is also available. The home is located in Drumchapel, Glasgow and is near to local transport and amenities.

The service is managed by Tower Bridges Homes Care Limited and one of their objectives is: "To be committed to continuous improvement of the service by involving residents, taking forward their suggestions and views."

How we inspected the service

This report was written following an unannounced inspection which was carried out by two inspectors and an inspection volunteer. Feedback was provided to the manager at the end of the visit.

This report should be read in conjunction with the last report of 7 June 2017 and noted that Quality of Staffing has been re-graded to a grade of 4.

During this visit we gathered evidence from various sources, including the relevant sections of policies, procedures, records and other documents, including:

- Resident personal plans
- Observation of the environment
- Staff training records
- Staff rotas
- Audits
- Discussions with residents, relatives, staff and management.

Taking the views of people using the service into account

Residents we spoke with told us that they were overall happy with the quality of care received and very complimentary about the staff,

'staff very caring'
'staff excellent and food good'.

Taking carers' views into account

Relatives we spoke with told us that they were overall happy with the quality of care received although some felt that some areas could be improved on and it would be good to see the manager around the home more.

'management very positive and on hand if needed'
'visit most days, staff very good'
'made to feel very welcome'

'management structure not working, no sign of manager on the floor' 'manager not visible'

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 that a personal plan is in place that details how each service user's health, welfare and safety needs are to be met. In order to do this they must ensure that all service users have personal plans which:

- a) Include information about necessary care and support interventions and are developed to fully reflect the care and support being provided.
- b) Contain risk assessments that are up to date.
- c) Utilise the risk assessments to inform the care plan.
- d) Ensure that any discharge information is followed, or a clear reason documented where it is not.

This is to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210), Regulation 4(1)(a) & 5(1).

This requirement was made on 7 June 2017.

Action taken on previous requirement

In the personal plans viewed, we found that the relevant care plans and risk assessments were in place and up to date. We discussed with the manager about how these could be further developed to become more personcentred and outcomes focused.

Met - within timescales

Requirement 2

To ensure the health, welfare and safety of service users the provider must ensure that all nursing staff are professionally accountable and practice independently. In order to do this they must ensure that:

- a) Nursing staff follow the Nursing & Midwifery Council 'The Code 2015' and 'Standards for competence for registered nurses 2014'.
- b) Medication management plans are followed at all times for individual residents.
- c) That discharge advice for a resident is adhered to until they are re-assessed by the relevant health care professional.
- d) Each nurse challenges any deviation to parts a, b and c to ensure that their own acts or omissions are in each residents' best interests.

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This is to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210), Regulation 4 (1)(a).

This requirement was made on 7 June 2017.

Action taken on previous requirement

We viewed relevant medication and nutrition audits as well as medication administration records and found that practice was overall good. We discussed some areas which could be improved further in relation to 'as required' medication protocols being up to date and the 'carried forward' system being used for all medication.

We also saw that nursing staff had received further medication training and completed competency assessments and reflected on their practice.

Met - within timescales

Requirement 3

To ensure the health, welfare and safety of service users the provider must ensure that all nursing staff are professionally accountable and practice independently. In order to do this they must ensure that:

- a) Nursing staff follow the Nursing & Midwifery Council 'The Code 2015' and 'Standards for competence for registered nurses 2014'.
- b) Medication management plans are followed at all times for individual residents.
- c) That discharge advice for a resident is adhered to until they are re-assessed by the relevant health care professional.
- d) Each nurse challenges any deviation to parts a, b and c to ensure that their own acts or omissions are in each residents' best interests.

This is to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210), Regulation 4 (1)(a).

This requirement was made on 7 June 2017.

Action taken on previous requirement

As per Requirement 2, we were satisfied that this Requirement had been met.

Met - within timescales

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

Previous recommendations

There are no outstanding recommendations.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Enforcement

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

Inspection and grading history

Date	Туре	Gradings	
7 Jun 2017	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 3 - Adequate Not assessed
24 Aug 2016	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed Not assessed 5 - Very good
10 Sep 2015	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good 5 - Very good 4 - Good 4 - Good
13 Aug 2014	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good 5 - Very good 4 - Good 5 - Very good
10 Dec 2013	Unannounced	Care and support Environment Staffing Management and leadership	Not assessed 4 - Good 4 - Good Not assessed

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Date	Туре	Gradings	
19 Jun 2013	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed Not assessed 4 - Good
11 Jan 2013	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good Not assessed 3 - Adequate
28 Jun 2012	Unannounced	Care and support Environment Staffing Management and leadership	Not assessed Not assessed 3 - Adequate Not assessed
24 May 2012	Re-grade	Care and support Environment Staffing Management and leadership	Not assessed Not assessed 2 - Weak Not assessed
8 Feb 2012	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good

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