

Hebron House Nursing Home Ltd Care Home Service

27 Seabank Road
Nairn
IV12 4EU

Telephone: 01667 452459

Type of inspection: Unannounced
Inspection completed on: 16 March 2018

Service provided by:
Hebron House Care Home

Service provider number:
SP2008010148

Care service number:
CS2008189589

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.

This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

The service is registered to provide care to 22 older people. There were 19 people living in the service at the time of the inspection.

Hebron House is located in a quiet residential area of Nairn, set in its own grounds and consists of the original two storey building with extensions. Both the home and grounds have been upgraded.

The care home consists of 20 single rooms and one double room as well as several communal public rooms and lounges. Seventeen of the 21 bedrooms have en-suite toilet facilities, four of which have shower facilities. There is a passenger lift and stair access between the ground and first floor.

The aims and objectives of the service were to strive to provide a good, individual, home life for all the people who use the service and that they are cared for with dignity and respect, whilst maintaining their individuality at all times. To promote the need to continue with hobbies, activities and interests and to involve residents and their relatives in the care provided.

What people told us

During this inspection we spoke with five people who lived there and spent time chatting socially with a group spending time in the lounge and we also joined people for lunch. They told us that the service was very good and that the staff cared and supported them in a manner which suited them. Some people were independent and were able to go out and about when it pleased them to do so. One person said that since coming to the service they were getting better day by day. Another said that staff helped them to choose their clothing each morning.

The meals in the home were enjoyed by all and they told us that the quality was good and that there was enough to eat.

Five questionnaires had been returned to us from the people who live in the service. Overall they were happy with the service. Individual comments included:

"Very good"

"I am happy with my bedroom"

"I feel I am happy here and if I had a complaint I would sit down with the staff and tell them."

We spoke with five relatives who were very complimentary about the staff and management. Relatives felt that the healthcare needs of their loved ones was good and that they were kept informed of any changes. People said that the service was homely with nice little touches. One said that the staff were "superb" and the way they spoke with their husband was good and that they treated him as part of the family. One relative who had only been using the service for a short time said that any trivialities were dealt with straight away and that they did not happen again. One relative whose partner had been in hospital for a long period of time felt that their social life had improved and that they were now joining in with other people. They said that the staff were very

attentive, that there was nothing they didn't know about their partner and that they couldn't fault them about anything. They were especially pleased with the fact that their partner was now more settled and less anxious when being supported to use the hoist.

Six questionnaires had been returned to us prior to the inspection. All of these agreed with the statements within. Individual comments included:

"At times the home can seem short staffed and the other people who use the service sometimes were unable to call for help and that this was distressing. They felt that the music that was played was not changed often enough and that people should have the opportunity to go outdoors more often." This questionnaire was anonymous therefore we were unable to speak with this person. However we have made reference to people being able to summon assistance when needed and made a recommendation.

"The service is excellent and Hebron is a happy home."

"Hebron House is a truly wonderful home. It is not an institution, it is a warm caring home for my mother. The staff are very committed and always helpful and respectful which upholds people's dignity. I sleep easy at night knowing she is being cared for by a dedicated staff team in a lovely home. A very big thank you to the whole team at Hebron."

"This is a very caring facility for my wife with staff pleasant and caring. The home is warm and well kept. Senior staff are available and sensible and seem to set a good example to the nurses and other carers on the staff."

"I am more than happy with the care my relative receives at Hebron House."

Self assessment

The service had not been asked to complete a self assessment in advance of the inspection. We looked at how they managed and planned for improvements within the home.

From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of environment	not assessed
Quality of staffing	not assessed
Quality of management and leadership	4 - Good

What the service does well

Hebron House is a bright and welcoming service and staff were kind and caring. Staff seemed to know the people using the service well and the feedback we got from people we spoke with about the care was good. Some told us that their health had improved as a result of living in the care home.

The staff have continued to work on improving the information about people's needs, choices and preferences. Staff were continuing to work on improving the care plans and care documentation using a more person centred approach. Some care plans were starting to show that staff were aware of the need to maintain existing skills for people and to take their choices and preferences into account when working with them. Staff said that an

important part of their role as a key worker was to develop and nurture positive relationships. There was good evidence of involvement from other healthcare professional where this was needed. The way staff managed people's medication for them was satisfactory.

At the time of the inspection the activity staff was not on duty, however we could see that outside entertainers regularly visited the home. Some people felt that the day to day activities could be better and one felt that gentle exercises could be introduced.

The mealtimes experience was enjoyable for all and the dining room was bright and comfortable. Special diets were catered for and the cook was made aware of people's needs. We saw some lovely interaction from some staff that gave the people they were supporting a pleasant social experience and it was obvious that staff knew the people they supported very well. People were very happy with the meals that were provided.

There were good recruitment procedures for staff which maintained the safety and well-being of people using the service. The service also ensured that the staff were appropriately registered with professional bodies.

The induction, supervision and appraisals and training made available to staff was satisfactory. Staff that we spoke with were very complimentary about each other and said they worked well as a team. They said that the support and guidance from others helped them to care effectively for the people they cared for.

What the service could do better

Staff should continue to develop the care plans and involve the person using the service and representative with this as much as possible. The service needs to look at ways to support people using the service who do not have capacity or have difficulty with communication to express their views or for someone to advocate on their behalf. The staff should improve the way reviews are recorded and ensure that any agreed action is carried out and that care plans were amended accordingly. **(See recommendation 1)**

Staff need to develop better care plans about the way people's pain management and pressure ulcer prevention and management are met. This is to ensure staff have clear guidance about how to meet people's needs and that a high standard of care and continuity is provided. **(See recommendation 2)**

People using the service should be provided with a range of opportunities to take part in day to day activities within the home. **(See recommendation 3)**

Staff need to develop the risk assessments so that they had clear guidance about how to manage people's needs so that they could be supported with their safety. In addition written, dated and signed consent was to be gained from the person using the service or their relative/representative when needed. **(See recommendation 4)**

We could see that supervision and appraisals were taking place, however these were not of a standard which would support the on-going development, performance and motivation of staff. The service was to ensure that there were recorded discussions about staffs workload, performance and responsibilities. There were to be links made to training that had been undertaken being evaluated. Where staff identified training needs these were to be addressed. In addition and to ensure that all staff took part the service was to develop a timetable of supervisions and appraisals so that staff and management were aware of when these were to take place. **(See recommendation 5)**

While staff meetings took place on a regular basis the provider was to ensure that these provided the opportunities for staff to look at and discuss best practice guidance and how this can then be used to promote improvements within the service. They were to take into account the new Health and Social Care Standards: My support, my life that were coming into place in April 2018. Staff were to be made aware of these and contribute to how they were going to be used and embedded in their everyday practice. Action plans were to be used to ensure that any changes, improvements or developments that were highlighted and/or needed were fully addressed. **(See recommendation 6)**

Gathering and analysing information (data) on falls would help the service to anticipate and prevent falls rather than just manage problems once they have occurred. Learning from a fall can help prevent the same person from falling again, but can also prevent others from falling. This can be the case if things like staffing levels, the environment or routines have contributed to a fall. In addition the service was to use falls data to have improvement conversations with staff.

The service was to ensure that all handwritten entries on medication sheets were doubly signed and indicated the prescribing GP. The use of codes within the sheets were to be fully completed and showed the efficacy of the use of the medication that was prescribed for as and when needed. The provider was to review the current counting of all medication daily. It would be the case that where medication errors came to light that this was used for a period of time to monitor. The provider was to assess whether or not this was the best use of staffs time.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 6

1. Staff were to continue to develop the care plans for people using the service to ensure that they were effective in meeting peoples needs. The service needs to look at ways to support people using the service who do not have capacity or have difficulty with communication to express their views or for someone to advocate on their behalf. In addition they were to ensure that all relevant care plans were in place for identified needs. They were to be effectively evaluated, reviewed and updated to ensure the information is a current reflection of peoples needs and that the planned care is effective in meeting the person's needs.

National Care Standards Care Homes for Older People.
Standard 5: Management and staffing arrangements
Standard 6: Support arrangements.

2. The provider should ensure that care plans for people's pain management and pressure ulcer prevention and management needs are developed further. These were to contain clear, person centred information about how to support people and their individual needs. Reference should be made to specific assessment tools and equipment in use. Care plans should be effectively evaluated, reviewed and updated to ensure the information is a current reflection of people's needs and that the planned care is effective in meeting the person's needs.

National Care Standards Care Homes for Older People.
Standard 5: Management and staffing arrangements

Standard 6: Support arrangements.

3. The provider should ensure they carry out a review of the provision of activities, in order that they met the needs and wishes of the people who use the service. This review was to include them and their views and the use of personal life stories as a way of developing the activities. Staff were to be given training on the understanding and importance of day to day activities and interaction with people. The service was to review how they promoted what was on offer throughout the home so that people were able to have the ability to choose what to take part in.

National Care Standards Care Homes for Older People.

Standard 6: Support arrangements

Standard 8: Making choices

Standard 12: Lifestyle – social, cultural and religious belief or faith

Standard 17: Daily life.

4. The provider should ensure they review the current way that risk assessments were completed. They were to ensure that they were clear in how to support and manage any risks that were highlighted. These should be effectively evaluated, reviewed and updated to ensure the information is a current reflection of people's needs and that the planned care is effective in meeting the person's needs. Dated and signed consent forms were to be used where indicated.

National Care Standards Care Homes for Older People.

Standard 6: Support arrangements

Standard 8: Making choices

Standard 9: Feeling safe and secure.

5. The provider should ensure that a review of how supervision and appraisal was planned, managed and recorded. This was so that staff had the opportunity to take part in opportunities which would assist them with their development and learning.

National Care Standards Care Homes for Older People.

Standard 5: Management and staffing arrangements.

6. The provider should ensure they further develop the management of staff meetings for all grades of staff. They were to ensure that there was a focused approach to the overall development and improvement of the service, on behalf of the people that they supported and that the staff group were involved with this. The meetings were to provide a forum where best practice was discussed and shared. Action plans were to be used to ensure that any changes, improvements or developments that were highlighted and/or needed were fully addressed.

National Care Standards Care Homes for Older People.

Standard 5: Management and staffing arrangements.

Complaints

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

Inspection and grading history

Date	Type	Gradings
23 Jan 2017	Unannounced	Care and support 4 - Good Environment Not assessed Staffing Not assessed Management and leadership 4 - Good
12 Feb 2016	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and leadership 4 - Good
30 Mar 2015	Unannounced	Care and support 4 - Good Environment 3 - Adequate Staffing 3 - Adequate Management and leadership 4 - Good
14 Mar 2014	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and leadership 4 - Good
6 Mar 2013	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and leadership 4 - Good
6 Mar 2013	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and leadership 4 - Good
27 Jan 2012	Unannounced	Care and support 5 - Very good Environment 5 - Very good Staffing Not assessed Management and leadership Not assessed
1 Aug 2011	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing Not assessed

Date	Type	Gradings	
		Management and leadership	5 - Very good
26 Oct 2010	Unannounced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
4 Jun 2010	Announced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	Not assessed
29 Jan 2010	Unannounced	Care and support	3 - Adequate
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	3 - Adequate
28 Jul 2009	Announced	Care and support	3 - Adequate
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	3 - Adequate

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