

# Netherton Court Nursing Home Care Home Service

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ML2 0BP

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**Type of inspection:**  
Unannounced

**Completed on:**  
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**Service provided by:**  
Thistle Healthcare Limited

**Service provider number:**  
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## About the service

Netherton Court is situated in a residential area of Wishaw in North Lanarkshire and provides care and support for up to 63 older people with physical and cognitive impairment. It is accessible to public transport routes, bus, train or motorway and is within walking distance of local shops and community amenities.

Before 1 April 2011 this service was registered with the Care Commission. On this date the new scrutiny body Social Care and Social Work Improvement Scotland took over the work of the Care Commission, including the registration of care services. This means that Thistle Healthcare Ltd continued its registration under the new body, the Care Inspectorate.

The home is purpose-built over two levels with a passenger lift providing access to the first floor. All rooms provide single en suite facilities with access to communal bathrooms, dining rooms and lounges on each floor. The ground floor provides access into a well maintained, enclosed garden area with seated areas for residents and visitors to use.

At the time of this inspection there were 51 people living in the home.

## What people told us

Prior to this inspection we issued 15 Care Standard Questionnaires to people using the service as well as relatives/carers. Seven of which were returned from people using the service with five returned from relatives/carers. We discussed the results of these with the manager at the inspection.

We also gather feedback on how the service is performing by speaking to residents, relatives and visiting professionals. who told us they were happy with the care and support provided.

Some of the comments we received were as follows;

'Not sure about numbers of staff at night but always see enough trained and skilled staff during the day. A relative passed away last year in the home and their care and support was excellent in end of life care'

'It's a great place'

'They need more staff'

'I am very happy with the care and the staff treat me well'

'Happy and content in the home'

'This home is well organised, the staff are knowledgeable and always nice and pleasant. The home is always clean, tidy and there are never any odours'

'Staff keep me up to date on changes and address any concerns'

'It's not home but I get well looked after, the staff are lovely and take good care of me, the foods fine'.

## 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?	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?

4 - Good

People who experience care have the right to be treated with dignity, respect and compassion and have confidence in the people who provide their care and support.

Residents and visitors spoke positively of the staff and said they felt well supported by a nice, caring team of staff.

Staff were aware of the new health and social care standards and demonstrated a caring, professional approach when interacting with people. Residents looked well presented and appeared comfortable and relaxed with staff who knew them well.

When we visited the home it was clean and tidy providing a homely atmosphere which promotes a relaxed and friendly space for people living here. The secure garden area is accessible from the ground floor and is tidy with seated areas for people to use at their leisure.

Staff supported some residents to remain independent by encouraging them with light domestic duties, setting tables or going for walks in the local area. The home has a minibuss which is used to take residents out to events in the community. Some of the residents enjoyed a local tea dance, visited the library, while others enjoyed visits from the local school children and local church for a Christmas service.

There are plans to recruit an additional activity staff member. We suggested the service introduce a way of evaluating the current activities offered to ensure they remain appropriate, capture peoples interest and encourage participation.

There are communal dining rooms in each unit, these were spacious and nicely presented. Staff supported peoples nutritional needs, encouraged choice and provided support where required. People could choose where they wanted to eat their meals with some choosing to stay in their rooms. We saw plenty of drinks and snacks available throughout the day which helped maintain people's health.

Additional monitoring charts were used for residents who needed extra support. Some of these had more detail and were completed better than others, we discussed this with the manager who was aware of this through the auditing process.

Residents could be confident that staff had an overview of their health care needs and consulted with relevant health care professionals as needed. Medication was stored safely and was regularly audited by the manager as well as the local pharmacy to ensure safe practice continued.

Peoples views were sought through meetings and questionnaires. Any suggestions or actions from consultation was recorded within an action plan and revisited to record any progress. There had in the past been poor attendance at these meetings however this had started to improve. Some members of the relative committee were assisting the manager in completing an ongoing development plan based around the new inspection framework and Health and Social Care Standards.

**How good is our leadership?****4 - Good**

The service continues to benefit from a stable management and staff team who continue to work hard and are committed to moving the service forward.

We acknowledge that company are currently going through a period of change which will see a number of new systems implemented in the new year. These will include a new quality assurance system, an update of current policies and procedures, the introduction of ELearning training and an electronic care plan. The staff we spoke to were aware of these planned changes and were kept up to date through meetings and updates from the manager.

The majority of staff told us they felt well informed and supported in their role through regular training, meetings and supervision. A new supervision and induction programme had recently been implemented. This covered a range of topics and provided much more information and detail on staffs monitoring and performance. This had not been finalised and was subject to further change as still being reviewed by senior management.

We looked at the current quality assurance system the manager has in place and could see there were a range of audits taking place from healthcare to environment. Where an issue had been identified the manager was following this up to ensure ongoing improvement.

The complaints procedure was displayed at the reception area. People we spoke to said they felt confident if they had a concern they could raise this with the manager. There was a complaint and concern log where any issues were recorded and followed up to ensure a positive outcome.

Regular meetings were taking place with residents, relatives and staff. Individual preferences were recorded within the care plans and regular reviews were taking place in order to capture individuals' views and requests. The content recorded in the review meetings were basic and could be improved by providing more feedback from the resident, staff and other visiting professionals with more detail of actions and outcomes as a result of these meetings.

Accidents and incidents were recorded and analysed by the manager every month in order to identify any trends. There were a few areas where these could be improved upon such as ensuring staff are fully completing all parts of these reports as well as including more detail and consistency when recording follow up checks. There was no clinical observations attached to these reports or reference to where these were filed. When recording the actions taken to prevent a recurrence to a fall staff repeatedly record they provide close observation which in some cases is clearly ineffective. The manager assured us this would be reviewed with staff as part of their ongoing training and development programme.

**How good is our staff team?****4 - Good**

People using care services should have confidence in the people who provide support because they have been safely recruited, trained, competent and respond promptly to requests for help.

The residents and relatives we spoke to spoke positively about the support they received from staff who they said were nice, helpful and attentive. We observed staff responding to requests promptly in a nice dignified manner which residents responded well to. Staff told us they worked well as a team and had good support through supervision and meetings and were aware of the new Health and Social Care Standards.

The training matrix as well as feedback from staff demonstrated there was plenty of training available. Staff were aware that the training provided next year would now include ELearning in addition to the current one to one training. This will benefit staff by providing a more flexible option to complete training at times that suit them.

Some of the staff were training facilitators and the manager discussed plans to develop this role along with staff championship roles as part of the ongoing development of the service. This will provide staff with additional support from staff who have undertaken additional training in order to enhance their knowledge and performance.

We looked at the dependency assessments and staff rotas. There were currently twelve empty beds. The majority of staff told us there were enough staff currently available to meet peoples needs. We discussed with the manager the need to ensure that as occupancy and dependency increases that staffing levels are calculated to reflect these changing needs.

We were satisfied from the recruitment files we reviewed that staff were recruited using best practice guidance including Protecting Vulnerable Groups (PVG) checks and registration with the Scottish Social Services Council (SSSC) and Nursing and Midwifery Council (NMC). This ensured that staff supporting people were fit to do so and that people were protected from harm.

## How good is our setting?

### 4 - Good

Netherton Court is a purpose built home over two levels, all rooms are single occupancy with en suite facilities. Each floor has communal bathrooms, toilets, lounges and dining areas.

People are encouraged to bring in their own furniture and personal belongings to make their room more homely. The entrance to the home is wheelchair accessible and is warm and welcoming. Residents can wander freely around with no restrictions and staff ensured any walking aids were within their reach to assist them. Staff promoted mobility as well as providing assistance where required.

Access to outdoor space is important in encouraging people to move around and get fresh air. Residents and visitors had access to a well maintained, secure garden area from the ground floor.

The home is safe and secure and well maintained with equipment and servicing contracts in place which were up to date to ensure a safe environment.

New carpets had been fitted to the ground floor corridor and communal lounge and the manager discussed plans to replace the carpet in the upstairs lounge which is stained and worn looking. Ongoing redecoration will continue to improve the standard of the home to ensure that people living here continue to live in a welcoming and homely environment.

We suggested the manager use the Kingsfund Environmental assessment tool 'Is your care home dementia friendly?'. This will assist the service when considering any refurbishment particularly for those people living with dementia. We will review this at the next inspection.

The manager and staff were completing regular audits of the dining experience and the environment in order to identify any areas for improvement which were then actioned by the manager and staff.

Staff we spoke to told us they had plenty of equipment and cleaning products to assist them when providing care and support.

**How well is our care and support planned?****4 - Good**

People should be able to benefit from care plans which are regularly reviewed, evaluated and updated which consistently informs all aspects of the care and support they experience.

Staff had worked hard to improve the content of the personal plans since the previous inspection. The plans we looked at contained some good person centred information, recorded people's personal preferences and prompted staff to promote choice and independence. This was demonstrated in the staff practice and positive interactions we observed during the inspection. Appropriate risk assessments were in place and where a risk had been identified there was a care plan in place providing details on the management of this. There was good links and input from various healthcare professionals, who staff consulted regularly if they had any concerns. Any changes were recorded to ensure that the care and support provided remained relevant.

We saw that people's rights were respected and where there were issues of capacity, appropriate legal arrangements were in place and advocates involved. This meant that people experiencing care could be confident that their views would be sought and choices respected, including when they had reduced capacity to make their own decisions.

Staff continue to work through anticipatory care plans in consultation with residents and their relatives to ensure people's future wishes are recorded and respected.

There was still parts of the plans which would benefit from more detail. However we acknowledge that these care plans currently in use within this group of homes is about to change in the new year. The existing paper copies we reviewed will be replaced with electronic plans. Staff were aware of these planned changes and felt confident they would be fully supported with this transition. We look forward to seeing how this has developed at the next inspection.

The reviews matrix in each unit demonstrated that regular reviews were taking place in order to discuss any concerns or changes in individual care. Relatives we spoke to said they were kept fully informed of any changes and were confident in the standard of care and support provided. More information would improve the content of the review meetings, for example more detail of any achievements or deterioration since the previous review will assist staff when planning any changes to the care and support required to meet individuals' changing needs effectively. Where there are actions required or requests made at these meetings, this should be included within an action plan and should be updated regularly to reflect any changes.

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

### **Requirements**

#### **Requirement 1**

The service provider must ensure that residents' care plans set out how the health, welfare and safety needs of the individual are to be met. In order to do this the service must ensure that the care plans accurately reflect all the current needs of individuals and are evaluated regularly to demonstrate any improvement or deterioration in the person's health and well-being. Where risks to an individual have been highlighted in the care plan that this

is supported with accurate up to date information on how to effectively manage the risk in order to prevent any detrimental effects on the persons' health and well-being needs. Staff must be familiar with the contents of the care plans in order to demonstrate they can safely provide the care and support needs of individuals as stated in their plan.

This is in order to comply with SSI 2011/210 Regulation 5 Personal plans.

**This requirement was made on 6 July 2015.**

### Action taken on previous requirement

We saw an improvement in the contents of the care plans since the previous inspection. There was up to date information in place which was evaluated regularly. Risk assessments were in place, up to date and where a risk was identified this was supported by an appropriate care plan. Staff were clearly familiar when supporting individuals, we observed staff providing the appropriate support as stated in the care plans we looked at.

**Met - within timescales**

## Requirement 2

The service must ensure that care planning details how the health and safety needs of residents are to be met. In order to do this the service must:

- i) review the current paperwork for monitoring of daily care input to ensure this is efficient and person centred
- ii) that where an issue is identified in the daily monitoring charts this is evaluated and appropriate care input is in place to safeguard the health and wellbeing of residents.

This is in order to comply with SSI 2011/210 Regulation 5(1), (2)(b)(c) - Personal plans.

**This requirement was made on 27 May 2016.**

### Action taken on previous requirement

We sampled additional monitoring charts on both floors. These were generally being completed well, some of the content varied within the food monitoring charts although completed did not always provide details on how much was eaten or what a soft diet involved. There were a few odd gaps in the oral hygiene charts but overall these had improved since the previous inspection.

**Met - within timescales**



## 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

The service should ensure that a robust induction and training programme is in place for new staff. In order to this they should ensure that:

- a) there are clear records of any orientation and induction that staff receive
- b) that part of their induction is specific to their job role
- c) that the induction is within a reasonable time scale to their start date
- d) that mandatory training is provided and that the person is deemed competent in this training prior to them working unsupervised. This includes, but is not limited to, practical moving and assistance training.

**This area for improvement was made on 2 August 2017.**

#### Action taken since then

We spoke to two staff members who had recently been recruited who confirmed they had received a two day classroom based induction. This involved looking at policies, procedures, best practice guidance as well as practical moving and handling training. Staff said this training had prepared them for starting work in the service. Once they started working in the home they were provided with a twelve week induction programme which covered a wide range of topics. They then worked through this with the assistance of more senior staff. This induction programme is currently under review by senior management and may be subject to further change.

Staff said they felt well informed and supported when they started working in the service. This area for improvement has been 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).

### Detailed evaluations

How well do we support people's wellbeing?	4 - Good
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 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?	4 - Good
4.2 The setting promotes and enables people's independence	4 - Good
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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