

Bon Accord Care - Balnagask House Care Home Service

North Balnagask Road
Aberdeen
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Telephone: 01224 871158

Type of inspection:

Unannounced

Completed on:

7 December 2018

Service provided by:

Bon Accord Care Limited

Service provider number:

SP2013012020

Service no:

CS2013315404

About the service

Balnagask House is a care home for older people and is registered to provide care to a maximum of 30 people, of which ten places may be used to provide respite and interim care. The home is situated within the residential area of Torry, to the south of Aberdeen City. The home is close to local amenities and served by a regular bus service to the city centre.

Balnagask House has accommodation on three floors. All of the bedrooms are single with en-suite toilets and wash hand basins. There are communal bathrooms and shower rooms on each floor. There is one large shared lounge area on the ground floor, just beside the front door, which is mostly utilised for group activities. In addition there are smaller communal lounges and dining areas on each floor.

The service states that it aims 'to provide a personalised, high quality and forward thinking service which responds to the needs of its customers and enables them to live as independently as possible.'

At the time of our inspection there were 20 permanent residents and ten people using the respite facility.

This service registered with the Care Inspectorate on 1 August 2013.

What people told us

Before our inspection we sent out ten questionnaires to people living in Balnagask House and all ten were returned. The replies were all positive with several comments written in addition to the boxes being ticked, for example:

"very hygienic environment"

"staff are always nice"

"staff look after my needs with respect"

"I feel safe and confident, I am happy here"

During our inspection we talked to people and received similar views with people saying that the carers and food were good.

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?	not assessed
How good is our staffing?	not assessed
How good is our setting?	not assessed
How well is our care and support planned?	3 - Adequate

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

We looked at how well Balnagask House supports people's wellbeing and found this aspect to be of a good standard. It is important that people are treated in a way that is courteous and respectful and we saw this demonstrated as the carers were kind and warm and took time to chat with people. The people that we spoke to all said that the carers were good.

The people living at Balnagask told us that the food was good and we saw people choosing from healthy meals and snacks. The manager told us that they recently worked with all people to ask what they would like to change about the menus and we saw that Balnagask House have achieved a Healthy Eating award and a Vegetarian eating award which showed us that meals could suit cultural and dietary needs and preferences. We saw people having unhurried mealtimes in a relaxed atmosphere.

There were weekly activities sheets on the noticeboards and people told us that "sometimes there are things to do". This was encouraging because people should be able to choose to have an active life and participate in a range of activities. This was an area where we discussed improvements with the manager. One good idea we observed was a Wishing Tree where key workers had talked with people to see what they would wish for, with the aim of achieving these wishes. This needed more action to fulfil what people had talked about.

A particularly good area in Balnagask House was the effort that went in to working with other people, for example health colleagues (GP, nurse, occupational therapist), the hair dresser who had been there for many years, the Therapist and the intergenerational working with local school and nursery children. One innovative result of this effort was that there were active discussions taking place with the aligned GPs about anticipatory care plans which would help people to discuss significant changes in their life.

We saw from the minutes of tenants meetings that they had not been held regularly. We discussed this with the manager who told us that this had been in response to the people saying they didn't want the meetings. The staff were now trying different ways to gather people's views on how they experience their care and support, for example by having smaller meetings on each floor.

Areas for improvement

1. The provider should improve the variety and location of activities throughout the house and garden, with an emphasis on individual enablement and independent accessibility as well as organised groups. This is to ensure care and support is consistent with the Health and Social Care Standard 1.25 which states that "I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors"
2. The provider should improve its checks on workers practice and corresponding records to satisfy themselves that best practice is consistently being carried out.

This is to ensure care and support is consistent with the Health and Social Care Standard 4.11 which states that "I experience high quality care and support based on relevant evidence, guidance and best practice"

How good is our leadership?

This key question was not assessed.

How good is our staff team?

This key question was not assessed.

How good is our setting?

This key question was not assessed.

How well is our care and support planned?

3 - Adequate

We looked at how the care and support in Balnagask House is planned and found it to be adequate. Every person had their support plan in their room and, following advice from the last inspection we saw that these had been regularly reviewed. We also saw evidence of relevant professionals being involved in people's assessments and that copies of legal documentation regarding people's wishes and capacity was held in the plans. A conversation with a family member confirmed that they were involved appropriately in discussions and they felt they could speak with staff if they wanted to. We noted an area in the plans to discuss how people want to live well right to the end of their life and what their wishes were and there was limited use made of this. This should lead to people's personal plans being right for them because it sets out how their needs will be met, as well as their wishes and choices. We found the plans were focussed on tasks and an area for improvement is to make them more focussed on what people want to achieve and what their wishes are.

Areas for improvement

1. The provider should ensure all staff are trained in person centred practice and enablement and support plans should be added to. They should include personal history and stories, wishes and choices. These support plans must be accurately followed to enhance people's lives as well as providing basic care.

This is to ensure the care and support is consistent with the Health and Social Care Standards 4.25 "I am confident that people are encouraged to be innovative in the way they support and care for me"

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

Requirements

Requirement 1

The provider must ensure that all residents have in place a suitable personal plan which supports their health and wellbeing needs being met. In order to achieve this the provider must ensure all residents' personal plans:

- contain sufficient, up-to-date and clear detail of their needs, preferences and routines and the plans to meet these
- contain details of any legal powers in respect of them, such as Incapacity Certificates or Powers of Attorney
- contain clear documentation which supports the justification and consent for any use of restraint
- contain assessments and care plans which are informed by up-to-date best practice
- are regularly and promptly reviewed and amended in accordance with any changes in their needs.

This requirement was made on 24 April 2018.

Action taken on previous requirement

Action taken on all points. The practice could be updated further and this is noted as an area for improvement in this report.

Met - within timescales

Requirement 2

In order to ensure that adequate numbers of staff are available at all times to meet the care and support needs of residents, the provider must:

- keep individual records of assessments of residents' physical, social, psychological and recreational needs and choices
- record this in each care plan as this will inform the direct care hours for the individual
- keep a record of the assessment that identifies the minimum staffing levels and deployment of staff on each shift over a four-week period. This will take into account aggregated information of the physical, social, psychological and recreational needs and choices in relation to the delivery of care for all individuals, also taking into account the physical layout of the building, staff training and staff supervision needs
- take account of the views, experiences and preferences of residents in determining whether staffing levels are adequate at all times of the day and week

- ensure that each shift is planned so that any activities which take staff away from the direct provision of care and support do not adversely impact on the experiences of residents

- ensure the overall assessment of staffing levels and deployment is available to any residents, relatives and other interested parties.

This requirement was made on 24 April 2018.

Action taken on previous requirement

Staffing has been reorganised, set people are named for different activities and responsibilities. More work needs to be done in relation to being person centred and encouraging many small activities and points for physical improvement through an individuals day. This is mentioned as an area for improvement in this inspection report.

Met - within timescales

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at 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 well is our care and support planned?	3 - Adequate
5.1 Assessment and care planning reflects people's planning needs and wishes	3 - Adequate

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