

Southside Care Home Care Home Service

40 Southside Road
Inverness
IV2 4XA

Telephone: 01463 226227

Type of inspection:

Unannounced

Completed on:

26 February 2019

Service provided by:

Southside Nursing Home Ltd

Service provider number:

SP2003002407

Service no:

CS2003010544

About the service we inspected

Southside Care Home is registered to provide a care home service to a maximum of 33 older people. This service has been registered since April 2002.

The care home is a converted, two storey Victorian town house situated within a quiet residential area of Inverness. Eight bedrooms have an ensuite toilet and three bedrooms have an ensuite shower. There are three showers and one bath, which people share.

There is a passenger lift between the ground floor and the lower split, upper floor. There is a chairlift between the ground floor and the upper split, upper floor. Between the split levels on the upper floor there is stair access only. The care home has a pleasant, enclosed garden to the rear of the building and a well maintained garden in the grounds at the front of the building. There is a small safe decking area off the front lounge.

From the home's brochure, the aims of the service include:

- Our aim is to ensure each resident feels safe, loved and happy, and finds fulfilment and satisfaction in daily life.
- Our care always respects the rights to dignity, privacy, choice, safety, individuality and confidentiality of our residents and their families.
- We achieve our aims through the hard work and dedication of our well qualified, highly trained staff, and we view their continuing professional development as crucial in continuing to provide the highest quality of service.

How we inspected the service

This inspection concentrated on the one requirement and four areas of improvement that were made as a result of the statutory inspection of 28 August 2018.

We sampled some people's care plans, reviewed the service's action plans, minutes of meetings and an audit of the environment. We took a tour of the environment, observed a mealtime experience, observed staff practice and spoke with people who live in the service, some relatives and staff. We also spoke with the newly appointed manager and a representative of the new owners.

Taking the views of people using the service into account

We spoke with several people during the inspection. They were able to tell us that they enjoyed living in the service. One told us that they felt safe, warm and cared for. Another said that they enjoyed the activities that were offered. All felt that the meals were of a good standard and that there was enough to eat. All felt that the staff were very good, that they were kind and caring and that they were very well cared for.

We could see that those people who may not be able to effectively communicate their needs were being supported by staff and that the staff's interactions were warm and caring.

Taking carers' views into account

We spoke with some relatives who were all happy with the level of care and support. One relative said that even during 'difficult times' the service had experienced in the past, their mother's care had in no way been compromised. Relatives said that they were kept informed about how their relative's healthcare needs were being addressed. One relative said that the new manager was good and supportive of the staff team.

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

Previous requirements

Requirement 1

In order to ensure people receive the right care in a way which meets their needs, wishes and choices the provider must by 1 March 2019:

- (a) Fully involve people and/or their representatives in assessing their emotional, psychological, social and physical needs at an early stage, regularly and when people's needs change.
- (b) Set out in people's care plans how their needs will be met, as well as their wishes and choices.
- (c) Fully involve people and/or their representatives in evaluating their care plans.
- (d) Use monitoring records and care plans to inform staff practice and deliver the right care.

This is in order to ensure that care planning is consistent with the Health and Social Care Standards 1.19 which state that 'My care and support meets my needs and is right for me' (HSCS 1.19). It is also necessary to comply with Regulation 5 (Personal Plans) of the Social Care and Social Work Improvement Scotland Regulations 2011.

This requirement was made on 17 October 2018.

Action taken on previous requirement

Since the last inspection the service had introduced a new care planning system and all people who used the service had been transferred to the new system. Staff had received training in relation to their use and had had protected time to achieve this.

We sampled some care plans. We also asked a senior staff member to show us how they were used and how the information gained helped them to plan effective care and support based on people's preferences, wishes and needs. They had very good knowledge of people's healthcare needs and how a person centred approach to planning of care helped to promote autonomy and choice.

We saw that the way staff planned the care was of a better standard as it was clear and regularly evaluated. We could see that some of the plans were of a person centred nature and that some people had been involved with developing these. Within some plans there was clear evidence that people's preferences and choices were being respected.

Various healthcare assessments and monitoring records were being used to ensure that the plans were up to date and meeting people's changing healthcare needs.

We felt that there had been enough significant improvement to meet this requirement. However, there were further developments that needed to take place, to ensure that all care plans were of a person centred manner.

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 provider should review and update their quality assurance policies, procedures and processes to support continuous improvement.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

This area for improvement was made on 28 August 2018.

Action taken since then

Since the last inspection the service was now under new ownership. The new senior management team had introduced their own quality assurance processes and systems. The use of the new processes had yet to be fully undertaken and was a work in progress.

Therefore, this area for improvement had not been met and remains in place. This will be reviewed at the next statutory inspection so that we can assess how they are being used to support continuous improvements.

Previous area for improvement 2

The provider should self-evaluate the quality of the service against the health and social care standards in order to make and implement a plan that improves outcomes and experiences for people.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

This area for improvement was made on 28 August 2018.

Action taken since then

Since the last inspection the service was now under new ownership. The newly appointed manager had developed an action plan that was aligned to the health and social care standards. However, this action plan was a work in progress and not all areas had been addressed. In addition, some of the areas did not have completion dates so that improvements could be assessed as being met.

Therefore, this area for improvement had not been met and remains in place. This will be reviewed at the next statutory inspection so that we can assess how they are being used to support continuous improvements.

Previous area for improvement 3

The environment should promote and enable people's independence. The provider should make and implement a written plan to improve the environment. The plan should include clear priorities and timescales.

This is to ensure that the setting is consistent with the Health and Social Care Standards which state

that 'The premises have been adapted, equipped and furnished to meet my needs and wishes' (HSCS 5.16).

This area for improvement was made on 28 August 2018.

Action taken since then

Since the last inspection the service was now under new ownership. The newly appointed manager and a senior care assistant had recently assessed the environment, to help make it more dementia friendly to help promote and enable people's independence. They were using the Kings Fund tool to assist them with this. However, an action plan had not yet been developed.

Therefore, this area for improvement had not been met and remains in place. This will be reviewed at the next statutory inspection so that we can assess how aspects of the environment were being addressed and improved.

Previous area for improvement 4

People should feel confident that staff are trained, competent and skilled in assessing, planning and evaluating care in an inclusive and person-led way.

This is in order to ensure that care planning is consistent with the Health and Social Care Standards which states that 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

This area for improvement was made on 28 August 2018.

Action taken since then

While staff had received training in relation to the use of the new care planning system, we could still evidence that some of the care plans were not of a person centred nature. Therefore, we felt that some staff needed more support to achieve the aims of person led care planning.

Therefore, this area for improvement had not been met and remains in place. This will be reviewed at the next statutory inspection so that we can assess how aspects of the care planning processes were being addressed and improved.

Complaints

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

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