

Bayview Care Home Care Home Service

Prospect Terrace
Cruden Bay
Peterhead
AB42 0HP

Telephone: 01779 812 900

Type of inspection:
Unannounced

Completed on:
13 September 2021

Service provided by:
Bayview Care Home Limited

Service provider number:
SP2017012997

Service no:
CS2017360828

About the service

Bayview Care Home is registered to provide a care service to a maximum of 30 people, including two people who are under 65 years. The service is provided by Bayview Care Home Limited which is part of the Meallmore group. At the time of our inspection there were 29 people living in the home.

The service is located in a quiet residential area of Cruden Bay. There are landscaped easy to access gardens and a summer house. Shared lounges and dining areas are located on the ground floor. All bedrooms are single rooms with toilet facilities. One shared bath is located on the first floor with shared shower rooms available on both floors.

The service's aims and objectives state that:

'Those living at Bayview and their families, must be assured that the care delivered is appropriate and timely, so we will work with them, along with other professionals and national programmes, in partnership to ensure we deliver enhanced benefits and support each resident to achieve their goals'.

The service registered with the Care Inspectorate on 17 May 2018.

This was a follow up inspection to assess the progress the service was making in meeting the requirements and area for improvement made at our inspection on 29 and 30 of July 2021.

This inspection was carried out by two inspectors from the Care Inspectorate.

What people told us

We spoke with a number of people during our inspection. Their comments and feedback informed our findings. Most people expressed contentment with the quality of their lives in the home. More people had been supported to access the shared lounges. This meant that people could sit and have a chat with others. There continued to be high satisfaction levels with the quality of the meals provided and the social aspect of dining resulted in an enjoyable experience of people in the dining area. People were positive about the care and support staff saying they were "kind", "lovely" and "a laugh".

Visiting was in line with the 'Open with care' guidance. This contributed to positive experiences for people. Visitors said that they were supported to visit when it was best for them and their loved one.

One person spoke about the care and compassion shown by all staff when the health of their loved one had deteriorated.

We felt that the quality of people's lives and experiences had improved.

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?	3 - Adequate
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How good is our care and support during the COVID-19 pandemic?	3 - Adequate
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Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

3 - Adequate

The service had implemented a detailed action plan following our previous inspection. This meant there was a focus on making the changes that were necessary in order to improve people's wellbeing and outcomes. We found the service had made the necessary improvements and met the requirements in relation to people's health benefitting from their care and support. However further work is needed to ensure that the numbers of staff on duty are consistent and sufficient to meet the changing needs of people.

1.3 People's health benefits from their care and support

Improvements had been made to the overview of wounds and the management of wounds in the home. There was improved links with allied professionals meaning that additional advice was available if there was a clinical need. This resulted in people with wounds receiving the care that was right for them.

Improvements had been made to the variety and availability of activities in the home. This meant that more people had the opportunity to be included and pass their time in a meaningful way.

We have re-evaluated the service to be performing at an adequate level. (See 'What the service has done to meet any requirements'.)

How good is our care and support during the COVID-19 pandemic?

3 - Adequate

7.3 Staffing arrangements are responsive to the changing needs of people experiencing care.

There continued to be inconsistencies with the number of care and support staff on duty. This impacted on the visibility of staff. The care staff were seen to work hard to meet the needs of people to an improved standard, however there were occasions when people were not able to get the care and support they needed when they wanted.

The service continues to be operating at an adequate level for this key statement. (See 'What the service has done to meet any requirements' and requirement 1.)

Requirements

1. By the 6 December 2021, the provider must ensure that there are the right number of staff on duty to ensure people's care needs are met. The number of staff should be determined by a robust assessment of people's needs taking into account the complexity of people's needs, outcomes and experiences for

residents and the layout of the building.

This is in order to ensure that staffing is consistent with the Health and Social Care Standards (HSCS) which state that:

'My needs are met by the right number of people.' (HSCS 3.15); and

This is in order to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'My needs are met by the right number of people.' (HSCS 3.15);

'People have time to support and care for me and to speak with me.' (HSCS 3.16); and

In order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 210/2011), Regulation 4(1)(a) - Welfare of Users.

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

Requirements

Requirement 1

By the 6 September 2021 the provider must ensure that improvements are made to how people, in particular those who remain in their bedrooms, are supported to take part in meaningful activities and engagement to help support their health and wellbeing and improve the quality of their day.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'My care and support meets my needs and is right for me.' (HSCS 1.19);

'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.' (HSCS 1.25); and

In order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Regulation 4(1)(a) - requirement for the health and welfare of service users.

This requirement was made on 2 August 2021.

Action taken on previous requirement

The new activities planner in place showed a more varied programme of activities. This helped more people to take part and be included. Staff were completing life stories and the POOL activity levels. The information gathered would be used to inform the activities programme and ensure that it was reflective of people's personal histories and preferences.

In records, we read outcome focused entries that detailed what people got out of certain activities. Staff appeared to be more responsive to people's needs for example, one person was unsettled and becoming anxious, the staff member offered and then assisted this person with a walk around the gardens.

There was increased access to the gardens and the numbers of trips out had increased. People were happy with this improvement.

Two people now had weekly planners in place to help them lead active and productive lives. These were focused on the likes of the person and would help structure their days.

Staff had completed surveys with people. People had made comments and suggestions, however this information was not used to inform changes. Whilst it is important for people to be supported to participate and feedback on the quality of the service, it is important for their views then to be acted upon.

Most people appeared content and happier with how they passed their time.

Met - outwith timescales

Requirement 2

By the 6 September 2021 the provider must ensure that people's wound care and wound prevention needs are met.

In particular you must:

- a) Ensure that all skin integrity risk assessments are accurate and updated regularly.
- b) When the needs of people change and the risk of skin breakdown rises, the necessary changes are made to their care and support.
- c) Ensure that staff deliver the care and support that is documented to prevent skin breakdown.
- d) Ensure that all wound care documents are completed accurately.
- e) Staff must have completed the relevant training and have the skills and knowledge in order for them to deliver the expected levels of care and support.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'My care and support meets my needs and is right for me.' (HSCS 1.19);

'I experience high quality care and support based on relevant evidence, guidance and best practices.' (HSCS 4.11); and

In order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(a) - Welfare of Users.

This requirement was made on 2 August 2021.

Action taken on previous requirement

Improvements had been made to the prevention and management of wounds and in wound care.

When advice was needed in relation to wound treatment, input from allied professionals had been sought. Their advice was acted upon quickly, meaning that the care the person received was right for them.

Care plans were detailed and gave clear instructions on the prescribed care and treatment of wounds. Ongoing wound assessments were completed, meaning that any improvement or deterioration in the condition of wounds could be highlighted.

Staff had completed training in wound prevention. Reflective accounts were completed following this training and these showed how staff would implement the training in the care and support of people. There was improved completion of observation records that showed when a person was assisted to change position. Mattresses used when the risks of skin breakdown were high, were all set at the appropriate setting.

The improvements made in supporting people who were at high risk of skin breakdown reduced the risks of them developing wounds.

Met - outwith timescales**Requirement 3**

By 6 September 2021, the provider must ensure that there are the right number of staff on duty to ensure people's care needs are met. The number of staff should be determined by a robust assessment of people's needs taking into account the complexity of people's needs, outcomes and experiences for residents and the layout of the building.

This is in order to ensure that staffing is consistent with the Health and Social Care Standards (HSCS) which state that:

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This requirement was made on 2 August 2021.

Action taken on previous requirement

There continued to be inconsistencies with staff numbers in the home.

The number of domestic assistants has increased and this will help ensure that there are the same number of domestics on shift every day. There is ongoing recruitment of care and support staff.

The new allocation sheet helped inform staff of their areas of responsibility for the shift. Staff were positive about this and said it helped organise their workload. However, when staff numbers fell below the optimum, how areas of the provision were met changed and this affected consistency and meeting people's expectations. For example, how the breakfast service was managed was reliant upon staff numbers. We found that buzzers went for long periods of time, when the number of care staff was reduced. Often last minute staff sickness impacted on staffing. A contingency plan should be in place to help support consistency.

People had completed feedback surveys and stated "I do think they are busy and can't always manage to see to things right away but I understand there is a lot of people here" and "sometimes more staff would help".

This requirement has been unmet and will be followed up.

Not met

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 make improvements to the accuracy of information in care plans and assessments. This will help inform the care and support provided and ensure that people receive the care that is right for them.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'My care and support meets my needs and is right for me.' (HSCS 1.19)

This area for improvement was made on 2 August 2021.

Action taken since then

Improvements had been made to the content of care plans and assessments. Improvements had been made to the wound care documentation meaning that the care and treatment of wounds was better managed.

Entries following input from allied professionals were more detailed and gave an account of the visit. This helped inform staff of any changes to prescribed care or treatment.

Entries completed by care staff were less task focused. The improvements meant that these entries were outcome focused.

The updating of care plans and assessments had started and these were now detailed and reflected the care, support and health needs of the person.

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.

Detailed evaluations

How well do we support people's wellbeing?	3 - Adequate
1.1 People experience compassion, dignity and respect	3 - Adequate
1.2 People get the most out of life	3 - Adequate
1.3 People's health benefits from their care and support	3 - Adequate

How good is our care and support during the COVID-19 pandemic?	3 - Adequate
7.2 Infection control practices support a safe environment for people experiencing care and staff	4 - Good
7.3 Staffing arrangements are responsive to the changing needs of people experiencing care	3 - Adequate

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