

Norwood Care Home Care Home Service

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Type of inspection:

Unannounced

Completed on:

28 September 2021

Service provided by:

Advinia Care Homes Limited

Service no:

CS2017361017

Service provider number:

SP2017013002



About the service

Norwood Care Home is registered to provide care to 54 older people. There were 28 residents living on the home during our inspection. The Provider is Advinia Care Homes Limited.

Norwood Care Home is located in Barrhead, East Renfrewshire with local amenities such as shops and transport links close by.

The home is on two floors and some bedrooms have en-suite facilities. There are other bathroom and toilet facilities available throughout the home. There are communal lounges and dining rooms on each floor and an enclosed garden. There is also a cinema room.

The mission of the home is 'to do our best to support our residents to live well through the provision of high quality care.'

What people told us

We were able to spend time with residents observing the care and support they received. We were able to have light conversations with some residents:

"I am happy I can keep busy. I like to help with painting. I like it here, they take good care of me. I recently moved rooms and I like it more."

"They take very good care of me. The girls are lovely and work hard. I have no complaints. I am content."

"I am very happy. I really enjoy the banter with the staff, they make me smile. I like my room. Not too happy about all the agency staff though - I don't really know some of them. I wish I could sing and join a choir. I would like more to do."

Resident was able to let us know through nodding her head that she was 'happy' living in the home. She was 'comfortable' and 'well looked after.'

"It's good here but I do get bored. I have my ipad but not sure how to use it. Staff are lovely and kind."

"The food is good, plenty of it. I enjoy the meals."

We received feedback from nine relatives who we either spoke with directly or who responded by email. We collated the overall themes and they are as follows:

There were many positive comments about the care received by residents. One relative said "I feel my mum is well looked after and she tells me that she likes it here." Another stated "I find the staff to be very caring and approachable. They show great respect towards my mother and always have time to discuss how my mother is doing." One relative noted a time they had been unhappy about the access to the call system for their loved one.

The majority of the comments received about staff were positive. One relative said "Norwood staff themselves, care is great. Agency staff can't speak for. See a difference in what agency staff can do compared to regular staff, depends on agency." Most said that the staff were noticeably busy.

The majority of comments were positive about how residents health and wellbeing was supported. Most comments focused on physical health and appearance, for example "Mum is always clean and hair done, looks great." Another said "She always looks good, I have no concerns about her health". One relative shared concerns about their loved ones food and nutrition and we asked them to contact the manager to discuss.

We received mixed comments about effective communication with relatives. One relative said "They communicate fairly well, bit hit and miss at times but I put it down to day to day busyness." Another told us "They let me know about any falls. I would like to hear more about activities." One other said "I have Facebook and have added on Facebook that not everyone communicates this way. To send out letter or phone call. Reply was that they have notice on window at doorway. This could be 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?	4 - Good
How good is our care and support during the COVID-19 pandemic?	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

We observed warm, caring and respectful interactions between staff and residents. Well established relationships were evident and permanent staff knew the choices and preferences of residents very well. At times we found care staff to be focussed on the task of caring, leaving little time to spend meaningfully with residents and this was a missed opportunity as residents responded positively when staff spent time with them.

Each resident had a visiting care plan which outlined their specific, agreed, visiting arrangements. Relatives could visit both indoors and outdoors in line with Scottish Government Open with Care guidance. We spoke with relatives who were happy with the visiting arrangements and residents really benefitted from this contact with their families.

We were told that the care plans were being moved onto an electronic system called PCS. It was hoped that this system would guide staff to record in a more person led manner and ensure that all care needs were assessed regularly. We did not get a sense of a resident's care and support needs from the care plans we looked at as they were in transition from one format to another. Staff should develop the skills to write care plans to support residents with stress and distress and anticipatory care, as examples, so that plans were reflective of each residents expressed wishes and needs.

Area for Improvement 1

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Activities within the home were enjoyed by residents, however they were limited to group and small one to one events. A recent garden party and coffee morning had taken place and residents and relatives 'loved' these occasions. We were told that a new activity staff member had been appointed and would start soon. We were aware that there were few meaningful opportunities for those living with dementia or cared for in their rooms. This meant that they did not receive the same quality of experience as those who were able to attend the organised programme of events.

Area for Improvement 2.

The dining areas were pleasant and the food, on the whole, was enjoyed by residents. Residents could choose where to have their meals. Staff were discreet when residents required assistance. Choices for food and drinks at mealtimes were offered which meant that residents were able to express their preferences. Any concerns with the nutritional needs of residents were discussed at frequent staff handover meetings.

We spoke with a visiting professional about the health needs of residents within Norwood. They found staff to be 'knowledgeable' and able to 'act on their advice'. There was good healthcare information in resident's care plans which gave assurance that staff were vigilant about the health needs of residents. We suggested a GP overview for a couple of residents and asked the home to follow this up to ensure that a thorough review could take place for the benefit of these residents. We sampled medication administration and found practice to be good which protected residents and promoted their well-being.

Areas for improvement

1. The activity programme provided should respond to the preferences and choices of all residents. All staff should see the value in offering meaningful opportunities for residents taking their abilities into account, particularly those living with dementia.

This ensures care and support is consistent with the Health and Social Care Standards which state 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.' (HSCS 1.25)

2. The care plans should be completed on PCS (electronic care plan system) as soon as possible and be person centred in content. Staff should be able to use the care plan to support all of the residents needs, not just their clinical needs. Each resident should have an Anticipatory Care Plan, and staff should ensure that any stress and distress care plans are reflective of the residents needs.

This ensures care and support is consistent with the Health and Social Care Standards, which state that "My care and support meets my needs and is right for me". (HSCS 1.19)

How good is our care and support during the 4 - Good COVID-19 pandemic?

Housekeeping staff at Norwood worked hard to keep the home clean and infection free. There were good audits and systems in place to support Infection Prevention and Control (IPC) practice. Staff used green 'I am clean' stickers on equipment which gave a strong pictorial prompt. Initial confusion over cleaning products and washing temperatures was addressed and clarified with housekeeping staff who were responsive to any guidance we gave. This protected residents by ensuring a consistent approach to the monitoring of IPC and the maintenance of acceptable standards of cleanliness and laundry management.

We found some areas, such as wheelchairs, hoists and bedding where enhanced cleaning and attention to detail would offer further protection for residents and staff. The management team took action to address these areas during the inspection.

Area for Improvement 1.

PPE stations and other equipment to keep residents and staff safe were readily available. There was ample signage to guide staff and residents to correctly wash their hands and good hand hygiene and mask practice was observed. This meant that staff were aware of current practice to safeguard residents from infection.

There were some areas of the home, such as handrails and flooring, which would benefit from refurbishment. The manager advised that she would send us an overview of her plans to address this as work was due to start in the near future.

Staff knew both residents and relatives very well. Relatives were complimentary about staff and wanted to tell us how much they appreciated the care and support they gave during these challenging times. The positive relationships we saw promoted a lively and friendly atmosphere which residents really enjoyed. Residents and relatives did share concerns about the level of agency staff being used by the home. Residents would prefer to have permanent staff that they can get to know.

Area for Improvement 2.

Staff had good opportunities to attend training and they could tell us about the current guidance and protocols. Training is an important part of ensuring that staff are kept up to date and their practice is safe for the well-being of residents. We were aware that formal supervision and staff meetings were sporadic. Staff also told us they were 'tired', 'fed up' and 'don't have much more to give.' It was good to see that this did not effect the quality of care that residents received however staff have the right to receive formal support. Informal support for staff should also be put in place to ensure that they can express how they are feeling and share any concerns, particularly during these difficult times of Covid-19.

Also in Area for Improvement 2.

Areas for improvement

1. Staff should follow all protocols and guidance when completing IPC tasks. This includes safe management of laundry, attention to detail when cleaning equipment and ensuring that all bedding is fit for purpose.

This is to ensure care and support is consistent with Health and Social Care Standards which state 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)

The provider should continue to actively recruit staff to decrease the number of agency staff being used. Permanent staff should access to formal and informal support. This support should make staff feel valued and less focussed on task orientated practice.

This is to ensure care and support is consistent with Health and Social Care Standards which state that: 'My needs are met by the right number of people.' (HSCS 3.15)

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 needs to review the range and variety of activities on offer to ensure that these meet the interests and wishes of those living in the services.

This is to ensure care and support is consistent with the Health and Social Care Standards which states: '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)

This area for improvement was made on 10 August 2020.

Action taken since then

They have a new activity worked for 22 hours who is developing activities and a new full time new worker has been employed to start soon. They have had a couple of nice larger events such as a garden party. They have a residents meeting planned for 29 September. There is a small amount of 1:1 contact and the activity staff member knows that it is not enough. They need to develop activities for those living with dementia and cared for in their rooms.

This area for improvement will continue.

Previous area for improvement 2

The service needs to improve the detail and content of staff's daily handovers in relation to those living in the service. This is to ensure that information is clearly passed on between shifts and where follow up action is required that this be followed through.

This is to ensure care and support is consistent with Health and Social Care Standards which states: 'I experience high quality of care and support because people have the necessary information and resources.' (HSCS 4.27)

This area for improvement was made on 10 August 2020.

Action taken since then

We attended two handovers and there was plenty of detail and discussion. Handheld PCS (electronic care plan system) gives all staff an overview of handover notes. Fluid intake, creams, all noted and discussed at handover.

This area for improvement has been met.

Previous area for improvement 3

The service need to develop effective communication with service users representatives to ensure that people are kept regularly informed of their relatives wellbeing.

This is to ensure care and support is consistent with Health and Social Care Standards which states: 'I am supported to manage my relationships with my family, friends or partner in a way that suits my wellbeing.' (HSCS 2.18)

This area for improvement was made on 10 August 2020.

Action taken since then

The home has sent out one newsletter and hope to do more. Recent relatives meeting only one attended - hope to have another one soon. Use facebook, zoom etc to keep in touch. They will continue to develop this through keyworking. Relatives felt that communication was improving.

This area for improvement has been met.

Previous area for improvement 4

The service should ensure that all staff undertake training relating to end of life care and support.

This is to ensure that care and support is consistent with the Health and Social Care Standards which states: 'I experience high quality care and support based on relevant evidence, guidance and best practice.' (HSCS 4.11)

This area for improvement was made on 10 August 2020.

Action taken since then

We saw evidence from April 2021 where staff had attended hospice training. There was also an e-learning module. One nurse has hospice background and will support staff in this area. Anticipatory Care Plans will be included in Area for Improvment re care planning.

This area for improvement has been met.

Previous area for improvement 5

The service should ensure that regular recorded observation of staff practice takes place to ensure staff practices are appropriate.

This is to ensure that care and support is consistent with the Health and Social Care Standards which states: 'I experience high quality care and support based on relevant evidence, guidance and best practice.' (HSCS 4.11)

This area for improvement was made on 10 August 2020.

Action taken since then

We saw evidence of observations of practice of donning and doffing, hand hygiene and PPE. Good level of compliance and this will continue. Findings cascaded to staff for their development.

This area for improvement has been met.

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Previous area for improvement 6

The provider should ensure that people, where possible, are able to access the outside space freely without having to seek staff assistance.

This is to ensure care and support is consistent with the Health and Social Care Standards which states: 'I can independently access the parts of the premises I use and the environment has been designed to promote this.' (HSCS 5.11)

This area for improvement was made on 10 August 2020.

Action taken since then

We spent time in the garden with manager and regional director. They agreed to get costings for fence so that another door could be used for free access to the garden. Fire service due in a couple of weeks. Maintenance will check with them re this and fire doors/access etc. They assured us this would be addressed. We will review at next inspection.

This area for improvement has been met.

Previous area for improvement 7

The provider should ensure the service has detailed management audits of the practices and cleanliness of the environment, and all equipment used by and for those living there.

This is to ensure that care and support is consistent with the Health and Social Care Standards which states: '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 10 August 2020.

Action taken since then

Advinia has own 'Protect and Prevent' manual, details cleaning regimes/procedures and products. Checklists and audits in place. Service is clean, no malodours, bathrooms and cleaning areas very good standard. Observed equipment being wiped down after use. Enhanced cleaning schedule completed by housekeeping and night staff. People had individual pieces of equipment.

This area for improvement has been met.

Previous area for improvement 8

The service should continue to further develop people's care plans to ensure that they clearly highlight what people can do for themselves as well as support needed from staff.

This is to ensure care and support is consistent with Health and Social Care Standards which states: 'My personal plan is right for me because it sets out how my needs will be met, as well as my wishes and choices.' (HSCS 1.15)

This area for improvement was made on 10 August 2020.

Action taken since then

Plans being moved from paper to PCS system. Language not always person centred. We discussed this fully with the management team.

This area for improvement will continue.

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 good is our care and support during the COVID-19 pandemic?	4 - Good
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	4 - Good

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