

Netherton Court Nursing Home Care Home Service

7-11 Netherton Road
Wishaw
ML2 0BP

Telephone: 01698 373 344

Type of inspection:
Unannounced

Completed on:
11 January 2023

Service provided by:
Thistle Healthcare Limited

Service provider number:
SP2003002348

Service no:
CS2003010587

About the service

Netherton Court Nursing Home is situated in a residential area of Wishaw in North Lanarkshire and is provided by Thistle Healthcare Limited.

Netherton Court provides care and support for up to 63 older people with physical and cognitive impairment. It is accessible to public transport link routes, local shops, and community amenities.

The home is purpose built over two levels with a passenger lift providing access to the first floor. All rooms provide single, ensuite 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.

The service states its aims and objectives are to "Ensure that residents, including those who live with dementia, are supported in a person-centred environment, feel valued and respected as individuals. We acknowledge that people may experience levels of frailty, however, our aim is to support you to manage your symptoms and improve your quality of life as well as promoting your independence."

At the time of this inspection there were 60 people living in Netherton Court.

About the inspection

This was a follow-up inspection which took place on 10 January 2023. The inspection was carried out by two inspectors from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service, and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with six people using the service
- spoke with 10 staff and management
- observed practice and daily life
- reviewed documents
- contacted health professionals.

Key messages

- The service met both requirements and two of the four areas for improvement made at the previous inspection.
- We raised some concerns around poor infection control. We were pleased to note immediate action was taken with an action plan put in place to ensure improvements made were maintained.

How well do we support people's wellbeing?

There was a requirement to improve the range of meaningful activities made at the last inspection. The activity co-ordinators had worked hard and we could see vast improvements.

We have met this requirement, but made an area for improvement that activities are regularly reviewed and evaluated. This will ensure people continue to be offered activities they want to take part in.

Further information is detailed in the section 'What the service has done to meet any requirements made at or since the last inspection.'

Areas for improvement

1.

To ensure activities continue to meet peoples' choices and preferences, you, the provider, should regularly review and evaluate their activity plan.

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

How good is our staff team?

There was a requirement made at the last inspection around staff being appropriately trained in dementia care and stress and distress. We were satisfied that enough progress had been made to meet the requirement. However, we have made an area for improvement that the dementia training plan is fully implemented. This would give staff additional skills and knowledge to support people appropriately and help keep them safe.

Further information is detailed in the section 'What the service has done to meet any requirements made at or since the last inspection.'

An area for improvement was made following an upheld complaint around the recording of inductions for new staff, including agency staff. We did not find enough progress to meet this area for improvement and have repeated it.

Further information is detailed in the section 'What the service has done to meet any areas for improvement we made at or since the last inspection.'

Areas for improvement

1. In order to ensure the safety and wellbeing of people experiencing care, the manager should ensure that the induction process is recorded and retained for all staff members, including the induction process for agency staff.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: 'I use a service and organisation that are well led and managed' (HSCS 4.23).

2. To provide staff with the necessary skills to support people, you, the provider, must provide relevant training.

This is to ensure care and support is consistent with Health and Social Care Standard (HSCS) which state: '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), and Scottish Social Services Council (SSSC) Code 6 which state: 'As a social care worker, you must be accountable for the quality of your work and take responsibility for maintaining and improving your knowledge and skills.'

How good is our setting?

There was an area for improvement made at the last inspection around improving parts of the environment. The work had been completed and this area for improvement had been met.

Further information is detailed in the section 'What the service has done to meet any areas for improvement we made at or since the last inspection.'

How well is our care and support planned?

We made two areas for improvement at the last inspection. The areas for improvement were around the further development of stress and distress care plans and end of life plans. There was still progress to be made regarding stress and distress care plans. The improvements to end of life care plans had been met.

Further information is detailed in the section 'What the service has done to meet any areas for improvement we made at or since the last inspection.'

Areas for improvement

1. To provide detailed guidance for staff, you, the provider, should continue to develop care plans.

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

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

Requirements

Requirement 1

By 2 September 2022, you, the provider, must provide a varied programme of meaningful activities.

To do this, you, the provider, must at a minimum:

- a) provide opportunities for all residents to have access to the garden;
- b) provide an activity plan developed from peoples' interests and hobbies;
- c) provide a range of meaningful activities for people living in the service; and
- d) provide opportunities for people to be out in the community.

This is to comply with Regulation 4 - Welfare of users of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011.

This is to ensure care and support is consistent with Health and Social Care Standard (HSCS) which state: 'My care and support meets my needs and is right for me' (HSCS 1.19).

We have restated this requirement with a new timescale of 8 December 2022.

This requirement was made on 13 May 2022.

Action taken on previous requirement

There were two activity co-ordinators working in the home. They had spent time with each person to find out what kind of activities they liked and would want to take part in. When it was difficult to get this information from the person living in the home, their family member was asked for any ideas. This information was used to develop a person centred activity plan. This meant people had opportunities to take part in activities they were interested in.

The activity plan had vastly improved to provide a varied programme of meaningful activities such as arts and crafts, exercise, and going into the community for lunch. Being outside is good for peoples' mental health and wellbeing, so we were pleased to hear of people out walking round the garden, which was a lovely well tended space.

As we were satisfied the actions taken had lead to the development of a stimulating and varied activity programme, we have met this requirement. However, we have made an area for improvement that activities are regularly reviewed and evaluated. This will ensure people continue to be offered activities they want to take part in.

Met - within timescales

Requirement 2

By 2 September 2022, you, the provider, must ensure all staff have completed appropriate training.

To do this, you, the provider, must at a minimum:

- a) ensure all staff complete their mandatory and refresher training in the expected timescales;
- b) staff have dementia skilled training if relevant to their role; and
- c) staff are trained to support people with stress and distress.

This is to comply with Regulation 15 - staffing of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011.

This is to ensure care and support is consistent with Health and Social Care Standard (HSCS) which state: '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), and Scottish Social Services Council (SSSC) code 6 which state: 'As a social care worker, you must be accountable for the quality of your work and take responsibility for maintaining and improving your knowledge and skills.'

We have restated this requirement with a new timescale of 8 December 2022.

This requirement was made on 13 May 2022.

Action taken on previous requirement

We were satisfied that staff mandatory training was up-to-date.

All staff had completed dementia informed level training. Dementia skilled level was currently being rolled out with an expectation all staff will have completed this by March.

Supporting people with stress and distress was part of the skilled level dementia training. Therefore, when staff have completed the dementia skilled level they will also have the skills and knowledge to support people in stressful situations.

We have met this requirement, but made an area for improvement to ensure the training rollout continues.

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

To provide high quality facilities, you, the provider, should carry out the identified improvements to the environment.

This is to ensure that care and support is consistent with the Health and Social Care Standard (HSCS) which state: 'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment' (HSCS5.22).

This area for improvement was made on 13 May 2022.

This area for improvement was made on 13 May 2022.

Action taken since then

We were provided with an updated environmental plan that showed all identified improvements had been made.

This has been met.

Previous area for improvement 2

To provide detailed guidance for staff, you, the provider, should continue to develop care plans.

This is to ensure that care and support is consistent with the Health and Social Care Standard (HSCS) which state: '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 13 May 2022.

Action taken since then

The quality of the information provided in stress and distress plans was inconsistent. Some were well written and clearly guided staff in the best way to support someone who was distressed. However, some were vague with limited information. Providing a detailed stress and distress plan would support a person centred approach which may help defuse a challenging situation. This may help keep the person and the staff member safe.

This is repeated.

Previous area for improvement 3

The provider should develop end of life care plans for all residents which fully reflect the wishes and choices of the individual.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state: 'My personal plan (sometimes referred to as a care 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), and 'I am supported to discuss significant changes in my life, including death or dying, and this is handled sensitively' (HSCS 1.7).

This area for improvement was made on 13 May 2022.

This area for improvement was made on 13 May 2022.

Action taken since then

We found end of life care plans were in place and fully completed. Peoples' end of life wishes were recorded and being reviewed regularly to ensure the plan continued to meet their needs.

This has been met.

Previous area for improvement 4

In order to ensure the safety and wellbeing of people experiencing care, the manager should ensure that the induction process is recorded and retained for all staff members, including the induction process for agency staff.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: 'I use a service and organisation that are well led and managed' (HSCS 4.23).

This area for improvement was made on 1 November 2022.

Action taken since then

The induction process for new permanent staff was well recorded. This included shadow shifts with new staff reflecting on what they had observed and learned. However, the induction process for agency staff was poorly recorded. There were large parts of inductions not completed, some were not signed or dated. This meant there was no evidence the agency staff member had completed an induction.

This is repeated.

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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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

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