

# Inspection report

## Seaview House Nursing Home Care Home Service

Broadhaven Road  
Wick KW14 4RF

**Inspected by:** Lee Gordon  
**(Care Commission Officer)**

**Type of inspection:** Announced

**Inspection completed on:** 22 August 2007

**Service Number**

CS2007142989

**Service name**

Seaview House Nursing Home

**Service address**Broadhaven Road  
Wick KW14 4RF**Provider Number**

SP2003002454

**Provider Name**

Barchester Healthcare Ltd

**Inspected By**Lee Gordon  
Care Commission Officer**Inspection Type**

Announced

**Inspection Completed**

22 August 2007

**Period since last inspection**

Five months.

**Local Office Address**1st Floor, Castle House, Fairways Business Park,  
Inverness, IV2 6AA.

## **Introduction**

The care home is registered to provide a care service to a maximum of 42 older people, one of which could be an adult with physical and sensory impairment, including people with dementia. The service had also provided a respite/short breaks service. Nursing care is provided.

The service was first registered with the Care Commission on 31st January 2007.

## **Basis of Report**

This was an announced inspection by the Care Commission. During the inspection the Care Commission Officer (CCO) spoke with the manager, staff, service users and observed staff practice. The Care Commission Officer also looked at various policies, procedures and documentation including:

- Personal plans
- Adult protection
- Staff records
- Training records
- Restraint

Prior to the inspection the manager submitted an updated Annual Return. Annual Returns are used to ensure that the Care Commission has up to date and accurate information regarding the service.

This service was inspected after a Regulation Support Assessment (RSA) was carried out to determine the intensity of inspection necessary. The RSA is an assessment undertaken by the Care Commission Officer (CCO) which considers: complaints activity, changes in the provision of the service, nature of notifications made to the Care Commission by the service (such as absence of a manager) and action taken upon requirements. The CCO will also have considered how the service responded to situations and issues as part of the RSA.

This assessment resulted in this service receiving a low RSA score and so a low intensity inspection was required as a result. The inspection was then based upon the relevant inspection focus area(s) and follow up on any recommendations and requirements from previous inspections, complaints or other regulatory activity.

The inspection was therefore based upon Protecting People, specifically Child protection, Adult Protection, Restraint and the requirements of the Scottish Social Services Council with regard to staff training. This has been reported on through the relevant parts of the National Care Standards Care Homes for Older People Standard 5 - Management and Staffing Arrangements.

The Fire (Scotland) Act 2005 introduced new regulatory arrangements in respect of fire safety, on 1 October 2006. In terms of those arrangements, responsibility for enforcing the statutory provisions in relation to fire safety now lies with the Fire and Rescue service for the area in which a care service is located. Accordingly, the Care Commission will no longer report on matters of fire safety as part of its regulatory function, but, where significant fire safety issues become apparent, will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Further advice on your responsibilities is available at [www.infoscotland.com/firelaw](http://www.infoscotland.com/firelaw)

**Action taken on requirements in last Inspection Report**

There was one recommendation from the last inspection:

National Care Standard 2 - The service needs to ensure that all relevant written financial policies and procedures are in place ( Recommendation no.1 ). This had not yet been actioned.

**Comments on Self-Evaluation**

Self-evaluation had assisted the inspection process.

**View of Service Users**

Service users spoken with were very complimentary regarding the care and support they received from staff.

**View of Carers**

N/A

## **Regulations / Principles**

**Regulation :**

**Strengths**

**Areas for Development**

## **National Care Standards**

### **National Care Standard Number 5: Care Homes for Older People - Management and Staffing Arrangements**

**Strengths**

The manager had stated that the provider was about to introduce policies with regard to children visiting the service and child protection.

The service had a relevant policy on protecting vulnerable adults. The service had a copy of the Area Inter-Agency Adult Protection procedures. There had been no adult abuse concerns over the previous inspection year. Staff had received in-house training on protection of vulnerable adults. The manager and deputy manager had received training on protecting vulnerable adults organised by the Local Authority, NHS and Northern Constabulary.

The service had a relevant policy on restraint in place. At the time of inspection no service users were identified as requiring a risk assessment in place related to restraint. The manager had indicated that, if appropriate, service users would have a written risk assessment in place for restraint and this would be reviewed regularly.

The service had a copy of " Rights, Risks and limits to Freedom " and " Safe to Wander " - Mental Welfare Commission Best Practice Guidance.

A training needs assessment had been completed for staff and a staff training and development policy was in place. The service also provided access to training for staff to allow them to meet the training qualifications required to meet SSSC ( Scottish Social Services Council ) registration criteria. Fourteen staff had completed NVQ ( National Vocational Qualification ) level two and four of those staff had completed NVQ level three. Four staff were in progress with NVQ level two. The staff training programme delivered statutory and non-statutory training. The effectiveness of staff training was evaluated through appraisal, observation of practice and evaluation of questionnaires.

**Areas for Development**

Staff had not received training in relation to restraint issues, assessment and recording. Staff must receive appropriate training, assessment and record keeping associated with restraint (

Requirement no.1 ).

Staff had not received training in direct physical restraint. Staff must receive training in safe techniques of physical restraint ( Requirement no.2 ).

**Enforcement**

There has been no enforcement action against this service since the last inspection.

**Other Information**

N/A

**Requirements**

Staff must receive appropriate training, assessment and record keeping associated with restraint ( Requirement no.1 ). Timescale - within 9 months on receipt of report.

This in order to comply with SSI 2002/114 Regulation 13 - a requirement that a provider shall, having regard for the size and nature of the service, the statement of aims and objectives and the number and needs of the service and ensure that persons employed in the provision of the care service receive training appropriate to the work they are to perform.

Staff must receive training in safe techniques of physical restraint ( Requirement no.2 ). Timescale - within 9 months on receipt of report.

This in order to comply with SSI 2002/114 Regulation 13 - a requirement that a provider shall, having regard for the size and nature of the service, the statement of aims and objectives and the number and needs of the service and ensure that persons employed in the provision of the care service receive training appropriate to the work they are to perform.

**Recommendations**

N/A

**Lee Gordon**

**Care Commission Officer**