

Inspection report

Seaview House Nursing Home Care Home Service

Broadhaven Road
Wick KW1 4RF

Inspected by: John Rushforth
(Care Commission Officer)

Type of inspection: Announced

Inspection completed on: 7 October 2008

Service Number

CS2007142989

Service name

Seaview House Nursing Home

Service addressBroadhaven Road
Wick KW1 4RF**Provider Number**

SP2003002454

Provider Name

Barchester Healthcare Ltd

Inspected ByJohn Rushforth
Care Commission Officer**Inspection Type**

Announced

Inspection Completed

7 October 2008

Period since last inspection

10 months

Local Office AddressPhoenix House
1 Wards Road
Elgin
IV30 1QL

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 also provided a respite/short breaks service. Nursing care is provided.

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

The service's aims are: "to create an environment where residents can maintain their independence, rights and identity. We treat our residents uniquely as individual people in an environment that supports physical and mental wellbeing. Thus a spirit of trust and confidence between residents and care professionals can be assured and expected".

Based on the findings of this inspection the service has been awarded the following grades:

Quality of Care and Support - 5 - Very Good

Quality of Environment - 4 - Good

Quality of Staffing - 5 - Very Good

Quality of Management and Leadership - 5 - Very Good

This inspection report and grades represent the Care Commission's assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. Please refer to the care services register on the Care Commission's website (www.carecommission.com) for the most up-to-date grades for this service.

Basis of Report

The Annual Return

The service submitted a completed Annual Return as requested by the Care Commission.

The Self-Assessment Form

The service submitted a self-assessment form as requested by the Care Commission.

Regulation Support Assessment

The inspection plan for this service was decided 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. The inspection was based on the relevant Inspection Focus Areas and associated National Care Standards, recommendations and requirements from previous inspections and complaints or other regulatory activity.

LOW

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During the inspection process

Staff at inspection

During the inspection the Care Commission Officers met with the Manager and a number of staff.

Evidence

Evidence was gathered from a number of sources including:

Discussion with proprietor, manager and staff, observation of practice, viewing of premises, annual return, service's self assessment, comments noted in returned care standards questionnaires, the service's information brochure for service users/carers and other relevant documentation. The Care Commission Officers spoke with 10 service users to gain their feelings and opinion of the service.

Inspection Focus Areas and links to Quality Themes and Statements for 2008/09

Details of the inspection focus and associated Quality Themes to be used in inspecting each type of care service in 2008/09 and supporting inspection guidance, can be found at:

<http://www.carecommission.com/>

Fire Safety Issues

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

Action taken on requirements since last Inspection

The previous inspection did not make any requirements.

Comments on Self Assessment

The self evaluation document was completed and areas for development noted.

View of Service Users

View of Carers

The Care Commission Officers had the opportunity to speak with one carer who spoke most highly of the care and services of Seaview House. They found staff very approachable and caring. The Care Commission also received 2 care standards questionnaires returned by carers, both of which contained positive responses.

Quality Theme 1: Quality of Care and Support

Overall CCO Theme Grading: 5 - Very Good

Statement 1: We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service Strengths

The findings in this section are based on Quality Statements 1.1 and 1.2.

The service has a clear policy of welcoming participation by service users and carers.

Service users when speaking with the Care Commission Officers were keen to say how they felt involved in the service and how they felt able to easily speak with staff about the care and services. All service users can have a copy of their personal plan and service users spoken with understood the content of their plan and how they can alter it and control the content of the plan. Staff interviewed understood the importance of personal planning and the centrality of service users' participation in the process of personal planning.

In order to obtain feedback from service users on the quality of the care and support offered, there is regular examination of personal plans by the management, questionnaires used with service users and carers. In order to ensure impartiality with the results, these are compiled by an outside agency. The service can also see the results of surveys set against the company as a whole and regionally. This enables the service to be able to gain some benchmark on the service.

Regular resident meetings are held. The minutes from these meetings indicated that there were often discussions held on various issues regarding service delivery.

From the above evidence it was clear that there is an ethos and working practice of participation of service users in examining the quality of service provision.

Based on the finding of this inspection the service has been awarded the following grade
Quality Statement 1.1, 5 - Very Good

Areas for Development

The management and staff were continuing to work to meet this quality theme.

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Statement 2: We enable service users to make individual choices and ensure that every service user can be supported to achieve their potential

Service Strengths

The findings in this section are based on Quality Statements 1.1 and 1.2.

Personal plans offered evidence of the importance placed on individual choice for service users. The personal plans examined showed clearly service users or their carers involvement in the process. Service users spoken with had some sense of ownership of their personal plan and understood why they were being produced. There were examples where personal plans had been altered at the request of service users. There was further evidence of service users and carers' full involvement in the review of personal plans.

The service's diary/daily recording and activities plans displayed that service users are encouraged to participate in cultural, social and religious activities which take part both within the home and within the community. Personal plans for service users explained clearly the level of involvement that a service user desired.

Service users choose their main meal "at the table". The service have recently employed a staff member whose sole responsibility is as a hostess. This has freed up staff time to be involved with service users in activities both at an individual; and group level. Service users and visitors have access to snacks and drinks at all times.

Part of the personal planning processes was to complete a risk assessment with regards to managing finances and medication. Personal plans examined showed the level of involvement required by staff.

Based on the finding of this inspection the service has been awarded the following grade Quality Statement 1.2, 5 - Very Good

Areas for Development

The management and staff were continuing to work to meet this standard.

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Quality Theme 2: Quality of Environment

Overall CCO Theme Grading: 4 - Good

Statement 1: We ensure that service users and carers participate in assessing and improving the quality of the environment within the service.

Service Strengths

The evidence in Quality Themes 1.1 and 1.2 are relevant to this section.

From the responses received to the Care Commission's care standards questionnaires given to service users, it was clear that service users feel able to exercise choices over the environment and feel staff take their feelings into account.

The observed behaviour of service users was that they made full use of the environment e.g. service users were sitting in the garden area, using various lounges or using their own bedrooms. There were activities of varying nature taking place in most of the lounges.

The residents' meetings in the past have discussed and made suggestions over the environment.

The manager outlined some plans for the alteration to the grounds to enable them to be more accessible to service users and indicated that the residents' meetings would be a good forum to get service users' ideas on any changes.

Based on the finding of this inspection the service has been awarded the following grade Quality Statement 2.1, 5 Very Good.

Areas for Development

The management and staff were continuing to work to meet this quality theme.

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Statement 2: We make sure that the environment is safe and service users are protected

Service Strengths

The findings in this section are based on Quality Statements 2.1 and 2.2.

The service has developed policies and procedures with regards to health and safety which included:-

- Accident and incidents
- Fire safety
- Environmental health
- Recording of maintenance
- Staff recruitment, including health checks and interview procedures
- Risk assessment
- Medication, including safe storage.

From records seen by the Care Commission Officers the service was adhering to these policies and procedures. The Manager gave a number of examples where procedures had been followed and amended due to experience. Staff training records show that suitable training is offered to all staff.

The service's storage and medication practices are regularly checked by the local pharmacist in order to ensure safe handling.

Staffing levels are maintained at the levels shown on the service's staffing schedule.

The Manager outlined the plans for one of the wings in developing the environment to be more suitable for service users with a higher level of dementia. This included a specifically designed kitchen area, lounge areas and general decor. This work was due to start to start very shortly.

Based on the finding of this inspection the service has been awarded the following grade
Quality Statement 2.2, 4 - Good

Areas for Development

In line with the service's self assessment document it would be good practice to train a staff member to take the lead in Health and Safety.

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

0

Quality Theme 3: Quality of Staffing

Overall CCO Theme Grading: 5 - Very Good

Statement 1: We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service Strengths

The findings in this section are based on Quality Statements 3.1 and 3.2.

Part of the interview process for new staff is to meet with service users within the various units. Service users are then asked for their opinions on the candidate and their views are taken into account by the interview panels.

As indicated elsewhere, there is an ethos in Seaview House of seeking the participation and views of service users and this covers all areas of the service including staffing issues. Service users and carers' views are sought regarding the quality of staffing in "customer service" feedback questionnaires. There is also an opportunity at the review of service user's personal plans to access service users' opinions on the quality of staffing.

The service are constantly looking for ways to gain more feedback and participation of service users and carers as evidenced by the focus group initiative.

Based on the finding of this inspection the service has been awarded the following grade Quality Statement 3.2, 5 - Very Good

Areas for Development

The work started on trying to set up carers' meetings should be continued.

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Statement 2: We are confident that our staff have been recruited, and inducted, in a safe and robust manner to protect service users and staff.

Service Strengths

The findings in this section are based on Quality Statements 3.1 and 3.2.

The service has clear recruitment policies and procedures which are followed for all staff applications. These procedures include equal opportunities monitoring, disclosure checks

and reference checks for all staff.

Information from the Scottish Social Services Council regarding staff registration timetabling was on display and staff spoken with were aware of their obligations regarding registration.

A comprehensive induction programme is in place for all new staff. This included evidence of competency levels. Staff spoken with explained how they accessed training events, both internally and external training. There was further evidence from staff training files which displayed a very good level of take-up of training opportunities.

Based on the finding of this inspection the service has been awarded the following grade
Quality Statement 3.2, 5 - Very Good

Areas for Development

The management and staff were continuing to work to meet this standard.

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Quality Theme 4: Quality of Management and Leadership

Overall CCO Theme Grading: 5 - Very Good

Statement 1: We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Service Strengths

The findings in this section are based on Quality Statements 4.1 and 4.4.

The evidence in the previous quality statements is relevant to this quality theme.

The management of the service attempts to promote an ethos and culture of participation by service users and carers. This is achieved by use of various methods including questionnaires, reviews of personal planning, reviews of care practice by staff, regular reviews of policies and procedures and developing personal contact between staff and service users and carers.

From the responses received to the Care Commission's care standards questionnaire and from responses to the services own questionnaire it would appear that the management of the service are successfully achieving a culture of participation.

Based on the finding of this inspection the service has been awarded the following grade Quality Statement 4.1, 5 Very Good

Areas for Development

The management and staff were continuing to work to meet this quality theme.

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Statement 4: We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide.

Service Strengths

The findings in this section are based on Quality Statements 4.1 and 4.4.

The evidence in the previous quality statements is relevant to this quality theme.

The service has a formal over arching quality assurance system. There are a number of

significant quality assurance practices which take place within the service, e.g. induction programme for new staff, regular reports by the management to her line management, a number of systems which were in place to ensure regular reviews of personal plans and staff practices. As evidenced in other quality themes the service attempts to operate within an ethos and culture of participation with some success.

The Manager was aware of her responsibilities under the Scottish Social Services Council and plans were in place for the registration of staff when that becomes necessary.

Based on the finding of this inspection the service has been awarded the following grade
Quality Statement 4.4, 5 Very Good

Areas for Development

Discussions were held with the Manager over potential ways to improve accessibility by staff to the information kept in service users' files. The difficulties experienced by staff had led them to a solution which upon examination was not acceptable. Work should continue on finding a way that busy care staff can quickly access important information of service users' care needs.

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Regulations / Principles

National Care Standards

Enforcement

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

Other Information

The Care Commission Officers (CCOs) would like to thank the manager and staff for their cooperation in participating in piloting an assessment tool commissioned by the Care Commission and based on research conducted at Bradford and Sheffield universities. The assessment tool aimed to assist the inspection process by providing a structured framework for Care Commission Officers to consider the extent to which the care environment is either enriched or impoverished and to identify the issues that emerge for improving the quality of care within a care home.

Additionally, the CCOs used the "Short Observational Framework for Inspection" to assess to what extent the care home enriched the experience of care for those service users who have very high support needs and who are not able to communicate their needs and views verbally.

A focused observation of the interaction between staff and service users was used to inform the assessment. The observation took place over a period of two hours in the dementia unit located within the care home.

The interaction between staff and service users was good. Staff communicated with service users appropriately and showed respect. From the verbal exchanges between staff and with service users, it was evident that that staff knew service users well and were familiar with their support needs and preferred daily routines.

There were a range of activities offered for service users to participate in. Staff promoted service user engagement appropriately and there was a good level of stimulation experienced by most of the observed service user group. However, staff needed to be more aware of those service users whose ability to engage was very limited and to continue to offer them opportunities for stimulation and engagement.

Staff needed to be more alert to changes in service users state of being, in order that they might maximise opportunities for engagement and to inform them when some intervention may be needed to ensure that all service users' care needs were being met appropriately.

In general the service promoted a sense of security for service users very well. The unit was easily accessible for staff and visitors from the main building. Service users needed to operate a security keypad to exit the unit and access the rest of the building. Service users who had capacity were able to use the numeric code which was prominently displayed above the keypad to exit the unit.

Staffing levels were maintained in accordance with the staffing schedule for the care home. Within the unit, staffing levels were higher than in other areas of the care home. The manager stated that staff who worked in the unit were particularly skilled in working with service users who had higher support needs and were based in the unit to promote familiarity and a sense of continuity for service users, staff and visitors. Staff were encouraged to develop their skills and extend their knowledge base through specific training which helped to promote a sense of purpose and significance for the work they undertook with service users.

The observed activities offered to service users were designed around familiar tasks, local landmarks and well known events. These activities were observed to facilitate purposeful

conversation between service users and promoted opportunities for service users to demonstrate the extent of their knowledge thus enabling service users to achieve and to gain a sense of significance.

To a somewhat lesser extent the care service promoted the senses of security, belonging, continuity, purpose, achievement and significance for both staff and relatives. Relatives were observed to be welcomed into the unit and greeted warmly by staff. It was evident that service users' care plans had been developed with the involvement of relatives and other key people in the lives of service users.

The service needed to continue to develop the skills and knowledge of its staff and to promote opportunities for relatives and other significant people in service users' lives to be involved in the development of the service.

Requirements

No requirements were made at this inspection.

Recommendations

No recommendations were made at this inspection.

John Rushforth

Care Commission Officer