

Balhousie Pitlochry Care Home Care Home Service

Bobbin Mill
Burnside Road
Pitlochry
PH16 5BP

Telephone: 01796 473280

Type of inspection:

Unannounced

Completed on:

18 July 2018

Service provided by:

Advanced Specialist Care Limited

Service provider number:

SP2005007542

Service no:

CS2017358876

About the service

Balhousesie Pitlochry is a purpose-built care home situated in a quiet area of the Perthshire town of Pitlochry.

Accommodation is provided over two floors and divided into four separate units with communal living areas, activity rooms and a dining area in each. There are 50 single bedrooms all which have en suite facilities.

The residential unit has direct access to a landscaped garden area which has been planted with shrubs and flowers and there is a mature woodland area at the rear of the home.

This service registered with the Care Inspectorate on 8 September 2018.

What people told us

Prior to the inspection we sent out a total of 36 care standard questionnaires (CSQ's), 12 to residents, 12 to relatives and 12 to staff. We had nine CSQ's returned from residents, eight from relatives and eight from staff. We also spoke with residents, visiting relatives and professionals, and members of staff during the inspection.

Examples of the comments received were:

- "Staff are very kind, they try their best".
- "Mum is looked after extremely well, the girls are wonderful".
- "Due to there not being enough staff, Mum is not able to get outside".
- "There are frequent changes of management and staff which can be unsettling".
- "Some members of the team are fantastic, my experience has been very positive, but I know others hasn't".
- "Some staff go the extra mile, but they are too busy and I don't know how they cope".
- "Residents often have to wait for toileting".
- "The care is very good, the food is excellent and cleanliness is perfect".

Within the CSQ's some residents and relatives felt that, hot and cold drinks were not always available throughout the day, that residents' privacy was not always respected, that residents weren't involved in the development of the service and that in general there were not enough members of staff, or trained members of staff. However, other residents stated that they were treated fairly, there were always enough snacks and hot and cold drinks available, they were encouraged to discuss their views about the care home, and that staff had a good understanding of their needs.

Self assessment

The service had not been asked to submit a self assessment prior to this inspection. During the inspection we looked at the services own Improvement and Development Plan.

From this inspection we graded this service as:

Quality of care and support	3 - Adequate
Quality of environment	4 - Good
Quality of staffing	4 - Good
Quality of management and leadership	3 - Adequate

Quality of care and support

Findings from the inspection

The feedback received from people living at Balhousie Pitlochry and their relatives was mostly positive. Care and Support plans contained enough information to guide staff on how to care and support for each person and falls risk assessments were informative and specific to the resident. Residents who experienced stress and distress were supported by access to specialist advice and protocols.

We spent time observing practice in the home and staff appeared mostly attentive to residents' needs and requests. Residents and staff chatted to each other informally and residents seemed comfortable with the staff team.

There was good recording of residents' activities, their likes, dislikes and interests and their level of interaction. We also saw that the service was keen to build relationships with the local community.

We identified areas of improvement in relation to care and support and management systems and felt that more effective monitoring and quality assurance systems were required to ensure that the service was always operating to a satisfactory standard and there were safe and effective systems in place for the management and administration of residents' medication. We also found that information was not always fully documented or shared with the relevant people which could result in health and wellbeing needs not being fully met and an increased risk of medication errors.

We acknowledged that the service is in the process of transitioning over to a new electronic care planning system (PCS) which will resolve some of the concerns around documentation. In addition we were reassured to see that many of the areas identified for improvement during the inspection had been highlighted by the service in their 2018 Development Plan. At the time of the inspection, the home was also without a permanent manager, but were advised that someone had been recruited to this post and were due to start the following month. There is an expectation that the new manager will address areas for improvement and these will be followed up on at the next inspection.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 3

1. The service provider should ensure that the content and layout of care plan folders and documents is reviewed to improve the accessibility of information, such as assessments and reviews.

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

This will be followed up at the next inspection.

2. The service provider should ensure that systems for recording the administration of medicines are reviewed and appropriate action taken to make records clearer and easier to read.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that 'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event.' (HSCS 4.14)

This will be followed up at the next inspection.

3. The service should ensure that there are sufficient skilled and trained staff to provide care and support relevant to residents' specific needs.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that 'I experience stability in my care and support from people who know my needs, choices and wishes, even if there are changes in the service or organisation.' (HSCS 4.15)

Grade: 3 - adequate

Quality of environment

Findings from the inspection

We found that residents lived in an environment that was well presented, clean and homely. Corridors were wide enough to allow ease of access and safe use of wheelchairs and other mobility aids. There was good signage in place which supported people with dementia and other cognitive impairments to move around with minimal assistance. The main communal living areas had been freshly decorated and corridors were well-lit. There was a range of equipment in place to support residents, i.e. profiling beds, sensor mats and pressure relieving mattresses.

Residents' bedrooms were large with en suite facilities and provided space for personal privacy and spending time with visitors. People told us that they were happy with their room and that they were encouraged to personalise their rooms to their own taste and could furnish it with their own belongings.

The service was familiar with their responsibility for maintaining equipment to meet the requirements of current legislation and we saw that equipment was examined and tested regularly by persons competent to do so.

Each of the four units within the home have a key code which for safety reasons is not shared with residents. Likewise residents and their relatives do not have access to the code for the main door. This means that relatives can wait a considerable time to get into the building if staff are busy, residents who have been out with their relative or friend may also have to wait to get in to their own home, and residents wishing to go outside have to wait for a member of staff to escort them, thus restricting residents freedom of movement. The service has taken steps to reduce the time people wait to get entry by ensuring that five members of staff will be alerted via their phones when someone rings the bell. It was suggested that the service carry out an audit to ascertain whether this has helped with the above.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. Consideration should be given to enhancing opportunities for residents to maintain their independence by ensuring they are able to access outdoor spaces.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that 'I can use an appropriate mix of private and communal areas, including accessible outdoor space, because the premises have been designed and adapted for high quality care and support.' (HSCS 5.1)

Grade: 4 - good

Quality of staffing

Findings from the inspection

People should expect to have confidence in staff because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes.

We observed many warm and supportive interactions between staff and residents. We saw members of staff that were confident and motivated in their roles, who spoke enthusiastically about their job and had a good understanding and knowledge of people's health and care needs. Although systems were in place to ensure staff were trained according to the requirements of their role and had completed training relevant to the needs of the residents and the service, there was a lack of consistency in how residents experienced their care and support. In some instances this linked to a shortage of core staff and the use of agency staff.

There were a range of policies and procedures available to provide guidance for staff on what was expected of them in the delivery of their work. Staff we spoke to were familiar with these and told us they were readily accessible to them.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 - good

Quality of management and leadership

Findings from the inspection

At the time of the inspection, the service had just recruited a permanent manager, due to start the following month. Members of staff and relatives we spoke with felt that the absence of a permanent manager had had an adverse impact on the service, affecting staff leadership and guidance, and quality assurance. This mirrored our findings during the inspection.

We were reassured that areas for improvement identified during the inspection had been highlighted within the services own improvement and development plan. Work had commenced in some areas and we were advised that others would be actioned timeously when the new manager took up post.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 3 - adequate

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

Previous requirements

There are no outstanding requirements.

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

Previous recommendations

There are no outstanding recommendations.

Complaints

There have been no complaints upheld since they were registered.

Enforcement

No enforcement action has been taken against this care service since they were registered.

Inspection and grading history

This service does not have any prior inspection history or grades.

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.