

Heatherfield Nursing Home Care Home Service

49 Bathgate Road
Armadale
Bathgate
EH48 2PD

Telephone: 01501 733 066

Type of inspection: Unannounced
Inspection completed on: 6 January 2017

Service provided by:
Heatherfield Community Care Ltd

Service provider number:
SP2003002461

Care service number:
CS2003010642

About the service we inspected

Heatherfield Nursing Home is a care home service which is registered to provide 24 hour care for up to 60 older people. The home is situated in a residential area on the outskirts of Armadale in West Lothian and is set in pleasant gardens with open outlook across fields. The service is provided in two buildings, each divided into smaller group living units which have their own lounge and dining areas, bathroom and small kitchen. There is a separate building for laundry and a central kitchen where the majority of food is prepared and cooked.

The Aims and Objectives of the service state that it aims "to provide a high standard of individualised care to all its service users" and "it is the objective of Heatherfield that all service users will enjoy a clean, smoke-free, safe environment in private spaces and communal areas within the home and be treated with care, dignity, respect and sensitivity to meet the individual needs and abilities of the service user".

How we inspected the service

At this inspection we looked at the improvements the service had made in relation to the requirements and recommendation that were issued at the previous inspection on 1 July 2016. We found that the service had met the requirements issued. We found that not all of the recommendations had been met, however, the service had put in place systems to enable the implementation of the recommendations. We will monitor the progress of these at the next inspection.

Taking the views of people using the service into account

We walked around the care home and spoke with residents. The residents commented on the very good level of care provided. We also heard from residents about the commitment the manager and staff had made over the festive period to ensure the resident had an enjoyable time.

Taking carers' views into account

We did not speak with any relatives at this inspection.

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

Previous requirements

Requirement 1

The provider must ensure that the administration of medication is managed in a manner that protects the health and welfare of residents. In order to achieve this the provider must ensure that:

- (a) all topical medication administration information and directions are detailed on the Topical Medication Administration Record (TMAR)
- (b) all staff are aware of how to record administration of topical medication on the TMAR

(c) TMAR recordings are audited and actions and outcomes recorded.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations, Scottish Statutory Instruments 2011 No 210: Welfare of users 4. - (1) A provider must - (a) make proper provision for the health, welfare and safety of residents
Timescale: with immediate effect and to be fully implemented by 30 September 2016
Inspection

This requirement was made on 1 July 2016.

Action taken on previous requirement

The service has introduced personal folder held in the residents bedroom. These folders contain the template for Topical Medication Administration Records (TMAR) . A body map is also within the folder indicating areas where creams or lotions have to be applied. The templates are headed with information about the resident, the topical medication how to apply and relevant dates. Carers record their signature at each topical medication administration. TMAR's are audited within the overall medication administration audits.

Met - within timescales

Requirement 2

The provider must demonstrate that the level of staffing is adequate to provide the assessed level of support to service users at all times, including meal time's and that staffing levels are planned ahead.

This is in order to comply with: SSI 2011/210 regulation 4(1)(a) - requirement for the health and welfare of service users.
Timescale: with immediate effect and to be fully implemented by 30 September 2016

This requirement was made on 1 July 2016.

Action taken on previous requirement

The service has reviewed mealtimes and the level of assistance residents require at mealtimes. To meet the needs of all residents, a change in how assistance is provided has been implemented. Residents identified as requiring assistance and, who prefer their meals in their rooms or are unable to go to the dining room, are assisted with their meal as a 'first sitting' at lunchtime. All other residents attend the dining room once residents in their rooms have had their meal. Staff will also assist residents in the dining room at this time with their meal if required. Staff commented that this new system has made a difference to the numbers of staff available to assist and provide meals.

Met - within timescales

Requirement 3

The provider must improve the current quality assurance systems within the service to ensure that where deficits are identified that there is an action plan with evidence available to demonstrate progress made and the outcome achieved.

This is in order to comply with;
The Social care and Social Work Improvement Scotland (Requirements for Care services) Regulations 2011 (SSI

2011/210), Regulation 4 (1)(a)(d) - Welfare of Users.

Timescale; with immediate effect and remain on going.

This requirement was made on 1 July 2016.

Action taken on previous requirement

New auditing systems have been introduced for a range of areas within the care home. These include, but are not limited to, care plans, infection control, medication and wounds. The audit identifies areas for action, records the actions and outcomes with timescales. The audits are carried out monthly and reviewed monthly for compliance .

Met - within timescales

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

Previous recommendations

Recommendation 1

It is recommended that all care plans reflect the personal wishes and needs of residents and are outcome focused. The care plans should include details on how the care and support should be carried out to ensure each resident is receiving a personal delivery of care and support meeting their individual needs and choices. National Care Standards, Care homes for older people, Standard 6 support arrangements and Standard 17 daily life.

Timescale: with immediate effect and to be fully implemented by 30 October

This recommendation was made on 1 January 2016.

Action taken on previous recommendation

Care plans have been updated and reflect the wishes, needs and choices of the resident. In addition to this the service has introduced folders to be kept in each of the residents room. The information held within each of the folders give guidance to staff on residents personal choices, likes and dislikes. Carers also have responsibility for recording information on a daily basis within the folder and any changes that may occur.

Recommendation 2

It is recommended that the provider ensures there is a system which informs the residents who their keyworker or main contact person is in connection with the delivery of their care and support. National Care Standards, Standard 5 Management and staffing and Standard 7 Moving In

Timescale: with immediate effect and to be fully implemented by 30 September 2016 Inspection

This recommendation was made on 1 July 2016.

Action taken on previous recommendation

Within the residents folders held within their rooms, there is now information on who is keyworker for each of the residents. Residents and relatives have access to these folders and can record within in them comments, concerns or issues.

Recommendation 3

It is recommended that regular team meetings are carried out with a record of the meeting, actions and responsibility recorded.

National Care Standards, Standard 5; management and staffing

This recommendation was made on 1 July 2016.

Action taken on previous recommendation

We saw that team meetings had been implemented for trained staff (nurses) however a planned system was not in place for all care staff. Some unit meeting were being held for care staff within each individual unit, but not full team meetings. The manager informed us that care staff meetings were being planned and consideration was being given to whether these meetings should follow the managers and trained staff meetings or before to allow staff to make any comments that they would like taken to senior staff meetings. We will monitor the progress of this at the next inspection

Recommendation 4

The service should review and ensure that suitable signage is placed in the home in order to enable residents, relatives and visitors to move easily around the service and its grounds. Signage should assist people in maintaining their independence, providing them with clear guidance in finding their way around the home. This is in order to comply with National Care Standards Care Homes for Older People Standard 4 Your environment.

Timescale: with immediate effect and remain on going

This recommendation was made on 1 July 2016.

Action taken on previous recommendation

At this inspection we did not see any change or improvement in the signage around the home. We discussed this with the manager and were informed that they have been looking at appropriate signage. We heard that the provider is now working with a vision care company which provides eye testing for residents and will provide relevant signage to meet the needs of resident who are visually impaired, or have dementia or cognitive decline. We will monitor the progress of this at the next inspection.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

Date	Type	Gradings
1 Jul 2016	Unannounced	Care and support 3 - Adequate Environment 4 - Good Staffing 4 - Good Management and leadership 3 - Adequate
14 Dec 2015	Unannounced	Care and support Not assessed Environment Not assessed Staffing Not assessed Management and leadership Not assessed
9 Jul 2015	Unannounced	Care and support 3 - Adequate Environment 3 - Adequate Staffing 3 - Adequate Management and leadership 2 - Weak
4 Feb 2015	Unannounced	Care and support 3 - Adequate Environment 3 - Adequate Staffing 3 - Adequate Management and leadership 3 - Adequate
5 Aug 2014	Unannounced	Care and support 1 - Unsatisfactory Environment 1 - Unsatisfactory Staffing 2 - Weak Management and leadership 1 - Unsatisfactory
11 Feb 2014	Unannounced	Care and support 2 - Weak Environment 2 - Weak Staffing 2 - Weak Management and leadership 2 - Weak
7 Nov 2013	Unannounced	Care and support 4 - Good Environment 4 - Good

Date	Type	Gradings	
		Staffing	4 - Good
		Management and leadership	4 - Good
19 Dec 2012	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	Not assessed
		Management and leadership	Not assessed
11 Jul 2012	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	Not assessed
		Management and leadership	4 - Good
29 Feb 2012	Unannounced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	4 - Good
7 Jul 2011	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	3 - Adequate
15 Feb 2011	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
8 Jul 2010	Announced	Care and support	3 - Adequate
		Environment	2 - Weak
		Staffing	3 - Adequate
		Management and leadership	2 - Weak
16 Mar 2010	Unannounced	Care and support	2 - Weak
		Environment	2 - Weak
		Staffing	2 - Weak
		Management and leadership	3 - Adequate
4 Sep 2009	Announced	Care and support	2 - Weak
		Environment	2 - Weak

Date	Type	Gradings	
		Staffing	2 - Weak
		Management and leadership	2 - Weak
24 Feb 2009	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	Not assessed
		Management and leadership	Not assessed
1 Oct 2008	Announced	Care and support	2 - Weak
		Environment	2 - Weak
		Staffing	2 - Weak
		Management and leadership	3 - Adequate

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.