

## North Argyll House Care Home Service

Bealach-an-Rìgh  
Dunollie Road  
Oban  
PA34 5TG

Telephone: 01631 562168

Type of inspection: Unannounced  
Inspection completed on: 12 May 2017

**Service provided by:**  
North Argyll Eventide Home Association  
Ltd

**Service provider number:**  
SP2015012517

**Care service number:**  
CS2015338261

## About the service

North Argyll House is run by a local non-profit making organisation (North Argyll Eventide Home Association Ltd). The building is a large detached house situated on the edge of Oban with wonderful views over Oban Bay. The home provides single en suite accommodation with a variety of communal sitting rooms. The home has a well-tended garden which is accessible to residents and their families.

The information leaflet states that "Our aim is to provide the highest standard of care for elderly people in a comfortable and secure environment. Our residents' independence and dignity are of paramount importance to us ....."

At the time of the inspection there were 25 people living at the home.

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## What people told us

People living in the home and relatives provided many examples of how people's experiences had been broadened and enhanced since moving into the home. Examples of this included greater access to interests both in the community and within the home. Service users said that staff members were always encouraging and suggesting new interests to try. One service user, who was a keen gardener, advised he had hoped to work in the garden more in the summer.

Views were shared relating to communication, where there was detailed information about how people liked to communicate and what different facial expressions, behaviour and actions might indicate. Positive comments made included:

"I am very happy and could not ask for better care from the care staff,"

"I have no complaints to make at all; the food is good, I like my flat" and

"The food is terrific and I would never want to move to another care home."

Enabling people to develop new experiences and interests was regularly commented and praised by both relatives and people living here.

## Self assessment

We did not ask the provider to submit a self assessment this year.

## From this inspection we graded this service as:

Quality of care and support	5 - Very Good
Quality of environment	not assessed
Quality of staffing	not assessed
Quality of management and leadership	5 - Very Good

## What the service does well

We observed very good relationships between staff and people who use the service. Staff ensure people have ample choices. These opportunities for choices at each person's pace were consistently observed during snacks and meal times. People were observed to be supported thoughtfully and discreetly. This helped service users to choose including controlling the room temperatures in the sitting areas.

Good nutritional health and regular access to healthcare professionals and services are in place. The staff stated during interviews that the access to quality dementia training had equipped them to confidently provide care and support for people who often have complex and changing needs. Where people lacked capacity, appropriate actions had been taken to ensure decisions were made in the person's best interests. Very good communication with families ensured that all views were taken into account.

Complaints procedures are in place where concerns and complaints are listened to, addressed in a timely manner and used to improve the service. Consistently staff were observed to respect privacy and dignity at all times and interacted with people in a caring, respectful and professional manner. Staff knew and were able to talk about the values of the service and expectations about the care they provided. They felt the leadership was open and approachable. They also felt listened to and as a result staffing and qualitative training had continued to improve.

## What the service could do better

The established staff team work in an open culture, and are sensitively supported by a well informed management team. The service should continue to develop care plan information which records and implements the individual likes, dislikes, preferences and needs in relation to their care and support in greater depth using various formats to effectively evidence the positive outcomes achieved. The service should continue to explore ways to consolidate and improve service user involvement in the care plans.

## Requirements

Number of requirements: 0

## Recommendations

Number of recommendations: 0

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## Inspection and grading history

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

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