

# Care service inspection report

## North Argyll House

### Care Home Service Adults

Bealach-An-Righ  
Connel Road  
Oban  
PA34 5TG  
Telephone: 01631 562168

Inspected by: Kevin Dale

Type of inspection: Unannounced

Inspection completed on: 3 September 2013



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## Service provided by:

North Argyll Eventide Home Association

## Service provider number:

SP2003000073

## Care service number:

CS2003000435

## Contact details for the inspector who inspected this service:

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## Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

### We gave the service these 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

### What the service does well

North Argyll House provides a very good quality service to residents and relatives. The home is well-kept and residents and relatives make many positive comments about staff and the care provided by the service.

Staff are hard working and were observed to have a warm relationship with residents.

### What the service could do better

The manager continues to develop training and supervision for staff and implement an improvement plan for the service.

### What the service has done since the last inspection

The service has plans to relocate the sluice area to the first floor, staff hours and numbers have increased to reflect the increasing dependency of residents.

### Conclusion

The service is performing to a very good standard and should continue to develop their quality assurance systems to continuously improve the service.

### Who did this inspection

Kevin Dale

# 1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at [www.careinspectorate.com](http://www.careinspectorate.com)

This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

Requirements and recommendations

If we are concerned about some aspect of a service, or think it could do more to improve, we may make a recommendation or requirement.

- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service, but where failure to do so will not directly result in enforcement. Recommendations are based on the National Care Standards, relevant codes of practice and recognised good practice.

- A requirement is a statement which sets out what is required of a care service to comply with the Public Services Reform (Scotland) Act 2010 and Regulations or Orders made under the Act or a condition of registration. Where there are breaches of Regulations, Orders or Conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Inspectorate

North Argyll House is run by a local non profit making organisation (North Argyll Eventide Home Association).

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 attended 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 24 residents living at the home.

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

**Quality of Care and Support - Grade 5 - Very Good**

**Quality of Environment - Grade 4 - Good**

## **Quality of Staffing - Grade 5 - Very Good**

## **Quality of Management and Leadership - Grade 5 - Very Good**

This report and grades represent our 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. You can find the most up-to-date grades for this service by visiting our website [www.careinspectorate.com](http://www.careinspectorate.com) or by calling us on 0845 600 9527 or visiting one of our offices.

## 2 How we inspected this service

### **The level of inspection we carried out**

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

### **What we did during the inspection**

We wrote this report following an unannounced inspection. This was carried out by Inspector Kevin Dale. The inspection took place on 3 September 2013 from 9.30am to 5pm. We gave feedback to the manager on the 3 September 2013.

As part of the inspection, we took account of the completed annual return and self-assessment forms that we asked the provider to complete and submit to us.

We sent 20 care standard questionnaires to the manager to distribute to residents and 6 completed questionnaires were returned before the inspection.

We sent 20 care standard questionnaires to the manager to distribute to relatives and carers and we received 14 completed questionnaires.

We also asked the manager to give out 20 questionnaires to staff and we received 13 completed questionnaires.

During this inspection process, we gathered evidence from various sources, including the following:

We spoke with:

- 9 residents
- 2 relatives the manager
- 2 depute managers
- 4 care staff
- a social worker

We looked at:

- supporting evidence from the self assessment
- residents' personal support plans
- staff personnel files
- training records
- minutes of staff meetings
- minutes of service user meetings

- medication administration records
- medication storage and security arrangements
- accident and incident logs
- maintenance logs
- comments and complaints logs
- risk assessment policies and procedures
- observation of staff care and support practices

### **Grading the service against quality themes and statements**

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

### **Inspection Focus Areas (IFAs)**

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

### **Fire safety issues**

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at [www.firelawscotland.org](http://www.firelawscotland.org)

## **What the service has done to meet any recommendations we made at our last inspection**

See Quality Statement 1.3 for action taken on the outstanding recommendation.

## **The annual return**

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

**Annual Return Received:** Yes - Electronic

## **Comments on Self Assessment**

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

The Care Inspectorate received a fully completed self-assessment document from the provider. We were satisfied with the way the provider completed this and with the relevant information included for each heading that we grade our services under.

The provider identified what it thought the service did well, some areas for development and any changes it had planned. The provider told us how the people who used the care service had taken part in the self-assessment process.

## **Taking the views of people using the care service into account**

We sent 20 care standard questionnaires to the service to distribute to residents and 6 were returned.

We spoke to 9 residents during the inspection, comments include:

"I think we are lucky, it is pretty good, I like living here very much"

"I like the music and singing, the girls are very good".

Four residents strongly agreed and two agreed that overall they were happy with the quality of care they received at the home.

Comments from residents are contained in the main body of the report.

### **Taking carers' views into account**

We sent 20 care standard questionnaires to the service to distribute to relatives and carers and fourteen were returned. Eight relatives/friends strongly agreed and six agreed that overall they were happy with the quality of care their relative/friend received at the home.

Comments from relatives and friends were mostly positive, for example:

"I am confident that my relative is in good hands and being well looked after by a caring, friendly and supportive staff".

"The manager and all the staff are always on hand and are extremely efficient and cheerful. They are always welcoming and it gives me peace of mind to know they have my relative's interests at heart".

Three relatives/friends felt the service could do more to ask their views in the development of the service.

Comments from relatives are included in the main body of the report.

## 3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

### Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 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 service was very good at involving residents, relatives and staff. At this inspection, we focused on personal plans, records of residents', relatives' and staff meetings and discussion with residents, relatives and staff.

We found evidence of 6 monthly reviews taking place. The care review minutes contained good information on residents' health, activities and social events. Residents and relatives were encouraged to comment on the quality of the care and support and any issues arising were recorded and actioned.

Minutes of resident, relative and staff meetings contained good information on ideas for activities, for example music in hospitals, clothes show and coffee mornings. We found evidence of residents and staff making suggestions to improve the environment and staffing and actions taken, for example extending the duty room for more space for meetings and writing care plans.

Residents and relatives confirmed that management and staff were approachable and acted quickly if there were concerns about their care or were unhappy about any aspect of the service.

#### Areas for improvement

Some feedback from the care standard questionnaires indicated some relatives and residents did not always feel fully involved in developing the service. The manager told us that she had sent questionnaires to relatives and residents and was currently developing an action plan from the issues and ideas arising from the feedback.

Staff told us that they felt involved in the development of the service, however training in implementing the participation strategy had not taken place.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 0

### Statement 3

We ensure that service users' health and wellbeing needs are met.

#### Service strengths

The service was very good at ensuring residents' health and welfare needs were being met. We looked at residents' personal plans, risks assessments and minutes of review meetings. We spoke with residents, relatives and staff.

We looked at residents' dependency assessments and noted that the most residents were in the medium to high range of dependency. The manager told us that as a result of high dependencies staff hours during the day and evening had increased.

The service had developed and implemented a new policy on food and nutrition. We observed lunch being taken by the residents. The food looked appetising and residents were enjoying their lunch. Four residents told us that the food was good and "there was always plenty of it". Residents said that they always had a choice, one resident told us "If there is something I don't like the girls always get me something else". Staff served lunch in a calm and unhurried way and took their time with residents who required assistance to eat.

## Areas for improvement

We observed medication being administered at lunchtime and looked at the medication administration records (MAR). We found that medication was being appropriately administered and there were systems in place to routinely audit medication systems. We noted that some medications were handwritten and not signed or dated in the MARS.

The manager told us that she had met with the Prescribing Support Nurse from Highland Health Board to discuss the changes that the way medication is dispensed. Monitored Dose systems for medication administration will be discontinued and medication will be dispensed from the original containers.

We noted that residents were not routinely assessed for pain and discussed with the manager the benefits of undertaking pain assessments particularly with residents with dementia who exhibit anxious or agitated behaviour.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 0

## Quality Theme 2: Quality of Environment

Grade awarded for this theme: 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

See Quality Statement 1.1 in Quality Theme 1.

#### Areas for improvement

See Quality Statement 1.1 in Quality Theme 1.

**Grade awarded for this statement:** 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

We found that the service was performing to a good standard in this quality statement. Work had been completed in one of the lounges, the joists had been replaced and the room redecorated, carpets and curtains had been purchased and fitted. Residents told us that they had been involved in choosing the colours for the decoration and fabric.

We looked at maintenance records and checked equipment in use, for example hoists, air mattresses, commodes and wheelchairs. We found that records were up to date and the equipment was well maintained and in good repair. One resident told us that they liked their room and had their own pictures and a view from their window.

The standard of house keeping and cleanliness of the environment was of a high standard, the home was bright and fresh and free from odours. We noted that residents' clothing was neatly folded in drawers and appropriately hung in wardrobes.

Residents told us that they liked sitting in the small lounges and looking out at the views. During the good weather they had been sitting out in the garden.

## Areas for improvement

We looked at the accident and incident records and noted that most of the falls were unwitnessed. The manager reviews all accidents and incidents on a monthly basis and we found that post fall records and assessments contained good information of actions taken to reduce the frequency of individual resident's falls, for example, medication reviews, increased observation. The manager told us that due to the size and layout of the building monitoring residents in their room can be difficult at times. Actions had been taken to move residents to the ground floor if they were at high risk from falling.

We noted that some door frames and corridors on the first floor required redecoration. Some residents and relatives commented that at times fellow residents would "wander" into their room which compromised their privacy.

There was one Recommendation arising from the last inspection regarding the practice of using the sluice for storage and domestic services and that a separate room should be used for domestic services. The manager informed us that there were plans in place to move the sluice to the first floor, however we advised we would seek the views of the Care Inspectorate's professional advisor for infection control to ensure the new arrangements met best practice in the disposal of clinical waste and infection control. (See recommendation 1.)

**Grade awarded for this statement:** 4 - Good

**Number of requirements:** 0

**Number of recommendations:** 1

## Recommendations

1. The practice of using the sluice for storage and domestic services should cease and a separate room should be used for domestic services.

National Care Standards Care Homes for Older People, Standard 4.3 Your Environment

## Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 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

See Quality Statement 1.1 in Quality Theme 1.

#### Areas for improvement

See Quality Statement 1.1 in Quality Theme 1.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 0

### Statement 3

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

#### Service strengths

We found that the service was performing to a very good standard in this quality statement. We looked at training and development plans, staff personal files, observed care practice and spoke to staff, residents and relatives.

Staff training records evidenced that staff had recently undertaken training in moving and handling, health and safety, infection control and adult protection. Some senior staff had attended promoting excellence in Dementia Skilled Practice and were cascading this training to care staff.

Some care and domestic staff were undertaking vocational qualifications in care and staff who were responsible for administering medication were undertaking the SVQ3 HSC 375 Unit "Administer medication to individuals".

Staff complete training evaluation questionnaires at the end of each training event which was used to inform the training plan and quality assure the training experience.

We observed staff care practice and noted that staff spoke to residents in the manner and pace which suited their needs and carried out care tasks in an unhurried and competent way.

### **Areas for improvement**

We found that supervision and appraisal meetings did not take place as often as they should, the manager told us that due to senior staff absence planned supervision had not always taken place. The manager was aware of the negative impact this could have on staffs' continuous professional and organisational development and was devising a programme of supervision and appraisal for all staff.

We noted that staff had not received training in skin care and pressure ulcer prevention for some time and that given the increasing dependencies of residents staff would benefit from an update in their training.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 0

## Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 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

See Quality Statement 1.1 in Quality Theme 1.

#### Areas for improvement

See Quality Statement 1.1 in Quality Theme 1.

**Grade awarded for this statement:** 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

We found that the service was very good in the way residents, relatives, staff and external stakeholders were involved in assessing the quality of the service.

The manager had sent quality questionnaires to residents, relatives and visitors and was in the process of developing an action plan from the responses to the questionnaires.

A resident told us that they attend and take part in the management committee meetings and have been involved in the consultations for the new build.

Residents' personal plans were reviewed on a monthly basis by senior staff, the manager told us that the services' policies and procedures were to be quality assured to comply with best practice and compliance with current legislation.

## **Areas for improvement**

The service should continue to implement their quality assurance systems and develop a robust organisational improvement plan to ensure the continuous improvement of the service.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 0

## 4 Other information

### Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

### Enforcements

We have taken no enforcement action against this care service since the last inspection.

### Additional Information

### Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in the Care Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme being re-graded as unsatisfactory (1).

## 5 Summary of grades

<b>Quality of Care and Support - 5 - Very Good</b>	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
<b>Quality of Environment - 4 - Good</b>	
Statement 1	5 - Very Good
Statement 2	4 - Good
<b>Quality of Staffing - 5 - Very Good</b>	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
<b>Quality of Management and Leadership - 5 - Very Good</b>	
Statement 1	5 - Very Good
Statement 4	5 - Very Good

## 6 Inspection and grading history

Date	Type	Gradings	
11 Sep 2012	Unannounced	Care and support	5 - Very Good
		Environment	4 - Good
		Staffing	5 - Very Good
		Management and Leadership	5 - Very Good
14 Dec 2011	Unannounced	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	4 - Good
		Management and Leadership	Not Assessed
19 Jan 2011	Unannounced	Care and support	4 - Good
		Environment	Not Assessed
		Staffing	Not Assessed
		Management and Leadership	Not Assessed

## Inspection report continued

27 Jul 2010	Announced	Care and support Environment Staffing Management and Leadership	4 - Good Not Assessed Not Assessed 5 - Very Good
10 Feb 2010	Unannounced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed 5 - Very Good Not Assessed
4 Jun 2009	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good 5 - Very Good 5 - Very Good 5 - Very Good
20 Jan 2009	Unannounced	Care and support Environment Staffing Management and Leadership	Not Assessed Not Assessed Not Assessed 4 - Good
10 Jul 2008	Announced	Care and support Environment Staffing Management and Leadership	4 - Good 4 - Good 4 - Good 3 - Adequate

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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## Translations and alternative formats

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

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