

Baillieston Nursing Home Care Home Service

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Baillieston
Glasgow
G69 7XZ

Telephone: 0141 773 0733

Type of inspection: Unannounced
Inspection completed on: 29 September 2016

Service provided by:
Tamaris (RAM) Limited, a member of
the Four Seasons Health Care Group

Service provider number:
SP2003002125

Care service number:
CS2003010426

About the service

Baillieston Nursing Home provides care for a maximum of 60 older people. The service is in the East of Glasgow and managed by Four Seasons Health Care Group.

There were 59 people (referred to as "residents" in the report) living at the service at the time of inspection.

The service is located close to local amenities and public transport. The accommodation is provided over two floors with stair and lift access to the upper floor. On each floor there are 30 bedrooms with en-suite toilets, shared bathrooms, a communal dining room and lounges.

There is provision for car parking and a small garden at the front of the home. A larger garden is located at the rear of the home.

Baillieston Nursing Home stated their aim for the service is to provide care based around each person's individual needs within a secure and caring environment.

What people told us

Prior to the inspection we sent out 120 questionnaires to residents, relatives and staff.

We received 11 completed questionnaires from relatives. Of these nine were happy with the quality of care their relative received. There were many positive comments made:

"My Dad appears well cared for and has a good relationship with staff."

"Staff are very good. Listen to what I have to say, I only need to ask."

"...Mum says she feels safe and I also sleep better knowing Mum is safe and getting looked after and cared for in a safe clean environment."

Although there were positive comments made a couple of relatives thought there could be more staff to spend more time communicating with residents.

One relative was dissatisfied with the quality of care and commented that the quality of food was poor.

We received three completed questionnaire from residents. All were positive.

Although comments about care were positive there was one comment that the food could be better.

Only one completed staff questionnaire was received. This indicated awareness of key policies and training opportunities were available.

A variety of staff were consulted during the inspection visit. They told us they enjoyed their jobs, felt the home was providing good care and they had good support from management.

We spoke with two relatives during the inspection visit. Both were very positive about the care and support provided. They confirmed there was good communication and their relative's needs were being met well.

We spoke with two residents who also confirmed satisfaction with the service. There were positive comments about the efforts made with activities.

"First class staff, it's a good place." was one comment made.

Self assessment

The manager submitted a self assessment of how the service was performing against the quality themes. This provided information identifying many strengths and some areas for service improvement. We discussed with the manager ways of improving the self assessment in the future to provide more information local to Baillieston nursing home and include results and actions whenever possible.

From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of environment	4 - Good
Quality of staffing	not assessed
Quality of management and leadership	not assessed

What the service does well

We observed residents appearances were good and they appeared well kempt. There were high levels of satisfaction with the service expressed when speaking with residents and most relatives.

We checked how staff record and respond to falls and found this was well recorded. Staff had a good awareness of residents who were at high risk of falls and there was appropriate use of alert equipment such as room sensors and seat mats.

The manager analysed falls and other statistics on a monthly basis. A high rate of bruising had been identified recently and actions were being taken to identify possible causes and reduce occurrence.

We checked two personal plans of residents with wounds. One record was good, with regular evaluation and support from health care professionals such as podiatrist and care home liaison nurse.

We observed activities were taking place on a regular basis. Activity staff knew the residents well and records to help support activities had developed since the last inspection. There was positive feedback about activities within the home and further developments were planned such as increasing activity staff hours.

Many residents with dementia can experience stress or distress and sometimes determining the cause can be difficult. We observed staff interactions to be kind and appropriate. There was a calm atmosphere and residents with stress or distress had some reference to this in care plans. There were positive developments seen such as the use of doll therapy.

The lunchtime meal was observed to be well managed. Staff assisted residents with dignity, visual choices were offered. The upstairs unit used the main dining area as well as another smaller dining area. This helped to provide a calm and pleasant atmosphere.

The environment was clean and tidy with a layout that provided different spaces to sit.

Consideration had been given to adapting the environment to be suitable for people with dementia especially in the upstairs unit.

Records showed equipment checks were carried out regularly. Individual slings were allocated for residents who use hoists. The service provider was moving to have two slings allocated to ensure one was always available.

What the service could do better

There were four residents who had medication disguised in food or drink. The records to agree this were not up to date on two of the records examined. This was discussed with management and it was agreed reviews would take place. Covert medication should be reviewed regularly by the G.P. to ensure it is essential and records should be in place to show which medications and what method of disguise is agreed and who has agreed it. Pharmacy advice had been sought but the records could be improved to be clearer for the staff administering medications. Whenever possible covert medications should be kept to a minimum. Staff training on this subject would be beneficial to support improvement in this area. See recommendation 1.

A resident who had fallen and sustained a head wound and elbow grazing did not have these wounds recorded clearly on a body map and an evaluation was only recorded once. This record could have been improved by ensuring more regular evaluation. The wound dressings used were not prescribed for the individual and this could be improved by ensuring an emergency box of wound dressings are available. The manager had already identified this and was in the process of progressing an agreement on the contents. More complex dressing have to be prescribed.

The support for residents with stress and distress reactions was developing. Further improvements could be made to ensure medication reviews are undertaken regularly and legal representatives views are listened to and responses or action points recorded. For example after 6-monthly reviews.

We noted the lunchtime menu options could be improved to provide more soft easily chewed options suited to frail older people. The manager was developing this with kitchen staff. The alternative menu could also be made clearer for everyone to see. This could also include more soft easily chewed options.

Further development to adapt the environment to be more suitable for people with dementia was due to take place. For example to provide more contrast to doorbell, light switches and handrails.

The provision of a more supportive shower chair was discussed to improve the range of equipment available. The manager was in agreement that this could be purchased.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. The service provider should ensure residents with covert medications have these reviewed regularly and records show clearly which medications, what method of disguise has been agreed and who this has been agreed with. Staff training on this subject should be provided.

National care standards for care homes for older people, Standard 15.11 keeping well - medication.

Complaints

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

Inspection and grading history

Date	Type	Gradings
10 Dec 2015	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and leadership 4 - Good
29 Jan 2015	Unannounced	Care and support 4 - Good Environment 5 - Very good Staffing 5 - Very good Management and leadership 5 - Very good
24 Feb 2014	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing Not assessed Management and leadership Not assessed
17 Oct 2013	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and leadership 4 - Good
19 Feb 2013	Unannounced	Care and support 4 - Good

Date	Type	Gradings	
		Environment Staffing Management and leadership	5 - Very good 4 - Good 4 - Good
8 Jun 2012	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 5 - Very good 4 - Good 4 - Good
1 May 2012	Re-grade	Care and support Environment Staffing Management and leadership	2 - Weak Not assessed Not assessed Not assessed
27 Oct 2011	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good Not assessed Not assessed
7 Jun 2011	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 4 - Good 4 - Good
4 Apr 2011	Re-grade	Care and support Environment Staffing Management and leadership	4 - Good Not assessed Not assessed 4 - Good
29 Nov 2010	Unannounced	Care and support Environment Staffing Management and leadership	2 - Weak 3 - Adequate 2 - Weak 2 - Weak
6 Aug 2010	Announced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
15 Apr 2010	Unannounced	Care and support	2 - Weak

Date	Type	Gradings	
		Environment	2 - Weak
		Staffing	2 - Weak
		Management and leadership	2 - Weak
2 Feb 2010	Unannounced	Care and support	1 - Unsatisfactory
		Environment	2 - Weak
		Staffing	2 - Weak
		Management and leadership	2 - Weak
17 Sep 2009	Unannounced	Care and support	2 - Weak
		Environment	2 - Weak
		Staffing	2 - Weak
		Management and leadership	3 - Adequate
8 Dec 2008	Unannounced	Care and support	2 - Weak
		Environment	2 - Weak
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
9 May 2008	Announced	Care and support	2 - Weak
		Environment	2 - Weak
		Staffing	4 - Good
		Management and leadership	3 - Adequate

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