

Woodside Care Home Care Home Service

Woodside Street
Coatbridge
ML5 5NJ

Telephone: 01236 442000

Type of inspection: Unannounced
Inspection completed on: 30 March 2018

Service provided by:
Woodside Carehomes Ltd

Service provider number:
SP2007009228

Care service number:
CS2007143254

About the service

Woodside Care Home provides care and support for up to eighty-four people with a range of physical and cognitive impairment. The aim of the service is to "promote person-centred care where care is designed around every service user to promote independence, respect privacy and encourage service users, families and friends to maintain close relationships".

The service was registered in 2007 and is provided by Woodside Carehomes Ltd. The home is situated within close proximity to Coatbridge town with access to local transport links and amenities.

The home is purpose-built and comprises of three units over two levels with a passenger lift providing access to the first floor. All rooms provide single ensuite facilities and people are encouraged to bring in their own furnishings to personalise their rooms. Each unit has communal lounge and dining areas as well as smaller quieter lounges for residents and visitors to use. There is a secure garden area with seated areas for people to enjoy in the better weather.

At the time of this inspection there were seventy people residing in the service.

What people told us

Prior to this inspection we issued twenty-five Care Standard Questionnaires to people using the service as well as relatives and carers. Seven of which were returned who all strongly agreed or agreed that overall, they were happy with the standard of care and support provided.

We also spent time speaking to residents and visitors, we looked at some of the comments received in thank you cards as well as observing staff interaction and practice. Some of the comments we received were as follows;

"I feel very involved, they speak to you and let you know what's going on. There's always plenty of familiar staff on and the home is always clean and fresh. Would recommend this home and have done so to people. There's a nice genuinely friendly feeling in here. Staff in here are fantastic and the manager's door is always open".

"The home and staff are very accommodating and they take care of the residents needs".

"Our relative received wonderful care during their stay at Woodside. We are so grateful for the care, kindness and friendliness of staff throughout the home who are always ready to stop and chat, we could not have wished for better care".

"It was very difficult to accept our relative required nursing care however, I am extremely happy with the standard of care they are receiving in Woodside. They have settled in well and there is a lovely atmosphere in the home. All the staff have been lovely and I can relax knowing they are in such capable hands".

"Our relative was admitted in very poor health, all credit to the staff as they soon had them physically better, they love their new home and friends and we can't thank staff enough for the brilliant way they perform more than their duties".

Self assessment

The Care Inspectorate is not currently requesting that services submit a self-assessment prior to inspection.

From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of environment	not assessed
Quality of staffing	5 - Very Good
Quality of management and leadership	not assessed

What the service does well

The home continues to engage and consult with people on how the service is performing. The recording of consultation had improved since our previous inspection and we could see evidence of actions taken where a request or suggestion had been made.

A development plan and newsletter informed people of what had been happening as well as any ongoing plans. There were lovely pictures of residents and staff enjoying a varied selection of activities and focus groups both in-house and within the local community.

There was a complaints procedure displayed and where a concern/complaint had been raised this had been recorded, followed-up, and satisfactorily resolved ensuring people felt confident in the staff and management team.

We saw a well-trained, motivated staff team providing care and support in a caring manner, promoting independence and personal choice.

We looked at recruitment files which were completed well and contained all the necessary information including, satisfactory references and safety checks demonstrating safe practice.

The training matrix offered staff a choice of relevant training. Following training staff completed a framework of reflection recording what they learned and how this could be used to improve their practice. Regular meetings and supervision sessions took place which all together contributed to a stable team of staff, who told us they felt well supported by the management team and were confident in their role.

Care plans contained some good person-centred information with relevant risk assessments in place and evidence of good support from external professionals where required. These were evaluated monthly and reviewed minimally every six months.

Medication was stored safely and was audited by the manager to ensure safe practice. This had resulted in improvements in the standard of information recorded in the Medication Administration Charts (MAR) since the last inspection. Additional monitoring charts were in place for residents who needed extra support or were unwell.

There was a secure door entry system, maintenance log and satisfactory certificates of additional safety checks of equipment and appliances to ensure residents safety.

What the service could do better

We could see improvements in the recording of the actions and outcomes as a result of consultation. This could be improved further by developing the template used when capturing engagement with residents/relatives. This will enable staff to record all actions, outcomes and dates of final resolution which was not presently happening consistently.

We acknowledge there had been improvement in the standard of recording within the Medication Administration Charts (MAR). We looked at how staff recorded the use of as required medication. This type of medication is not required on a regular basis and when administered by staff should include the reason and outcome achieved, to ensure its effectiveness. The records we saw were inconsistent and did not always record an outcome or were referenced to the relevant section of the care plan. Some of the MAR charts included handwritten entries with no signature or reference to the prescriber to ensure safe practice (see recommendation 1).

The standard of recording within the care plans could be improved. More detail on current medical conditions and monthly evaluations would provide a more accurate reflection on individuals' current needs and how to manage these effectively. Staff had received training on the management of stress and distress and knew residents well. However, this level of information was not recorded within the care plans. We found gaps in the additional monitoring charts with some completed better than others (see recommendation 2).

Staff completed an annual training needs analysis where they could identify and request training. This could be improved by providing a list of all possible training available, this will assist staff in identifying and choosing training relevant to their needs and role.

We looked at the management of Individuals' personal finances. This could be improved by discussing and encouraging expenditure with residents/relatives at six-monthly reviews. This to ensure, where appropriate that individuals are aware and given the opportunity to use these savings to enhance their quality of life.

The manager carried out a range of healthcare audits including accidents and incidents. The accident/incident format could be improved to provide clearer instruction for staff on the timescales required for any follow-up intervention. Where individuals had experienced more than one fall this was not always recorded within the corresponding managers audit. Where relatives were unavailable to contact at the time of the accident/incident it was unclear if any further action was taken.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 2

1. The manager should ensure that all staff are aware of and adhere to best practice guidelines when recording any changes to the medication administration charts. Hand written entries should provide a signature and be referenced to the prescriber. Where as required medication has been prescribed and administered this should include the reason and outcome to ensure its effectiveness. This should be documented on the medication chart and referenced to the relevant section of the care plan with evidence of regular evaluations and reviews by the residents GP.

This is in order to comply with: National Care Standards; Care Homes for Older People Standard 15 Keeping Well Medication.

2. The manager should ensure the content of the personal plans:

- Accurately reflect all the current healthcare needs, what they are, how they present and how staff are expected to provide the appropriate support to manage these effectively. Any changes should be recorded within the daily notes and evaluations with details of any action taken and outcome recorded in the relevant section of the plan.
- Any additional monitoring charts should be checked at least once in every twenty-four hour period and where gaps are identified that this is recorded and actioned to ensure the well-being of the individual.
- Stress and distress care plans should provide details of any triggers, how staff can recognise and manage this effectively using intervention techniques before the use of medication is required.

National Care Standards Care homes for Older People Standard 6 Support Arrangements.

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
6 Oct 2016	Unannounced	Care and support 4 - Good Environment Not assessed Staffing 5 - Very good Management and leadership Not assessed
13 Oct 2015	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and leadership 4 - Good
24 Oct 2014	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good

Date	Type	Gradings	
		Management and leadership	4 - Good
24 Oct 2013	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
22 Oct 2013	Re-grade	Care and support	Not assessed
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
30 Jan 2013	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
18 Sep 2012	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	3 - Adequate
		Management and leadership	Not assessed
20 Oct 2011	Unannounced	Care and support	3 - Adequate
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	3 - Adequate
20 Jul 2011	Unannounced	Care and support	2 - Weak
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	3 - Adequate
1 Nov 2010	Announced	Care and support	3 - Adequate
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	Not assessed
22 Dec 2009	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good

Date	Type	Gradings	
		Management and leadership	3 - Adequate
13 Aug 2009	Announced	Care and support	4 - Good
		Environment	3 - Adequate
		Staffing	4 - Good
		Management and leadership	3 - Adequate
4 Sep 2008	Announced	Care and support	2 - Weak
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
12 Jan 2009		Care and support	2 - Weak
		Environment	4 - Good
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate

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