

Blair House Care Home Care Home Service

Blair House 81 Blair Road Coatbridge ML5 2EW

Telephone: 01236 423 784

Type of inspection:

Unannounced

Completed on:

28 March 2024

Service provided by:

Blair House Limited

Service provider number:

SP2003000241

Service no: CS2004072717



About the service

Blair House Care Home is registered with the Care Inspectorate to provide support to 24 older people. The home is owned and managed by Blair House Limited.

The home is conveniently situated for public transport routes and within walking distance of local shops and community amenities in the Coatbridge area.

Accommodation is provided in a converted villa. There are 22 bedrooms, two of which could accommodate two people should they want to share. Most bedrooms have en-suite toilet and sink. Residents have access to a number of communal toilets and have a choice of one shower room with walk-in facilities, and one bathroom with tracking hoist facilities.

The ground floor has a choice of three lounges, one of which also contains the dining area as well as being developed into a sensory/quiet room to support residents with stress/distress, to allow pamper and massage to take place away from the main lounge areas.

There is ramp access to the front and rear of the property. The grounds are well maintained, offering a landscaped patio space and flower beds. Residents have access to garden furniture to sit outside. There is patio door access to a mono-blocked gated area to the side of the home.

About the inspection

This was an unannounced inspection which took place on 26 March to 28 March 2024. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, information submitted by the service, and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with several people using the service and three relatives of residents
- spoke with a number staff and the management team
- reviewed documents
- observed practice and daily life for residents and staff.
- spoke to an external social care professional
- considered results of pre-inspection completed questionnaires

Key messages

- People were very happy with the care and support they received in the service.
- Relatives were happy with the quality of care and communication from the home.
- There were some good activities taking place regularly that people enjoyed.
- People's needs were supported by external health professionals.
- Some enhancements were needed in responses to external professionals' recommendations with regard to maintaining a suitable environment. These were addressed during the inspection visits.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	5 - Very Good
How good is our leadership?	5 - Very Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

5 - Very Good

Our overall evaluation for this key question was very good. We found the service had significant strengths in keeping people safe and meeting their needs.

Throughout the inspection visits we could see people were treated with dignity and respect. We saw caring interactions between staff during our visits to each area within the home. Staff clearly knew the residents well and understood how best to support them. We carried out a more formal observation in the lounge area and noted similar caring and supportive interactions. People appeared well kempt, comfortable, and engaged well with the care and other staff within the home. Staff we spoke to felt happy in their work and spoke highly of the support they had received from the management and how well the staff within the home worked together. They told us people were cared for to a high standard within the home. This was confirmed by the relatives we spoke and the high standard of care planning documentation that was sampled.

There was a good range of communal activities that took place regularly. Staff and relatives we spoke to confirmed this. Relatives spoke of how their relatives thrived within the home and that their loved ones had plenty to do to keep them occupied. Some staff did feel there could be more activity outside the home but understood the logistics of providing this could be difficult. We were told some residents did go for walks outside the home and that when offered some residents did not want to engage with planned activity. We discussed with staff the need to continue to encourage people to do as much as possible for themselves to promote their health and wellbeing

People in the home were receiving regular visits from their loved ones. Relatives told us they could see their loved ones when they wanted, and they received regular communications and updates from the care home staff. This was positive for people's wellbeing and ensured regular contact with family members. Families spoke positively about the very good quality of care their loved ones received in the home.

Comments included:

"My [relative] takes part in all activities."

"They make things so personal."

"Good awareness of [relative's] needs"

"Good communications and updates from manager."

"[The home] has had a very positive impact on my [relative's] life

Every person living at Blair House Care Home had a personal plan that detailed their care needs. These were updated frequently and available to all appropriate staff and visiting professionals. It was noted that the entries in the support plans and associated documentation sampled were detailed and descriptive and gave an accurate reflection of people's care needs. This meant staff had access to the necessary information to keep people well.

People received appropriate care from outside professionals and support with their medication. Medication

records were completed well and 'as required' medications given and recorded appropriately. It was noted that protocols for 'as required' medication could be more detailed and instructive. It was also suggested for ease of reference that copies of these protocols located in care plans could also be supplied within the medication file system. This ease of access would further ensure all necessary actions were taken before the use of 'as required' medication was deemed necessary. The home utilised outside support appropriately for certain treatments to ensure people's needs were met. Records were seen of regular engagement, amongst others, GPs, District Nurses, chiropody and dentists. People's health and wellbeing needs were being met to a high standard.

How good is our leadership?

5 - Very Good

We found significant strengths in aspects of the care provided which led to high quality, positive outcomes for people, therefore, we evaluated this key question as very good.

We sampled a number of well completed, comprehensive auditing processes. People's care and support needs were subject to a full set of checks. These checks were carried out on people's care plans, medicines and weights. People's opinions of the quality of care were sought. We could see effective action plans put in place in response to people's suggestions. This ensured all aspects of people's care were regularly considered and gave the opportunity for people to voice their opinions and be involved in the home's quality assurance processes. A further enhancement and addition to these checks would be random staff competency assessments to ensure staff were carrying out tasks in line with guidance. This area for improvement was discussed with the manager who was going to introduce a system of random checks that the management team could carry out in the future. However, systems in use at the time of inspection did provide us with assurances that people were receiving care to a very good standard.

The home maintained the premises and equipment to a very good standard. Professional assessors carried out all appropriate checks required by law to keep people safe and best practice was followed. There were a couple of areas where the management team could have responded more promptly to some recommendations made by outside professionals and carried out environmental works more in line with best practice. These were, however, dealt with during the period of inspection visits and an undertaking made by the management team to respond more promptly going forward. Although these issues were identified at inspection, they did not impact significantly on the positive outcomes people experienced in the home.

Staff we spoke to told us how well they were supported by an approachable, supportive, very good management team. Examples were given which demonstrated the caring and considerate approach the management team and the wider team had taken towards each other. The only issue that was raised by a few staff were that the décor within the home appeared, in some areas, to look at bit tired. We were assured and could see that when residents moved out of their rooms these rooms were redecorated. It was, however, noted that some communal areas could have done with some more attention. The management team undertook to keep monitoring these areas, and, at the time of inspection works were ongoing in carrying out some essential repairs.

Inspection report

Complaints

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

Detailed evaluations

How well do we support people's wellbeing?	5 - Very Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good

How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good

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