

# Hatton Lea Nursing Home Care Home Service

2 Reema Road  
Bellshill  
ML4 1RR

Telephone: 01698 748 258

**Type of inspection:**  
Unannounced

**Completed on:**  
24 May 2024

**Service provided by:**  
HC-One No. 1 Limited

**Service provider number:**  
SP2016012770

**Service no:**  
CS2016349817

## About the service

Hatton Lea Nursing Home is a home registered for 150 older people, 90 of whom may have mental health problems. The provider is HC-One Oval Limited.

Hatton Lea Nursing Home is housed in five separate purpose-built bungalows that can accommodate 30 people. Three of the units are funded by NHS Lanarkshire for people who require advanced care with their mental health. These units are well supported by an NHS psychiatrist. The remaining two units are for older people either living with dementia or physical frailty and are funded using mainstream funding methods.

At the point of the inspection, notice had been served by HC-One to NHS Lanarkshire to end the contracted beds. There were 88 people living in the care home, 36 of which lived in the NHS units.

## About the inspection

This was an unannounced inspection which took place on 22-24 May 2024 between 13:00 and 14:00. The inspection was carried out by two inspectors from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection. In making our evaluations of the service we:

- Obtained feedback and spent time with people using the service. We also spoke with the families of eight people during the inspection.
- Spoke with staff and management.
- Observed practice and daily life.
- Reviewed documents.
- Obtained feedback from visiting professionals.

## Key messages

- The service had worked hard to meet the two requirements and two areas for improvement made at the previous inspection.
- People living in the care home and their families were very happy with the care and support.
- People's health needs were escalated to other health professionals when needed.
- How people access and engaged with the community had improved.
- Management had an overview of what was working well and what areas to focus on next.
- People living in the care home and staff benefited from staffing levels that supported their care needs.
- Dignity was compromised for people due to no ensuite facilities and should be considered as part of the provider's planned refurbishment.
- Personal plans were in place to guide staff on how best to care and support for each person.

## 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?	4 - Good
How good is our leadership?	4 - Good
How good is our staff team?	4 - Good
How good is our setting?	3 - Adequate
How well is our care and support planned?	4 - Good

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

## How well do we support people's wellbeing?

4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

People experienced warmth, kindness and compassion in how they were supported and cared for. The service was good at ensuring people maintained relationships with those important to them. Family and friends were made to feel welcome. One relative told us, "The staff are excellent and they also support me when I visit", whilst another said, "The staff are all great".

People living in the care home and their families were very happy with the care and support. One person told us, "The staff are all great and answer my call bell quickly", whilst another said, "I like living here". A relative explained, "my relative is always clean and tidy", whilst another said, "The care here is excellent".

The care home had four wellbeing co-ordinators who mainly worked through a weekly planner. Since the last inspection, the service had reviewed the planner through engagement and feedback from people living there. The planner now included more trips out and time in the garden. They continued to have good links with local schools, community groups and had managed to get support to start a monthly church service. The home was looking at ways to promote independence for people throughout their day and had recognised some people's achievements recently. People's self-worth and wellbeing had been enhanced by these changes.

People benefited from regular healthcare assessments, access to community healthcare and treatment from external healthcare professionals. One family told us, "I have no concerns about X's (their relative) care here", whilst another said, "They look after X (their relative) very well".

People benefited from access to tasty, varied and well-balanced meals. Throughout the day, they were supported to choose from a variety of meals, snacks and drinks. Senior staff and management had a good overview of each person's nutrition and strategies were in place where anyone was at risk of malnutrition.

Whilst no one we spoke with raised any concerns about the current care and support, all were concerned about what the future held due to the closure of the NHS units. We passed on these concerns to management during our feedback to them.

## How good is our leadership?

4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

The manager and their staff teams across all departments had worked hard to meet the requirements and areas for improvement made at the previous inspection in January 2024.

People could be assured that since the previous inspection improvements had been made to the systems in place to audit standards of cleanliness within the care home. We found systems had been reviewed to support these improvements being sustained.

HC-One had served notice to close the three NHS units in March 2024. All staff we spoke with told us that this had been unexpected and that since then communication had been poor. They understood that there were legal processes to be followed, however, all spoke of a lack of updates. Relatives gave us similar feedback. We passed on these concerns to management during our feedback to them. A senior member of HC-One was present and assured us they would review this going forward.

Aside from the closure, staff told us that senior staff and management were approachable and that they felt well supported. All, bar one relative, had similar experiences.

### How good is our staff team?

4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Despite staff working under difficult circumstances about the closure of the three NHS units, they were working hard and really supporting each other to not let this affect the people who lived there. People living in the care home and staff benefited from a warm atmosphere because there were still good working relationships across Hatton Lea.

People could be assured that the numbers and skill mix of staff were determined by a process of continuous assessment. Work had started to widen the assessment tool to feature a range of measures as described under the newly enacted Health and Care (staffing)(Scotland) Act 2019.

Staff were clear about their roles and were deployed effectively. Staff helped each other by being flexible in response to changing situations to ensure care and support was consistent and stable. However, staffing had been rationalised and redundancy discussions had taken place. Some staff had already left to start new jobs. We had an open discussion with management at our feedback, where we shared the views we had received and our own observations. This allowed them to consider these going forward.

### How good is our setting?

3 - Adequate

We evaluated this key question as adequate. While the strengths had a positive impact, key areas need to improve.

People benefitted from an environment that was clean and tidy, with no evidence of intrusive smells. Residents were able to move around the unit they lived in as they wished and choose where to spend their day. As each unit was a bungalow, there was easy access to the gardens regardless of which unit you lived in.

Systems had improved since the previous inspection to ensure that the care home was clean and aspects that had been unsafe or unhygienic had been addressed.

There remained many aspects where flooring was very worn and decor tired. However, due to the imminent closure of the three NHS units, we had to be realistic about this.

We were informed that as once these units were closed, refurbishment would start on the two remaining units.

Dignity was compromised for people due to no ensuite facilities and it was disappointing that HC-One were not considering how they could create ensembles within their future plans. Currently there are no ensembles, with people only having a wash basin within their bedroom. This meant that people either have to use one of the communal toilets in their unit or a commode chair in their bedroom. Whilst Hatton Lea was built prior to current guidance that would require an ensuite facility with a shower, they should consider how they can work towards this for people (see area for improvement 1).

## Areas for improvement

1. To support people to have a more dignified life, the service should consider how they can introduce ensuite facilities.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'As an adult living in a care home, I have ensuite facilities with a shower and can choose to use a bath if I want. If I live in a small care home that has not been purpose built, I might need to share a bathroom with other people.'. (HSCS 5.28)

## How well is our care and support planned?

4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

People could be assured that they had a personal plan in place that included relevant risk assessments. There was a good level of detail within the plans to guide staff around how best to care and support for each person. These were then regularly evaluated.

Management carried out regular audits to support staff to develop the care plans and ensure that they reflected people's current needs.

Personal plans were reviewed with the person and/or their family members in line with legislation. This gave an opportunity to discuss any aspects of care and support that was working well and anything they would like to be done differently.

The service had a supportive and inclusive approach to involve all carers and family members in the planning and delivery of care and support, where this is important to the person living in the care home.

Supporting legal documentation was in place to ensure people were protected and to uphold their rights.

## What the service has done to meet any requirements we made at or since the last inspection

### Requirements

#### Requirement 1

By 21 May 2024, the provider must ensure a thorough and clear quality assurance process in place for auditing the environment and cleanliness of the home. Additionally, staff should complete relevant records to evidence cleaning in all areas they have responsibilities for.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations, Scottish Statutory Instruments: SSI 2011/210 regulation 10 (b) and (d) requirement about Fitness of premises.

This is to ensure care and support is consistent with Health and Social Care Standard (HSCS) which state that 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.' (HSCS, 4.19)

**This requirement was made on 29 January 2024.**

#### Action taken on previous requirement

Please information under key question 4.

#### Met - within timescales

#### Requirement 2

By 21 May 2024, the provider must demonstrate that the premises and environment people are living in is in a good state of repair, and free from hazards.

In order to do this the provider must:

Resolve concerns around repairs and environmental hazards.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations, Scottish Statutory Instruments: SSI 2011/210 regulation 10 (b) and (d) requirement about Fitness of premises.

This ensures care and support is consistent with the Health and Social Care Standards, which state: "The premises have been adapted, equipped and furnished to meet my needs and wishes" (HSCS 5.16) and "I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment" (HSCS 5.22).

**This requirement was made on 29 January 2024.**

## Action taken on previous requirement

Please see information under key question 4.

**Met - within timescales**

## What the service has done to meet any areas for improvement we made at or since the last inspection

### Areas for improvement

#### Previous area for improvement 1

To support people to get the most out of life and achieve good health and wellbeing, the provider should provide a varied program of meaningful activities. Furthermore, the provider should ensure recordings of activities are fully completed. To do this the provider must at a minimum provide:

- a) an activity plan developed from people's interests and hobbies
- b) a range of meaningful activities for people living in the service
- c) opportunities for people to be out in the community.

This is to ensure care and support is consistent with Health and Social Care Standard (HSCS) which state that 'I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors' (HSCS 1.25.)

**This area for improvement was made on 29 January 2024.**

#### Action taken since then

Please see information under key question 1.

**This area for improvement was met.**

#### Previous area for improvement 2

To ensure people get the most out of life the service should support people to maintain and encourage their independence in all aspects of their lives. This will uphold people's confidence, control and human rights.

This is to ensure care and support is consistent with Health and Social Care Standards which state 'I am empowered and enabled to be as independent and as in control of my life as I can be.' (HSCS, 2.2).

**This area for improvement was made on 29 January 2024.**

#### Action taken since then

Please see information under key question 1.

**This area for improvement was met.**



## 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).

## Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good
How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good
How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good
How good is our setting?	3 - Adequate
4.1 People experience high quality facilities	3 - Adequate
How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

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