

Hermitage House Care Home Service

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Type of inspection:
Unannounced

Completed on:
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Service provided by:
Helensburgh Care Home Limited

Service provider number:
SP2022000008

Service no:
CS2022000018

About the service

Hermitage House is a purpose-built care home registered to provide nursing care for up to 64 older people, some of whom will be living with dementia.

The home is situated close to Hermitage Park in Helensburgh with easy access to transport links. It comprises accommodation over four floors made up of single bedrooms with en suite wet rooms arranged in six small, homely clusters. Each of the six areas has a lounge/dining area, satellite kitchen facilities and a selection of communal toilets and bathrooms.

A central reception area provides access to stairs and lifts. Additional facilities include quiet lounges and a hairdressers with a nail bar. There is also a tearoom with comfortable seating where relatives can enjoy parties and private conversations.

The service employs nursing and care staff to deliver on a range of healthcare needs for residents. Additional staff are available for housekeeping, catering, laundry, waste management, gardening and buildings maintenance.

There is a small garden area accessible from the lower ground floor. Upper floors had access to balconies.

A minibus was available to be used when drivers were available.

About the inspection

This was an unannounced inspection which took place on 7, 8 and 9 May 2024. Feedback was given on 14 May 2024. 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:

- spoke with 17 people using the service and seven of their family (19 people also responded to our questionnaire)
- spoke with 15 staff and management (19 staff responded to our questionnaire)
- reviewed questionnaires returned to us from six visiting professionals
- observed practice and daily life
- reviewed documents.

Key messages

- Staff knew people well and supported them with kindness and compassion.
- People and families were happy with the support offered.
- Staffing arrangements worked well to support people.
- Leadership and staff teams demonstrated a commitment to provide high quality care and support to people.
- Management should further develop access to outdoor areas and assess how well the indoor areas work for all in Hermitage House.

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
How good is our staff team?	5 - Very Good
How good is our setting?	4 - Good
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?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

Staff were very good at engaging with people and their families. People we spoke with offered positive comments about staff but we also witnessed positive interactions that were supportive, tender and simply just fun when needed to be. This helped people to feel comfortable and welcomed by the staff team.

Some people had clinical needs which required input from the nursing team. There was very good oversight in this area. Nursing staff were mindful to not just gather information, they analysed it to see what it meant for people and how their care could be tended to and how it could be improved if needed. A local surgical team had offered positive feedback to staff on how they dealt with wound care, staff were understandably pleased to have got such feedback from an external specialist team. This reinforced our view of the good work carried out by staff to keep people well.

Nutritious, appealing and appropriate meal choices are important to people's day. It ensures people have the energy they need to keep well and it often offers pleasure due to the stimulation of senses such as taste and smell. Freshly prepared meals were well-received with different dietary and support needs respected and understood. As people moved around the home, they could stop at various drink and snack stations to pick and choose what they wanted, when they wanted. People in one of the floors expressed a desire to have the traditional lunch meal in the evening and vice versa - this was done and highlights people's wishes being met. It was encouraging to find that people's choices were listened to and acted on.

Staff recording around fluid intake needed to improve, this had already been highlighted as an area of practice and was being further developed and supported by management. It is important that when monitoring charts are in place that staff understand why they are there and only use them when they are required. Monitoring must be meaningful, if not it becomes an exercise which adds to an already busy workload but it can also tip into being unnecessarily intrusive into a person's life.

How good is our leadership?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

Throughout the inspection, we came across several situations where leadership had taken the time to gather information, analyse and reflect on it to understand whether people were getting the best care that they could. This evidenced a staff team who were keen to improve to promote positive experiences for people's care.

There was strong sense of leadership in the service across all departments and across a range of staff who held a supervisory role. Staff felt confident to express their thoughts and views on what was working well and what could improve. There was a strong sense from staff that they felt listened to but they also appreciated some changes were outwith the gift of the management team to change. Many staff commented on the notion of an open door to management.

Laundry and kitchen staff felt their workplaces were oppressively hot to work in. It is incumbent upon organisations to ensure the safety and wellbeing of their staff. We asked external management to review this and we have signposted them to the Health and Safety Executive's Temperature in the Workplace guidance. (<https://www.hse.gov.uk/temperature/index.htm>)

A training and development lead role was in place which indicated a desire to have a trained and competent staff team. Oversight of training and supervision is an important role which is often tagged onto the role of an already busy manager. There had been an increased focus on ensuring that all required training and supervision was planned which should result in being offered the training and support that they need to carry out their roles. Staff spoke of being supported to develop new skills and having access to the training they required. It was also encouraging to find staff were offered training on top of the mandatory options.

We were impressed at the enthusiasm that staff had for new staff joining the team and a recognition that new staff can often bring new strengths to the current team. Equally, current staff could share their knowledge and experiences that they have developed over their careers.

How good is our staff team?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

Hermitage House is a relatively new service and as such they have been building up their staff team over the last year in particular. Staff told us that they really enjoyed working there, they felt part of the whole team as well as part of their own smaller departments. Staff generally felt valued and able to express their views.

Staff were flexible and responsive to the needs of people in the service. They worked well as a team and understood their roles and associated responsibilities. People and their families spoke very highly of the staff team. The staff team was quite stable and came across as being a happy team. There was a relaxed and friendly atmosphere about the home and staff very much contributed to that which in turn created a pleasant place for people to be.

Management were not afraid to embrace change and to learn from it, and staff very much engaged and offered feedback. Staffing was looked at in terms of staff being able to work across all floors (some staff worked primarily on an assigned floor). The reasoning was centred around a more positive experience where staff flexibility meant that they could much more easily work with people who they maybe didn't know so well. However, it did not achieve the goals and they have reverted to staff mainly being allocated a floor due to their strengths in certain areas of support and knowledge. It is commendable that staff and management were willing to give something a try but also to put their hands up and say it didn't work and the reasons why - this is reflective of a team striving to be better.

During analysis of falls, the management team recognised falls had increased in a particular floor at night. This led to them reviewing the staffing levels on that floor and how staff from other floors could support. Responsive actions such as this reinforced to us that the correct deployment of staff is fully considered by management.

Handovers and daily flash updates helped to keep up-to-date with what was going on and what work was required to be followed up each day. Weekend flash updates needed to be tightened to ensure they always happened as there were some gaps.

How good is our setting?

4 - Good

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

Hermitage House has only been open for a couple of years and is a very pleasant care home. The housekeeping team and maintenance worker worked hard to keep the home clean, fresh and well-maintained. People's lives are improved when able to live in a setting which offers them comfort, safety and a sense of homeliness.

Homeliness was promoted through the design of the service where communal spaces were smaller and thus cosier and targeted towards generally no more than 10 people. That said people could go to different areas of the care home as they desired.

Balconies on the upper floors allowed access to the benefits of fresh air and the stimulation which nature can offer us whether from the twitter of birds to the smell of flowers. We saw where staff positioned someone's bed in such a way that the person benefited from an outdoor experience whilst still inside - a bed facing an open window can be so much more comforting than looking onto a wall/doorway. Clearly staff were mindful of what a person wanted and what gave them happiness.

People should have access to such spaces when it suits them, however there was a risk averse approach to this due to fear of accidents. As such, the doors to balconies were often locked and staff were needed to open them. Management engaged well with us in discussion regarding this issue and we were reassured that they will develop their risk assessments further to adopt a risk enabling approach which offers people more say in how they use their day and the facilities on offer to them. We signposted the service to the Dementia Services Development Centre at the University of Stirling for further guidance.

The lower floor benefits from a garden area which can be accessed by people on that floor and from the communal rooms. People and their families used it well during the inspection but we have also asked management to further consider how to make the space work for people to use without staff support also being required. The step area and sloped grass area should be considered within future improvements to ensure people can have freedom of access to the garden with risks being minimised where possible.

The service had used The King's Fund tool externally but had to complete it and also use the internal one. However, as The King's Fund is for people who have dementia, we have also asked the management team to consider how they capture the needs of those who do not have dementia. We hope that we will be able to see progress in this area during our next inspection.

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.

An electronic care planning system called Care Control was in place. People and their families had access to this system and it was positive to hear how it was being used. Families told us of the comfort they derived from it because at a glance they could get an idea of how their loved one was. This was particularly helpful for those who lived a distance away but also for when they may have felt their loved one wasn't as well as could be. Not only did Care Control offer an extra means of communication, it also reassured us that families and people were involved in care planning.

Care plans should offer direction to staff as to how a person wishes to be supported and what matters to them, a sense of what makes their day important. Most care plans that we sampled were rich with information but some needed to be further developed. Management had recognised this and already had included it in their improvement plan. Given the strength of the good quality care plans, we were confident of the capacity of staff to bring all care plans up to the higher standard.

Reviews were held with people and their families. It was commendable as to how often the care plans were reviewed to ensure they were up-to-date. The law around care reviews is clear that they must be completed at least every six months, staff were exceeding this but recorded it differently to the more traditional minuted meeting. We asked the management team to be mindful to track changes in care plans and to discuss further with the local health and social care partnership who are currently looking at care service reviews across the authority.

Future care planning is an important aspect of life in general. It allows us to think of what we would like to happen should there be a significant change in our health and indeed the choices we would like to make for when we approach the end of our lives. We know that not everyone wishes to be involved in these discussions but have suggested to management that they consider discussions around future care planning which are more personal and meaningful to people and families.

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

The provider should ensure people benefit from a robust quality assurance management system. Information gathered from quality assurance audits, meetings and self-evaluation should be used to inform the service improvement plan. This should also include, for example, procedures for the management of people's finances.

This is to ensure that care and support is consistent with the Health and Social Care Standards (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) and "I use a service and organisation that are well led and managed" (HSCS 4.23).

This area for improvement was made on 11 November 2022.

Action taken since then

The management team shared the service improvement plan with us, and it was clear that they had used information from various formal audits, and feedback from people, families and staff to inform the plan.

The provider used their external management team to provide support and to offer further oversight on quality assurance. Leadership staff in the service were involved in internal audits which reassured us of their commitment to providing good care and support. These internal checks and balances were then looked at by external staff who could confirm where things were going well but also suggest areas where further improvements could be made.

This area for improvement has been met.

Previous area for improvement 2

The service should review the processes and systems for safer staff recruitment, training, supervision and professional registration.

To do this, the service should ensure they:

- a) follow safer recruitment guidance
- b) implement a robust system to capture the statutory, mandatory and other training
- c) review the system for staff supervision and appraisal
- d) review the system to support professional registration.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes" (HSCS 3.14).

This area for improvement was made on 11 November 2022.

Action taken since then

In order that people are supported by staff who have been properly vetted, management should always follow a process of safer recruitment. Management was clear on the expectations of this and we saw evidence of the correct checks taking place such as Protecting Vulnerable Groups (PVG) checks, references and Right to Work. We offered further guidance regarding Right to Work checks to ensure further robustness of these checks.

A training lead was in place which was good to see in terms of organisational investment in training. This level of commitment should make an even greater impact on people's care and support due to having a dedicated member of staff in place to oversee and support staff learning. People should be confident that they will be supported by a skilled and competent staff group. All too often training is left to be overseen by an already busy manager who will often find that other priorities take over.

Better systems were in place to capture the training that staff had completed albeit the online training system was not easy to navigate in terms of reporting. Competency checks were in place which meant that management were checking that staff were and could do the roles assigned to them.

A system was in place to provide oversight on supervision and also professional registration. Some staff supervisions were out-of-date but we could see planned supervisions and were confident they would take place.

This area for improvement has been met.

Previous area for improvement 3

To ensure that residents are kept safe, the provider should ensure the completion of all identified and outstanding remedial works to the new building. This should include the completion of actions detailed in the fire safety report relating to:

- a) all fire doors
- b) the fire risk assessment
- c) regular staff training.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that "My environment is secure and safe" (HSCS 5.19).

This area for improvement was made on 11 November 2022.

Action taken since then

Work had been completed in relation to the above noted points regarding maintenance. Scottish Fire and Rescue completed another visit since the last inspection and as such the service was awaiting the report.

Fire drills were in place. We noted that recording around this was very good. However, some staff had still to refresh/take part and that was highlighted to management who committed to address it.

This area for improvement has been met.

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
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our leadership?	5 - Very Good
2.4 Staff are led well	5 - Very Good
How good is our staff team?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good
How good is our setting?	4 - Good
4.2 The setting promotes people's independence	4 - Good
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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