

Strathtay House Care Home Service

Harley Place Perth PH1 5DP

Telephone: 01738 632 343

Type of inspection:

Unannounced

Completed on:

21 June 2024

Service provided by:

HC-One Limited

Service provider number:

SP2011011682

Service no: CS2011300762



Inspection report

About the service

Strathtay House is a care home for older people situated in a residential area of Perth, close to local transport links, shops and community services. The service provides residential care for up to 40 people.

Strathtay House is a purpose built, single floor building comprising of two units. All bedrooms are single occupancy and have en-suite toilet and wash hand basin. There are three sitting areas and two dining areas. Outside there are well kept, accessible, enclosed garden areas.

At the time of inspection there were 40 people living in the service.

About the inspection

This was an unannounced inspection which took place on 19 and 20 June 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, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- Spoke with eight people using the service and five of their family
- Spoke with five staff and management
- · Observed practice and daily life
- · Reviewed documents
- Spoke with visiting professionals.

Key messages

- People were supported by a compassionate and stable staff team
- There was a comprehensive process in place for the management of medications
- Physical exercise and movement were promoted throughout the day
- People were supported with meaningful activities
- People were consulted on and involved in decisions about the way the service operated
- Staffing was sufficient to meet people's needs and to provide meaningful interactions with people.

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 staff team?	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

We evaluated this key question as very good. There were several major strengths which supported people to have positive experiences and very few areas needing improvements.

There was a comprehensive process in place for the management of people's medication, including medications administered on an 'as required' basis. A system was in place to ensure people received their medications at the right time and as prescribed. This was supported by leadership oversight. The service had good links with external health professionals and there was evidence that medication use was monitored, and reviews were requested if needed to ensure people's needs were consistently met.

People's health needs were being further assessed and monitored using a range of recognised health assessments. These were used to inform the care and support people received and to communicate with external health professionals as needed. A visiting health professional told us that the service provided "responsive care" and that their professional advice was always followed. This ensured that people received consistent care and support in line with their health needs.

The service was in the middle of transitioning to a new, digital format for their care plans. The care plans and risk assessments we sampled were comprehensive and the information they contained was consistent across all relevant areas. People, or their representative, could be involved in care plan development, and these were regularly reviewed and updated, meaning they could be used to direct someone's care in line with their needs and wishes. Legal documents were mostly in place so the service could be clear who had decision making powers for the person if needed.

People had access to a range of food and drink options regularly throughout the day that helped to ensure their nutrition and hydration needs were met. Mealtimes were well organised with people receiving the right level of support for them. There were choices at mealtimes and fresh fruit and home baking were also available daily.

Regular promotion of movement and physical exercise enhanced people's wellbeing. People told us about exercise goals they had set which were keeping them motivated. The layout of the service further helped to support mobility with long corridors and plenty of seating areas. There was easy access to the attractive enclosed garden areas, and during the inspection we saw people regularly being assisted outside for a walk or to sit in the fresh air.

There was a calm, unhurried but fun atmosphere throughout the service that contributed to positive experiences for people. People benefitted from good relationships with the staff team who knew them well, knew how to support them and how to promote their independence. A variety of activities were available, and the service benefitted from a dedicated wellbeing co-ordinator to support this. People were encouraged to achieve their aspirations by trying new skills, developing their existing interests or re-engaging with activities they had previously been interested in. We heard about people learning Makaton communication signs as a new skill, regaining their love of knitting, or developing their interests in gardening.

People who preferred not to join in group activities were given opportunities for meaningful engagement through one-to-one chats, and the service had a strong focus on getting to know everyone's interests, hobbies, and histories to ensure people were treated as individuals. People could also be involved in daily

tasks such as setting the tables and helping with tidying up. This meaningful occupation further supports people's sense of worth and value.

People and families could be involved in the service through a variety of means, such as relatives' and residents' meetings, surveys, and there was a suggestion box in the reception area. These opinions were valued, and we saw and heard about improvements that had been driven by suggestions from people, such as the development of the new bar area in the communal lounge. Listening to and acting on feedback is important in ensuring that the service continues to meet the needs and wishes of the people living there.

How good is our staff team?

5 - Very Good

We evaluated this key question as very good. Positive outcomes for people were supported by major strengths of the service and there were very few areas for improvement.

Strathtay House had a good system in place for ensuring adequate staffing to meet people's needs. It benefitted from a stable staff team that worked well together and were flexible to ensure care was consistent and met people's needs. There was clear allocation of roles and responsibilities for care staff and ancillary staff and there was a system in place to communicate this. Staff were deployed with some consideration given to knowledge and skills, with less experienced staff being allocated to areas of lower clinical need initially.

Staffing was informed by a dependency assessment and the leadership team's clinical judgement. The dependency was reviewed monthly and in line with any significant changes, such as new admissions, or an increase in someone's care needs. Staffing was consistent but not static, and always higher than dictated by the dependency tool as the service recognised that care needs could escalate quickly and unpredictably at times. This ensured sufficient staff were on shift to meet people's needs.

Throughout the inspection staff were visible on both units and engaged with people. There were enough staff on duty to attend to people's care needs and to provide meaningful connection and activity. This was appreciated by the people and families we spoke to and also by the staff, who told us the best thing about working in Strathtay House was the people they supported.

Staff were supported to maintain their knowledge and skills with time and assistance given to complete appropriate training. There were opportunities for career development and staff were rewarded and recognised for their achievements. The leadership team had oversight of staff training and carried out regular observations of practice or competency checks to ensure staff could apply their learning and that support for people was consistent.

Staff benefitted from good working relationships and communication in the service was effective. Staff input to the service was valued and listened to and staff members had opportunity for regular supervisions and discussions about their performance and career aspirations. A valued and motivated staff team contributes to a positive atmosphere in the care home which supports people to have good experiences.

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 ensure people's health, safety and wellbeing, the service should make sure that people consistently receive their medications as prescribed.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24).

This area for improvement was made on 19 January 2024.

Action taken since then

We sampled medication records and found that people were receiving their medications as prescribed including medications administered on an 'as required' basis. This was supported by regular audits and leadership oversight.

This area for improvement has been met.

Previous area for improvement 2

To ensure the health, safety and wellbeing of people, the provider should make sure all quality assurance systems are used to their full potential to identify and rectify areas for improvement.

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).

This area for improvement was made on 19 January 2024.

Action taken since then

A range of quality assurance systems were in place and audits were being completed comprehensively. The leadership team had good oversight of key areas of the service, such as medications, the environment, infection prevention and control, staffing and care planning. Action plans were created in response to quality assurance activities and used to monitor progress on the identified improvements.

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 staff team?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good

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