

# Newcarron Court Nursing Home Care Home Service

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Falkirk  
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Telephone: 01324 610 334

**Type of inspection:**  
Unannounced

**Completed on:**  
24 June 2024

**Service provided by:**  
Advinia Care Homes Limited

**Service provider number:**  
SP2017013002

**Service no:**  
CS2017361016

## About the service

Newcarron Court Nursing Home is registered to provide care for up to 116 older people. It is situated in the Carron area of Falkirk.

Accommodation is provided over two floors and divided into six units. The ground floor comprises of Crammond unit accommodating 16 residents; Arran 16 residents and Lewis 24 residents. Iona, Skye and Harris units are all on the first floor and each accommodate 20 residents. Iona and Crammond units were not in use.

Staffing is provided over 24 hours, with a team of nurses and carers in each unit. The management team comprises of a manager and deputy manager. All bedrooms are single occupancy with an ensuite toilet and wash hand basin. There are lounge and dining facilities in each unit. The gardens are dementia friendly with seating, pathways and areas of lawn, and can be accessed from the ground floor via a keypad system.

## About the inspection

This was an unannounced follow up inspection which took place on 24 June 2024, 09:30 until 14:30. 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 six people using the service and one of their relatives.
- spoke with staff and management
- observed practice and daily life
- reviewed documents.

## Key messages

- People could be assured that staffing levels were continuously reviewed using a method of assessment
- Improvement had been made to ensure the service was responsive to changes and develop a culture of continuous improvement
- Improvement had been made to ensure people's care notes were completed consistently to demonstrate care being provided.

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

### Requirements

#### Requirement 1

By 13 April 2024, the provider must ensure there is proper provision of sufficient numbers of staff to ensure the health, safety and welfare of people at all times.

To do this, the provider, must at a minimum:

- a) Review staffing levels using a method of assessment that includes the involvement of people experiencing care or their representatives.
- b) Undertake observations at various times of day over the 24 hour period and record the outcomes to help inform the assessment of how effectively people's needs are met.
- c) Ensure there is sufficient numbers and skill mix of staff to support people's needs safely at all times.
- d) Ensure management have oversight of people's care and support needs.
- e) Ensure staff are effectively led, deployed and supervised to meet the needs of people experiencing care.

**This requirement was made on 3 January 2024.**

#### Action taken on previous requirement

People could be assured that staffing levels had been reviewed using a method of assessment involving people and or their representatives. We saw evidence of observations being carried out by the management team and analysis of the information collated, which helped inform the skill mix and sufficient staffing levels within the specific units.

Managers worked hard to ensure the oversight and deployment of staff within the home to ensure people's care needs were being met safely and effectively.

**Met - outwith 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 ensure the service remains responsive to changes and develops a culture of continuous improvement, the provider should:

- a) Ensure the current improvement plan is accurate and reflective of the QA system audits, outcomes and actions.
- b) Ensure regular oversight by the manager to monitor progress on identified improvements.

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

**This area for improvement was made on 2 May 2024.**

#### Action taken since then

People could be assured that the service had an improvement plan in place which was reflective of the current quality assurance system with clear actions and outcomes. The manager had regular oversight and managed and monitored the progress of improvements identified, which meant the service was responsive to changes and develop a culture of continuous improvement.

Therefore this area for improvement has been met.

#### Previous area for improvement 2

To support people's health and wellbeing, the provider should ensure that people's care notes are completed consistently to demonstrate care being provided.

This is to ensure care and support is consistent with Health and Social Care Standard 1.4: "If I require intimate personal care, this is carried out in a dignified way, with my privacy and personal preferences respected."

**This area for improvement was made on 3 January 2024.**

#### Action taken since then

People could be assured that people's care notes were completed consistently to demonstrate care being provided, which helps support people's health and wellbeing.

Therefore this area for improvement has been met outwith timescales.

#### Previous area for improvement 3

The provider should ensure that the service can fully meet the needs of all people who are newly admitted to the service. To do this, you, the provider, should develop and undertake robust pre-admission assessments involving people and their representatives, and then review the skill mix of staff to ensure that the needs of the other people already residing in the service are taken into account.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: "My need, as agreed in my personal plan, are fully met, and my wishes and choices are respected" (HSCS 1.23); and "Any treatment or intervention that I experience is safe and effective" (HSCS 1.24).

**This area for improvement was made on 2 May 2024.**

## Action taken since then

The service had developed a pre-admission assessment document however due to it only being implemented for one new admission, we were unable to fully assess the impact of this improvement within the service.

Therefore this area for improvement has not 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](http://www.careinspectorate.com).

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