

# Forthbank Nursing Home Care Home Service

Drip Road Kildean Stirling FK8 1RR

Telephone: 01786 474 745

Type of inspection:

Unannounced

Completed on:

29 August 2024

Service provided by:

**HC-One Limited** 

Service provider number:

SP2011011682

**Service no:** CS2011300708



## Inspection report

#### About the service

Forthbank Nursing Home has been registered with the Care Inspectorate since October 2011 to provide a care service to a maximum of 68 older people. The provider is HC-One Limited.

The care home is a purpose built building with accommodation provided over two floors and has good access to outside garden space. Forthbank is set within the heart of the community, close to facilities with easy access to transport links.

The aims and objectives of the service state that Forthbank aims:

'To provide people with the highest quality of holistic care to allow them to enjoy their life to their fullest.'

## About the inspection

This was an unannounced inspection which took place on 27 and 28 August 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 a number of people using the service and nine of their family and friends.
- Spoke with 18 staff and management.
- · Observed practice and daily life.
- · Reviewed documents.
- Spoke with six visiting professionals.

### Key messages

People living at Forthbank experienced support with compassion and kindness.

Peoples health and wellbeing needs were met timeously because of the strong relationships between the service and their health and social care colleagues.

The staff and management team were passionate about achieving better outcomes for the people that lived in Forthbank.

The imminent refurbishment included good practice design and was developed to better support people who are living with dementia.

As part of this inspection, we assessed the service's self-evaluation of key areas. We found that the service had begun to use self-evaluation, however, further work is required to develop this approach to support improvement.

## 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 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.

People experienced support with compassion because there were warm, encouraging, positive and trusting relationships between staff and people living at Forthbank and people, their families and external professionals told us that people who lived at Forthbank were very important to the staff and staff knew people very well. One person told us "the staff are all lovely here, they work very hard" while a family member said "I am really happy with care here. I feel that (my relative) is very comfortable, and the staff are brilliant with (my relative)."

People could be confident that any health and wellbeing needs would be met because the service had developed strong relationships with health and social care professionals and sought specialist advice timeously e.g. from dietician and speech and language professionals, when required. One relative said "the staff always keep in touch with me, and always get the doctor quickly if needed".

There was good oversight of falls management and falls prevention this had resulted in a reduction in the number of falls reported recently.

People were supported well with skin integrity and where there were skin lesions or wounds, the service had robust plans in place, which were further supported by regular advice from NHS specialist nurses.

Medication was safely managed and where there were any concerns, for example about compliance, the service were quick to follow guidance and engage the appropriate professionals for support.

Although care plans were well organised, reviewed and audited, documents that recorded care events, for example, oral care, foot and nail care and fluid intake, were often incomplete or inaccurate. When we spoke to the management team about this they had already engaged a plan to address recording and we were confident that this could support improved outcomes for people in this area of care and support.

During our observations we had some concerns about supporting people who may experience stress and /or distress. The service had recently refurbished one area of the home and we could see how this very well improved outcomes. However, one of the units that supported people living with dementia did not follow good practice guidance in relation to the environment and we could see how factors such as the lighting and noise level could exacerbate peoples stress and distress. When we discussed this with the management team we were encouraged by the immediate plans for enhanced staff training and refurbishment of the care home. While the plans are imminent, we encouraged the service to consider how outcomes could improve in the very short term and we were confident that this would be considered for individuals.

## 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.

People could be confident in the staff team as we saw that they were motivated, worked well together and had formed good relationships. One person said "Staff are helpful and understanding" and although all

feedback about staff was positive, some people felt staff did not always have enough time to spend with them "having a blether."

There was respectful communication within the team, this created a warm atmosphere because there were good working relationships. We saw evidence of good skill mix throughout the service and this was linked to individual dependencies of people living in Forthbank, to ensure that staffing levels were correct.

Staff told us that they enjoyed working within the service and although there was some frequent short term staff absence, this was covered by familiar bank staff and agency staff to fill the gaps.

Staff were visible and available to people and visitors throughout the day and were seen to be very responsive to peoples needs. Staff were motivated through support from each other and the wider management team and the service followed good practice in relation to the Health and Care (Staffing) (Scotland) Act 2019 (HCSA) with a clear focus on staff wellbeing.

## 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 help to give purpose to individuals' day, and support their wellbeing, people should have opportunities to take part in meaningful engagement with other residents and/or staff. In doing so, there should be more emphasis placed on people's preferences, wishes and aspirations, to help them live a meaningful and fulfilling life.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'My care and support meets my needs and is right for me' (HSCS 1.19).

This area for improvement was made on 14 April 2023.

#### Action taken since then

We evaluated this area at our inspection. The service had worked hard to determine peoples wishes and preferences. We had some concerns about individual support particularly where people may need distraction or avoidance of stressful situations. We will review this again at our next inspection.

#### Previous area for improvement 2

In order to improve outcomes for people experiencing care, the service should ensure effective supervision of people who need support within communal areas.

This should include, but is not limited to:

- a) The organisation and deployment of staff to maximise supervision of and interaction with people experiencing care.
- b) The availability of activity equipment (such as sensory items and music).

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'My needs are met by the right number of people' (HSCS 3.15).

This area for improvement was made on 14 April 2023.

#### Action taken since then

We evaluated this area at our inspection. The service had made some changes to the environment to support observation and supervision and we could see this had improved the opportunity for staff interactions with people. Equipment that supported staff to keep people engaged was available in the lounge areas. Although there was still some work required to complete the environmental changes, the service had met this area for improvement.

#### Previous area for improvement 3

So that people can have confidence in the organisation providing their care and support the provider should ensure that quality assurance process is kept up to date, are clear and accessible and action plans identified.

This should include, but is not limited to:

- (a) Recording, reporting and evaluation of adult protection concerns.
- (b) Robust and regular oversight of audit activity, staff supervision and resident reviews.
- (c) Robust and regular oversight of the home improvement plan.

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

This area for improvement was made on 14 April 2023.

#### Action taken since then

We evaluated this area at our inspection. The service were able to evidence a significant improvement in quality assurances processes including staff supervision and reviews of people who live at Forthbank. There was good management overview of adult protection concerns, audit activity and the service improvement plan. This area for improvement had been met.

#### Previous area for improvement 4

So that people feel familiar and can orientate themselves within the home, the provider should ensure that clear signage is in place, taking account of good practice guidance.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'I can independently access the parts of the premises I use and the environment has been designed to promote this' (HSCS 5.11).

This area for improvement was made on 14 April 2023.

#### Action taken since then

We evaluated this area at our inspection. The service had made some changes to the environment that supported better outcomes for people. This was not yet complete and there were plans in place to continue with refurbishment imminently. We could see that these plans included good practice guidance for environments where people may be living with sensory or cognitive impairment.

We will review this again at our next inspection.

#### Previous area for improvement 5

To ensure good outcomes for people, the provider should ensure support records reflect care and support and any actions taken to obtain specimens for health checks, including where these have been declined. Strategies used to encourage participation in this support should also be recorded to ensure these can be evaluated and incorporated within care plans.

This is to comply with:

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Health and Social Care Standard 1.23: My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected.

This area for improvement was made on 24 April 2024.

#### Action taken since then

We evaluated this area at our inspection. The service were able to evidence improvement in health related recording. There was good management overview of and audit of care plans.

This area for improvement had been met.

#### Previous area for improvement 6

To ensure positive outcomes for people, the provider should ensure care plans are reviewed and updated in line with their care planning procedure. This should include the update of respite care plans when people's stays are extended and, where necessary, discussions regarding leaving this in place should be documented.

This is in order to comply with:

Health and Social Care Standard 1.15: My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices.

This area for improvement was made on 24 April 2024.

#### Action taken since then

We evaluated this area at our inspection. The service were able to evidence improvement in care planning which included input from people and their families and included people on short breaks and respite. There was good management overview of and audit of care plans.

This area for improvement had been met.

## Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

## 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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