

Northcote Lodge Care Home Care Home Service

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Type of inspection:
Unannounced

Completed on:
26 September 2024

Service provided by:
Northcote Lodge Trust

Service provider number:
SP2010010986

Service no:
CS2010251941

About the service

Northcote Lodge is located in the quiet, residential area of Airyhall in Aberdeen. The service aims to provide a 'personalised' level of care and support, to maintain independence and individuality. It is registered to provide a care service, up to a maximum of 60 older people.

The home is a modern two storey building, and is accessible for all people. There are distinct areas, each having their own lounge and dining area, and the spacious rooms are all en-suite. The home has two enclosed garden areas for residents to enjoy safely, as they wish. There are two summerhouses, a putting green and various outdoor games available.

The home also has a chapel which people and their families can use, and services are held regularly.

Northcote Lodge has a café located by the front reception area serving home bakes, soup, sandwiches and snacks. This provides a space for people to enjoy socialising with friends, family and visitors.

About the inspection

This was an unannounced inspection which took place on 25 and 26 September 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 14 people using the service and their families
- spoke with ten staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

- People using the service benefited from a consistent staff team, who worked well together and knew them well
- Quality assurance processes were identifying issues which were driving improvements in the service
- The manager was visible in the service and people had confidence that any issues were dealt with appropriately
- The home environment was cleaned and maintained to a high standard, making it a pleasant and safe space for people
- As part of this inspection, we assessed the service's self-evaluation of key areas. We found that the service was not yet undertaking self-evaluation. We discussed the benefits of self-evaluation and how this approach should be adopted to support improvement in the service.

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?	5 - Very Good
How well is our care and support planned?	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.

Positive relationships had developed between staff and people living in the service. It was evident that people benefitted from a consistent staff team, who knew them well. People told us, 'The staff are very attentive and caring' and, 'I like it here, the staff are lovely'. The values of the service and staff team reflected the Health and Social Care Standards. As a result, relationships and connections between people promoted good outcomes, and enriched people's lives.

People did not need to wait for long periods for care and support. People looked well, and were dressed in a way they would like to be dressed. For example, with jewellery, hair styled and nails painted. People were treated with dignity and encouraged to maintain personal touches to their appearance.

Families were visiting and participating in their loved one's care. For example, some were enjoying mealtimes together, and others chose to help with aspects of personal care. Everyone was welcomed, and this meant that the service actively encouraged meaningful connection, whilst promoting people's rights and choices.

Care plans were detailed, with information about individual care needs, and likes and dislikes. A range of assessments had informed the basis of the care plans and noted what was required to ensure people's safety. This meant that staff could use this information to engage with people to support them to achieve their goals.

People's health benefitted from engagement with other health professionals. Staff recognised changes in people's health or presentation and sought referrals and advice from appropriate healthcare professionals. We were told, 'I feel that staff are following the advice that we are providing and contact us to flag up any concerns'. This approach helped people keep well and ensured their health needs were being met.

People told us, 'I like the meals here. I eat more than I ate at home' and 'I'm pleased with the meals. I'm always happy with what I've chosen'. Although people were enjoying their food, some people waited too long to be assisted with their meals. The mealtime experience felt disorganised and rushed. We discussed this with the manager, who took action to speak with staff and review how they assisted people during meals. As a result, by the end of our inspection, the dining experience was calmer and people were being supported timeously with their meals.

People told us that there was plenty to do and participate in each day. The activities planner included weekends and one to one time for people. We were told, 'I am able to go out for a walk and participate in things I want to' and 'There are plenty of activities. I join in some of them, although I like the quizzes'. People were able to choose how to spend their time and were encouraged to keep active.

An organised system for medication administration was in place. We saw that the service did not have 'as required' (PRN) medication protocols in place. This meant that it was not always clear at which point that PRN medication should be administered. We discussed this with the manager, who took prompt action to ensure these were put in place. Regular medication audits were identifying areas for improvement with medication administration, which were actioned promptly. As a result, people could be reassured that their medication would be given safely, as prescribed.

The home was visibly, very clean and tidy, with cleaning protocols in place. Infection prevention and control (IPC) stations were available for staff throughout the home and used appropriately. People could be confident that they were being cared for in a clean and healthy environment.

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.

The manager had a good overview of the home, and there was a service improvement plan in place, which identified key areas for development. People were encouraged to give feedback through various means such as meetings. The service improvement plan should however, incorporate feedback from others in order to promote participation, and improve the service.

People had confidence in the manager. We were told, 'The manager is kind' and 'The manager would sort things out if I had anything wrong'. At the time of inspection, the manager was visible in the service and was available for people to talk if they needed to. People felt reassured when they raised a concern, it would be dealt with quickly.

The service had a comprehensive quality assurance process in place, which allowed the management team to monitor service delivery. Audits completed had associated action plans evidencing actions taken, and the outcomes achieved. Audits included the whole staff team, and provided opportunities for staff at all levels to develop, and maintain their own areas of responsibility. This promoted and encouraged leadership in all staff groups at all levels. People could therefore be reassured that the service benefited from a culture of continuous improvement.

Meetings were being held across all disciplines, with good attendance. Staff told us that they created the agenda prior to the meetings, which allowed them to discuss any areas of concern. We were told, 'I am listened to' and 'Meetings are helpful, as I can say what I feel'. This meant people's views were being considered, and actioned to improve quality of life in the home.

The manager was transparent throughout the inspection, and responsive to any suggestions for development. As a result, the service was improvement focussed. A supportive environment had been developed, and people felt included, and treated with respect. This meant the manager was a visible role model, guiding the development and direction of the service.

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.

Staffing levels reflected people's needs. The manager had developed a staffing tool, which was reviewed regularly, to consider people's needs, and the dependency levels in the service. People's needs were reviewed at the daily flash meetings, and if there were any changes, the staffing levels were flexed to support this.

The manager and staff were visible to people and their families. People told us staff were kind, caring and helpful. People benefitted from a consistent staff team, who knew them well. This helped foster positive relationships, which enriched people's lives, and experience of living in the home.

Staff appeared happy at their work, and there was enough staff to meet more than people's basic needs. We were told, 'The home's fantastic, the best care home I've ever worked in'. People told us they knew staff well, and liked the staff. Families told us that the staff team was consistent. As a result, there was a high level of satisfaction throughout the service.

Staff were working well together as a team. People told us, 'We've got a good team' and 'There's great teamwork here'. This helped build trust and confidence within the whole team and maintained staff morale.

People commented on how supportive it was to have someone at the entrance, welcoming people into the home. This was a positive addition to the service, particularly when this was a relative's first experience of care. As a result, this made relative's feel at ease. The thought and consideration that had gone into the staffing arrangements, supported good outcomes for people and their families. This meant that people had confidence in the service.

It was positive that there was capacity within the staffing arrangements to provide mentors for new staff. The service had developed a 'de-brief' for staff when adverse events happened. This meant that staff reflection improved practice.

Management had good oversight of what training was needed to improve staff skills, to create a positive impact on outcomes for people. Staff had completed mandatory training such as moving and handling and adult support and protection. Current training on hydration and adults with incapacity was ongoing, to increase staff's knowledge and understanding. People could be reassured that they were being cared for by staff with the necessary skills and competence.

Staff were receiving supervision on a regular basis. Staff told us, 'Supervision is meaningful. I get feedback and have input too' and 'The regular supervision is helpful'. This meant it was effective at supporting staff's wellbeing, and personal and professional development.

How good is our setting?**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.

The service was very clean and fresh in all areas, and free from intrusive odours or noise. This meant people could enjoy a calm, pleasant environment in which to spend their time. There was good use of dementia friendly signage around the home, which didn't distract from the homely feel and atmosphere.

A robust maintenance programme was in place, and all maintenance checks were up to date. The maintenance team were efficient, and proactive to resolve any issues quickly. This was reflected in the good quality of both interior and exterior environments. It was clear that people were being well cared for in a safe, and well maintained service.

People had access to outside space in the grounds surrounding the home. We were told, 'You can go to the garden as much as you want' and 'I like to keep active, there's no restriction to me walking in the garden'. Staff had recently started to encourage people to enjoy an accompanied walk in the mornings. It was good to see people having free access to fresh air to enhance their wellbeing.

People benefited from spacious en- suite rooms, with pleasant views into the garden area. We saw that they were encouraged to have personal items such as ornaments and pictures in their rooms. This meant that people were confident that they were supported to make their own personal space feel homely.

People and their families benefitted from nicely furnished communal areas, and a café within the home. There was a hair and nail salon, which was well furnished and well used. People were clearly enjoying the social aspect of these spaces, with their friends and families and were relaxed and having fun.

The service had access to a minibus and two wheelchair accessible vehicles to support people in the local community. We were told that there had been trips to the local hotels and cafes as well as the cinema. Staff had recently supported people to join the local community centre, where there were a variety of different activities to enjoy. As a result, people were integrating as part of the community which gave them a sense of purpose and made them feel valued.

How well is our care and support planned?**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.

The service had recently moved people's care files to an electronic system. Care plans we sampled were accurate, and comprehensive, with lots of specific detail. We saw evidence of these being reviewed and monitored regularly. Care plans were informed by a range of assessment tools, which helped maintain people's health and wellbeing. Appropriate support and advice was sought from other professionals, when required.

Fluid charts were in place, with daily target amounts to monitor people who required assistance with drinking. However, staff had completed fluid charts for all residents, including people who could drink independently, which were not required. As a result, some people appeared not to be meeting their daily fluid intake. We discussed this with staff and the manager, and will follow this up at our next inspection.

There were a variety of risk assessments in people's files, which were reviewed on a regular basis. People's level of risk was being monitored regularly, to ensure the appropriate measures were still in place.

Legal powers were documented in people's care plans and a copy of legal documents evident. This meant that staff were aware who was responsible for residents who lacked capacity, to ensure they were protected, and their rights upheld appropriately.

Detailed anticipatory care plans (ACP's) had been completed with people, which helped staff to identify what actions should take place when they reached the end of their lives.

Reviews of care were being carried out at six-monthly intervals, with appropriate people present. Reviews were detailed and incorporated residents' views and wishes. This meant they were central to directing their own care.

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 protect people's rights to consent and decision making, the provider should ensure that issues in relation to a person's capacity are clearly recorded and that staff understand the principles of the supporting legislation.

This should include but is not limited to training for staff in Adults with Incapacity (Scotland) Act 2000.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS), which state that: 'If I am unable to make my own decisions at any time, the views of those who know my wishes, such as my carer, independent advocate, formal or informal representative, are sought and taken into account' (HSCS 2.12)

This area for improvement was made on 14 March 2024.

Action taken since then

All legal powers for people were clearly documented in their personal files. Copies of these documents were also evident in their files. Adults with incapacity training has been arranged for staff.

This area for improvement has been met.

Previous area for improvement 2

In order for people to achieve optimum hydration to maintain their wellbeing, the provider should ensure that improvements are made to help people maintain adequate fluid intake. Fluid balance charts should contain a daily target intake and be checked regularly to ensure that this is achieved.

This is to ensure care and support is consistent with the 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 March 2024.

Action taken since then

Hydration training had been delivered to all staff

Hydration questionnaire completed following training by all staff, to consolidate learning

Staff described how they would meet people's fluid targets and how they would know people's intake and how they encouraged people to drink

People's fluid charts were completed appropriately with daily target amounts to be achieved.

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
2.2 Quality assurance and improvement is 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?	5 - Very Good
4.1 People experience high quality facilities	5 - Very Good
How well is our care and support planned?	5 - Very Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	5 - Very Good

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