

# Highview Care Home Care Home Service

Scorguie Avenue  
Inverness  
IV3 8SD

Telephone: 01463 711 331

**Type of inspection:**  
Unannounced

**Completed on:**  
3 October 2024

**Service provided by:**  
Barchester Healthcare Ltd

**Service provider number:**  
SP2003002454

**Service no:**  
CS2007142927

## About the service

Highview House Care Home is registered to provide a care service for up to 83 older people, this may include provision of respite care to a maximum of two older people. Highview House is a purpose built care home which has been extended and is situated in a residential area. There are 71 single rooms and six double rooms, all have en suite toilet facilities.

Highview House has a purpose built dementia unit called 'Memory Lane' which can provide care for up to 22 people with dementia and has it's own facilities and secure garden area. The remaining rooms are split across two floors in the main building and there is a lift in place to access the second floor. The home benefits from pleasant and well maintained garden areas around the whole building..

The provider is Barchester Healthcare Ltd.

## About the inspection

This was an unannounced inspection which took place between 30 September and 3 October 2024 The inspection was carried out by three 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 20 people using the service, and received 16 peoples survey responses
- spoke with 20 relatives of people using the service, and received 28 relative survey responses
- spoke with 18 staff and management, and received 13 staff survey responses
- spoke with two visiting professionals, and received seven professionals survey responses
- observed practice and daily life
- reviewed documents.

## Key messages

- The home was well managed and there was a supportive leadership team in place.
- People were very well cared for
- Mealtimes were relaxed and homely
- Some documentation and records could be more clear and person-centred
- Staff were offered extensive training and development opportunities
- As part of this inspection, we assessed the service's self-evaluation of key areas. We found that the service had an effective and well completed self-evaluation that was reflective of our findings.

## 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.

Highview House had a very warm and welcoming atmosphere. People appeared comfortable, relaxed, and were engaging with staff and their peers throughout the inspection.

The home had significantly improved how it meets people's social needs, and had appointed a new activities co-ordinator since the last inspection; opportunities were diverse and included visits from therapy pets, musical performances, themed activities and trips out in the mini bus. There were one-to-one sessions arranged for those who preferred these to ensure everyone had opportunities to access activities to enrich their day to day life. Staff interactions with people were kind, warm, and staff consistently took opportunities to engage with people regularly through the day.

There was good clinical oversight of people's nursing care needs. Some of the documentation and information recorded relating to people's health needs was not always clear and concise, and six-monthly reviews were not always focused on reviewing people's outcomes (see area for improvement 1), the provider is working to introduce an electronic system which they felt would improve this. The service was quick to respond to changes in people's needs and make referrals to professionals if required, this meant people's health and wellbeing benefited from access to high quality and responsive healthcare. One professional told us:

"Communication is excellent. They know people so well, and the management is very professional."

Medication administration was well monitored and staff were confident administering and applying medication in line with good practice guidance. There were appropriate protocols in place to support people with the administration of PRN ('as required') medication, and medication audits were carried out regularly.

People were supported well with nutrition and hydration. Meals were well presented and people could enjoy a relaxed and homely dining experience. Fluids and snacks were readily available through the day, and relatives told us meals were often prepared for their loved ones out with usual mealtimes if they preferred. Where people needed support with eating, this was provided in a respectful and unhurried manner.

There were protocols in place to support people who may experience stress and distress, staff knew these well and were responsive to ensure situations were deescalated quickly, this meant people were less likely to experience stress or distress.

One person told us:

"If there's anything I need I can just ask and they will be there for me."

and relatives told us:

"Staff see [my relative] and not just their condition. Everything is very resident focused."

and

"The home has helped to create our happiest of memories in the last few years. They really care about [my relative] and go the extra mile."

### Areas for improvement

1. To support positive outcomes for people, the service should ensure people's records set out how their individual outcomes are met, with specific concentration on, but not limited to:

- a) records such as skin check and repositioning records should clearly reflect the care people are receiving to prevent skin damage;
- b) records for people who are at risk of hydration should provide accurate information about their fluid intake; and
- c) the twice-yearly review record should reflect if people's outcomes are being met, including their views and experiences, the views of staff and relatives involved in their care and support, and their written care records.

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

'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.' (HSCS 1.15)

### 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.

Staff clearly demonstrated principles of the Health and Social Care Standards, such as dignity and respect, and were dedicated to providing a very high standard of care and support to people.

There were good working relationships between care and nursing staff, seniors, and management, this meant people benefited from a warm atmosphere. Staff were clear about their roles and responsibilities, and there was a responsive management team in place who were passionate about providing high quality care. The staffing team at Highview House was stable and there was no use of agency staff in the home at the time of inspection, this meant people received support from a consistent team of staff who knew them well. New staff were recruited following best practice guidance and we saw all suitable checks had been carried out for new staff before they started a robust induction program.

Staff spoke very positively about their roles and employment at Highview house, telling us:

"It's like one big family here. We all support each other."

and

"Senior staff are really supportive."

The service used a dependency tool to calculate staffing levels within the home which was regularly updated and reviewed by the management team. Staffing arrangements were made to ensure staff were

able to meet beyond the basic needs of people living within the home, and we saw that staff had capacity to consistently engage in meaningful conversations and interactions with people. Nursing and care staff were deployed appropriately across the home to ensure all floors have the right skill mix of staff during each shift.

The provider offered a significant program of training for staff, including supporting many staff through further practice and nursing qualifications. Staff were often recognised and praised for demonstrating good practice and their commitment to learning and development through internal awards by the provider. This meant that people were supported by qualified and knowledgeable staff who felt valued.

Relatives told us they had every confidence in the staff team at Highview House, some told us:

"I can walk out of the door after visiting with no worries about [my relative]'s care at all."

and

"There's a really good team and feeling of teamwork. They do exceptionally well."

## 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 support people's wellbeing and social inclusion, the provider should ensure everyone has the opportunity to be active both indoors and outdoors, participate in activities and trips out as per their choice of interests and activity plan.

**This area for improvement was made on 9 May 2022.**

#### Action taken since then

Significant progress had been made in this area. There was a clear increase in the level and choice of activities available for people, and the variety of activities available was wide and included Japanese lessons. Relative told us the entertainment was very good. For example, Highview frequently held sing along sessions, concerts, pets were welcomed into the building and there were frequent trips out and about in the mini bus. Some residents told us there was always something happening.

The outside space of Memory Lane had been improved and was more accessible. People accessed the outside gardens independently if they were able to or staff supported them if needed. Where people were sitting alone and disengaged from what was going on around them, staff took time to engage with them directly. This reflected the quality and strength of the relationships between staff and residents.

During the inspection, we discussed the need to include the activities team in the review process and ensure that they are updated, along with review documents, about future activity wishes and plans for individuals.

We concluded that this area for improvement has been met.

#### Previous area for improvement 2

To ensure people's health and well-being benefits from their meal times, the provider and service should ensure that;

- a) people are encouraged to use the dining room to socialise;
- b) the quality, choice and presentation of food provided should be of a consistently high standard;
- c) there is sufficient choice available to meet people's cultural, dietary needs and preferences; and
- d) staffing levels are sufficient to support people to enjoy all their meals in an unhurried and relaxed atmosphere.

**This area for improvement was made on 9 May 2022.**

#### Action taken since then

Significant progress had been made in this area. People benefited from access to a tasty, varied and well-balanced diet in an unhurried, sociable and relaxed atmosphere. Staff took the time to support people with

sensitivity. Feedback regarding the quality of the food was more positive and described as appetising and well presented. Omlettes and other light snacks were prepared for people, outwith usual meal times if they did not want to eat from the menu. The dining rooms were attractive and well presented which meant people could enjoy their meals in a pleasant environment.

Staff took time to show plated options to assist people living with dementia to choose. Everyone routinely had drinks at hand, and were offered drinks throughout the day. We saw people being gently encouraged to try some food while chatting to people with warmth.

This area for improvement has been met.

## Previous area for improvement 3

Where people's independence, choice and control are restricted, for example to prevent a fall, the service should ensure all legal arrangements and consents are in place. Where people are not able to fully express their wishes and preferences, the necessary consents must be signed by the person's legally appointed guardian. This includes all restrictive measures such as, but not limited to, the use of equipment such as sensor mats and wheel chair lap belts.

**This area for improvement was made on 9 May 2022.**

### Action taken since then

During the inspection, we were able to confirm that consent had been sought either by individuals or where people were not able to fully express their wishes and preferences, the necessary consents had been sought and evidenced by the person's legally appointed POA or guardian.

We discussed the need to ensure the service had a sustainable process in place to ensure consents had been obtained, could be evidenced and were reviewed regularly to ensure people's rights are protected.

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](http://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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Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

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