

Balmoral By Northcare Care Home Service

512 Kilmarnock Road
Glasgow
G43 2BP

Telephone: 01416484111

Type of inspection:
Unannounced

Completed on:
27 November 2024

Service provided by:
Northcare (Scotland) Ltd

Service provider number:
SP2003002314

Service no:
CS2022000108

About the service

Balmoral by Northcare care home is registered to provide a care service to a maximum of 69 older people over the age of 65 years. The provider is Northcare (Scotland) Ltd. The home is located in the southside of Glasgow, near local amenities including shops and is served with good public transport routes.

The home is purpose built and describes itself as "a luxury care home". The home has 69 beds over three floors. All bedrooms include en-suite's with double bed, call bell, telephone facility, wireless internet connectivity and Sky TV facility. There are many communal areas in the care home and the third floor has no bedrooms but is a large space which hosts a cafe, hair and beauty salon, cinema and private dining space.

There is a large secure garden which has a path leading to a work shed area.

The service aims and objectives state "Our vision is to make a real and lasting difference to the people we support by achieving positive outcomes and enabling as normal and fulfilling a life as possible."

About the inspection

This was an unannounced inspection which took place between 26 and 27 November 2024. The inspection was carried out by three inspectors from the Care Inspectorate. At the time of inspection there were 65 people residing in the home.

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 we:

- Spoke with 15 people using the service and 10 of their family/friends
- Spoke with 12 staff and management
- Observed staff practice and daily life
- Reviewed documents
- Liaised with two visiting professionals.

Key messages

- People receiving care and support and their families were very satisfied with the service.
- People had access to extensive activities in-house and in the local community.
- The home was led by approachable and responsive manager who was committed to making improvements.
- People benefited from a well presented and maintained living environment.
- There were appropriate staff available to meet the needs of people living in the home.
- Personal plans set out people's needs and preferences well .

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?	4 - 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.

People experienced compassion, dignity, and respect and benefited from positive relationships with a staff team who knew them well. We received the following comments from people who experienced care: "The staff are brilliant" and "I don't need to worry anymore". We observed positive relationships and pleasant interactions between residents and staff. We saw an individual being discreetly supported with kindness and compassion and staff managed an individual's distress well. This meant people felt valued.

Staff demonstrated a strong commitment to ensure people got the most out of life. People had opportunities to take part in a range of meaningful activities such as exercise classes, outings for meals, games evenings and flower arranging classes. Links with a local school helped kept people connected to their local community. It was clear people enjoyed these activities. People told us "The Zumba class is great; it keeps me active". A family member told us about a recent musical evening and meal event they were able to attend as a family. They told us "It's a family affair and it's great we feel involved". This gave assurance of positive outcomes for people.

Families of people supported were positive about the care provided. A relative told us "The staff are good, communication is good". This meant that families were well informed and people felt listened to.

There was time available for one-to-one activities and engagement with individuals who preferred not to join the larger group-based sessions. This included pampering events, arts and crafts and walks in the garden. People spoke positively about the onsite beauty salon.

People benefited from access to a well-presented and varied menu. People were invited to choose from a variety of meals and snacks which reflected their dietary needs and preferences. Meals were enjoyed in an unhurried, relaxed atmosphere with people choosing when and where they preferred to eat. One person told us "The food is amazing". This promoted good nutritional intake.

Staff had positive working relationships with other agencies and professionals involved in people's care. One professional told us, "The service is really very good; management and staff are very good, and communication is excellent". This collaborative approach helped keep people well.

Medication was managed well. Appropriate systems ensured people received their medication at the right time which promoted safety and wellbeing.

Staff had the necessary skills, training, and competence in infection prevention and control to reduce the risk of transmission of infection.

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.

People can expect a service to be managed well. The home was well led by a visible management team.

People living in the home and relatives spoke positively about the team and their positive impact in the home. The staff team spoke positively about the manager who was seen as being very approachable and supportive. There were opportunities for staff to discuss aspects of their work, development and wellbeing through team discussions, reflective accounts and formal supervision. This meant staff felt listened to and valued.

People can expect to be meaningfully involved in shaping the development of their care service. Feedback was actively sought from people who live in the home and their relatives. The feedback process included actions to address any areas of improvement identified. This allowed those living in the home to contribute their views and ideas and helped ensure people got the most out of their time at Balmoral.

A quality assurance system supported a culture of continuous improvement. Managers monitored standards by completing audits of key aspects of service delivery. Appropriate action plans had been developed where needed to direct improvement. The outcome informed a comprehensive improvement plan. The management's own analysis demonstrated a number of positive outcomes achieved as a result. For example, a reduction in the use of sedative medications. This helped drive improvement.

The management team were responsive to concerns or issues raised. People gave examples of occasions where issues had been raised and a prompt response and resolution was achieved. A lesson learned approach promoted improvement.

People could be confident that safe recruitment guidance was followed. An induction program for new employees helped ensure staff were prepared for their role. This included shadow opportunities to facilitate introductions with people who experience care.

How good is our staff team?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Having the right number of appropriately skilled staff to provide care is important to ensure people's needs are met. A recognised dependency tool was used to help the management team identify staffing levels to meet the needs of people living in the home. Sufficient numbers of motivated staff, effective deployment and good teamwork meant that staff spent as much time as possible with people. Staff were confident in building positive interactions and relationships and knew people well. This meant people could get the most out of life.

People and their families spoke very highly of the staff team. We observed staff practice and found staff to be responsive and caring. Staff were clear about their roles and responsibilities and supported each other in response to changing situations to ensure care and support was consistent.

There was effective communication between staff, with regular opportunities for discussion about their work and how best to improve outcomes for people. Comments from staff included "this is a great place to work and "management are really supportive". This showed staff felt valued.

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 environment was spacious with plenty of natural lighting. People benefited from clean, tastefully decorated and high-quality accommodation. The facilities and quality of fittings and furnishings offered people who experience care a very good level of comfort and an extended range of socialisation opportunities. People benefited from access to a range of seating, lounge and dining areas. This meant people could have privacy if desired and choice of where they liked to spend their time. This promoted opportunities for quiet time, physical activity and the opportunity to meet and engage with others. People we spoke with praised the quality and presentation of the care home environment. One person described it as "excellent".

The environment promoted a variety of social opportunities. People benefited from a cinema room. Relatives told us they made use of this during visits. The brasserie area was also popular with visitors, hosting live music events. We were told about a recent lunch event. Families spoke highly of this feeling like a family outing rather than a visit to a home. This helped families feel welcome and involved.

People can expect to choose to have an active life and participate in a range of recreational activities indoors and outdoors. The design of the building had a positive impact on the quality of life for people who lived there. Outdoor space could be independently accessed throughout the building. The upper floors had well-furnished balcony areas and the ground floor accommodation had direct access to individual patios and a large garden area. People told us how they loved to use the patio when the weather was nice. Access to fresh air and outdoor activities supported people's physical wellbeing.

Each bedroom was spacious and well-equipped with quality furnishings and ensuite facilities to promote comfort, privacy, and dignity. People had been supported to personalise their bedroom to make it feel more homely. Specialist equipment was available to meet people's care and support needs if required.

A designated private dining area with butler service was available for special events and family celebrations. Residents and their families could also access a cocktail bar. It was evident the amenities supported people to socialise and connect with their loved ones.

The management told us about plans for the home's dementia suite. The accommodation would benefit from contrasting handrails, light switches and orientation resources within the suite including dementia friendly signage. This would promote independence whilst living within the suite. The management team confirmed this was part of their development plan for the care home.

There were appropriate arrangements in place for the maintenance of the premises to keep people safe and ensure the environment was a pleasant place to live.

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.

People were cared for by a knowledgeable staff team. Pre-admission assessments were undertaken to ensure people received the right care and support from the time of admission. A communication book and daily staff handover promoted effective information sharing. This helped ensure people's care was right for them.

Personal plans were person-centred and gave very good direction to staff about people's care needs and

their choices and how their care and support should be delivered. Plans also included any known risk factors and planned interventions to mitigate these. It was evident that staff knew people well and could respond to a change in their well being. Personal plans were developed in partnership with people receiving care and/ or their family representatives where appropriate. Where needs changed personal plans were updated. All plans had been reviewed in last six months to ensure they reflected people's current needs. This helped to ensure that planned care interventions remained relevant.

People had an anticipatory care plan (ACP) in place that reflected their wishes and, where appropriate, those of their representatives. Staff were familiar with people's preferences for palliative and end of life care.

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

Requirements

Requirement 1

By 15 July 2024, to support people's health and wellbeing, the provider must ensure as a minimum:

- a) staff are confident and competent in the use of clinical observation and monitoring tools, which record changes to people's presentation to support decision making
- b) staff escalate, without delay, any concerns relating to changes in people's presentation which requires medical advice or intervention
- c) clear records are maintained, which evidence liaison with external medical services.

To be completed by: 15 July 2024

This is to ensure care and support is consistent with Health and Social Care Standard 3.17: I am confident that people respond promptly, including when I ask for help. This is in order to comply with: Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This requirement was made on 27 May 2024.

Action taken on previous requirement

A new clinical escalation tool had been implemented. This helped ensure that staff were clear about what information to record and escalate. Staff spoke positively about the tool as an aid to support decision making. The manager and staff team were fully invested in maintaining escalation systems now in place. Clear records were maintained, with evidence of consultation with external professionals where appropriate. Feedback from professionals told us that they were confident in the staff decision making and staff made appropriate referrals. This gave assurance staff were able to recognise and respond to changes in people's presentation appropriately.

This requirement has been met.

Met - within 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

The provider should ensure that all staff are familiar with and adhere to the agreed communication arrangements with relatives/representatives of people experiencing care, so that all matters relating to the health and wellbeing of people are communicated without delay.

This is to ensure care and support is consistent with Health and Social Care Standard 2.12: 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

This area for improvement was made on 27 May 2024.

Action taken since then

People spoke of effective communication and of being well informed.

This area of improvement has been met.

Previous area for improvement 2

To ensure people benefit from a culture of continuous improvement, the provider should ensure:

Any actions from completed audits or accident/incident reviews are included in the service improvement plan, which includes specific and measurable actions designed to lead to continuous improvements. The improvement plan should be shared with all stakeholders.

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 15 March 2023.

Action taken since then

A range of audit tools and management checks were in place to assess compliance with expected standards. This included audits of personal plans, medication, record keeping, accident, incidents and quality of the environment. Feedback was actively sought from people who use the service and was reflected in the service development plan. A "you said, we did, display" was planned for the entrance hall to illustrate how people were able to inform their care arrangements. This was shared with all stakeholders with a process to feedback. A service improvement plan reflected where improvement was needed, the timeframe and individual responsible for actioning and following up any accidents and incidents. This helped to promote a positive culture of improvement. The manager and staff team were fully invested in maintaining the oversight systems in place.

Previous area for improvement 3

The provider should ensure where a risk assessment reflects a current need for a resident, it is reflected in all personal plans to provide clear guidance on strategies and approaches to be used by staff to meet residents' identified needs.

This ensures that support is consistent with the Health and Social Care Standards: 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 15 March 2023.

Action taken since then

Personal plans were nicely detailed and provided a good insight into people's current needs, preferences and desired outcomes. Plans took account of known risk factors and planned interventions to mitigate these. Formal reviews of care arrangements were undertaken regularly with appropriate individuals. This helped to ensure that people's care was right for them.

This area of improvement has 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 leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good
How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - 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

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.