

# Riverside View Care Home Service

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Telephone: 01382 561 667

Type of inspection:

Unannounced

Completed on:

18 December 2024

Service provided by:

**HC-One Limited** 

Service no:

CS2011300759

Service provider number:

SP2011011682



## Inspection report

#### About the service

Riverside View is a residential care home, which is owned and run by HC-One Limited. It is located in the west of Dundee, and there are good transportation links to the city of Dundee.

Riverside View is a purpose-built care home and is registered to provide care for up to 60 people, aged 55 and over. The ground floor, named the 'Bluebell', provides care and support for up to 30 people. There are a further two units upstairs; 'Primrose' and 'Daisy' providing care and support to people living with Dementia. These units have 16 and 14 beds, respectively. The bedrooms are all single occupancy and have ensuite toilet facilities. The upper floor is accessed via a lift, with good wheelchair access to all areas. This service has access to a large, secure garden with different areas provided with patio and seating areas.

#### About the inspection

This was an unannounced follow up inspection which took place on 18 December 2024. The inspection was carried out by one inspector 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. This report should be read in conjunction with the previous report dated 17 July 2024.

In making our evaluations of the service we:

- spoke with four people using the service
- spoke with five staff and management
- observed practice and daily life
- reviewed documents.

## Key messages

- People were treated with kindness and respect, feedback from all spoken with was very positive about the quality of the staff.
- There was a variety of activities available for people in the service.
- Improvements to risk assessments and care planning had been actioned.

#### 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 is our care and support planned?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

## Inspection report

#### How well is our care and support planned?

4 - Good

This inspection focussed on improvements required from the inspection on 17 July 2024. We have detailed the progress in these areas under the following section of this report:

- what the service has done to meet any requirements we made at or since the last inspection.

We have re-graded the service in recognition of the requirement met. Grades have been moved upward, as we evidenced that the previous grade of 'adequate' is now 'good'.

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

### Requirements

#### Requirement 1

By 9 October 2024, the provider must ensure that people are provided with high quality care and support and that this is evidenced by accurate recording of care.

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

- a) all care provided is in line with each person's personal plan and is recorded consistently on appropriate recording charts
- b) a robust process is put in place for the monitoring and review of personal care provided and any relevant recording charts.

This is to comply with Regulation 4(1)(a) and (d) (Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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

This requirement was made on 17 July 2024.

#### Action taken on previous requirement

We examined three care plans; the information contained had improved since the previous inspection. In each of the care plans there was useful, up to date, person centred information in relation to their health and support needs. There was a range of recognised health risk assessments being used which minimised risk. In relation to monitoring of people's health, information was clearly recorded. This meant that staff were consistently tracking people's intakes and outputs and weekly weights where it was assessed as being required.

We could see from the evidence that the service had taken prompt action to address this requirement in its entirety and we, therefore, assessed it as 'met' in full.

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

This area for improvement arose as a result of an upheld complaint:

In order to support people's health, wellbeing and improve quality of life, management should ensure that quality checks for maintaining the environment are specific in detail and should monitor that staff are completing these tasks thoroughly to outline environmental concerns requiring action.

This is to ensure care and support is consistent with Health and Social Care Standards: 'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment' (HSCS 5.22).

This area for improvement was made on 2 December 2024.

#### Action taken since then

A full audit of all mattresses had been carried out, head housekeeping staff had carried out coaching sessions with staff to ensure they are fully aware of their responsibilities to adequately check mattresses. All areas of the care home were clean and well maintained. Cleaning schedules and environment audits were fully completed and checked by the manager on a weekly basis.

This area for improvement has been met.

#### Previous area for improvement 2

This area for improvement arose as a result of an upheld complaint:

To ensure good outcomes for people experiencing care, the service should ensure that the identified supervision, support required and any identified risks to the person's health, is documented within the care plan to promote a consistent approach. This includes any support and adapted equipment required for maintaining hydration.

This is to ensure care and support is consistent with Health and Social Care Standards: '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).

This area for improvement was made on 2 December 2024.

#### Action taken since then

Training had been provided by the provider's Regional Quality Improvement Lead and Deputy Home Manager regarding care plans being more person centred and ensuring they contain specific details of individual's needs. We examined three care plans and associated risk assessment documentation and found these to be fully completed, updated routinely to reflect the currents needs of people and contain a sufficient level of detail to inform staff practice.

We observed a mealtime; people were encouraged and enabled to eat their meals independently with just the right level of support from staff, where needed. Adapted crockery and cutlery were in use for those who needed them. Fluid stations were now being replenished twice daily to ensure adequate supplies of fresh drinks were available for people to access, glasses were available at each of the fluid stations.

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.

## Inspection report

## Detailed evaluations

How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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