

Woodside Court Nursing Home Care Home Service

Woodside Way Glenrothes KY7 5RW

Telephone: 01592 754 497

Type of inspection:

Unannounced

Completed on:

21 October 2024

Service provided by:

HC-One Limited

Service provider number:

SP2011011682

Service no: CS2011300791



Inspection report

About the service

Woodside Court Nursing Home is registered to accommodate 60 people, including older people and people with physical disabilities. The service is provided by HC-One Ltd. The building is set within extensive garden grounds, with easy to access parking facilities to the front of the property. Residents have the choice of a range of seating areas and quiet rooms which they can use for meeting with other residents, family members and friends. The service has good access to local facilities and transport links.

About the inspection

This was a follow up inspection which took place on 21 October 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. In making our evaluations of the service we:

- spoke with five people using the service and two of their family members
- spoke with six staff and management
- · observed practice and daily life
- · reviewed documents
- spoke with visiting professionals.

Key messages

The service were working with sufficient staff to meet people's needs.

Staff supervisions and appraisals had begun and were identifying strengths and training needs.

Hot and cold drinks were available throughout the day.

The home was clean and the environment was being regularly monitored.

The requirements and areas for improvement set at the last inspection had been met.

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?	3 - Adequate
How good is our leadership?	4 - Good
How good is our staff team?	3 - Adequate
How good is our setting?	3 - Adequate
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.

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How well do we support people's wellbeing?

3 - Adequate

This was a follow up inspection to explore requirements and areas for improvement made at the last inspection. Please see 'What the service has done to meet any requirements made at or since the last inspection' and 'What the service has done to meet any areas for improvement we made at or since the last inspection' for details.

How good is our leadership?

4 - Good

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How good is our staff team?

3 - Adequate

This was a follow up inspection to explore requirements and areas for improvement made at the last inspection. Please see 'What the service has done to meet any requirements made at or since the last inspection' and 'What the service has done to meet any areas for improvement we made at or since the last inspection' for details.

How good is our setting?

3 - Adequate

This was a follow up inspection to explore requirements and areas for improvement made at the last inspection. Please see 'What the service has done to meet any requirements made at or since the last inspection' and 'What the service has done to meet any areas for improvement we made at or since the last inspection' for details.

How well is our care and support planned?

4 - Good

This was a follow up inspection to explore requirements and areas for improvement made at the last inspection. Please see 'What the service has done to meet any requirements made at or since the last inspection' and 'What the service has done to meet any areas for improvement we made at or since the last inspection' for details.

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

Requirements

Requirement 1

By 14 October 2024, the provider must ensure that people's care and support needs are met effectively and that staffing arrangements are safe.

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

- a) regularly assess and review people's care and support needs
- b) demonstrate how the outcome of people's assessments are used to inform staffing numbers and arrangements
- c) implement quality assurance systems to evaluate people's care experiences and assess if staffing arrangements are effective in providing responsive, person-centred support.

This is in order to comply with section 7(1)(a) of the Health and Care (Staffing) (Scotland) Act 2019. This is to ensure that care and support is consistent with the Health and Social Care Standard (HSCS) which state that: 'I am confident that people respond promptly, including when I ask for help' (HSCS 3.17).

This requirement was made on 23 September 2024.

Action taken on previous requirement

People's care and support needs were regularly assessed using the provider's chosen dependency tool. Staffing levels were in accordance with the findings of the tool at a minimum, and at times the home was staffed above this level. Consideration had been given to the skill mix and deployment of staff and also to the way in which each shift was organised. This ensured the most effective use of the staff who were available and that more experienced and qualified staff were present in each unit. Quality assurance was in place in order to provide an oversight of the staffing arrangements and any issues which might arise.

Met - within timescales

Requirement 2

By 14 October 2024, the provider must support good outcomes for people by implementing a system of regular formal staff supervision. To do this, the provider must, at a minimum:

- a) ensure that learning needs are assessed, reviewed and addressed
- b) ensure that observations of practice are undertaken and discussed
- c) ensure that staff have the opportunity to formally discuss their views.

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This is to comply with Section 7(1)(a), (b) and (c) of the Health and Care (Staffing) (Scotland) Act 2019 (as substituted for regulation 15(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210).

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

This is in order to ensure care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

This requirement was made on 23 September 2024.

Action taken on previous requirement

A variety of observations of practice were being undertaken by the service. These included observations of medication administration, infection prevention and control practice and general observations of staff interactions and practice. These were providing good information from which seniors and leaders could identify strengths and areas for improvement.

Staff supervision meetings had begun providing a forum to discuss training and development issues and to feedback on information gathered during observations of practice.

Staff meetings had also begun and were providing an opportunity for views to be shared and contributions made to the running of the service.

We were confident that staff's learning needs were being addressed and opportunities existed for two way communication.

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

To promote people's choice and ensure that their hydration needs are met the service should ensure that access to hot and cold drinks is available throughout the day. This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that 'My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected' (HSCS 1.23).

This area for improvement was made on 23 September 2024.

Action taken since then

Staffing arrangements and the organisation of each shift had been considered to ensure that staff were available at key times for drinks service. The daily staff 'flash' meeting had been moved in order to ensure that senior staff could supervise the serving of hot drinks mid morning. People were observed to receive hot drinks during the inspection and confirmed that this had become normal practice. We were confident that hot and cold drinks were available throughout the day.

This area for improvement has been met.

Previous area for improvement 2

To support people's wellbeing, the provider should ensure systems are in place which check and identify when environmental cleanliness is not of an acceptable standard. Adequate provision should be made to address issues promptly as they arise. This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that '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 23 September 2024.

Action taken since then

The home was clean and well presented at the time of the inspection. There had been upgrade and improvement to one dinette area and further work was planned for the upstairs unit. Regular domestic staff meetings were in place in order to identify and address any issues or concerns. Recruitment had been underway and new domestic staff were due to start work and provide additional cover.

Quality assurance was more effectively identifying issues and actions were being taken to address areas of concern promptly.

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?	3 - Adequate
1.3 People's health and wellbeing benefits from their care and support	3 - Adequate
How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good
How good is our staff team?	3 - Adequate
3.3 Staffing arrangements are right and staff work well together	3 - Adequate
How good is our setting?	3 - Adequate
4.1 People experience high quality facilities	3 - Adequate
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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