

## Bayview House (Support Service) Support Service

Olrig Street  
Thurso  
KW14 7JZ

Telephone: 01847 892 314

**Type of inspection:**  
Unannounced

**Completed on:**  
6 March 2025

**Service provided by:**  
NHS Highland

**Service provider number:**  
SP2012011802

**Service no:**  
CS2012307191

## About the service

Bayview House Support Service, is a support service providing day care to older people in dedicated accommodation within Bayview House Care Home and an outreach service for older people at home in the community. The service was registered with the Care Inspectorate on 30 March 2012, to provide a care service to older people at Bayview House Support Service and in their home in the community.

The service is situated in the town of Thurso, it provides a range of activities and outings for older people affected by age related illnesses or social isolation. The service is operated by NHS- Highland.

The service has its own dedicated accommodation within Bayview House Care Home. The service has its own entrance and located on the ground floor of the care home. The accommodation for the day care service comprises of a communal lounge/dining area, a quiet room, small kitchen and office space. There are toilets available for the exclusive use of people using the support service

## About the inspection

This was an unannounced inspection which took place on 26 February 2025.

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 everyone who was using the service that day;
- Spoke with staff and management;
- Observed practice and routine activities;
- Reviewed documents.

## Key messages

- The service was very good at supporting people in a warm and caring way.
- Everyone we met spoke highly of the staff and how much they enjoyed coming to the service.
- People's sense of worth was enhanced by staff who were respectful, knowledgeable and respected them as individuals.
- The management team were fully involved in the delivery of the service and modelled good professional practice.
- There was good management oversight of the service and a positive vision of how they wanted the service to progress.

## 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 evaluated this key question as very good. This applies to a service where there were major strengths in supporting positive outcomes for people

People's care and support needs were detailed in their care plan. Most people attend the service to alleviate loneliness and social isolation or to provide respite to their carers. Risk assessments and Personal Emergency Evacuation Plans (PEEPs) were in place and reviewed monthly.

There was a range of group and 1:1 activities available. These were tailored to meet individual needs and helped promote communication with other people using the service and which had a positive impact on people's emotional wellbeing .

The group size is kept to a small number and careful consideration is given to ensure the group members would get on; fit well together and have things in common. This makes for an enjoyable day for people. The small group size with very good staffing levels means that small differences in people's health or presentation were picked up quickly. Communication with families was good and concerns were fed back to families very quickly.

The service enjoyed helpful links with multi-disciplinary teams which support communication and ease of referrals when someone's health or presentation is causing concerns. This means that people are supported to get the right healthcare from the right professional at the right time.

Support plans were in place but there was little evidence that these had been reviewed regularly. We heard about plans to start reviewing people's support plans every 12 weeks. We have made an area of improvement to ensure that people's support plans are reviewed and evaluated within statutory requirements. **(See area for improvement 1).**

There were plans to develop a community information board with details of community groups available and events in the community. This will offer people relevant information about other social and community groups they and their carers can access within their communities.

The acoustics in the day centre were difficult, and some service users found the environment challenging. This is a barrier to full participation in the life of the service and could negatively impact on some people's wellbeing. **(See area for improvement 2).**

### Areas for improvement

1. To ensure people's health and wellbeing benefits from regular evaluation and review the provider and manager should ensure that care plans were closely monitored and review meetings fully documented.

This should include, but is not limited to:

- a) evaluations of care plans and health assessments are fully documented including details of the evaluation and outcomes recorded;
- b) a full review of people's plan of care and support must be held at least once in each six month period and sooner if there is a significant change in people's health or wellbeing needs;

- c) demonstrate how people have been consulted and involved in reviewing their care plan;
- d) minutes of review meetings include details of those consulted or involved in the review, including their views; a summary of the discussion held and the decisions made; and the date of the next review.

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

**'I am fully involved in assessing my emotional, psychological, social and physical needs at an early stage, regularly and when my needs change'. (HSCS 1.12)**

2. To ensure people's health and wellbeing benefits from having a positive experience, the provider and manager should ensure that the environment is comfortable by ensuring noise reduction tools, such as the use of soft furnishings, acoustic panels and sound deadening paint are deployed throughout the accommodation.

**This is to ensure that care and support is consistent with the Health and Social Care Standards which state that:**

**'My environment is relaxed, welcoming, peaceful and free from avoidable and intrusive noise and smells.' (HSCS 5.20).**

## How good is our staff team?

## 5 - Very Good

We evaluated this key question as very good. Major strengths were noted which clearly supported positive outcomes for service users.

The staff team work well together and support each other. Support was flexible so service provision can be seamless. We observed staffing levels were very good. This means that service users benefited from a high level of staff interaction.

We observed positive, trusting relationships between staff and service users. It was clear that staff knew the service users well and were very familiar with their likes and dislikes. This was invaluable knowledge when considering someone joining the group as it meant the new person would be more likely to be a good fit with the group and feel welcome.

We heard about the outings service users had enjoyed. Outings were planned on a fairly regular basis and were tailored to people's interests. For example, the visit to the local heritage centre which particularly benefitted the men in the group.

All mandatory staff training was up to date and staff were keen to progress with additional training, which would benefit service users.

Staff supervisions were regular and staff said they found this supportive and helpful, and the new team lead inspirational, approachable and inclusive.

Regular team meetings were happening now and we saw that staff suggestions and ideas were welcomed and acted upon. This means that the staff team feel included and valued. Staff felt comfortable in approaching the management team with issues and were confident that any concerns would be dealt with

and resolved effectively.

## 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

People should be supported properly at all meal and snack times to be safe and enjoy their food and beverages. Detailed plans of care or risk assessments to help prevent choking should be in place, regularly reviewed and known by all staff to make sure this can happen.

**This area for improvement was made on 22 February 2017.**

#### Action taken since then

We saw there were sufficient staff to support people very well. On reviewing the care plans we saw all risk assessments were completed for the most relevant risk areas. None of the service users had any issues with swallowing or were on modified diets so there was minimal risk of choking for service users.

Staff knew service users and their needs very well, staff had completed all mandatory training including emergency first aid; and were able to support people in an emergency.

In conclusion this area for improvement is **MET**.

#### Previous area for improvement 2

People should know which staff are supporting them with their care each day and when regular staff are expected to return. The service should improve the daily communication with people about the staffing. The service should consider that this communication is supported with photos and writing about who is on duty each day.

**This area for improvement was made on 22 February 2017.**

#### Action taken since then

The service had a board up in the hallway with photos of all the staff employed in the service, and their role. Staff wore name badges to help people identify them. Service users or their relatives were able to call the service and request information about which staff would be supporting them.

Service users told they knew all the staff as they had been coming for a while and the staff group were stable.

There is a communication book in the service so the staff group always know who is coming in on each day

and can be prepared to support them in accordance with their wishes and preferences

In conclusion this area for improvement is **MET**.

### Previous area for improvement 3

People should have a positive dining experience. Staff and management should ensure staff practice enables noise levels to be kept to a minimum.

**This area for improvement was made on 22 February 2017.**

#### Action taken since then

Meals were provided from the care home kitchen. These were nutritious, looked and smelled appetising. Meal choices were displayed on a board so people could make an informed choice.

The day care setting was cosy and the whole group could sit at a dining table and enjoy their meal together. There were sufficient staff available to assist people with whatever they needed. None of the service users attending on the day of the inspection required assistance to eat.

We heard conversations with and between people and staff. There was fun and laughter and people told afterwards they had enjoyed their meal. However, it was apparent that the acoustics in the room were quite challenging. This could be quite confusing and distressing for some people with hearing impairment. We have made a separate area for improvement to address this.

**See area for improvement under Key Question 1.**

In conclusion this area for improvement is generally **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



## 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](http://www.careinspectorate.com)

## Contact us

Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

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

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.