

Harris House (Care Home) Care Home Service

Leverhulme Road Tarbert Isle of Harris HS3 3DB

Telephone: 01859 502 194

Type of inspection:

Unannounced

Completed on:

11 February 2025

Service provided by:

Comhairle Nan Eilean Siar

Service provider number: SP2003002104

Service no:

CS2003009708



Inspection report

About the service

Harris House (Care Home), in Tarbert, Isle of Harris is a purpose-built home, which is owned and managed by the local authority, Comhairle nan Eilean Siar.

The premises has 16 bedrooms, all of which have en-suite facilities, and a range of spacious communal areas. One bedroom is allocated to provide respite care. The premises provide comfortable, high quality accommodation and excellent facilities.

About the inspection

This was an unannounced inspection which took place between 3 and 4 February 2025. The inspection was carried out by one inspector from the Care Inspectorate. We shared feedback with the provider and manager on 11 February 2025.

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 several people using the service and made contact with several family members, some of whom acted as legally appointed guardians;
- spoke with several staff and management;
- · observed practice and daily life;
- · reviewed documents; and
- received feedback from a number of visiting professionals.

Key messages

- People benefited from a warm and welcoming setting because staff worked well together.
- Staff had improved the level of activities available for people to join in.
- The manager had developed and improved the service.
- Staff needed to complete people's health-based assessments to a better standard, ensuring they document any plans to help minimise any risks.
- The manager agreed to add areas for improvement into the service improvement plan.

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?	4 - 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 living in Harris House benefited from a warm atmosphere because staff treated them with kindness and compassion. People knew the staff in the home well which had allowed them to form positive relationships. We observed many positive interactions. Staff supported people in a way which matched with their preferences. For example, people who wanted to be cleanly shaven were; some of the ladies had rollers in their hair, which was in keeping with their preferences around their appearance. People told us:

- 'Oh, the staff are brilliant here, they just know how to look after you'.
- 'I get all the support I need from the staff'.
- 'They're right fine here'.

People's health and wellbeing was managed well, with important strengths. Staff had positive and effective relationships with health professionals and there was a common view of respect amongst these teams. Health professionals told us staff were responsive and attentive to people's needs and that they appropriately sought advice when they were concerned. The manager and their team invited GPs to people's annual reviews and there was evidence of the involvement in review minutes. Some examples of what they told us were:

- 'Excellent care home. Competent, compassionate management and workers'.
- 'I can comment on dignity, respect, cleanliness and environment. These are flawless'.
- 'This is the only residential home I know where local GPs are present at annual review meetings of the residents'.

Relatives spoke highly of the care being provided to their loved ones. Some examples of what they told us were:

- 'I can't believe how well he has improved his life since he was admitted to Harris House'.
- 'My relative receives a very high standard of care which reflects the professionalism of the team at Harris House'.

Staff could make improvements on how they regularly document and update people's health-based assessments. We found some lacked the necessary information and some did not fully explain ways to improve the health-based outcomes. We asked the manager to consider and review this as we were confident in their ability to improve this issue, and we agreed this could be added to their service improvement plan.

Staff managed people's medication safely and we found records to be well documented.

People's finances were less organised, and staff needed to improve how they documented these. The manager took swift and appropriate action to address the areas for improvement and agreed to add this onto the service improvement plan to monitor and develop.

The staff team had progressed with improvements around how they planned and organised activities for people. People we spoke with felt there was enough for them to get involved with. Some people, staff and families felt that some people missed out in getting further afield as the service no longer had a wheelchair accessible minibus available. We discussed this with the manager and suggested an alternative to try and improve this for people.

People benefited from a modern care home and we found their bedrooms to be spacious and comfortable with lots of personal touches evident.

How good is our staff team?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant, positive impact on people's experiences.

Staff were clear on their roles and responsibilities. The manager supported this through the daily allocation sheets which they completed, to set out the expectations and responsibilities for staff. When we spoke with the manager about how they had decided the staffing levels, they were able to effectively talk us through their assessment. They described considering experience and skills mix when looking at rotas for the home. From our observations, we agreed with the rationale around staffing and agreed there was appropriate staffing.

The manager could develop this further, by detailing further in their staffing risk assessment more of the narrative around their thinking. This could be further be enhanced by gaining the views of the staff, people who live in Harris House and appropriate visiting professionals. The manager could then share the assessment with people, so everyone understood their rationale around the staffing. We agreed with the manager that this should be added to their service improvement plan.

Staff worked well together, which meant people benefited from a warm atmosphere because of these good working relationships. Staff communicated well with each other and there were opportunities for staff to come together to look at what was working well, or areas they would like to see improvements.

Staffing levels had enabled more than basic care and support to be offered. This had positively impacted on people's experiences. Staff felt their staffing levels were appropriate, as did people living in Harris House.

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 to be involved and stimulated, the service provider should ensure that people have regular opportunities for meaningful activities, outings and entertainments. These should be planned in accordance with people's needs and preferences.

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

'I can choose to have an active life and participate in a range of recreational, social creative, physical and learning activities every day, both indoors and outdoors.' (HSCS 1.25)

This area for improvement was made on 16 May 2022.

Action taken since then

People had access to a range of activities which took place through the week. This included some groups from within the community coming into the care home, for example the knitting club.

People told us they felt they had a good range of opportunities to get involved in activities if they wished to do so.

Therefore this area for improvement has been met.

Previous area for improvement 2

The service provider should ensure that people's care and support needs and wishes are recorded with sufficient detail within their personal plans. Regular and effective quality assurance checks of this information should be undertaken.

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

'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 16 May 2022.

Action taken since then

People's personal plans set out how they wished to be supported and staff were keeping personal plans updated. Further work should continue to support this and ensure this continues to improve.

This area for improvement has been met.

Previous area for improvement 3

To ensure that the service is providing a consistently high standard of care and support, and of environment the service should implement a quality assurance system which will support regular audits of different areas of service delivery, and of people's lived experience.

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 16 May 2022.

Action taken since then

The manager had taken steps to improve the quality of information they needed to help evaluate the service. Further work should continue to fully embed this into effective self-evaluation.

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?	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?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good

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