

# Haydale Nursing Home Care Home Service

17 Corbett Street Tollcross Glasgow G32 8LF

Telephone: 01417 788 678

Type of inspection:

Unannounced

Completed on:

1 May 2025

Service provided by:

Advinia Care Homes Limited

Service provider number: SP2017013002

Service no:

CS2017361012



## Inspection report

#### About the service

Haydale Nursing Home is registered to provide a care service to a maximum of 66 adults to include frail elderly and those with learning disabilities.

The service is owned and managed by Advinia Care Homes Ltd and is part of the Advinia Care Homes Limited group.

The service is situated in the Tollcross area of Glasgow, very close to shops, public transport links and other community resources.

There is a car park at the front of the property and enclosed gardens to the rear.

The service is provided over two floors with lift and stair access to the upper floor. Dunlop is the older people's unit; Corbett supports older people and adults with learning disabilities and Sunnyside supports adults with learning disabilities.

Each floor has bedrooms with en-suite facilities (toilet and wash-hand basin), shared lounges/dining rooms, toilets, and bathrooms.

## About the inspection

This was an unannounced inspection which took place between 29 April 2025 and 1 May 2025 between the hours 07:00 and 19:30. The inspection was carried out by two inspectors 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 ten people using the service and seven of their family members
- spoke with 16 staff and management
- spoke with three visiting professionals
- observed practice and daily life
- reviewed documents
- prior to the inspection we issued questionnaires and received three back from relatives of those supported by the service and 18 members of staff.

## Key messages

- The staff team were working well together to promote a positive experience for individuals.
- People's health was monitored and changes escalated to other health professionals when needed.
- There were sufficient staff to meet people's needs.
- · Environmental improvements were underway.
- A new manager was making a positive impact in the service.

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

## How well do we support people's wellbeing?

4 - Good

#### 1.3: People's health and wellbeing benefits from their care and support

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. The strengths identified had a positive impact on people's experience of living in the care home.

We saw warm and compassionate interactions between staff and people being supported. Engagement was friendly and kind. The choices and preferences of people living in the care home were supported well by staff who were familiar with individuals' needs. One relative told us "she feels safe and staff treat her well" whilst another commented "they are aware of her needs". This meant staff were able to respond to changes in health needs and liaise with external professionals. One external professional commented favourably on the joint working between the staff team and their department. This had contributed to positive outcomes for an individual.

People should expect to enjoy their meals in a relaxed environment. Mealtimes were calm and unhurried with a pleasant and friendly atmosphere. People were offered appropriate support and encouragement to eat and drink. When offering assistance, staff supported people to enjoy their meal in a discreet and patient manner. The menu was displayed and staff offered visual choices at the point of service. This helped individuals to choose what they would like to eat. The service was introducing a new seasonal menu. It was positive to hear that feedback would be sought and used to further enhance the new menu and would be reflective of individuals wishes and choices. People were offered snacks and drinks out with meal times which promoted good food and fluid intake.

When required, appropriate monitoring of people's food and fluid intake was undertaken. The service had maintained previous improvements in relation to staff practice in this area. Clear records of what individuals had been offered and what they had consumed meant that changes to planned care could be made where needed. This promoted health and wellbeing through improved nutrition and hydration.

Medication was managed effectively to support people to take the right medication at the right time. There was guidance available for staff on the administration of "as required" medication. Staff followed recognised medication protocols to respond to individuals needs. This helped to keep people well.

Two dedicated activity workers and a committed staff team worked hard to help people get the most out of life. People had opportunities to take part in a range of meaningful activities such as musical events, accessing the local community, arts and crafts, and events with other care homes in the providers group. Links with the local community helped keep people connected. It was clear people enjoyed these activities. One person told us "I enjoy the trips out with staff". We received feedback regarding recent changes to the activity budget allocation and the impact this had on organising larger events due to the different needs of individuals. The provider agreed to revisit this.

## How good is our leadership?

4 - Good

- 2.1: Vision and values inform practice
- 2.2: Quality assurance and improvement is led well

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. The strengths identified had a positive impact on people's experience of living in the care home.

Since the last inspection, a new manager had been appointed who was supported by a deputy manager. We received positive comments from individuals regarding the management team. They worked well together and shared a clear vision for the service. One relative told us "there is positive leadership with a caring nature in the care home", whilst a member of staff commented "there is now a new manager in place to support the deputy manager and staff team".

The service used an electronic system to monitor aspects of the service. A range of audits were being completed to monitor key areas across the service. This included medication, accidents/incidents, health risk assessment and personal planning. Where issues were identified, these were addressed quickly with action plans being completed and assigned to relevant staff across the service. Staff in various roles were involved in the audit and oversight process. This meant that there was a whole team commitment to driving improvement.

A new "quality metrics" tool had been introduced. This helped the management and wider quality team to monitor people's changing health needs and take appropriate action quickly. This tool covered areas such as wounds, falls, medication, infections and complaints. It also allowed staff to identify themes or patterns in these areas. This included pictorial overviews in the form of graphs. We were confident that the management team had good oversight of people's clinical needs.

Accidents and incidents were monitored and analysed within the service. This provided assurance that when things did not go to plan, the service used a lessons approach. We saw examples of this learning leading to positive changes for individuals, such as the introduction of assistive technology.

Quality audits and feedback from those living and working in the service was used to inform an overall service improvement plan.

## How good is our staff team?

4 - Good

#### 3.2: Staff have the right knowledge, competence and development to support people

#### 3.3: Staffing arrangements are right, and staff work well together

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. The strengths identified had a positive impact on people's experience of living in the care home.

Staffing arrangements were determined by regular assessment of people's care needs. There were sufficient staff on shift. Staffing had been increased in response to the changing needs of individuals, particularly when individuals experienced stress and distress. One member of staff commented "the staff work well together to try and provide person centred care, staff in all departments work hard and want to ensure residents feel safe, happy and comfortable". We received mixed feedback and views on staffing arrangements overnight. We asked the provider to revisit, with the staff team, decision making around staff deployment practices overnight. This would ensure people working in the service were well informed and involved in the process.

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People should have confidence that the people who support them are trained, competent and skilled. A blended approach continued with staff training. E-learning covered a wide range of mandatory training. Training completion had reduced in previous months, however, we were reassured that this had improved prior to the inspection. Staff were provided with time to complete required training. This helped promote a learning culture within the staff team. The training provided was relevant and helped staff meet the needs of people supported. Observations of practice were undertaken to ensure staff applied training in their day to day work practice.

Staff told us they felt well supported by the management team. Staff had regular supervision opportunities with managers to identify any practice, training and support needs promptly. The service shared with us that the formal supervision process had fallen behind. There was a clear plan in place to quickly rectify this. This would give staff the opportunity to discuss what was working well in the service and express their views.

People could be confident that new staff had been recruited safely and the recruitment process reflected the principles of "Safer Recruitment, Through Better Recruitment".

#### How good is our setting?

4 - Good

#### 4.1: People benefit from high quality facilities

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. The strengths identified had a positive impact on people's experience of living in the care home.

The home was welcoming, clean and tidy with a relaxed atmosphere. People were able to freely move around and had the equipment they needed to maintain their health and wellbeing. Individuals had their own bedroom. These were nicely personalised, in partnership with individuals. This promoted privacy and helped make people feel at home. One person told us "it is a bright and clean environment" whilst a relative commented "the building is easy to navigate and tidy".

Since the last inspection, the service had refurbished some corridors, shared bathrooms and lounges. Further work was planned to enhance the remainder of the environment. This included new floor coverings, decoration and new soft furnishings. The provider had an environmental action plan in place. We asked for this to be reviewed to ensure that timescales were specific (see area for improvement 1). This would help prioritise areas of the service that required to be redecorated.

People can expect accessible outdoor space and benefited from a large garden area with a choice of areas to spend their time. The garden had been well maintained. This made it an inviting space for individuals. New outdoor seating was delivered during the inspection. This would further enhance the outdoor space by providing an improved choice of seating.

The service was supported by maintenance personnel. Records showed that regular checks of equipment were being carried out in line with guidance and best practice. Unplanned repairs were quickly rectified. This helped to keep people safe.

#### Areas for improvement

1. To ensure people benefit from an environment that is well maintained throughout, the provider should update the environmental action plan to reflect clear timescales for completion.

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

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

4 - Good

#### 5.1: Assessment and personal planning reflect people's outcomes and wishes

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. The strengths identified had a positive impact on people's experience of living in the care home.

Personal plans help to direct staff about people's support needs and their choices and wishes. Overall, personal plans were person-led and involved those living in the care home. We shared some examples when the information could have been more person centred. Where individuals had experienced a short term change in their health, supplementary personal plans were in place to guide and support staff. This meant that individuals could be assured that they were being supported by a staff team that were aware of their needs.

Individuals were supported by a range of health assessments. These had been completed well. Quality assurance processes monitored the accuracy of completed assessment tools. This ensured any corrective action was completed if required.

It is important for services to keep clear and accurate records of care delivered and how this impacted on individuals. Overall, we found that the service had maintained improvements identified at previous inspections. Monthly reviews of people's personal plans were completed. We found that the quality of the content of these varied. Ongoing support and training would continue to develop this area with the staff team to ensure consistency of practice.

It is important to afford people living in the service and those closest to them the opportunity to be involved in their care and support. An overview of six-monthly reviews that had taken place and those planned supported this. One unit had fallen behind in this process, however, we were reassured that these reviews had been booked in the coming weeks.

## 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?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good
How good is our leadership?	4 - Good
2.1 Vision and values positively inform practice	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good
How good is our staff team?	4 - Good
3.2 Staff have the right knowledge, competence and development to care for and support people	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good
How good is our setting?	4 - Good
4.1 People experience high quality facilities	4 - Good
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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