

Netherton Court Nursing Home Care Home Service

7-11 Netherton Road
Wishaw
ML2 0BP

Telephone: 01698 373 344

Type of inspection:
Unannounced

Completed on:
5 June 2025

Service provided by:
Thistle Healthcare Limited

Service provider number:
SP2003002348

Service no:
CS2003010587

About the service

Netherton Court Nursing Home is situated in a residential area of Wishaw, in North Lanarkshire, and is provided by Thistle Healthcare Limited.

Netherton Court provides care and support for up to 63 older people with physical and cognitive impairment. It is accessible to public transport routes, local shops and community amenities.

The home is purpose-built over two levels with a passenger lift providing access to the first floor. The home is divided into three units. All rooms provide single ensuite facilities with access to communal bathrooms, dining rooms and lounges on each floor. The ground floor provides access into a well-maintained enclosed garden area, with seated areas for residents and visitors to use.

At the time of the inspection, there were 59 people living there.

About the inspection

This was an unannounced inspection which took place between 3 - 5 June 2025, between 07:15 and 17:00. The inspection was carried out by three 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:

- Spent time with 15 people using the service and spoke with 10 of their families who were visiting. We also obtained feedback from a pre-inspection questionnaire from six residents and five families.
- Spoke with 15 staff and management, along with feedback from a pre-inspection questionnaire from 15 staff.
- Observed practice and daily life.
- Reviewed documents.
- Obtained feedback from four visiting professionals.

Key messages

- People living in Netherton Court, and their families, were happy with the care and support, with the exception of one.
- People were respected and listened to because their wishes and preferences were used to shape how they were supported.
- The activity team and staff supported people to get involved in a wide range of activities and interests.
- Management demonstrated a clear understanding about what was working well and what improvements were needed.
- People living in the care home, and staff, benefited from a warm atmosphere because there were good working relationships across the care home. However, staffing levels needed reviewed, particularly on the early shift in Witcutt Unit.
- Whilst the environment was clean and well-maintained; improvement was needed to the cleaning and decontamination of reusable medical devices, for example bedpans, commode pans and urinals.
- Personal plans had a good level of detail to guide staff around how best to care and support each person.

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

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| How well do we support people's wellbeing? | 5 - Very Good |
| How good is our leadership? | 5 - Very Good |
| How good is our staff team? | 5 - Very 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?

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 experienced warmth, kindness and compassion in how they were supported and cared for. The service was very good at ensuring people maintained relationships with those important to them. Family and friends were made to feel welcome. One relative told us: "I can visit when I want and staff make me feel welcome." Whilst another explained, "When I visit, the staff are always so kind."

People living in Netherton Court, and their families, were happy with the care and support, with one family not finding this. One person explained: "I have never been so well looked after in my life ... I love the company and the kindness from everyone" whilst another told us, "Staff are extremely attentive and keep family updated."

The atmosphere within each of the units was welcoming and friendly and the strong values and aims of the service were demonstrated and visible at all levels. People knew the staff team well and we witnessed strong and positive relationships, humour, fun and respectful interactions between people living there and the staff. Time was taken by care staff during personal care to promote people's dignity and self-esteem.

The activity team supported people to get involved in a wide range of activities and interests. This included regular trips out both individually and as a group. The planner included options to maintain, develop and explore people's interests, strengths and skills. Key dates throughout the year were being celebrated with special events. The service was currently looking to build on how people can be supported to achieve their wishes and aspirations by introducing wish trees.

People benefited from comprehensive and up-to-date healthcare assessments, access to community healthcare and treatment from external healthcare professionals. One person told us, "Staff really help me, encourage me to eat and walk a little when I'm up to it." Feedback from families included: "My relative is happy and content and is well cared for", "At times there could be better attention to the cleaning of my relative's finger nails" and "The care and support given to my parent and family is excellent ... I am kept up to date with any changes to my parent's medical condition and their wellbeing."

People benefited from access to a tasty, varied and well-balanced diet. They could choose from a variety of meals, snacks and drinks. However, we received lots of feedback that people would like the lunch time options to be more varied. One person said, "The food is usually ok and if I don't like what's on, then I can get something else," whilst another said, "I enjoy the meals but get fed up with pasties and sandwiches at lunch." Management had a very good overview of peoples' nutrition, with regular internal audits being carried out which identified any areas for improvement.

The service liaised with other healthcare professionals as and when needed. No concerns were raised to us from visiting professionals.

People's health and wellbeing benefited from safe infection prevention and control practices and procedures. However, we found one aspect that needed improved and have made an area for improvement around this under How good is our setting?

How good is our leadership?**5 - Very Good**

We found significant strengths in aspects of leadership and quality assurance and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

Management and senior staff worked hard to ensure that people experienced high quality care and support. One family commented, "Excellent leadership and team work," whilst another explained, "I feel at ease to go and speak to the person in charge or the manager when I need to."

Leaders demonstrated a clear understanding about what was working well and what improvements were needed. They ensured that the needs, outcomes and wishes of people living in the service were the primary drivers for change. A wide variety of audits was completed with key actions being identified. There was an overall service development plan in place which identified planned actions to drive improvement along with completed actions throughout the year.

Informal observations of staff practice were undertaken regularly to assess learning and competence. Outcomes from these were discussed through supervision and appraisals. We have discussed ways of supporting staff to use reflective accounts to support their development.

The majority of people we spoke with felt confident giving feedback and raising concerns because they knew this would be welcomed and responded to in a spirit of partnership.

Staff told us that they felt supported and could go and speak to senior staff or management if they had any ideas or concerns.

How good is our staff team?**5 - Very Good**

We found significant strengths in aspects of the staffing arrangements and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

People living in the care home and staff benefited from a warm atmosphere because there were good working relationships across the care home.

People were confident that staff had the necessary skills and competence to support them. There was a clear staff assurance framework that provided a structure of training for each role within the care home. Staff were supported to keep up-to-date with current and changing practice, with easy access to a range of good practice guidance.

Whilst people could be assured that the numbers and skill mix of staff were determined by a process of continuous assessment, a review of the staffing level in Witcutt Unit was needed. We came to this conclusion after hearing feedback from residents, families and staff about how busy the unit was, particularly on an early shift. Our own observations and the service's most recent dependency calculations aligned with this (see area for improvement 1).

People living in the care home, and their families, were positive about the staff group. We received the following comments: "Staff are wonderful, very helpful, I'm very lucky here", "Staff are caring and friendly and carry out their duties efficiently" and "Amazing staff who are dedicated and know their residents well."

Areas for improvement

1. To ensure that people's care and support needs are met effectively, the service should ensure staffing arrangements are safe.

To do this, the service should, at a minimum:

- a) regularly assess and review people's care and support needs
- b) demonstrate how the outcomes 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
- d) make the overall assessment of staffing level and deployment available to any visitors to the service and everyone using it.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I am confident that people respond promptly, including when I ask for help" (HSCS 3.17).

How good is our setting?

4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

People benefited from a comfortable, warm and homely environment where residents were able to sit and chat to each other. They were supported by staff to choose where to spend their day.

The environment was clean and tidy with no evidence of intrusive smells.

The setting had been designed or adapted for high quality care and support. Whilst Belhaven Unit for people living with dementia had adopted some good aspects of best practice, this could be further developed.

There were clear planned arrangements for the regular monitoring and maintenance of the premises and the equipment to ensure people were safe. However, some aspects of general in-house repairs and refurbishment needed a focus. A new maintenance person had just started which meant that the service was in a good position to start to address these.

People were encouraged to personalise their bedrooms to ensure that they were individual to their taste and home comforts including photographs and ornaments.

Staff were aware of environmental cleaning schedules and clear about their specific responsibilities. Staff carrying out housekeeping and cleaning in the service were familiar with required environmental and equipment decontamination. However, identified dirty utility (often referred to as the sluice) areas were not being used for the cleaning and decontamination of reusable medical devices, for example bedpans, commode pans and urinals. The sluice rooms did not have any automated method such as a thermal washer or disinfectant. There was no standard operating procedure in place to instruct staff on how this should be carried out manually (see area for improvement 1).

Areas for improvement

1. To promote good infection prevention and control, the provider should ensure that a standard operating procedure is put in place for the cleaning and decontamination of reusable medical devices, for example bedpans, commode pans and urinals. Ensuites must not be used for this purpose.

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 premises, furnishings and equipment" (HSCS 5.24).

How well is our care and support planned?

4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

People could be assured that they had a personal plan in place. There was a good level of detail within the plans to guide staff around how best to care and support for each person. These were then regularly evaluated. Some improvement was needed to ensure consistency, including the level of detail within personal plans and the completion of supporting documentation. While some gaps were identified, these had not affected people's outcomes.

Staff maintained comprehensive daily notes which were used to provide live information to the next shift.

The service had a supportive and inclusive approach to involve the people they support, and their family members, in the planning and delivery of the service, if this was important to the person living in the home. Reviews had been taking place and a tracker was in place to ensure that management had an overview of these.

Supporting legal documentation was in place to ensure people were protected and to uphold their rights.

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 ensure people can freely access all areas of the home and outside space, the provider should fully implement the contingency plan for the lift.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I can independently access the parts of the premises I use and the environment has been designed to promote this (HSCS 5.11).

This area for improvement was made on 11 June 2024.

Action taken since then

Please see information under How good is our setting?

This area for improvement has been met.

Previous area for improvement 2

To ensure people have opportunities to be out in the community, the activity plan should continue to develop.

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

This area for improvement was made on 11 June 2024.

Action taken since then

Please see information under How well do we support people's wellbeing?

This area for improvement has been met.

Previous area for improvement 3

To support people's health and wellbeing, the provider should ensure recordings of daily health charts are fully completed.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I experience high quality care and support because people have the necessary information and resources" (HSCS 4.27).

This area for improvement was made on 11 June 2024.

Action taken since then

Please see information under How well is our care and support planned?

This area for improvement has been met.

Previous area for improvement 4

To support people's health and wellbeing, the provider should improve the dining experience.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "If I need help with eating and drinking, this is carried out in a dignified way and my personal preferences are respected" (HSCS 1.34).

This area for improvement was made on 11 June 2024.

Action taken since then

Whilst the dining experience was relaxed and staff supported people as needed, aspects could be improved. This includes offering condiments, choice of drinks, having a menu available and reviewing the lunchtime options. People explained that they would like a change from sandwiches or pasties, or very similar, at lunchtime. We felt assured that the manager would take this forward.

This area for improvement has not been met.

Previous area for improvement 5

To ensure people and their families feel listened to and are kept up-to-date with what is happening in the home, the provider should improve communication.

This is to ensure that care and support is consistent with the Health and Social Care Standard (HSCS) which state that: "If I have a concern or complaint, this will be discussed with me and acted on without negative consequences for me" (HSCS 4.21).

This area for improvement was made on 11 June 2024.

Action taken since then

People had the option of a range of communication options including a new manager's evening drop-in surgery, meetings or suggestion box. There was a participation strategy on display in the foyer and updates were sent using a newsletter and emails.

This area for improvement has been met.

Previous area for improvement 6

To provide staff with the necessary skills to support people, the provider should ensure levels of completed training improve.

This is to ensure that care and support is consistent with the 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 area for improvement was made on 11 June 2024.

Action taken since then

Please see information under How good is our staff team?

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

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|--|---------------|
| How well do we support people's wellbeing? | 5 - Very Good |
| 1.1 People experience compassion, dignity and respect | 5 - Very Good |
| 1.2 People get the most out of life | 5 - Very Good |
| 1.3 People's health and wellbeing benefits from their care and support | 5 - Very Good |
| 1.4 People experience meaningful contact that meets their outcomes, needs and wishes | 5 - Very Good |
| 1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure | 5 - Very Good |
| How good is our leadership? | 5 - Very Good |
| 2.2 Quality assurance and improvement is led well | 5 - Very Good |
| How good is our staff team? | 5 - Very Good |
| 3.2 Staff have the right knowledge, competence and development to care for and support people | 5 - Very 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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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

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