

# Care service inspection report

## Hunterhill Care Home Care Home Service Adults

Blackford Road  
Paisley  
PA2 7EN

Inspected by: John Browne

& Annabell Nicolson

Type of inspection: Unannounced

Inspection completed on: 10 October 2011



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### Service provided by:

Renfrewshire Council

### Service provider number:

SP2003003388

### Care service number:

CS2006121927

### Contact details for the inspector who inspected this service:

John Browne

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## Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

### We gave the service these grades

Quality of Care and Support	5	Very Good
Quality of Environment	5	Very Good
Quality of Staffing		N/A
Quality of Management and Leadership		N/A

### What the service does well

The service demonstrated very good involvement of residents, relatives and staff through various methods.

Care records viewed generally showed good detail in relation to residents care needs and how they were being met.

The service is continuing to develop health care practice.

The home environment was of a very good standard and the safety of residents was monitored.

### What the service could do better

Some aspects of the home environment should be improved which the management recognise.

Further guidance should be given to staff about the use of risk assessment tools.

### What the service has done since the last inspection

The service is working in partnership with health care professionals to reduce the incidence of falls in the home, provide access to earlier diagnosis and testing.

## **Conclusion**

Hunterhill Care Home remains a popular and well regarded place with those who use it and with their relatives. It has a relaxed and happy atmosphere where we saw many examples of service users and staff interacting well. People tell us that it is a good place to live. The staff team is stable and staff work hard to ensure that people get a good service.

## **Who did this inspection**

John Browne  
& Annabell Nicolson

**Lay assessor:** N/A

# 1 About the service we inspected

Hunterhill Care Home opened in January 2008. The purpose built unit is registered with the Care Commission to provide care to a maximum of 60 older people. Before 1 April 2011 this service was registered with the Care Commission. On this date the new scrutiny body, Social Care and Social Work Improvement Scotland (SCSWIS), took over the work of the Care Commission, including the registration of care services. This means that from 1 April 2011 this service continued its registration under the new body, SCSWIS.

Located within a residential area close to Paisley town centre, the accommodation is on two levels and provides single occupancy en suite bedrooms. There are five discreet units which accommodate twelve residents each, one unit providing a respite facility while another provides specialist dementia care. Each unit is self contained and has a lounge/dining area and a small kitchen, meals are provided from a central kitchen area within the home. On the day of the inspection there were 54 service users living in the care home.

The aims service include:

" To ensure the dignity, privacy, choice and safety are maintained for those who use the service".

Based on the findings of this inspection this service has been awarded the following grades:

**Quality of Care and Support - Grade 5 - Very Good**

**Quality of Environment - Grade 5 - Very Good**

**Quality of Staffing - N/A**

**Quality of Management and Leadership - N/A**

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website [www.scswis.com](http://www.scswis.com) or by calling us on 0845 600 9527 or visiting one of our offices.

## 2 How we inspected this service

### **The level of inspection we carried out**

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

### **What we did during the inspection**

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care

This report was written following an unannounced inspection which was carried out on the 7 October 2011 between 9.30am and 4pm. Feedback was provided to the management on 10 October 2011. The Inspection was carried out by John Browne and Annabell Nicolson, Inspectors for the Care Inspectorate.

As requested by us, the care service sent an annual return and self assessment. In this inspection we gathered evidence from various sources, including the relevant sections of policies, procedures, records and other documents, including:

- Resident and relatives meetings
- Resident care files
- Policies and Procedures
- Accident and incident records and audits
- Staff training records
- Observation of the environment
- Discussions with residents, relatives, staff and manager.

### **Grading the service against quality themes and statements**

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

## **Inspection Focus Areas (IFAs)**

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

## **Fire safety issues**

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at [www.firelawscotland.org](http://www.firelawscotland.org)

## What the service has done to meet any recommendations we made at our last inspection

There were two recommendations from the previous report:

1. Further advice and guidance should be made available to staff and service users as to when certain risk assess tools are used. National Care Standards, Care Homes for Older People, Standards 5.1, Management and Staffing.

Action Taken - The management have implemented a care plan audit system which is intended to ensure that risk assessments are completed. However there is still no guidance available for staff indicating the factors which should lead to assessment being completed. This recommendation will continue.

2. Support Plans should be developed to include a record of professional contacts which clearly shows when visits were made and any action required. National Care Standards, Care Homes for Older People, Standard 14; Keeping Well, Healthcare.

Action Taken - Examination of care plans showed that a record of professional visits pro forma has been developed and is used. This recommendation has been met.

## The annual return

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

**Annual Return Received:** Yes - Electronic

## Comments on Self Assessment

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

We received a fully completed self assessment document from the service provider.

We were satisfied with the way the service provider had completed this and with the relevant information they had given us for each of the headings that we grade them under.

The service provider identified what they thought they did well, some areas for development and any changes they planned. The service provider told us how the people who used the care service had taken part in the self assessment process.

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## Taking the views of people using the care service into account

We received four Care Standards Questionnaires from service users who agreed strongly or very strongly with the quality statements. We were able to speak to ten service users during the visit. Some comments were:

" Well run and organised"

" Staff are at hand for my need day and night "

" I feel this is a safe haven for people like myself. I have no hesitation in recommending Hunterhill Care Home"

" The home is so comfortable and the food is delicious"

" It is a happy and clean home with lovely staff who attend to all my needs"

" They look after you very well"

" It was my own decision to come here and I've no regrets"

" I enjoy being able to do what I like in here"

" The staff are all nice and polite"

" The food is really not but at all but sometimes there is a repetitive menu. Today there was mince and stew on the same menu".

" It's very good staff help me to dress and I can go on outings".

## Taking carers' views into account

We received eight completed questionnaires from relatives and carers. All agreed or strongly agreed with the statements. We were able to speak with four relatives during the visit. Some comments were:

" I think it's great. She gets all th attention she needs."

" There's not enough staff but they are very good"

" The Manager is always there and available"

" It's brilliant,it's like a five star hotel.

" The staff are are great,nothing is a bother"

" There were two great outings recently to the Transport Museum and Beechwood Community Centre"

" My father has been resident for a year and half now and I have been very impressed with the quality of service provided"

" My interaction with staff at all levels has been very reassuring"

" It's a pleasure to visit this home

"It's bright and airy,staff are welcoming and there is always plenty going on"

" Recently my relative spent a week in hospital. The home staff conveyed genuine concern when she was ill and genuine delight when she returned to the home".

" I am very confident that my mother is being cared for in a very safe environment by people who actually care about her and who feel genuine affection toward her. I am fortunate to have found Hunterhill Care Home"

## 3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

### Quality Theme 1: Quality of Care and Support

Overall grade awarded for this theme: 5 - Very Good

#### Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

#### Service strengths

The service had a participation policy for the involvement of residents, relatives, friends and staff with the aim of leading to effective participation within the care centre. This would have direct impact on the delivery of care and the future development and hopes for Hunterhill. How this was to be achieved was clearly detailed.

Information about the home including the management structure, personalisation of bedrooms, security, laundry, menus and participation is provided in the home brochure.

Information boards were evident throughout the home and displayed residents meeting minutes, newsletter, advocacy information and updates on the garden work in progress. A DVD showing recent events in the home and service users taking part in activities was showing in the foyer.

There was evidence of planned Carers Forum meetings and minutes for were seen. discussions about how to improve attendance, involvement in service user activities, guest speakers and links with a local school were minuted. Minutes reflect the interest shown by the forum in contributions from CPNs and Gerontology nurse.

There were extensive minutes of regular meetings with the Service User forum where a range of issues were discussed. They show that service users welcome increased opportunities for activities, outings and that they value the garden area very highly. These meetings are attended by a member of the management team.

There were a number of very positive, personal and emotional testimonials from relatives to the care staff noting how much they valued the time their relative had lived in the home.

The service has also issued questionnaires to other visiting professionals seeking their views on the quality of the care provided and their interaction with the home. These showed a high degree of satisfaction with the collaborative work undertaken and the attitude and knowledge of the staff team.

Eight care files were viewed which demonstrated that the home operates an up to date review programme. It was evident that residents and relatives had been involved in continuing care planning.

The service has a programme of continuing assessment of service users activity preferences which informs the provision of activities.

The majority of the inspection questionnaires returned from residents and relatives indicated that there were frequent social events and activities, there was access to GP and health services and that they were encouraged to discuss their views. This was confirmed by service users, relatives and friends during our discussions with them.

### **Areas for improvement**

We examined eight care files during the visit and examined the use of risk assessment tools by staff. These files show that risk assessment is place to ensure the safety of service users and statutory assessment is carried out. The previous inspection recommended that the service provide guidance to staff and service users and their relatives and friends about the use of other risk assessment tools such as, challenging behaviour, depression, measurement of pain.

It is not clear what the service considers the triggers for the use of these tools are, however we discussed with the manager examples of how their use may be appropriate. (See recommendation one).

Minutes of service user consultation and comment from some service users during the visit show dissatisfaction with the services policy on the provision of food produced from fresh eggs. The Provider organisations should on behalf of service users seek current guidance on the safety implications of fresh eggs. The service should explore risk assessment of the possible hazards associated and try to find a compromise so that people can have their expressed choice of items such as boiled, fried, scrambled or poached eggs.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 1

## Recommendations

1. Further advice and guidance should be made available to staff and service users as to when certain risk assess tools are used. National Care Standards,Care Homes for Older People,Standards 5.1,Management and Staffing.

## Statement 3

We ensure that service user's health and wellbeing needs are met.

### Service strengths

Eight care files were viewed in detail selected at random from the units.

The service has begun to revise care plans using "Anticipatory Care Planning" to support individual end of life care.

The service has continued to develop very effective working relationship with other health care professionals. During the visit we spoke with the Gerontology Nurse whose team felt that the quality of practice and knowledge in the home would allow them to work together to prevent hospital admission. This work is also intended to improve re admission from hospital to the home. The comment was made to us that the staff are "absolutely determined" to ensure that people can return to the home following hospitalisation.

Nursing staff are able to provide individual advice and guidance to staff who they see as being "being very skilled in identifying subtle changes in people".

The home is working in partnership with the Falls Prevention Team in developing assessment of risk.

The District Nurses commented that they have "an excellent working relationship with all carers and management in addressing patients needs"

In all of the care files examined there was strong evidence of the service upholding individuals rights and a knowledge of adult protection practice. Some residents had complex needs and there was some very good detail in relation to the management of challenging behaviour.

The home has introduced a record of health care professionals visits within care plans.

Staff have access to best practice guidance.

### Areas for improvement

The service should ensure that information within care plans is used to effect changes in support. We discussed with the management some examples where we saw evidence of changes in individuals behaviour which was recorded by staff. However changes in support planning which would be expected had not been achieved, This should be addressed through improved care plan audit.

The service has a proprietary falls risk assessment tool in use, however it is aware of tools available in the recent Care Inspectorate guidance "Managing Falls and Fractures in Care Homes for Older People". It intends to consider their introduction into practice.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 0

## Quality Theme 2: Quality of Environment

Grade awarded for this theme: 5 - Very Good

### Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the environment within the service.

#### Service strengths

The methods of service user participation reported in statement 1.1 remain relevant for this statement.

There was evidence that service users are consulted in their views about the environment.

All of the the bedrooms seen, were well personalised with their own furniture and personal possessions.

The home is very well appointed lounge areas are very attractively decorated and furnished.

All of the questionnaires returned indicated that they felt safe and secure and that the home was clean and free from smells.

#### Areas for improvement

During the visit we saw that some communal toilets were out of use and were awaiting repair. This should be addressed as a matter of priority.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 0

## Statement 2

We make sure that the environment is safe and service users are protected.

### Service strengths

The service was found to have a warm, relaxed atmosphere which was clean, tidy and odour free. The dementia unit had good use of colours, memory boxes, tactile objects on corridor walls, use of old signage and pictures.

Accident and incident records seen, showed a review by the manager and relevant action indicated.

Relevant risk assessments were seen in the care files viewed.

The service is working in partnership with other professionals to identify factors which may increase the risk of falls. There is collaborative work taking place to assess whether additional resources or equipment is required. This work is in addition to the service existing practice.

The service has very good awareness of adult protection practice.

### Areas for improvement

The home should revisit some aspects of the environment in the dementia unit particularly whether the level of lighting is sufficient.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 0

**Quality Theme 3: Quality of Staffing - NOT ASSESSED**

**Quality Theme 4: Quality of Management and Leadership - NOT ASSESSED**

## 4 Other information

### Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

### Enforcements

We have taken no enforcement action against this care service since the last inspection.

### Additional Information

N/A

### Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in SCSWIS re-grading the Quality Statement within the Management and Leadership Theme as unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).

## 5 Summary of grades

<b>Quality of Care and Support - 5 - Very Good</b>	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
<b>Quality of Environment - 5 - Very Good</b>	
Statement 1	5 - Very Good
Statement 2	5 - Very Good
<b>Quality of Staffing - Not Assessed</b>	
<b>Quality of Management and Leadership - Not Assessed</b>	

## 6 Inspection and grading history

Date	Type	Gradings	
10 Jan 2011	Unannounced	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	Not Assessed
		Management and Leadership	Not Assessed
24 Jun 2010	Announced	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	5 - Very Good
		Management and Leadership	Not Assessed
14 Jan 2010	Unannounced	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	5 - Very Good
		Management and Leadership	Not Assessed
17 Jun 2009	Announced	Care and support	5 - Very Good
		Environment	5 - Very Good
		Staffing	5 - Very Good
		Management and Leadership	5 - Very Good

## Inspection report continued

9 Feb 2009	Unannounced	Care and support Environment Staffing Management and Leadership	4 - Good 5 - Very Good 3 - Adequate 4 - Good
22 May 2008	Announced	Care and support Environment Staffing Management and Leadership	4 - Good 5 - Very Good 3 - Adequate 4 - Good

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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## Translations and alternative formats

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