

Netherton Court Nursing Home Care Home Service

7-11 Netherton Road
Wishaw
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Telephone: 01698 373 344

Type of inspection:
Unannounced

Completed on:
27 June 2023

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 link routes, local shops, and community amenities.

The home is purpose built over two levels with a passenger lift providing access to the first floor. 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.

The service states its aims and objectives are to "Ensure that residents, including those who live with dementia, are supported in a person-centred environment, feel valued and respected as individuals. We acknowledge that people may experience levels of frailty, however, our aim is to support you to manage your symptoms and improve your quality of life as well as promoting your independence."

About the inspection

This was a follow up inspection which took place on 5 June 2023 and 27 June 2023. 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 nine people using the service
- spoke with nineteen staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- People experiencing care were supported in a kind a compassionate manner. One person told us 'staff are lovely'.
- We observed people to be supported to eat and drink well. We found improvements in food and fluid intake records and the evaluations of these records.
- Improvements had been made in relation to the cleanliness of the environment.

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 7 April 2023, the provider must ensure effective infection prevention and control measures are implemented to ensure health, safety and welfare of people.

To do this, the provider must, at a minimum:

- ensure all staff have undertaken training which meets current best practice standards for infection prevention and control.
- undertake observation of staff practice in relation to infection prevention and control and use of personal protective equipment and provide additional training and support.
- ensure that the physical environment is kept clean and hygienic and repairs are carried out to ensure surfaces can be cleaned in line with current best practice.
- ensure that equipment and furnishings are kept clean and hygienic.
- ensure that there is an adequate stock of personal protective equipment available and this is stored appropriately.
- ensure there is an effective auditing system in place to review the cleanliness of the environment and equipment, with effective management oversight.

This is in order to comply with: Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure care and support is consistent with Health and Social Care Standard 5.17: My environment is secure and safe.

This requirement was made on 10 February 2023.

Action taken on previous requirement

This requirement was made following a visit to the service in relation to a complaint investigation which took place on 10 January 2023 and 30 January 2023. The provider submitted an action plan to detail how the requirement would be met to ensure positive outcomes for people experiencing care.

Following a visit to the service on 26 April 2023, this requirement was not met. An extension was given to this requirement until 2 June 2023 to allow further time for improvements.

When we revisited the service there was evidence that improvements had been made. Staff had completed training in relation to infection, prevention and control. The staff's practice had been assessed to ensure that staff adhered to infection prevention and control guidance.

The manager told us that daily walk rounds had re-started to ensure any concern's related to the environment were addressed in a timely manner. Records showed that actions from daily walk rounds had been addressed. Audits had been undertaken to review the environment and equipment. We were also told there had been changes to staffing arrangements to improve cleaning.

We found personal protective equipment (PPE stations) to be well stocked and clean.

We found improvements in the cleanliness of the environment and care equipment.

However, we found several chair cushions that needed to be immediately replaced. We were satisfied that the service took immediate actions to address these concerns and improved their auditing system to reduce the risk of reoccurrence in the future.

Met - outwith timescales

Requirement 2

By 7 April 2023, the provider must support people to ensure they eat and drink well to maintain their health and wellbeing.

To do this, the provider must, at a minimum:

- a) ensure people are supported and encouraged to eat and drink well and are offered appropriate food and fluids in line with their assessed needs.
- b) develop and implement clear treatment plans for people who are at risk of weight loss and/or dehydration.
- c) ensure people's nutritional and hydration needs are being monitored and evaluated, with appropriate records kept.
- d) ensure that staff have the necessarily skills to support people safely with their nutrition and hydration needs.

This is in order to comply with: Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure care and support is consistent with Health and Social Care Standard 1.19: My care and support meets my needs and is right for me.

This requirement was made on 10 February 2023.

Action taken on previous requirement

This requirement was made following a visit to the service in relation to a complaint investigation which took place on 10 January 2023 and 30 January 2023. The provider submitted an action plan to detail how the requirement would be met to ensure positive outcomes for people experiencing care.

Following a visit to the service on 26 April 2023, this requirement was not met. An extension was given to this requirement until 2 June 2023 to allow further time for improvements. During our visit on 5 June 2023 although some improvements were made we were not reassured that people were being supported to eat and drink well. We were concerned that food and fluid intake records were not being consistently completed and these were not always evaluated appropriately to determine what action may be required. A further extension until 26 June 2023 was given to the service to make further improvements.

We visited the service on 27 June 2023 and found improvements had been made to ensure people were supported to eat and drink well. There was a greater access to snacks and fluids within each unit to support people more effectively. We observed staff support people to eat and drink throughout the day. Staff we spoke with confirmed there was easy access to food outwith meal times to support people.

We observed the dining experience to be calm and positive for people. People were supported in line with their assessed needs in a kind and compassionate manner. People were observed to be enjoying their food and one person told us the food was 'lovely'. We observed residents being supported to make their own food to support them to eat and drink well, this activity also provided an opportunity for people to socialise together.

The service had implemented food and fluid intake records to monitor people's intake. We found improvement in the completion of these records and the recording of people's dietary supplements. There was evidence of evaluation of these records and appropriate actions taken to support people's health and wellbeing. We found care plans had been updated to reflect people's needs and staff we spoke with told us they can access the information on people's needs. The service had also engaged with people and relatives on their preferences, there was plans to ensure this information was collated in people's care plans and suggestions acted upon. For example, some people would like to see different kinds of food at mealtimes.

The manager had implemented an improved system to monitor people's weight. There was evidence that concerns around people's nutrition and hydration were discussed at daily briefings and clinical meetings. We found evidence that the service had contacted other professionals appropriately when concerns arose.

Staff we spoke with told us they had undertaken malnutrition training, they spoke positively about this training and their learning. We saw evidence of this having a positive impact on people's care and support, for example, through the fortification of food. We saw evidence of staff utilising people's care records to ensure appropriately support was given.

Met - outwith timescales

Requirement 3

By 7 April 2023, the provider must ensure appropriate care recording and implementation of appropriate care plans to ensure the health, safety and welfare of people.

To do this, the provider must, at a minimum:

a) undertake a full assessment of people's needs.

- b) ensure care plans are completed robustly detailing how people are to be supported and contain clear guidance for staff.
- c) where there is a risk identified there is appropriate risk reduction or preventative measures to provide guidance to staff.
- d) ensure care plans are reviewed and updated when people's needs change.
- e) ensure that there is effective case recording with appropriate evaluation to determine if actions are required.
- f) ensure staff have undertake training with regard to care planning and care recording appropriate to their role.
- g) ensure staff have received appropriate training with regards to prevention and management of pressure ulcers.
- h) ensure referrals are made to external professionals to seek advice.
- i) implement an effective auditing system to review care plans and take action when concerns arise.

This is in order to comply with: Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure care and support is consistent with Health and Social Care Standard 1.15: 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.

This requirement was made on 10 February 2023.

Action taken on previous requirement

This requirement was made following a visit to the service in relation to a complaint investigation which took place on 10 January 2023 and 30 January 2023. The provider has submitted an action plan to detail how the requirement will be met to ensure positive outcomes for people experiencing care.

To allow further time for improvements to be made and evaluated, an extension to this requirement was given until 7 August 2023. This requirement will be followed up after this date.

Not assessed at this inspection

Requirement 4

By 7 August 2023, the provider must provide a varied programme of meaningful activities. To do this the provider must at a minimum provide :

- a) an activity plan developed from people's interests and hobbies.
- b) a range of meaningful activities for people living in the service.
- c) opportunities for people to be out in the community.

This is to comply with Regulation 4 - Welfare of users of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011.

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

This requirement was made on 1 May 2023.

Action taken on previous requirement

This Requirement was not followed up due to the timescale being 7 August 2023. This requirement will be followed up after this date.

Not assessed at this inspection**Requirement 5**

By 7 August 2023, the provider must maintain a robust quality assurance system. In order to do this they must provide:

- a) systems that audit healthcare issues including, but not exclusive to, weights, wounds and falls risk.
- b) a SMART action plan to address any deficits or issues identified.
- c) ensure all staff have appropriate training in nutrition, hydration and safely supporting people to eat and drink

It is also necessary to comply with Regulation 3 of the Social Care and Social Work Improvement Scotland Regulations 2011.

This is to ensure that care and support is consistent with the Health and Social Care Standard 4.19 which states 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.

This requirement was made on 1 May 2023.

Action taken on previous requirement

This Requirement was not followed up due to the timescale being 7 August 2023. This requirement will be followed up after this date.

Not assessed at this inspection**Requirement 6**

By 7 August 2023, the provider must ensure new staff have fully completed the induction programme and there is evidence they are deemed competent.

This is to comply with Regulation 15 of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This is to ensure care and support is consistent with Health and Social Care Standards (HSCS) which states: '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.' (HSCS3.14)

This requirement was made on 1 May 2023.

Action taken on previous requirement

This Requirement was not followed up due to the timescale being 7 August 2023. This requirement will be followed up after this date.

Not assessed at this inspection

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's health and well-being the provider should ensure recordings of 'as and when required' medications are fully completed.

This is to ensure care and support is consistent with Health and Social Care Standard (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 1 May 2023.

Action taken since then

This was a focused inspection, therefore this area of improvement was not reviewed.

Previous area for improvement 2

To support people's health and well-being the provider should improve the dining experience.

This is to ensure care and support is consistent with Health and Social Care Standard (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 2 March 2023.

Action taken since then

This was a focused inspection, therefore this area of improvement was not reviewed.

Previous area for improvement 3

To support improvement communication should improve when complaints are made.

This is to ensure care and support is consistent with Health and Social Care Standard (HSCS) which state that 'I use a service and organisation that are well led and managed' (HSCS 4.23)

This area for improvement was made on 1 May 2023.

Action taken since then

This was a focused inspection, therefore this area of improvement was not reviewed.

Previous area for improvement 4

To support people's health and well-being the provider should ensure short term care plans are in place for people on respite.

This is to ensure care and support is consistent with Health and Social Care Standard (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 1 May 2023.

Action taken since then

This was a focused inspection, therefore this area of improvement was not reviewed.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

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