

Deeside Care Home Care Home Service

Cults Avenue
Cults
Aberdeen
AB15 9RZ

Telephone: 01224 869 816

Type of inspection:
Unannounced

Completed on:
22 February 2024

Service provided by:
Deeside Care LLP

Service provider number:
SP2013012104

Service no:
CS2013318602

About the service

Deeside Care Home is situated in the Cults area of Aberdeen and is close to local amenities and public transport.

The five-storey home is divided into three units providing dementia, residential and nursing care. The service is registered to care for up to 68 older people. Included in the maximum occupancy number will be three places for named people under the age of 65.

All bedrooms have en-suite facilities which include a toilet and wash hand basin and shower. Each unit has communal living spaces which includes lounge / dining areas and a bathroom. The service also benefits from a hair salon, bar area, library, cinema, games, and sensory room.

At the time of inspection, 58 people were living in the home.

About the inspection

This was an unannounced follow up inspection which took place on 20 February 2024. 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 sixteen people using the service and ten of their families;
- spoke with staff and management;
- observed practice and daily life;
- reviewed documents.

Key messages

- Families reported being happy with the care and support their relatives received.
- We saw some kind and caring interactions between staff and the people they support.
- The level of engagement between staff and the people they supported varied.
- When people needed care and support staff were responsive.
- Repairs to faulty equipment were undertaken timeously.
- People's risk assessments were personalised to them.

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?	3 - Adequate
How good is our setting?	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?

3 - Adequate

We carried out a follow up inspection to measure the action taken in response to an outstanding requirement we had made at our last inspection. This requirement was in relation to people experiencing dignity, compassion, and respect in all aspects of their care and support. Although we observed improvements had been made to meet this requirement, some areas had not been fully embedded into practice. For example, people were not always given choices and the level of engagement between staff and the people they support varied at times. Therefore, we have made an area for improvement to address these outstanding areas.

(See area for improvement 1).

Please see the section of this report entitled "What the service has done to meet any requirements made at or since the last inspection" for further information.

Areas for improvement

1. To support better outcomes for people, the provider should promote meaningful engagement and interactions between staff and the people they support. This should include ensuring people's choices are sought and respected.

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

'My views will always be sought and my choices respected, including when I have reduced capacity to fully make my own decisions'. (HSCS 2.11) and

'I can control my own care and support if this is what I want'. (HSCS 2.1).

How good is our setting?

4 - Good

We completed a follow up inspection to measure the action taken in response to an outstanding requirement made at our last inspection. The requirement was to ensure people experience care in an environment that is safe and well maintained, by ensuring all repairs to faulty equipment are undertaken timeously.

Sufficient improvement had been made to meet this requirement. We changed the evaluation of this Key Question from adequate to good.

Please see the section of this report entitled "What the service has done to meet any requirements made at or since the last inspection" for further information.

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

Requirements

Requirement 1

By 1 December 2023, the provider must ensure that all people experience dignity, compassion, and respect in all aspects of their care and support.

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

- a. All staff understand and are implementing practices that promote person-led practice, compassionate support, and respect for all people.
- b. Ensure people are given the choice on where they wish to spend their time.
- c. Ensure people receive attentive and responsive support when required or requested.
- d. Ensure staff in leadership roles have an oversight on each shift and address any issues as they arise.

This is to comply with Regulations 4(1)(a) (welfare of service users) and 4(1)(b) (privacy and dignity of service users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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

'I am treated as an individual by people who respect my needs, choices and wishes, and anyone making a decision about my future care and support knows me'. (HSCS 3.13) and 'I experience warmth, kindness and compassion in how I am supported and cared for'. (HSCS.3.9).

This requirement was made on 24 August 2023.

Action taken on previous requirement

We saw some kind and caring interactions between staff and the people they support, however, the level of engagement varied at times. We found some people were sitting in communal areas for extended period of times with little or no interaction from staff. Staff were clearly busy and working with the best intentions to meet people's needs. However, there was limited engagement from staff out with care tasks and planned activities. The service needs to continue to develop this to ensure people have a consistent experience. We were confident in the manager response to this feedback and were confident this would continue to be developed within the service.

People were comfortable and well presented. This helped promote people's dignity. People and their families spoke positively about the service. A family member told us that staff are "very attentive" and another told us "Staff are great, they are visible and could not be more helpful".

People benefitted from a positive mealtime experience. People living in the service spoke naturally amongst themselves and the level of engagement between people and staff was increased during this time. People received a menu planner which allowed them to choose what they would like to eat. Where people required assistance to eat their meal, we saw this being undertaken sensitively and dignified. We saw that people

were offered fluids throughout the meal, however, some people were not provided with a choice of drink.

People benefitted from having an energetic activity team employed in the home. People received a weekly activity planner which allow them to choose how they would like to spend their time. However, out with planned activities we observed occasions where people were not given choices, for example, where a person's tv was put on in their room without asking them first. People's experiences varied, we heard that staff knew people well and one person told us that their care was not rushed and tailored to them. However, another person told us that their routine was "set in stone" and another told us that they "have to be at certain things, at certain times". We recommended that people are consulted to ensure people have choice and control on how and where they spend their time.

Staff were observed responding sensitively and compassionately, providing support and reassurances on occasions when people were distressed. This contributed to people feeling safe and valued.

We found people's buzzers were answered quickly during our inspection and any request for assistance was undertaken timeously. People we spoke to told us they did not need to wait for staff and one person told us that staff "are always available to help". It was positive that the service carried out regular checks of the response times of answering the buzzer system, this reassured us that people were receiving responsive care when requested.

The expectations of staff practice to care for people in a person centred, compassionate and respectful manner were discussed at staff supervisions and meetings. We would recommend that staff are supported to transfer and embed this knowledge into practice to enhance people's experiences and care.

We found leaders to be visible and accessible within the home to direct staff practice and to ensure people receive responsive person-centred care. We found that there was a responsive management team in place, who were observed to be accessible to residents, staff, and visitors. The manager demonstrated an understanding about what was working well and what improvements were needed within the service.

Some parts of this requirement have been met and a new area for improvement has been made to address any outstanding actions.

Met - within timescales

Requirement 2

By 06 October 2023, the provider must ensure people experience care in an environment that is safe and well maintained, by ensuring all repairs to faulty equipment are undertaken timeously.

This should include, but is not limited to, bathing equipment and the buzzer system.

This is to comply with Regulations 4 (1) (a) and (d) (welfare of users and procedures for the prevention and control of infection) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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

"My environment is safe and secure". (HSCS 5.19)

This requirement was made on 24 August 2023.

Action taken on previous requirement

We found the home to be comfortable and well-maintained, which contributed positively to a comfortable living environment. A handy person was employed within the service who undertook regular maintenance checks of the environment.

The bathing equipment and buzzer system which had been faulty at our last inspection was repaired and in working order.

A system was in place to report any faults or repairs. These were prioritised in order of urgency and signed off on completion. We found repairs to faulty equipment were undertaken timeously which ensured people experienced care in an environment that was safe and well maintained.

A service improvement plan was in place. This plan detailed information and plans for the ongoing refurbishment and improvement to the home environment. This gave us confidence that they are committed to driving forward improvement.

This requirement has been met.

Met - within timescales

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 risks to people's health and wellbeing are managed, the provider should ensure all risk assessments are personalised to the person.

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)

This area for improvement was made on 24 August 2023.

Action taken since then

Assessments were in place for regular monitoring and evaluation of matters that can impact on a person's health or wellbeing. This included skin condition, weight, and mobility. This kind of monitoring assisted people to keep good health, as it meant any concerns were identified early and was then, usually, easier to address.

Where a risk had been identified, a risk assessment had been undertaken which was personalised to the person. This meant people received person centred support to keep them safe.

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?	3 - Adequate
1.1 People experience compassion, dignity and respect	3 - Adequate
1.2 People get the most out of life	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	4 - Good
How good is our setting?	4 - Good
4.1 People experience high quality facilities	4 - Good

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