

Nazareth House Care Home Service

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Glasgow
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Type of inspection: Unannounced
Inspection completed on: 23 June 2016

Service provided by:
Nazareth Care Charitable Trust

Service provider number:
SP2013012086

Care service number:
CS2013317817

About the service

The inspection focused on standards of care for people living with dementia. We are using a sample of 150 care home services to look in detail at the standards of care for people living with dementia and this service is one of those selected as part of the sample.

The areas looked at were informed by the Scottish Government's Promoting Excellence: A framework for health and social care staff working with people with dementia and their carers and the associated dementia standards. It is our intention to publish a national report on some of these standards during 2017.

Nazareth House provides residential care for older people who are frail and many who have a diagnosis of dementia. The service provider is Nazareth Charitable Trust who also own the premises. The service re-registered with the Care Inspectorate under the new provider name in 2014 however the service has an extensive regulatory history before the change.

The new home (on the existing grounds) opened in April 2015. The home was purpose built to support older people. Each resident has a single room with en-suite shower and toilet facilities. There are lounges and dining areas on each floor and other quiet areas for residents to enjoy. There is an enclosed garden, caf area, large hairdressing salon and other 'therapy' rooms for visiting professionals to use. The service has two 'units' - St Theresa's and Larmenier.

The home is situated on the outskirts of Glasgow and is close to local amenities and transport links.

The aim of the service was to 'provide safe, high quality care to older people who require support in a residential setting'.

What people told us

We spoke with 12 residents on an individual basis and many more in group settings. We also spoke with eight sets of relatives. The comments received from everyone were, on the whole, very positive.

Residents -

'I love it here. I am happy and I love the friends I have made.'

'It's marvellous here. I really like the staff. I enjoy the company and going to mass.'

'We are very well taken care of.'

'I am happy here. The staff are lovely and caring.'

'Staff are wonderful, hard-working and make everyone feel safe and loved.'

'I couldn't be happier with the home and everything they provide to me.'

Relatives-

'The care assistants are excellent, as are the reception staff. The cleanliness and comfort in the rooms is of a very high standard.'

'Everyone is so friendly and helpful. They know my mother and they know me. It is a warm and friendly place for her to be in.'

'All the family were very impressed with how quickly our relative settled in and this is due mainly to the standards set by the home. Our relative is happier now than she has been for a long time and she enjoys the company. Words cannot express our gratitude'.

'As a family, we have found staff to be exceptionally warm and welcoming. This applies to all staff. We are frequent visitors and often find staff engaging and interacting with residents showing warmth and humour. They are very good at communicating with us promptly. We consider our relative to be fortunate to be a resident and we are confident that he is safe, stimulated and well cared for.'

'I have been really pleased with the care my relative has received. She is getting 100% care.'

'I cannot speak highly enough about the care my relative receives, it feels like she is part of a wider family. She gets hugs and cuddles of reassurance.'

We observed residents enjoying a meal or participating in an activity. We found residents to be engaged in the activities and enjoying themselves.

Any areas of concern noted in conversations or the questionnaires were discussed with the management team and we were assured that they would be addressed.

Self assessment

The self assessment was completed to a good standard and was referred to throughout the inspection

From this inspection we graded this service as:

Quality of care and support	5 - Very Good
Quality of environment	4 - Good
Quality of staffing	4 - Good
Quality of management and leadership	5 - Very Good

Quality of care and support

Findings from the inspection

We found residents and relatives to be very positive about the care and support provided by Nazareth House. We found that staff knew the residents well and this was evidenced in the care plans we sampled. We found the care plans to be thorough and regularly reviewed. They gave a good reflection of the choices and preferences of each resident.

We found that staff were warm and caring with residents. We observed staff taking time with those residents who had a cognitive impairment. They were patient and would take time to explain things. We saw that staff worked as a team and this included housekeeping and catering staff. Staff had a good understanding of how to take care of residents with a diagnosis of dementia and they have received training in this area. We found staff to be responsive if there was an on-going concern about a resident with a diagnosis of dementia and there was good communication and liaison with other professionals such as the community psychiatric nurses.

When we spoke with staff, they were very aware of their duty to keep residents safe from harm. They knew their responsibilities in this area and would have no hesitation in raising a concern.

The pastoral care within the home was a particular strength. Faith was a very important part of life within the home for all residents and this was supported by both staff and the nuns within the home.

We found that the care plans could be more person centred in some areas. We saw some very positive recording but we also saw recording within the plans that were generic and superficial. Staff would benefit from more training in the area.

We spoke with staff about some of the continence management practice we observed which gave us cause for concern. We raised this with the management team and further training will be arranged.

We asked the service to ensure that the care plans for 'as required' anti-psychotic medication detailed the triggers as to why the medication would be required but also detailed and monitored the effect of the medication.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 3

1. All care plans should be written in a person centred way which gives a reflection not only of the clinical needs of residents but also how the resident has had a meaningful and worthwhile experience.

National Care Standards for Care Homes for Older People Standard 6 Support arrangements.

2. All staff should be aware of, and have received training in, the best practice for the promotion of continence management.

National Care Standards for Care Homes for Older People Standard 6 Support arrangements

3. When any resident is receiving anti-psychotic medication 'as required', there should be robust care plan in place. The care plan should detail what the medication is, the circumstances (triggers) as to when it might be required and the responsibility of staff to monitor the effect of the medication once it has been given.

National Care Standards for Care Homes for Older People Standard 15 Keeping Well-medication.

Grade: 5 - very good

Quality of environment

Findings from the inspection

We found that very good efforts were made to support residents to maintain community links and the on-site church played a part in this. All residents could attend mass daily and it was also shown on televisions within the lounges in the home.

There were good links with the local schools and nurseries who would visit to entertain residents. Residents also enjoyed when singers and bands visited the home. Families were encouraged to take part in any activity within the home and to take their relative out if they wished. The home organised trips out for residents to the museum and shopping centres, and these were much enjoyed.

Residents could keep their own dentist and G.P. if they preferred and they were encouraged to attend appointments in the surgeries wherever possible.

The home had many areas that residents could visit such as the cinema room, a large hairdressing salon, a cafe, a prayer room and a shop. There were also smaller lounges on both floors if residents preferred quieter spaces. Residents were free to wander to within safe limits and some residents had the code for the lift so that they could use this independently. The enclosed garden could be accessed with staff help.

The service had completed the Kings Fund Audit Tool for the environment and were already considering how they could improve the environment for those residents with a diagnosis of dementia. They had sourced better signage for some areas and had approached Head Office for further funding to improve the environment for those residents with a diagnosis of dementia. We asked the service to consider developing another area of the grounds into an enclosed garden as the present garden was being affected by building works close by. The management team were receptive to this and had already put plans in place to develop the other garden area by the end of the inspection.

The provision of meaningful activities within the home could be better. We spent time discussing this with the new activity staff member and the management team. They intend to offer activity staff training and more support to ensure that activities provided are what residents would like.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 2

1. The service should consider the findings from Kings Fund Environmental Audit with a view to improving the environment for residents with a diagnosis of dementia so that it is easier and safer for them to move around the home. The home should actively consider developing another area of the grounds into an enclosed garden. The current garden is being disrupted with building works nearby and is not a restful space at the moment.

National Care Standards for Care Homes for Older People, Standard 4 Your environment and Standard 9 Feeling Safe and secure.

2. The provision of activities within the home needs to improve. Activity staff should receive appropriate support and training and feel confident to provide activities to residents in line with their choices, interests and preferences.

National Care Standards for Care Homes for Older People, Standard 17 Daily Life.

Grade: 4 - good

Quality of staffing

Findings from the inspection

We received very positive comments from both residents and relatives about the staff and management team within the home. We observed staff to be responsive, warm and respectful when caring and supporting residents. Positive relationships were evident and staff knew the residents well. Relatives told us that staff often 'went the extra mile' for residents and this was much appreciated.

Staff told us that they 'were happy to work here' and felt well supported and trained. They received regular supervision and felt that the training they received equipped them to take good care of residents. Staff had a good understanding of how to support those residents with a diagnosis of dementia. We saw staff being patient and taking time to explain something to a resident when required.

We found that all relevant staff were registered with the Scottish Social Service Council and that staff were also being supported to complete a SVQ qualification. Staff were supported to reflect on their practice and this will become more structured within supervision to support the requirement for the SSSC - Post Registration Teaching and Learning log (PRTL).

As previously noted we saw a few elements of practice (continence promotion and moving and handling) which did not promote dignity for residents. These were discussed fully with the management team and we were assured that further training for staff in these areas would take place.

There was a dementia ambassador in the home and she enjoyed the responsibility of the role but also acknowledged that she could benefit from more enhanced training. All staff within the home would benefit from further dementia training which is aligned to their role within the home.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. All staff within the home would benefit from further dementia training which is aligned to their role within the home.

National Care Standards for Care Homes for Older People Standard 5 Management and staffing arrangements

Grade: 4 - good

Quality of management and leadership

Findings from the inspection

The management and staff teams co-operated fully with this new Dementia Focus Area. They expressed a desire to improve the service they offered to residents with a diagnosis of dementia and they were receptive to any ideas and suggestions arising from this inspection.

The home had a strong ethos based on faith and this was fully supported by the staff and management team. Staff, in discussions, were also aware of the principles of good, safe care. Residents and relatives spoke very highly of the management team and told us that they would approach them with any concerns.

The management team had established systems in place to assure the quality of the service. They operated an 'open door' policy where residents and visitors were welcome to drop in. They used surveys to gather the views of residents and relatives and they had an active home development plan which outlined areas for improvement with timescales. They undertook regular audits of areas such as medication and care plans and the outcomes of these would be discussed with staff and practice improved if required.

We participated in a morning meeting where representatives of the heads of departments within the home met to discuss any issues, concerns or good news. This was an effective way to ensure that everyone knew what was happening within the home for that day.

Staff were encouraged to develop their practice and take on leadership roles, such as Dementia Ambassador and Caring for Smiles Champion. The management acknowledged that there were still improvements to be made in this area as they felt that other staff had the capacity to enhance their role, they just needed the support, training and time to do so.

In discussions with relatives and in a few of the completed questionnaires, we noticed that the issue of the need for 'improved communication' was raised. Two relatives told us that, for example, they did not know that a new activity staff member had started in the home and they did not know the name of the Dementia Ambassador. We discussed this fully with the management team and they acknowledged that this was an area that needed to improve but they have been so busy over the last year moving into the new home and getting it established. They agreed to focus on this as soon as possible as they appreciated the importance of good communication and sharing of information with residents and relatives.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. The home should develop more effective ways to communicate and share information with residents and relatives.

National Care Standards for Care Homes for Older People Standard 5 Management and staffing arrangements

Grade: 5 - very good

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

Previous requirements

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

Previous recommendations

Recommendation 1

The service should consider how it can achieve a more person recording style within the care plans. The care plan recordings should reflect how someone has enjoyed their day and what they got out of it not just their personal care and dietary intake for the day.

This recommendation was made on 12 June 2015.

Action taken on previous recommendation

We found that some progress had been made with this recommendation however we did also find that a lot of the care plans were clinical in tone and the essential information about a persons' interests and past life were brief. We will continue this recommendation and it is reported on under Quality Theme 1 - Care and Support

Complaints

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

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

Date	Type	Gradings	
16 Jun 2015	Unannounced	Care and support	4 - Good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	4 - Good
2 Oct 2014	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good

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