

Hawkhill House Nursing Home Care Home Service

234 North Deeside Road
Milltimber
AB13 0DQ

Telephone: 01224 735 400

Type of inspection:
Unannounced

Completed on:
29 February 2024

Service provided by:
Caring Homes (TFP) Group Ltd

Service provider number:
SP2015012608

Service no:
CS2015342220

About the service

Hawkhill House Nursing Home is owned and managed by Caring Homes (TFP) Group Ltd. It is registered to provide a care home service for a maximum of 41 older people.

The care home is a traditionally built care home service situated in Milltimber, a residential area on the western periphery of Aberdeen. It is surrounded by well-established gardens. All bedrooms have en-suite facilities. There is a variety of communal sitting and dining areas. Accommodation is provided on two levels.

About the inspection

This was an unannounced inspection which took place on 29 February 2024 between 9:30 and 15:00. 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, information submitted by the service and intelligence gathered since the last inspection.

To inform our evaluations we:

- spoke with 11 people using the service and a relative who was visiting at the time of the inspection.
- nine people and five relatives responded to and submitted a questionnaire we sent prior to the inspection
- spoke with staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- People living in Hawkhill House received excellent, flexible, responsive and person-led care.
- People were supported by a skilled, compassionated and consistent staff team.
- People living in Hawkhill House and their families were firmly at the heart of all decision-making and had control over their lives.
- Although working to the highest standards, the service sought to continually improve. There was a proactive culture of trying to make people's life and experiences better.

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?	5 - Very Good
How good is our leadership?	6 - Excellent

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.

We received mainly very positive feedback about the service and carers. People told us "This is my home now, I am ok", "staff are excellent 10 out of 10" and "home is great, I've no complaints. I'm left to live how I want to live". However, some concerns were raised regarding the attitude of some staff, at times.

Staff were very visible throughout the home, and available to attend to people's requests. People showed pleasure, as they engaged in warm and friendly conversations with staff and others whom they had built quality relationships with. This contributed to the levels of satisfaction expressed about the expertise of the care and support people received. People appeared relaxed and comfortable. There was a welcoming, warm positive ethos in the home.

The service promoted an ethos of being person-led in how all care was delivered, providing people with a meaningful level of determination over their lives. People's values, rights and choices and the opinions of those important to them, were at the heart of decisions made regarding their wellbeing. People were respected and listened to, their rights were being respected and valued. Where concerns were raised regarding the conduct of a staff member, a person was fully supported by empathetic, trusting staff to be an active participant in the investigation undertaken by the professional body. People were considered experts in their own situations, which meant that they were respected and listened to. As a result, they felt empowered to maximise control of their own life.

People were supported by resourceful staff who showed expertise in promoting independence through meaningful activity. People's skills were recognised and developed in all aspects of daily living. Staff were responsive and had enabled and supported people to be involved in an extensive range of tasks or activities that were meaningful to them. People could choose where and how to spend their time. A person who had chosen to spend most of their time in their bedroom told us that they used to play badminton. Staff had rigged up a shuttlecock so they could continue to play. The resident said they "loved" playing with this and was delighted to give a demonstration. The 'come dine with me' initiative allowed people to take charge of their own dining experience, selecting their favourite meal and inviting family or friends to share their achievement. A person said "It's amazing to be able to cook my favourite food again and bring back such happy memories" and a relative expressed how the dish prepared by mum brought back so many memories of Saturday lunch with the family. This allowed people to take an active role in their dining choices, promoting a sense of independence and satisfaction. This in turn, supported people's values, sense of achievement and happiness.

People were extremely positive about the quality and choice of meals which were enjoyed in a pleasant, sociable environment. The breakfast club was well attended. People were able to help themselves to a buffet breakfast. This was one of the many opportunities for people to socially interact and to maintain and develop new friendships with different people. Staff had a broad understanding of nutrition. The advice from visiting professionals, around modified diets had been fully implemented. Staff effectively monitored and recorded people's weights, dietary and fluid intake, where appropriate. A choice of snacks and hot and cold drinks were readily accessible. This supported and encouraged people to remain independent and make their own choices without being reliant on staff.

Medication was managed safely and effectively, ensuring people received their medication as prescribed. Risk assessments and care plans sensitively considered people who may experience stress and distress. Strategies to support people were clear and concisely documented to ensure people's emotional wellbeing was maintained. Consequently, incidents where people had become distressed or anxious were quickly deescalated by compassionate, skilled staff.

People's health and wellbeing was enriched by committed staff who had specialist skills and knowledge. Some staff were dedicated leads or champions and had gained additional qualifications, including dementia, oral care and moving and handling to provide and support improvements in people's wellbeing. There was evidence of improved outcomes for people's balance, mobility, and a reduction in falls as a result. The environment and unhurried atmosphere in the home empowered people to freely move around, further supporting these outcomes.

Staff appreciated people as individuals and had built trusting relationships. This had helped support people who were distressed or anxious. Staff were able to provide well-coordinated, consistent care and support. Care plans were written with respect, valuing the person as an individual and promoting independence. They were informed by comprehensive, relevant risk assessments and completed and reviewed with the person and their representative to ensure they were fully reflective of the person's needs and wishes. Staff we spoke to told us they understood the care plans and we saw care being delivered in accordance with them. There was strong multi-agency collaboration and a trust in the professional judgment made by the staff. Actions and advice were being implemented into the care and support provided. This meant that outcomes regarding people's health were positive. Communication and information sharing amongst staff was outstanding. There was an array of information sharing tools available to staff. Staff were not only informed of people's changing needs, any new admissions but also changes in practice that would have an impact on how people experienced care and support. There was an open culture where staff were encouraged and supported to discuss suggestions on how people's lives could be improved. This ensured that all staff remained well informed and up to date with people's changing needs and care continued to remain consistent.

Overall people living in Hawkhill House received excellent, flexible, responsive and person-led care. Creative approaches were taken to ensuring positive experiences. Staff were not complacent in this approach and demonstrated a commitment to strive for improvement, ensuring the people living in Hawkhill House and their families were firmly at the heart of all decision-making and had control over their lives.

How good is our leadership?

6 - Excellent

This service demonstrated a track record of exceptionally high-quality care. We identified innovative approaches to people's support which led to outstandingly high-quality experiences. We have therefore evaluated this key question as excellent.

There was an established, competent management team in place who were visible and approachable to all. People said about the management team, "excellent: very approachable, listens well and takes action quickly when appropriate." Staff spoke highly of the support given to them by the management team and the impact that this has had on developing a positive culture in the home. People's roles and responsibilities were clearly defined, and the management team and staff were working well together to improve the outcomes for people. The management team were very open, transparent and responsive and have worked remarkably hard to make improvements.

Although working to the highest standards, the service sought to continually improve. There was a proactive culture of trying to make people's life and experiences better. There was a comprehensive quality assurance process and a range of audit tools being used to inform the manager and senior team about how well the service was performing. Regular wide-ranging senior management audits fed directly into the service's improvement plan. The manager was working closely with the organisation's quality assurance team to ensure that the audits used within the service remained focused on people's outcomes and were relevant to Scottish legislation and good practice. It was positive to see a whole home approach to the auditing processes and that staff's views and suggestions on improving people's experience of care were proactively sought and acted upon.

Exceptional work had been undertaken to review the lessons learned from incidents, concerns and complaints. Actions had been taken which had led to improvements in the outcomes for people and how they experience life at Hawkhill House. A detailed service improvement plan was in place. This was based on self-assessment and was supported by specific action plans to drive continuous improvement. Systems and processes were in place to gain people's views, thoughts and ideas for future improvements that could be made to improve people's lives. An example was that, following a discussion with a person and their family as part of the 'resident of the day' process, a practical solution was found to the person continually dropping their TV remote control. This ensured that there was a focus on improving people's experiences and outcomes, no matter how small or insignificant it may seem.

There was an outstanding culture of innovation and sharing this good practice both locally and nationally. An initiative already embedded into the home and shared nationally has been 'Happy Feet'. A project which has successfully increased awareness of falls and has brought about a 50% reduction in falls, while supporting and enabling people to remain independent and mobile. Another initiative has been 'come dine with me', where people can prepare and cook a meal, with the support of staff and invite a relative to share the meal. The outcome for people has been very positive, people have felt great pride in their achievements, relationships have been maintained and people's appetites had increased. The staff were also reviving the 'concert in the park' event, where staff and people share good practice, ideas and their dementia journeys with others in a social, fun setting. These events enabled people to share best practice and develop ideas on how to improve people's quality of life. One of the ideas taken forward was the use of lightboxes for those people with low mood. After a period of 9-10 months a person was sleeping better at night, their appetite had increased, they were more sociable and their friends commented that they were "more talkative and outgoing than they have seen for many years".

People and their relatives were actively encouraged and supported to be involved in the life of the home. The management team and staff had built open, trusting relationships. People's thoughts and views were proactively sought through several ways, including the 'resident of the day'. People felt comfortable raising suggestions or views. The management team were extremely responsive to everyone's views and had taken them into account. The 'you said, we did' board was used to share these suggestions, gathered from people, their families and staff. A person raised that staff sometimes did not respond as quickly as they would have liked. The manager addressed this with staff and the issue of responding promptly to call buzzers was addressed before it became an issue or a concern. This ensured that people felt included and in control of their lives, and that the needs, outcomes and wishes of people living in Hawkhill House remained the primary drivers for change.

There was an established, stable staff group. The manager strived for excellence, and this was evident in the meticulous and consistent quality assurance records and in the regular evaluations of staff practice. A person-led ethos was integral to Hawkhill House and people living there were clearly at the heart of all decision making. Relatives raised some concern about staff's attitude towards each other and people at times.

The manager was taking appropriate action to address this, as this was not the expected culture within the home. Staff were valued and supported well, with structured supervision and training taking place.

People had raised some issues regarding continence management and the correct use of continence garments. All staff had been involved in group discussions regarding best practice. The manager undertook a review of how continence products were being used. As a result, staff were more familiar with people's individual needs and people were using the correct continence garment. We spoke to staff who told us they enjoyed working within the service and with each other. Staff had built relationships with people and their families and were extremely well equipped to meet their needs, wishes and aspirations. For example, the person who liked to spend time in their bedroom, staff knowing the person's history, previous hobbies and what made them happy, used their initiative to create an indoor badminton set for them so they would not become uninterested in life. This reinforced people's values and experiences on a daily basis.

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?	5 - Very Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	6 - Excellent
1.3 People's health and wellbeing benefits from their care and support	6 - Excellent
How good is our leadership?	6 - Excellent
2.2 Quality assurance and improvement is led well	6 - Excellent

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.