

# Kintyre House (Care Home) Care Home Service

Saltburn  
Invergordon  
IV18 0JX

Telephone: 01349 853 248

**Type of inspection:**  
Unannounced

**Completed on:**  
8 November 2023

**Service provided by:**  
Gate Healthcare Limited

**Service provider number:**  
SP2003001705

**Service no:**  
CS2003008482

## About the service

Kintyre House is registered as care home for older people, and is situated in the town of Invergordon. The service provider is Gate Healthcare Limited, which is part of Sanctuary Care Limited .

The care home has a pleasant setting and overlooks the Cromarty Firth. The care home is close to local amenities and facilities. Kintyre House is surrounded by spacious garden areas.

Kintyre House is registered to provide a care service to a maximum of 41 older people. At the time of the inspection there were 39 people living in the home. The home is located over two floors, with communal areas, and the majority of the bedrooms, on the ground floor, but with four bedrooms on the first floor.

## About the inspection

This was an unannounced inspection which took place on 1 and 2 November 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 five people using the service and 15 of their family/friends/representatives;
- spoke with 14 staff and management;
- observed practice and daily life;
- reviewed documents;
- spoke with six visiting professionals.

## Key messages

- Staff were warm, kind and respectful.
- Activities and outings were a strength within the service.
- Management had very good oversight of the home.
- Improvements and developments were being identified and progressed.
- Professionals' feedback about the service was positive.
- Staff were benefitting from good training opportunities.
- Staff worked well as a team, but staffing levels often fluctuated.
- The premises have benefitted from significant investment in the fabric of the building and more work is planned to enhance the quality of the accommodation and facilities.

## 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?	5 - Very Good
How good is our staff team?	4 - Good
How good is our setting?	3 - Adequate
How well is our care and support planned?	5 - Very Good

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 at Kintyre House and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

People experienced care and support with compassion because there were warm and encouraging relationships between staff and people living there. People told us the staff team were kind, respectful and approachable. Most people felt communication was good, and that they were appropriately involved in support planning and decision making. Some people told us that while staff responded to their needs, there could sometimes be a delay at busy times in staff answering their call bell. A number of people highlighted ongoing issues with clothes going missing from the laundry which caused them concern. We observed people to look well cared for, with dress and grooming preferences being supported.

People get the most out of life. People experienced support which promoted their independence and wellbeing. People had choices, which enabled them to make connections, and to form relationships within the care home. They met up with fellow people living in the care home in the communal areas, whilst joining in with some of the activities. Activity and outing provision was of a very good standard in the service, and it was evident that people benefitted from the interaction and inclusion that this offered. Community engagement was prioritised so that people had regular opportunities to visit ordinary places, and community events. The service should, however, find ways of addressing staffing pinch points without diluting the resources deployed to activity provision.

People's health benefits from their care and support. The majority of relatives spoken with were confident in the care and support their loved one experienced, with some describing significant improvements in people's physical and emotional health as a consequence of the care and support provided. However, a relative expressed concern about the consistency of personal care provision, and we have highlighted the necessity of having senior daily oversight to monitor this

The provider had successfully introduced an electronic medication system last year. This gave assurance that people's medication needs were administered, as prescribed and intended. Any improvements needed in medication management were dealt with quickly. This system had also addressed previous inconsistencies in the administration of topical medication. Care staff who supported people's medicine needs regularly undertook a review of their competency. This provided confidence that well trained staff administered medication.

To support people's mental health and general wellbeing, there were good links with external services such as community nurses, community psychiatric nurses, dieticians and dentists. Accessing local GP services could be problematic in the locality, but we observed staff escalating concerns, and preparing for a weekly consultation with the community advanced nurse practitioner. Feedback about oral care suggested this could be strengthened, making sure people's needs were understood, and informed the care provided. However, feedback from health professionals was overall, positive about the quality of support delivered at Kintyre House, and about their responsiveness to noticing changes, making referrals, and following up on advice given. This supported the service to ensure people received the most appropriate support by the right person at the right time to maintain their health and wellbeing.

Some people who were living with dementia could become restless and feel stressed. It was evident that the service sought advice about the best way to support someone in this event. They responded promptly to

reduce people's anxiety, with warmth and encouragement. Most staff had received training in supporting people experiencing stress and distress. Some feedback indicated that the service had supported very good outcomes for people who had initially struggled to transition into the service. We heard about a nurturing approach from the team, with staff working very well to help reduce people's anxiety, and increase their sense of belonging and purpose.

People's mealtimes provided an opportunity to be sociable in a relaxed atmosphere. Food was of a good standard, home cooked, fresh, and hot with a choice available. Home baking and hot drinks were available in between mealtimes. Feedback about the menus was varied, so the service need to continually review these to ensure people's preferences are included. Where someone was not eating, staff offered support and assistance in a warm and encouraging manner. Feedback about nutrition evidenced a good approach to monitoring people's dietary intake, and specialist advice being sought when this was clinically indicated. Staff were seen to be promoting hydration, and a range of different drinks were available and being promoted to support a good fluid intake.

### How good is our leadership?

### 5 - Very Good

We found significant strengths in aspects of the service leadership and how these supported positive outcomes for people, therefore we evaluated this key question as very good. We had a positive response from staff and relatives with the majority telling us they felt supported and listened to by management. Where people had concerns about individual issues, we highlighted these to the service manager to enable appropriate follow up. Managers were visible in the service and had a good understanding of people's needs and any issues they were experiencing. Overall people felt they could raise issues with management, confident that issues would be followed up.

The provider has very good quality assurance processes which were being used effectively at Kintyre House. Audits were carried out periodically by the quality team, and by the regional manager, as well as the detailed audit system used within the home. The outcome of these audits provided very good evidence enabling management to identify opportunities to continually improve, develop, learn and support people well. Feedback obtained through relative or resident meetings, surveys, as well as observations of people's lived experience were also used to shape the improvement plan. The service has responded well to findings from external scrutiny, including previous inspections. For example, the service have met two of the previous areas of improvement, and while another, regarding the environment has been continued, there has been significant progress and investment to evidence progress.

The service have implemented a very good electronic care and support planning tool. This supports their care oversight and governance, and we observed good use being made of these systems to identify concerns, adjust support, or to trigger escalations and referrals. Accidents and incidents were well managed and a lessons learnt approach was used in response to any significant occurrences. The service have been very proactive in keeping other organisations appropriately informed, and there was evidence of clear understanding of their responsibility to engage with, and defer to partner agencies who have statutory roles in decision-making and the oversight of people's care.

There was good evidence of the use of staff support and management processes. Staff experienced regular supervisions and appraisal, as well as periodic opportunities to come together as a team to discuss their roles, and be updated about new developments or changes. Staff training needs and achievements were being regularly reviewed and responded to. There has been a significant input into ensuring that staff were provided with training relevant to their role, and to the needs of those people they supported.

All this supports people to have confidence in the organisation, and their ability to deliver responsive care and support .

## How good is our staff team?

4 - Good

We made an evaluation of good for this key question. This means there were important strengths with some areas for improvement. Primarily these concerned making sure staffing levels consistently meet people's needs.

We saw that staff had developed positive relationships with individuals. They enjoyed their work and were flexible in supporting people and each other at times of staff shortages. Staff described having a strong team who worked well together. Communication between care staff, and senior carers was effective. Staff who were not involved in providing direct care and support to people, also played an important role in the service, getting to know people's needs, and preferences. This meant people benefited from a team that worked well together with the aim of providing support that was consistent and stable.

Significant efforts were ongoing with some success, to recruit staff to outstanding vacancies. This had included recruitment of some overseas staff. There were very good safer recruitment systems in place which included monitoring staff work permits and regulatory registrations. This meant people could be confident staff were being recruited safely. There was little reliance on agency workers, and there seemed to be a good balance of experience and skill within the team, which was being taken account of when planning the rota.

Despite this there was a fluctuation in the staffing levels. While we were confident that very effort was made by the team to resolve these gaps, when this was not possible, there was a consequent impact. Staff told us that when this happened, despite their efforts, it was difficult to provide well paced care, and to give people the time they needed to support quality support, including individual time with people. Some staff also said staffing levels were inconsistent with either too many or not enough carers on duty on different days. An area for improvement has been made about this. **(See area for improvement 1).**

## Areas for improvement

1. To ensure people's care and support needs are met by the right number of people, the service should;
  - a) review staffing cover arrangements with a view to increasing consistency in the levels;
  - b) strengthen staff contingencies so that there are still enough staff on shift when short notice absences arise;
  - c) consider ways of being able to increase the number of staff available, at times when people's support needs and dependency levels are high, for example, if people are experiencing stress and distress, are unwell, or in end of life stages.

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

**'My needs are met by the right number of people' (HSCS 3.15) and**

**'I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any unknown vulnerability or frailty' (HSCS 3.18).**

## How good is our setting?

## 3 - Adequate

We evaluated this key question as adequate. While the strengths had a positive impact, key areas need to improve.

The provider has a comprehensive plan in place that once completed is designed to make some major improvements to the physical environment at Kintyre House. We recognise that the significant investment they have already made in the fabric of the building, with the roof replacement, and the installation of new doors and window, has laid the foundation for the next phase of improvement. It is anticipated that these next steps will continue with the programme of decoration, improved facilities and continued essential replacement work to the fabric of the building.

The care home premises were seen to be clean and fresh. Soft furnishings were of a good standard, and items were being replaced when this was required. Communal areas were generally pleasant spaces. Some were homely and comfortable, but we thought that the main lounge could be enhanced and made more inviting.

People had been supported to personalise their bedrooms so that they reflected their preferences and interests. Where bedrooms had been upgraded, these offered good quality accommodation.

The home has nice garden areas around the home, and there is a pleasant summer house in the garden that can be used by relatives and residents.

The provider had a very good system in place to ensure that essential safety checks and maintenance takes place as and when this is required, and that records are maintained so that this can be overseen.

However, as at the last inspection, it is acknowledged that despite increased strengths, the premises remain in need of refurbishment and decoration. Some areas, for example, the dining room and conservatory area appear tired, and are in need of some repairs. Some of the facilities, for example, some en-suite showers, are no longer suitable for people's needs. There is no assisted bath available for use in the home, and in some areas floorcovering requires replacement. As part of regular premises checks, room temperatures should be regularly monitored to ensure that in cold weather all areas remain comfortable.

**(See previous area of improvement 1).**

## Areas for improvement

1. To ensure that people can benefit from high quality facilities the provider should:
  - a) progress, and complete, all the works identified in the current environmental improvement plan;
  - b) also continue to evaluate the premises, and ensure that their findings, influence ongoing repairs and refurbishment.

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

**'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment.'** (HSCS 5.24).

## How well is our care and support planned?

## 5 - Very Good

We found significant strengths in aspects of the care and support planning and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

A new electronic care planning system had recently been introduced. Generally, these held very good information and guidance to support people well.

There were a few areas within some plans which would benefit from more information. There was a bit of variation between plans with some having sections more fully completed than others. However, all the plans reviewed would enable a worker to deliver safe support. Plans were person centred, up to date, and all had related risk assessments, and with necessary records and charts being regularly updated. The system enabled staff to be able to continually check people's needs, preferences and whether any changes had occurred. The system also enabled them to monitor what support had been delivered, so that care remained appropriate to people's needs.

People were having regular opportunities to participate in formal care reviews. Detailed records were being maintained of discussions and it was evident that these were a supportive opportunity for people to reflect on the service they were receiving, and whether their needs were being met.

## 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 people's health needs are consistently met the provider should ensure that topical medications are administered as prescribed.

To achieve this the provider should ensure that:

- a) the correct preparation is always administered to people at the right time.
- b) accurate records are maintained of what has been administered.

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

**'Any treatment or intervention that I experience is safe and effective.'** (HSCS 1.24)

**This area for improvement was made on 15 April 2022.**

#### Action taken since then

This area of improvement has been met. The service had successfully implemented an electronic medication administration system which has addressed practice issues about topical medication.



### Previous area for improvement 2

To ensure that people can benefit from high quality facilities the provider should:

- a) progress, and complete, all the works identified in the current environmental improvement plan.
- b) also continue to evaluate the premises, and ensure that their findings, influence ongoing repairs and refurbishment.

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

'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment.' (HSCS 5.24)

This area for improvement was made on 15 April 2022.

#### Action taken since then

This area of improvement remains relevant and will be continued in this report.

See key question 3 for further details.

### Previous area for improvement 3

To ensure that personal plans support good outcomes for people the service should;

- a) ensure that each person has a plan that is reflective of them as an individual.
- b) ensure that plans are in place for all areas relevant to the person, including up to date visiting plans.
- c) ensure that plans include guidance for staff as to how sensitively support stress and distress or other behaviours.
- d) ensure that evaluations are regularly recorded.
- e) ensure that reviews are used to reflect on people's outcomes, and action points recorded in a way that will support follow up.

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 15 April 2022.

#### Action taken since then

This area of improvement has been met. The provider has implemented an electronic care planning system and a significant amount of work has been carried out to improve the standard and consistency of support documentation.

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://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	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good
How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good
How good is our setting?	3 - Adequate
4.1 People experience high quality facilities	3 - Adequate
How well is our care and support planned?	5 - Very Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	5 - Very Good

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Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

0345 600 9527

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