

# Birdston Care Home Service

Birdston Road  
Milton of Campsie  
Glasgow  
G66 8BY

Telephone: 01417 763 355

**Type of inspection:**  
Unannounced

**Completed on:**  
9 December 2024

**Service provided by:**  
Pacific Care Limited

**Service provider number:**  
SP2003002346

**Service no:**  
CS2003010430

## About the service

Birdston is a care home for older people situated within Milton of Campsie, East Dunbartonshire. It is close to local transport links, shops and community services. The service provides nursing and residential care for up to 60 people including respite and there were 51 people living at the service at the time of this inspection.

Accommodation is on one level and provides single and double bedrooms with en-suite toilet facilities. There are a number of communal facilities across the building which includes lounges and dining areas. There is also access to a large, enclosed, well-maintained garden which provides outdoor space for people.

## About the inspection

This was an unannounced inspection which took place on 4 to 6 December between 06:30 and 17:30. The inspection was carried out by two inspectors from the Care Inspectorate. An inspection volunteer was involved in the inspection. An inspection volunteer is a member of the public who volunteers to work alongside the inspectors. Inspection volunteers have a unique experience of either being a service user themselves or being a carer for someone who has used services. The inspection volunteer role is to speak with people using the service and their families and gather their views.

To prepare for the inspection we reviewed information about the service. This included registration information, information submitted by the service and intelligence gathered. In making our evaluations of the service we:

- gathered feedback from pre-inspection questionnaires (five responses were received from people using the service, 14 responses were received from relatives, 15 responses were received from staff and four responses were received from visiting professionals)
- spoke with seven people using the service and five of their relatives (two relatives were contacted by email).
- spoke with 11 staff and management
- observed practice and daily life
- reviewed documents
- spoke with two visiting professionals and received email feedback from one visiting professional.

**Key messages**

People appeared happy with their care and support.

Staff felt supported and worked well together.

The service had recently implemented digital care planning systems which had improved the quality of records they kept about people's care and support needs. This had also improved management's oversight of the service.

The service had made progress with providing meaningful group and individual activities. However, there were still improvements needed to ensure that people were enabled to maintain social connections.

The service worked well with external professionals.

The staff team were up-to-date with their training. This included being knowledgeable on how to complete stress and distress care plans.

**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 staff team?	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 and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

People received support with warmth and compassion. People told us; "I like the staff", "I'm well looked after" and "I like it in the home". Relatives told us, "The staff are great", "Great place. My relative has everything they need and I can visit any time" and "The service informs me of any updates regarding my relative's care".

The service had undergone digital transformation which meant that most records about people were no longer in paper format. All records the service created about people's care and support were now created digitally at the time when care and support was provided. Staff used mobile handheld recording devices and were inputting data as and when required. The management team now had better oversight of all aspects of care and support they were providing which meant that people's health and wellbeing needs were being met as and when they should be.

People benefitted from comprehensive health assessments based on good practice and evidence-based guidance. The service worked closely with external health professionals which ensured that people's care and support was right for them. This was evident from people's digital care plans which contained timestamped records of input and guidance from external professional such as community practice nurses, dieticians, dentists and general practitioners. There was also a robust medication management system which also adhered to good practice guidance. People's care and support was regularly reviewed and the service worked closely with other professionals to ensure it met their identified health and wellbeing needs.

The service had made improvements to their provision of group and individual activities. However, a few improvements were still needed to ensure that people had access to meaningful activities inside and outside the service. With this in mind, we have not met an outstanding area for improvement from previous inspection. This was discussed with management who assured us they would continue to work on making the necessary improvements (**see outstanding areas for improvement 1**).

There was a system in place to ensure regular access to drinks, meals and snacks, especially for people who needed support to eat and drink. The service closely monitored and reviewed people who were at risk of not drinking or eating enough. The service had set up alerts on people's digital care plan which meant that staff knew exactly when to offer drinks, meals and snacks as records were now live.

People enjoyed their meals in an unhurried, relaxed atmosphere. Staff were very attentive to people's needs whilst dining and had the required support. Although there were menus on the table, people were also given visual options of meals on offer. Some people may have been unable to read the table menu's. This was passed on to the management team and they agreed they would discuss menu preferences with people they support.

Some people found elements of their care difficult to accept such as assistance with personal care. Staff were confident and skilled in assessing risks and sharing information to protect people from harm. This was evident through daily flash meetings and digital records that the service had created. This included information about how to offer support to people who experienced stress and distress (**see outstanding areas for improvement 2**).

**How good is our staff team?****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.

People living in the care home and staff benefitted from a warm atmosphere because there were good working relationships. When asked about staff, people and their relatives told us, "Yeah, staff have the right skills and knowledge", 'I can speak to staff if I have a worry', 'all staff very helpful including housekeeping', 'carers are excellent' and 'staff encourage my relative to participate in activities'.

Staff told us they enjoyed their jobs and felt supported at work. They spoke positively about what the service did well and acknowledged there was still room for improvement in areas such as communication and additional staffing during busier periods.

The service had robust methods to assess staffing. These were informed by their latest guidance, data and professional judgement. This was evident through their digital rota system, quality assurance audits, records of staff handovers, flash meetings and reviews. The service were continually reviewing and monitoring staffing levels to ensure it continued to meet people's needs.

There was effective communication between staff, with opportunities for discussion about their work and how best to improve outcomes for people. Training statistics within the service were very good. There was a learning culture embedded within the service, which included reflective practice. Staff received regular supervision and were encouraged to identify their own learning needs to ensure their practice was up-to-date. This meant that people were being supported by staff who were competent, skilled and sensitive to their needs and wishes because a range of learning and support measures were in place.

## 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 improve people's health and wellbeing, the provider should implement an activity schedule that promotes and encourages meaningful activities on a group and individual basis.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I can choose to have an active life and participate in a range of recreational, social, physical and learning activities every day, both indoors and outdoors' (HSCS 1.25).

**This area for improvement was made on 8 December 2023.**

#### Action taken since then

The service had made improvements towards ensuring that people were enabled to get the most out of life. Activities were happening on an individual and group basis and there was a varied range of indoor activities on offer such as daily exercises, crafts such as knitting and quizzes. The service had gathered feedback from people earlier in the year and were in the process of embedding a digital system to report on activities. Some activities needed to be improved upon to ensure people were being encouraged to move regularly and remain as active as they could be, including using outdoor space where possible. Promotion of activities within the home could also be further improved upon as the activity timetable was available in one format only which may have been difficult for people with poor eyesight to read. Outdoor group or individual activities did not appear to happen often. Some people had opportunities to go out with their families whereas others had not which meant there were people who were not being enabled to maintain social connections out-with their home.

**This area for improvement has not been met.**

#### Previous area for improvement 2

People who have behaviour assessment plans should be supported by staff who are knowledgeable and trained in how to complete these plans. This will help to ensure that any interventions are meaningful and improve people's quality of life.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: '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' (HSCS 3.14); and 'I experience high quality care and support because people have the necessary information and resources' (HSCS 4.17).

**This area for improvement was made on 14 November 2022.**

### Action taken since then

Improvements had been made to care plans that contained information about people who experienced stress and distress. Where people's behaviour may be seen as challenging to others, there were clear protocols written by staff which provided sensitive support and guidance to reduce the impact. However, records of stress and distress events needed to be more detailed regarding support strategies used and how effective these were. This would further support the reviewing and monitoring of people who experienced stress and distress to ensure their care and support needs continued to be met. This was discussed with the management team who had devised a plan to improve these records.

**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](http://www.careinspectorate.com).

## Detailed evaluations

How well do we support people's wellbeing?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our staff team?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good



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