Eildon House Nursing Home

Care Home Service Adults

23 Eildon Street
Edinburgh
EH3 5JU
Telephone: 0131 557 1481

Inspected by: Alison Ballantyne
Type of inspection: Unannounced
Inspection completed on: 27 February 2013
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Service provided by:
Anthony McGuire

Service provider number:
SP2003002456

Care service number:
CS2003010633

Contact details for the inspector who inspected this service:
Alison Ballantyne
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Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

We gave the service these grades

<table>
<thead>
<tr>
<th>Area</th>
<th>Grade</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>Quality of Care and Support</td>
<td>5</td>
<td>Very Good</td>
</tr>
<tr>
<td>Quality of Environment</td>
<td>4</td>
<td>Good</td>
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<tr>
<td>Quality of Staffing</td>
<td>5</td>
<td>Very Good</td>
</tr>
<tr>
<td>Quality of Management and Leadership</td>
<td>5</td>
<td>Very Good</td>
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What the service does well

Eildon House continues to provide very good quality of care and support to residents. The environment is comfortable and well managed. We saw that staff were responsive to individual residents’ needs, and were kind and respectful. Residents we spent time with were contented and told us they felt safe and well cared for. The atmosphere was relaxed and cheerful and the home was busy with visitors during our visit. They told us they were confident in the home and the manager and staff, and appreciated the care their relatives received.

What the service could do better

The manager identified that she wished to continue to develop community links to support residents to participate in local events and community activities.

She identified that staff development is an ongoing challenge and we saw that this ethos of continual improvement was essential to the quality of care delivered to residents.

We agreed with the observation made at the last inspection that the manager should continue to oversee the development of personal care and support plans. At this visit, we saw that some plans have been reviewed and we will review progress at our next inspection.
The plans for redecoration and improvements to the home environment (including the reduction of shared rooms) should continue.

**What the service has done since the last inspection**

We saw that development to care plans is taking place and those which have been reviewed were increasingly person-centred. Developments planned included staff training to improve communication skills. This will enable staff to use Talking Mats with residents who experience communication difficulties. We saw that staff have undertaken further Scottish Vocational Qualifications to develop their skills. Work to upgrade the premises to provide more single rooms had continued and general upgrading of bathroom and shower facilities is ongoing.

**Conclusion**

We concluded that this is a welcoming and comfortable nursing home. Both residents and relatives/carers we met were very satisfied with the quality of the service provided. We saw that the managers ensure good training opportunities for staff and provide clear leadership. The staff we met were knowledgeable and responsive to the needs of residents.

Overall, we found that Eildon House is a service with clear leadership that maintains high standards of care.

**Who did this inspection**

Alison Ballantyne
1 About the service we inspected

Eildon House is a care home facility, registered to provide 24 hour care and support for up to 26 older people. This includes nursing care. An application was submitted last year to the Care Inspectorate to reduce the home capacity and reduce the number of shared rooms in the home. On this inspection we saw that progress had been made with this plan and that the home has reduced its actual capacity to 24 residents in order for residents to enjoy single rooms.

The home is situated in a quiet residential street which overlooks a park and has views across the city of Edinburgh. The home is close to local amenities, including the Botanic Gardens.

The home is a large three storey property with stair and lift access to the upper floors. There are both single and shared rooms, some of which have en-suite or wash hand basins. There are bathing or showering facilities on each floor.

There are large bright sitting and dining rooms on each floor and a separate kitchen and laundry.

The information brochure states that the home aims to “provide the highest standard of nursing care 24 hours each day in a safe and welcoming environment.”

Before 1 April 2011 this service was registered with the Care Commission. On this date the new scrutiny body, Social Care and Social Work Improvement Scotland (SCSWIS) took over the work of the Care Commission, including the registration of care services. This means that from 1 April 2011 this service continued its registration under the new body, SCSWIS, now the Care Inspectorate.

Based on the findings of this inspection this service has been awarded the following grades:

Quality of Care and Support - Grade 5 - Very Good
Quality of Environment - Grade 4 - Good
Quality of Staffing - Grade 5 - Very Good
Quality of Management and Leadership - Grade 5 - Very Good

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website
www.careinspectorate.com or by calling us on 0845 600 9527 or visiting one of our offices.
2 How we inspected this service

The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What we did during the inspection

We wrote this report following an unannounced inspection by Inspector, Alison Ballantyne. The inspection took place on 27 February 2013. During the inspection, we spent time with residents, met staff on duty and reviewed progress with the deputy manager and manager.

We met with residents and carers throughout the home, and observed the residents’ dining experience at lunchtime. During the afternoon, we chatted with residents and visitors to obtain their views. As some residents were unable to talk to us easily, we observed whether they appeared relaxed and well cared for. During the late afternoon, we gave feedback to the manager.

We gathered evidence from various sources including the relevant sections of records and other documents including:

* minutes of staff meetings
* training records
* news letters
* accident/incident records
* support plans, risk assessments and daily records
* employers’ liability insurance certificate
* a sample of staff files
* a sample of resident files
* a sample of medication administration records
* activities plans and records
* discussion with residents and visitors throughout the home
* discussion with the manager, deputy manager and a range of the staff on duty during the inspection
* observation of staff practice
* contents of one (of 20 sent) residents pre inspection questionnaires
* contents of nine (of 20 sent) relative/carer pre inspection questionnaires.
Grading the service against quality themes and statements

We inspect and grade elements of care that we call ‘quality themes’. For example, one of the quality themes we might look at is ‘Quality of care and support’. Under each quality theme are ‘quality statements’ which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

Inspection Focus Areas (IFAs)

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

Fire safety issues

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services’ responsibilities for fire safety at www.firelawscotland.org
The annual return
Every year all care services must complete an ‘annual return’ form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

Annual Return Received: Yes - Electronic

Comments on Self Assessment
Every year all care services must complete a ‘self assessment’ form telling us how their service is performing. We check to make sure this assessment is accurate.

We received a fully completed self-assessment document from the manager. This provided detailed information about the service. The manager identified strengths in the service, of which there are many. A number of areas for development were identified and could be detailed more fully in future self-assessments.

Taking the views of people using the care service into account
Comments from residents are contained in the body of the report. Residents were unanimous in their praise for the staff and manager.

Taking carers' views into account
Carers were positive and complimentary about the service.
3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

Quality Theme 1: Quality of Care and Support
Grade awarded for this theme: 5 - Very Good

Statement 1
We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service strengths
Based on the evidence found during this inspection we graded the service as Very Good for this statement. We decided this after speaking with residents and staff and looking at resident support plans and a variety of records.

We sent out 20 care service questionnaires for distribution to residents, however only one was returned. A further nine out of 20 of the care service questionnaires sent out to carers and relatives were returned to us. All of those returned were highly satisfied with the care and support provided at Eildon House. Overall, the comments we heard from residents and their relatives/visitors during the inspection were consistently complimentary.

Residents told us that the quality of their care was “terrific, I am very settled”, “really good” and that “I like it here, they are very kind” Relatives and carers were equally content and told us that they felt it was an excellent service with good staff and a committed manager.

We saw that the manager routinely involved residents and carers in developing the service. For example, we observed that the manager promoted the use of satisfaction surveys but that both residents and carers preferred a more individualised approach to consultation.

Care staff help residents to keep in touch with families who are not close by with regular e-mail updates or by helping them to have Skype conversations.
A colourful regular newsletter provides information to all involved in the life of the service, residents and staff, and friends alike. We found this to be interesting and informative. It contained information about social events, training, staff comings and goings.

Residents also told us how much they enjoyed the rescue dogs that regularly visit the home with the manager. We heard residents ask for them by name and they told us they enjoyed the comfort provided by these friendly pets.

Although the home has a complaints procedure, we noted that no complaints had been received in the service since our last inspection.

**Areas for improvement**
At this inspection, we discussed the value of continuing to try to develop links with the community.

The service has developed a participation strategy, and this should be evaluated on an annual basis to help to inform plans for training and development. We will review progress with this at our next visit.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 0
Statement 3
We ensure that service users’ health and wellbeing needs are met.

Service strengths
Based on the evidence found during this inspection we graded the service as Very Good for this statement. We decided this after speaking with and observing residents and staff and looking at records and support plans. Overall, we found that the service works hard to promote good quality of life and well-being for residents.

We observed that residents were well groomed and well cared for in appearance. During the busy afternoon, residents and visitors mingled and we chatted with people to ask their views. We found that residents felt confident in their care. They told us "It’s very good, I like it here" and "they really look after me". Another said "My care is excellent, I am very happy here and I can talk to any of the staff, especially the manager, if I am concerned about anything."

The questionnaires we received contained very supportive comments: "The care my mum receives is second to none...the improvement in her is wonderful to see" and "my mind is completely at rest with the staff and the care my mother now receives at Eildon House. They are so friendly and caring."

Additional healthcare support comes from local GP practices and district nurses who attend residents when required. If necessary, palliative care nurses support end of life care. Consultation takes place with residents and their advocates to ensure that end of life care respects people’s personal wishes. We saw that advanced life directives (a plan about what residents wish if they become seriously ill and are unlikely to recover) are included in care plans if people wish. We saw a folder containing recent cards and letters of thanks from relatives following a number of deaths in the home last year.

Residents benefit from support plans that identify risk factors and care needs. For example, if residents have weight loss or nutritional needs. When we observed lunch service, the atmosphere was calm; staff supported those in need of assistance to ensure residents ate well. We saw that staff ensured residents’ choice of meals at the table by offering a choice of plates.

Overall, we saw that health and well being was well understood and promoted by the care provided to residents, despite the fact that many residents had complex health needs.
Areas for improvement
The manager identified the need to maintain training and development for staff in relation to the identified needs of residents. We agreed with this and noted that training on Dementia care is due to commence shortly. We will review progress with this at our next inspection visit.

Grade awarded for this statement: 5 - Very Good
Number of requirements: 0
Number of recommendations: 0
Quality Theme 2: Quality of Environment
Grade awarded for this theme: 4 - Good

Statement 1
We ensure that service users and carers participate in assessing and improving the quality of the environment within the service.

Service strengths
The inspection findings recorded in Quality Theme 1 Statement 1 also apply to this statement.

Based on the evidence found during this inspection we graded the service as Very Good for this statement. We decided this after speaking with and observing residents and staff and looking at records and support plans. Overall, we found that the service works hard to involve residents and relatives/carers in the life of the home.

On a daily basis, we saw that staff helped residents to participate. The manager consulted residents about décor and where residents were unable to express views easily, relatives helped to provide information. Residents are encouraged to bring personal items of furniture to help to personalise their rooms and to help them feel at home.

We also saw that a small pantry is available and allows visitors to prepare snacks and refreshments whenever wished and this enhances the homeliness of the environment.

Areas for improvement
We saw that a new ensuite-wet room shower has been fitted in one of the shared bedrooms. The manager told us that she hopes to continue with upgrading facilities and plans to provide another wet room this year. We will review progress at our next visit.

Grade awarded for this statement: 5 - Very Good
Number of requirements: 0
Number of recommendations: 0
**Statement 3**
The environment allows service users to have as positive a quality of life as possible.

**Service strengths**
Based on the evidence found during this inspection we graded the service as Good for this statement. We decided this after speaking with and observing residents, staff and carers, and looking at records and support plans.

Residents’ accommodation is on three floors. The middle floor accommodates residents who are mentally frail or have dementia and staff numbers reflect the level of care these residents require. We saw that residents are kept updated with daily information. An orientation board in the lounge reminds residents of the day and date, the names of staff on duty, and any social events planned. We also saw that many residents throughout the home had a daily newspaper delivered.

Residents told us they liked their rooms “it’s lovely, it’s bright and sunny” and “I like my room, it’s homely and personal. All my things are here.”

From the downstairs lounge, residents can enjoy a bright open view into the gardens opposite and the view beyond to Edinburgh Castle. Benches situated in the little front garden provide a place for residents to sit in good weather. The activities coordinator told us that residents are involved in choosing activities. We saw that she spent one to one time with residents who did not have visitors during the afternoon, and who could not easily participate in group activities. The manager also told us that she strives to ensure residents actively participate in daily activities, like setting the tables and folding napkins.

The residents and visitors who spoke to us agreed that home life was comfortable and they felt safe and secure. Comments included “I can go where I want”, “I like it here - it’s quiet”.

**Areas for improvement**
We observed that aspects of housekeeping could be improved. For example, during this visit, we observed that some individual tables were in need of cleaning and we discussed this with staff. We also noted that not all beds had valance sheets and the bare bed bases spoiled the appearance of those bedrooms.

**Grade awarded for this statement:** 4 - Good
**Number of requirements:** 0
**Number of recommendations:** 0
Quality Theme 3: Quality of Staffing
Grade awarded for this theme:  5 - Very Good

Statement 1
We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service Strengths
The inspection findings recorded in Quality Theme 1 Statement 1 also apply to this statement.

Based on the evidence found during this inspection we graded the service as Very Good for this statement. We decided this after speaking with and observing residents, staff and carers, and looking at records, support plans and the questionnaires we received from residents and carers.

Comments from residents confirmed that relationships with staff are very good. The deputy manager told us that residents contribute to recruitment by meeting applicants when they attend for interview. The manager told us that surveys of residents’ views were not popular but that residents preferred one to one consultation. Residents we spoke with told us that they felt that their views were considered. They confirmed that the manager spent a lot of extra time in the home and was readily available to the residents. She confirmed this and explained that she often worked with staff and residents rather than being in the office all the time.

Areas for improvement
Care staff continue to develop relationships with carers and relatives by keeping regular weekly contact with them. In the self-assessment the manager identified her wish to promote feedback from service users. We will review progress with this at the next inspection.

Grade awarded for this statement:  5 - Very Good
Number of requirements:  0
Number of recommendations:  0
Statement 3
We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Service strengths
Based on the evidence found during this inspection we graded the service as Very Good for this statement. We decided this after speaking with and observing residents, staff and carers, and looking at records and support plans.

The enthusiasm of the staff we met was impressive. They told us how much they enjoyed working in Eildon House, and that they felt the manager was a good employer, and that training and support was plentiful. We saw that many staff had achieved Scottish Vocational Qualifications (SVQ’s) in preparation for the need to register with the Scottish Social Services Council (SSSC) in 2014.

We concluded that the learning and development ethos embedded into the practice of the home greatly benefits residents.

Areas for improvement
The manager identified in the self-assessment submitted that dementia training was required for all staff and we observed that this is booked with Tribal training. We will review progress with this at the next inspection.

Grade awarded for this statement: 5 - Very Good
Number of requirements: 0
Number of recommendations: 0
Quality Theme 4: Quality of Management and Leadership
Grade awarded for this theme: 5 - Very Good

Statement 1
We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Service strengths
The inspection findings recorded in Quality Theme 1 Statement 1 also apply to this statement.

Based on the evidence found during this inspection we graded the service as Very Good for this statement. We decided this after speaking with and observing residents, staff and carers, and looking at training records and support plans.

We saw that relationships between the residents, staff and managers were good. Similarly, staff told us they were confident in the good management of the service. The visitors we spoke to told us they felt confident in the in senior staff, especially the manager. Residents told us they were confident and that they could speak freely about any concerns they might have.

We saw that the manager was committed to continuing with her own professional development and this sets a good example to all staff in the home. We concluded that residents benefit greatly from the personal commitment and strong leadership provided by the manager.

Areas for improvement
In the submitted self-assessment, the manager identified that she wished to continue to develop ways of involving relatives in the care service. We acknowledged this is an ongoing challenge, but we were confident that the service was proactive and innovative in addressing this issue.

Grade awarded for this statement: 5 - Very Good
Number of requirements: 0
Number of recommendations: 0
Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide.

**Service strengths**

Based on the evidence found during this inspection we graded the service as Very Good for this statement. We decided this after speaking with and observing residents, staff and carers, and looking at audit reports and supporting evidence.

We found that there was a commitment to maintaining high standards of care that responded to residents’ changing needs. For example, we saw that four staff had undertaken specialist training in managing syringe drivers (used to administer pain relief) in response to the needs of a very ill resident.

Resident reviews continue to provide an opportunity to make sure that residents’ views are heard. We saw that the feedback from social workers who had undertaken client reviews was supportive and that their clients were satisfied with their placements. The carers and families we spoke with told us they were confident that their relatives received good care in a well-organised professional service. Residents are encouraged to use the suggestions box, but one resident told us she would just as happily have a chat with the staff about anything she thought important.

**Areas for improvement**

The managers should continue to include views of residents, relatives and staff in making decisions about the development of the service. We will review this at the next inspection.

We found that the manager had submitted a detailed self-assessment. However, it may be helpful to collate and interpret results from surveys, resident consultation and staff meetings. Using these findings can identify strengths, areas for development and help to evaluate training needs.

We will review progress made with this at the next inspection.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 0
4 Other information

Complaints
No complaints have been upheld, or partially upheld, since the last inspection.

Enforcements
We have taken no enforcement action against this care service since the last inspection.

Additional Information

Action Plan
Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in SCWIS re-grading the Quality Statement within the Management and Leadership Theme as unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).
## 5 Summary of grades

### Quality of Care and Support - 5 - Very Good

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<th>Grading</th>
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<tbody>
<tr>
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### Quality of Environment - 4 - Good

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### Quality of Staffing - 5 - Very Good

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### Quality of Management and Leadership - 5 - Very Good

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## 6 Inspection and grading history

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<tr>
<th>Date</th>
<th>Type</th>
<th>Gradings</th>
</tr>
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<tbody>
<tr>
<td>13 Mar 2012</td>
<td>Unannounced</td>
<td>Care and support: 5 - Very Good, Environment: Not Assessed, Staffing: 5 - Very Good, Management and Leadership: Not Assessed</td>
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<td>9 Dec 2010</td>
<td>Unannounced</td>
<td>Care and support: 4 - Good, Environment: Not Assessed, Staffing: Not Assessed, Management and Leadership: Not Assessed</td>
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<td>Announced</td>
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<td>Date</td>
<td>Type</td>
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<td>22 Jul 2008</td>
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All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.
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