

## Camilla House. Care Home Service

Main Street  
Auchtertool  
Kirkcaldy  
KY2 5XW

Telephone: 01592 780590

Type of inspection: Unannounced  
Inspection completed on: 5 July 2017

**Service provided by:**  
Kingdom Homes Ltd

**Service provider number:**  
SP2003001615

**Care service number:**  
CS2005112020

## About the service

Camilla House is a privately run nursing home and the provider is Kingdom Homes Ltd. The property is of two storey construction and is registered to accommodate a maximum of 42 older people with physical and/or mental frailty, 35 of whom may be living with dementia. The home is situated in the village of Auchtertool which is near Kirkcaldy in Fife.

All bedrooms have en-suite bathing facilities. Two bedrooms are of sufficient size to be offered to couples or people who may choose to share. There are a variety of sitting and dining rooms on the first floor. The upstairs bedrooms can be accessed by two internal passenger lifts.

The home benefits from a well kept, landscaped and enclosed garden area to the rear of the property with garden seating available for residents' use. There are car parking facilities to the side of the home.

## What people told us

Prior to the inspection we sent out Care Standard Questionnaires (CSQ's) to people who use the service, their friends and relatives and staff who work in the home.

Two CSQ's were returned from people who use the service and they were very happy with the service received.

Seven questionnaires were returned from relatives and they were also very happy with the service. Comments included:

"my relatives are well thought of and cared for - staff and other residents have almost become like a second family."

"really pleased with all aspects of care at Camilla."

"my relative has excellent care, always clean and comfortable, any ailments are quickly spotted and treated. I am also well looked after when visiting."

"I am very please with the care my relative received. The staff are all very friendly and caring, nothing is too much bother."

"the staff are very caring and understanding. They look after the relatives who visit as well as their residents."

"I am very happy with the care my mum receives in Camilla House."

We were supported during the inspection by an inspection volunteer. An inspection volunteer is a member of the public who volunteers to work alongside the care inspectorate inspector during the inspection process. They have a unique experience of either being a service user themselves or being a carer for someone who uses or has used services. Their role is to speak with people using the service, their family, carers, friends or representatives and gather their views. In addition, the inspection volunteer makes their own observations from their perspective as a recipient of care and these may be recorded.

We also received three completed questionnaires from staff. Not all agreed that they had regular opportunity to meet up with other staff to talk about their day to day work or had regular individual supervision with their manager. All staff who responded said that they had regular training to help them with their job.

During this inspection we spoke with ten residents. Their comments included:

"I like it here, staff are all really nice and the food is nice."

"I am happy here but I miss my husband."

"Food is nice, sometimes just sandwiches but always a choice."

"staff are nice and well trained although so busy sometimes they don't have time to chat. No complaints."

"staff are good, but can only do what they can."

We spoke with five relatives/friends of residents and their comments included:

"I am very happy with the care here, they look after my friend well."

"I am happy with my relative being here. The room is very nice and staff are really friendly and well trained. Sometimes there is a smell in the home."

"there are lots of activities, singers, pony's, cats (pet therapy) and singers from the church."

"My husband is always well cared for and his room is spotless. His personal grooming is done just they way he likes it."

"I get worried about my wife's care when the lift isn't working."

## Self assessment

A self-assessment was not required to be completed at this inspection; however the service spoke about their goals and aspirations for the forthcoming year. The management team had identified some of the strengths and areas that they wanted to develop and will be developing an improvement plan over the next few months.

## From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of environment	not assessed
Quality of staffing	5 - Very Good
Quality of management and leadership	not assessed

## What the service does well

We assessed the service to be performing to a good standard in relation to the care and support offered to people using the service and a very good standard in relation to staffing.

The home was welcoming with a range of homely touches. On the ground floor, there was ample space for people to sit together and socialise. There were two well laid out dining rooms and residents were given the choice of where to eat their meals. We observed some of the residents moving around the home independently. The home had good signage to help residents find their way around including signs for dining room and toilet facilities. Staff only rooms such as laundry, sluice rooms were mostly locked to ensure the safety of residents.

The home had a large, well kept garden with space and facilities for residents to spend time outside. Residents had recently been involved in the development of a herb garden and growing strawberries.

Both people living in the home and their relatives told us that they were happy with the service provided including personal care, their personal space, the environment and the quality of meals. Staff we spoke to knew the residents well and we were satisfied that they provided support based on individual's care plans.

A new care planning format was being introduced. This provided person centred information to guide staff to meet the needs of people living in the home.

We examined medication systems. The service had recently fitted individual medication cupboards in bedrooms. This was good practice and we were satisfied that people living the home were receiving medicines as prescribed.

Appropriate assessment tools were used to manage weight and nutritional needs and staff had recently been provided with refresher training regarding the use of these tools.

We observed residents over meal times. This was a positive experience for residents and they were supported by staff at a suitable pace to enjoy each course.

There was a range of activities available for people including gardening, art and craft and chair exercises. One to one support was provided for residents who did not enjoy group activities. This included the use of "playlist for life" which was being developed for six people.

Staff had access to a range of training, including mandatory training, training to develop their skills and encourage career advancement. Some staff had a lead role within the team for areas such as dementia care. The management team agreed to consider further development of this to support leadership skills and professional development.

The service had developed a plan for development of the home and surveys were regularly sent out to residents, relatives and staff to find out their views about the service. The management team agreed that future consultation would be used to inform the service improvement plan for the home. We will look at progress with this plan at the next inspection.

## What the service could do better

The service had fitted door gates to a number of bedrooms to provide security and privacy for residents. The service must review these arrangements to ensure care and risk management arrangements meet the personal care and safety needs of each resident. The management team agreed to review their approach taking into account the Mental Welfare Commission guidance, Rights Risks and limits to Freedom (see requirement 1).

Whilst we could see that the environment was well used by the residents, we asked the management team to use the environmental assessment tool, "is your care home dementia friendly?," produced by the Kings Fund. This would allow further improvements to be identified to support people living with dementia.

Other areas for improvement we found regarding the environment included:

- sitting rooms to include more comfortable chairs including two-seater couches.
- all staff only areas to be kept locked
- sluice areas to be cleaned and uncluttered
- the bathroom on the ground floor to be uncluttered so it could be used by residents if they wished.

One of the lifts to the first floor had recently been out of order. The management team agreed to update their contingency plan for lift breakdown to take account of the views of residents and relatives who had bedrooms on the first floor.

Although we saw evidence that staff supervision had recently taken place, some staff told us that they did not get regular opportunities to meet with their line manager or their colleagues. The management team should ensure that supervision and team meetings were held regularly. This would provide the opportunity for staff to meet with their line manager on a formal and regular basis to support individual professional development as well as team discussion about service developments.

## Requirements

**Number of requirements:** 1

1. The service must review arrangement for security of bedrooms to ensure care and risk management arrangement meet the personal care and safety needs of each resident . The management team to review their approach taking into account the Mental Welfare Commission guidance, Rights Risks and limits to Freedom (see requirement 1).

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations, 2011, Scottish Statutory Instrument 2011/210 Regulation 4 (1) (a), (b) and (c) and National Care Standards, Care Homes for older people, 4, Your Environment (1), (8), 9, Feeling Safe and Secure (8) and 16, Private Life (1)

Timescale - within three months of receipt of this report

## Recommendations

**Number of recommendations:** 0

## Complaints

Please see Care Inspectorate website ([www.careinspectorate.com](http://www.careinspectorate.com)) for details of complaints about the service which have been upheld.

## Inspection and grading history

Date	Type	Gradings	
1 Jun 2016	Unannounced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	5 - Very good
2 Jun 2015	Unannounced	Care and support	4 - Good
		Environment	5 - Very good
		Staffing	4 - Good
		Management and leadership	4 - Good
24 Jun 2014	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
17 Jan 2014	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
15 May 2013	Unannounced	Care and support	3 - Adequate
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
22 May 2012	Unannounced	Care and support	5 - Very good
		Environment	4 - Good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
5 Nov 2010	Unannounced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed



Date	Type	Gradings	
9 Sep 2010	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed Not assessed 5 - Very good
11 Feb 2010	Unannounced	Care and support Environment Staffing Management and leadership	Not assessed 5 - Very good Not assessed 5 - Very good
5 Aug 2009	Announced	Care and support Environment Staffing Management and leadership	5 - Very good 5 - Very good 5 - Very good 5 - Very good
2 Mar 2009	Unannounced	Care and support Environment Staffing Management and leadership	Not assessed Not assessed Not assessed 4 - Good
16 Sep 2008	Announced	Care and support Environment Staffing Management and leadership	4 - Good 5 - Very good 4 - Good 4 - Good

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Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

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

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