

Leonard Cheshire Disability - Newhaven Road

Care Home Service

161-163 Newhaven Road
Edinburgh
EH6 4QA

Telephone: 0131 553 6053

Type of inspection: Unannounced
Inspection completed on: 14 August 2017

Service provided by:
Leonard Cheshire Disability

Service provider number:
SP2003001547

Care service number:
CS2003010989

About the service

Newhaven Road is a care home registered with the Care Inspectorate to provide a care service to a maximum of seven adults with physical and sensory impairment. The home is owned and managed by Leonard Cheshire Disability.

Six people live in the main house and one person in the lodge which is adjacent. The accommodation is well maintained, spacious and accessible for people with physical disabilities. The home is set in large grounds with well maintained gardens.

The service is close to all local amenities and regular public transport links are nearby. The service aims to promote personal choice and independence while safeguarding the wellbeing and security of residents.

What people told us

The inspector met with two relatives and six residents during the inspection. The inspector also looked at the feedback in the eight returned care standards questionnaires.

Comments included:

'The staff are all good and I feel safe here. They treat me with respect when they are helping me with personal care.'

'I like living here and go out by myself a lot. I like all the staff and like my room.'

'I can't see anything that could be improved for my relative. They are so happy and settled here and the staff and team leader are just so caring. My relative knows them all well as they have lived here for so long.'

'I am happy that my relative is here. It is in such a lovely, peaceful setting and is homely. The team leader is really good at communicating with me but I don't think there are always enough staff on at times to support my relative with things they would want to do. It would be good to have more activities here for those that are not out and about as much. There is a new depute manager who I have met and I feel like my views have been listened to and they are planning for more activities.'

'I am very happy living here. I get on really well with the staff and we plan lots of things. I like music and we have all our fringe shows planned and we are off out this afternoon.'

'My carers help me in every possible way to be independent including going out with me to a range of social activities. I have a monthly review and if any changes are needed they are made. Staff treat me very well and they get all the training they require. The staff treat me with great kindness and are very attentive to all my needs.'

'I am looking for things to do. The staff are helping me with this and I get on really well with my keyworker. I like all the staff but staffing has been a problem - enough for the basics but not always for other things like getting out and doing the things I would like to do. I would like to get my own place eventually. I have been here a long time now. The staff are encouraging me to do more for myself around the house.'

Self assessment

We are not asking services to submit a self assessment for this inspection year but expect all services to have a service improvement plan.

From this inspection we graded this service as:

Quality of care and support	3 - Adequate
Quality of environment	not assessed
Quality of staffing	not assessed
Quality of management and leadership	4 - Good

What the service does well

Newhaven Road has a homely atmosphere with high standard accessible accommodation. Residents and relatives told us staff were caring and respectful. Staff knew residents well and had built strong trusting relationships with them. There were kind and caring interactions between staff and residents, and we heard when staffing allowed that people were supported in their interests.

For example, one resident was being supported to look for work and to learn more skills to help them towards getting their own accommodation. Another was out going to shows and music events of their choice on a regular basis.

The service had regular communication with local health professionals which meant that people were attended to promptly with any health issue. Financial support plans were being reviewed and individual capacity assessed.

The service was under new management arrangements. This was supporting continuous improvement and there was improved focus on outcome based, person-centred support. Staff received supervision and training to help them in their roles.

What the service could do better

The quality of the service had been affected by staff shortages. We heard it was difficult to provide a high quality of person-centred support with current staffing levels, and to maintain records to the quality expected. We have asked the service to fully assess residents' dependency levels and evidence that staffing levels match current needs. This will influence a reviewed staffing schedule for this service. **(See requirement 1.)**

Residents' support plans needed to be reviewed on a minimum six monthly basis. Minutes of review meetings needed to be accessible and all documents signed and dated. This is to show that each person's health, personal and social support needs are being regularly assessed, reviewed and outcomes for them evaluated.

Support plans needed more detail to guide staff in the following areas:

- promoting continence and catheter care
- moving and handling plans including details of equipment

- skin care plans and details of any pressure relieving equipment in use
- nutritional and fluid promotion plans
- individual risk assessments
- how people are to be supported with their expressed interests and goals
- communication support needs.

(See requirement 2)

The involvement strategy needed promoted so that residents' and relatives' views were heard and used to improve the service. **(See recommendation 1.)**

The management team should include continence promotion, catheter care and tissue viability (pressure sore prevention) in the staff training plan to increase knowledge about best practice in these areas. **(See recommendation 2.)**

The service information booklet and aims and objectives of the service were unavailable at the time of the inspection. These documents should be available to all who use the service so that they know what to expect from the service. **(See recommendation 3.)**

The assisted bath needed to be repaired so that residents had bathing choices. **(See recommendation 4.)**

Team meetings and supervision should be used to promote reflective practice. This would allow staff to discuss their work, progress in their roles and have more direction in their work.

Requirements

Number of requirements: 2

1. The provider must ensure that there are sufficient levels of staff to support the assessed care and social support needs of all people living at the service. Staffing levels should be linked to the assessed dependency levels of each person supported.

This is to comply with Scottish Statutory Instruments 2011/210 15 (a) Staffing

Timescale: Within 20 weeks upon receipt of the finalised report the provider should have all individual dependency assessment levels completed and provide evidence that staffing levels match current dependency.

2. The provider must ensure that reviews of support are carried out on a six monthly basis at minimum and as and when needs change. All review meeting minutes should demonstrate that the full range of each person health and social support needs are reviewed and evaluated and any action needing taken planned for.

This is to comply with Scottish Statutory Instruments 2011/210 Regulation 5. Personal Plans.

Timescale: Within 20 weeks upon receipt of the finalised report the provider must have all reviews of support carried out and well recorded. Support plans must also be reviewed and regularly audited within this timescale.

Recommendations

Number of recommendations: 4

1. We recommend that the organisation's participation strategy be promoted. This is so that people supported and their relatives' views are heard and used to improve the quality of the service. The use of advocacy services should also be promoted.

National Care Standards Care homes for people with physical and sensory impairments - Standard 11: Expressing your views.

2. We recommend that a full staff team training needs review is carried out and all staff receive updated guidance in the areas of continence promotion, catheter care and tissue viability best practice guidance. This will support the staff in gaining knowledge of how they can promote best practice in their support worker role.

National Care Standards Care homes for people with physical and sensory impairment - Standard 5.1: Management and staffing.

3. The service information booklet should be available for all people using or planning to use the service and detail the service's aims and objectives. The service's aims and objectives should be regularly reviewed and involve the people using the service and the staff team.

National Care Standards Care homes for people with physical and sensory impairment - Standard 1: Informing and deciding.

4. The provider should repair the assisted bath so that service users' bathing preferences and choices are promoted.

National Care Standards Care homes for people with physical and sensory impairment - Standard 8: Making Choices.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Inspection and grading history

Date	Type	Gradings	
26 Jul 2016	Unannounced	Care and support	6 - Excellent
		Environment	Not assessed
		Staffing	6 - Excellent

Date	Type	Gradings	
		Management and leadership	Not assessed
5 May 2015	Unannounced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
1 May 2014	Unannounced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	4 - Good
		Management and leadership	5 - Very good
24 Apr 2013	Unannounced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
20 Apr 2012	Unannounced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
3 Nov 2010	Unannounced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
16 Jun 2010	Announced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	4 - Good
11 Feb 2010	Unannounced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	Not assessed
8 Sep 2009	Announced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	2 - Weak

Date	Type	Gradings	
		Management and leadership	4 - Good
5 Mar 2009	Unannounced	Care and support Environment Staffing Management and leadership	Not assessed Not assessed 2 - Weak 5 - Very good
18 Nov 2008	Announced	Care and support Environment Staffing Management and leadership	5 - Very good 5 - Very good 4 - Good 5 - Very good

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