

## Inch View Care Home Service

233 Gilmerton Road  
Edinburgh  
EH16 5UD

Telephone: 0131 658 5000

Type of inspection: Unannounced  
Inspection completed on: 10 November 2017

**Service provided by:**  
City of Edinburgh Council

**Service provider number:**  
SP2003002576

**Care service number:**  
CS2009233011

## About the service

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at [www.careinspectorate.com](http://www.careinspectorate.com)

This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

Inch View is a purpose-built care home for older people. It is run by the City of Edinburgh Council Health and Social Care department. It accommodates up to 60 residents in five units. The building is situated in its own grounds, adjacent to Liberton Primary School, on the edge of Inch Park in the south of the City of Edinburgh.

Accommodation is on two floors with lift and stair access between the floors. All bedrooms have en-suite toilet, hand basin and shower facilities. Bathing facilities and additional toilets are available throughout the home.

The provider states its aim is to 'provide high quality care homes for older people, where the needs and wishes of each person are valued and respected'.

## What people told us

Before our inspection, we sent care standard questionnaires to residents and relatives/carers. Of the 45 sent to relatives, two completed questionnaires were returned. We did not receive any completed questionnaires from residents prior to our inspection.

In the responses from relatives/carers questionnaires, one agreed and one strongly agreed with the statement 'overall, I am happy with the quality of care I receive at this home'. One response disagreed with several statements in the questionnaire including those relating to the care of property and laundry, the number of trained and skilled staff on duty and if there were unnecessary restrictions such as when their relative/friend could get up and go to bed, or go out, when they wanted.

Comments from relatives/carer's included;

'laundry could be improved; items placed in the wrong rooms, often crushed and looking uncared for'

'staffing levels could be improved, less use of agency staff'

'I feel drinks could be placed in rooms'

'staff all kind, polite and helpful'

'very happy. delighted with the home. Couldn't be happier with the care and support provided'

'dad is always helped with his appearance, which is quite important to him'

'staff know residents and usually plenty of staff, but they use agency staff'.

One relative said they were happy with the home and that they were happy with the laundry and meals and that their relative was eating better. They said that their relative was always clean and well-groomed. Another relative described how staff had identified and dealt with an issue for their relative. They felt that communication from staff was great and that staff identified and dealt with the issue promptly. We spoke with relatives of one resident who noted that they had noticed a difference in their mum since she had moved into the home and that she was more alert.

We spoke with a visiting health professional during our inspection. They told us that residents were always well presented. Staff appeared knowledgeable about residents' needs and they followed the advice and

recommendations that they had been given. They said that Inch View was a quiet home but sometimes they had to search to find a member for staff when they visited.

Comments from the residents we spoke with during our inspection included;

'happy with the home, staff are alright'

'quite happy with the home other than the food - too much repetition'

'I like spending time in my room, but like going to the themed nights'

'feel quite happy in the home, staff are nice and caring'

'plenty of snacks and drinks'

Some residents told us that their underwear was not always returned from the laundry.

We used the Short Observational Framework for Inspection (SOFI 2) to directly observe the experience and outcomes for people who were unable to tell us their views. On this inspection we used SOFI 2 to observe the experience of two residents in the lounge of one unit. From this, we saw that staff were caring and supportive to residents but that this was based around practical tasks such as serving hot drinks and snacks, and assisting resident with these. The service may wish to consider how they support staff to make everyday interactions more meaningful.

We discussed some of the above comments and points raised with the manager during the inspection.

## Self assessment

We are not requesting self-assessments from providers for this inspection year. Issues relating to quality assurance, acting on feedback from people using the service and the quality of the service's improvement plan are considered throughout the inspection.

The service had an action plan in place that helped them to plan and progress any actions needed to support improvements in the home.

From 1 April 2018 the new Health and Social Care Standards will replace the existing Care Standards. These standards seek to provide better outcomes for people who experience care, and services should now be familiarising themselves with these. We would encourage services to prepare for the implementation of the standards by working with staff and people experiencing care to raise awareness and explore what they mean in their specific setting, and consider how they impact on their work.

## From this inspection we graded this service as:

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

## What the service does well

The service continues to perform at a good level in the areas covered in the quality themes covered in this report.

Overall, there were good standards of care being provided, with residents being supported in a caring and respectful manner. There was a relaxed and welcoming atmosphere during our inspection.

Residents and relatives/carers could give their views on the service in a variety of ways. Points raised were acted upon and the service responded positively to the input they received. The service was looking at different ways to keep people updated with developments.

Care plans contained personalised information and described residents and their preferences well. A range of assessments and tools were used to help identify potential risks or specific care needs and were integrated into care plans. These measures helped staff to deliver person-centred care, taking account of residents' choices.

Reviews of residents' care were completed regularly and involved residents and relatives/carers where appropriate. Actions were taken in response to concerns or issues raised.

A programme of activities and special events was organised by care staff. The home had developed strong links with the local community and schools. They had an established gardening project, which had received an award for innovative partnership working. This helped develop a sense of community, belonging and well-being for residents. The service was working to ensure more residents could benefit from individual social opportunities that provided meaningful experiences that were personal to them.

It was evident that staff had formed strong relationships with residents and knew them, and their families, well. We received good feedback about staff from residents and relatives, who felt staff were attentive, caring and welcoming.

The provider completed checks prior to new staff starting work in the service to help ensure that people were recruited safely. Staff were registered with the Scottish Social Services Council (SSSC), which is responsible for regulating education and training for those working in social services.

An induction and training programme was in place for staff and an overview was kept of all training completed.

Staff had regular opportunities to discuss their work and development at team meetings, individual supervision meetings and appraisals. Staff felt their supervision meetings were positive and supportive. We encouraged the service to continue providing this on a regular basis for all staff.

Staff spoke positively about their work and felt that they worked effectively as a team. Staff talked about their own values they brought to their role, which appeared in line with the provider's core values and those of the National Care Standards. Staff were keen to develop their skills and knowledge and wanted to deliver a high quality of care.

The service evaluated the ability of staff to put their learning and knowledge in to practice by observing staff practice in areas such as moving and handling, medication management and aspects of personal care.

Staff were encouraged to develop within their roles and take on specific responsibilities and promote good practice in areas such as dementia.

Systems were in place that helped ensure effective communication and awareness of residents needs within the staff team and between shift changes. The service had developed a system to help improve communication between the home staff and community nursing services, which appeared to be working well.

## What the service could do better

The service should continue to ensure care plans, care charts and associated documents are consistently completed and updated when resident's needs change. In particular, the service should ensure that skin care plans contain the level of detail needed to guide staff in supporting residents (see recommendation 1).

The minutes of resident's six monthly care reviews should be developed to more consistently record the views of residents and relatives and to indicate that those involved have agreed to the content.

Overall, the management and administration of medication had improved since the last inspection, however, further progress was needed. The management team had identified that improvements were needed and had sought input from pharmacy services to support them with this (see requirement 1).

Whilst on-going group activities and events were planned and provided for residents, the service should look at how they support residents who are less able to engage in social activities. At times, we observed that there was little interaction between staff and residents in lounge areas. This meant there were missed opportunities for residents to have social engagement with others. The service may wish to consider how they support staff to make everyday interactions more meaningful. We will look at this again at future inspections.

All staff training was organised and managed by the provider's head office. An overview of the training completed by staff was not readily available to the manager of the service. An overview of mandatory training completed was obtained during the inspection, however, this did not show all the supplementary training completed. From the information available, we were unable to see that all staff had completed the mandatory training within the stated timescales. We were unable to determine if staff had completed training in areas such as adult support and protection and infection control.

Staff would benefit from further training and guidance on therapeutic diets, stress and distress, skin care/pressure ulcer prevention and dementia at a level appropriate to their role. The manager advised they were planning training sessions on stress/distress and skin care/pressure ulcer prevention. On-going training should be provided to ensure that staff have the necessary skills and knowledge in order to meet the needs of residents (see requirement 2).

The service should develop a clearer system to evidence how they have dealt with any complaints they receive. This should provide a clear audit trail to evidence the receipt, acknowledgement, investigation and outcome of all complaints (see recommendation 2).

Meetings for residents, relatives and staff were held regularly and minutes recorded. Whilst these showed that actions had been identified and action plans in place for some, some minutes needed clearer recording of how actions were planned and completed. We will follow this up at the next inspection.

## Requirements

### Number of requirements: 2

1. The provider must make proper provision for the health and welfare of service users by ensuring that all medicines are administered and managed as prescribed and according to good practice guidance. This should include;
  - ensuring information is in place for residents being given medication in a disguised form (covert) that describes how this should be given, such as in a specific food or drink.
  - for residents prescribed medication for symptoms of stress or distress, information should be available on how individuals might display signs of stress or distress and actions staff should take to help the resident before giving medication.
  - information should be recorded on the medication administration records to indicate why a medication was not signed as prescribed.

This is to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Regulation 4 (1)(a) make provision for the health, welfare and safety of service users and Regulation.

This takes account of National Care Standards, Care Homes for Older People, standard 15, keeping well - medication.

Timescale: for completion by the 28 February 2018.

2. The provider must ensure that staff employed in the service receive training appropriate to the work they are to perform. This should include, but not be exclusive of;
  - medication
  - adult support and protection
  - manual handling
  - stress and distress
  - skin care/pressure ulcer prevention

This is to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Regulation 15(b) Staffing.

This also takes account of National Care Standards, Care Homes for Older People, standard 5 - management and staffing arrangements.

Timescale: for completion by 31 March 2018.

## Recommendations

### Number of recommendations: 2

1. The provider should ensure that personal plans contain detailed information on resident's care and support needs and that this information is regularly evaluated and update to ensure it is current and accurate. This should include;
  - a) care plans should be updated when resident's needs or abilities change and make sure changes recorded in the evaluation are transferred to the care plan.

- b) care plans should contain the level of detail need to guide staff on skin care needs, including settings for active pressure relieving equipment, re-positioning needs and topical creams/ointments. Skin risk assessments should be completed regularly and inform skin care plans.
- c) assessment of individual social needs and how these should be met

This takes into account National Care Standards, Care Homes for Older People, standard 14, keeping well - health care.

2. The service should develop a clear system to evidence their management of any complaints received. This should evidence;

- that complaints have been responded to within 20 working days after the date when the complaint was made
- details of the investigation completed
- that the complainant has been informed of actions taken and the outcome of these.

This takes into account National Care Standards, Care Homes for Older People, standard 11, expressing your views.

## 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).

## Inspection and grading history

Date	Type	Gradings	
8 Nov 2016	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	Not assessed
		Management and leadership	Not assessed
24 Feb 2016	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	5 - Very good
18 Mar 2015	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good

Date	Type	Gradings	
6 Aug 2014	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
3 Mar 2014	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
11 Oct 2013	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	3 - Adequate
		Management and leadership	4 - Good
12 Mar 2013	Unannounced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
17 Dec 2012	Unannounced	Care and support	4 - Good
		Environment	5 - Very good
		Staffing	4 - Good
		Management and leadership	5 - Very good
24 Feb 2012	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	3 - Adequate
		Management and leadership	Not assessed
3 Aug 2011	Unannounced	Care and support	3 - Adequate
		Environment	4 - Good
		Staffing	3 - Adequate
		Management and leadership	4 - Good

## To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at [www.careinspectorate.com](http://www.careinspectorate.com)

## Contact us

Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

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

0345 600 9527

Find us on Facebook

Twitter: @careinspect

## Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿੱਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.