

Belgrave Lodge Nursing Home Care Home Service

45 Belgrave Road
Edinburgh
EH12 6NG

Telephone: 0131 334 9400

Type of inspection: Unannounced
Inspection completed on: 18 December 2017

Service provided by:
Dixon Sangster Partnership

Service provider number:
SP2003002440

Care service number:
CS2003010613

About the service

This service was previously registered in 2002 with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

Belgrave Lodge Nursing Home is a care home registered to provide care for up to 33 older people. There were 26 residents living in the home at the time of our inspection. It is owned and managed by Dixon Sangster Partnership. They are referred to as the provider of the service in this report.

Belgrave Lodge Nursing Home is in a quiet residential area with shops and other community services nearby. The home is close to main bus routes to and from the city centre.

Accommodation is provided over three floors. There is one bedroom on the ground floor. The upper floors can be reached by stairs or a lift. All of the public rooms are on the ground floor. The bedrooms have en-suite facilities.

There is an enclosed garden with a patio and seating area. There is also a small car park to the side of the building.

The service's aims and objectives include the statements:

"To ensure that any care planned is carried out in consultation with our residents and families ensuring that the residents desired outcomes are met. To ensure that for everyone life is for living, achieving and dreaming, we will achieve this by reasonably assessing risk and not becoming risk averse".

What people told us

Before our inspection, we sent care standards questionnaires to residents and relatives/carers. Of the 20 sent six completed questionnaires were returned. In response to the question which asked if overall they were happy with the quality of care, all agreed they were.

Three people were unsure about the keyworker system. The manager told us letters regarding keyworkers had gone out to relatives. We suggested continuing to explain and promote the role of the keyworker system through meetings and reviews of care.

Two people thought attention to detail was an area that could be improved, for example ensuring their relatives' glasses and/or hearing aids were clean. The manager agreed to arrange additional training to address this.

Two people thought that there should be more activities for those that did not like the group activities and there were not many outings. The provision of activities was an area we have asked the service to improve on **(see recommendation 1)**.

During the inspection we spent time on each of the floors, meeting with most of the residents. When chatting with us about their day-to-day lives, they indicated that they were generally satisfied with the service being provided and commented about the kindness of the staff.

Some residents were less able to tell us what they thought about the service or the care they received. We spent time observing how these residents interacted with staff and how they spent their time. We saw that residents responded positively to support from staff and enjoyed chatting with them. We also used the Short Observational

Framework for Inspection (SOFI2) to directly observe the experience and outcomes for two residents in the early afternoon. Again we saw many positive interactions between the staff and these residents.

We spoke with seven relatives/carers. Overall, all were satisfied with the quality of the service. Two people thought that it was difficult to bring up suggestions or concerns. We noted in the minutes of meetings that action points and/or suggestions given were often not followed up at the next meeting. We asked the management team to promote systems for giving feedback and demonstrate how they have listened and responded to this feedback in order to develop people's confidence in the management of the service (**see recommendation 5**).

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 were considered throughout the inspection.

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

At this inspection we reviewed the quality themes of quality of care and support and quality of staffing. We concluded from our inspection findings that the service continued to perform to a good level in the areas covered by these quality themes. This resulted in good standards of care and support being provided for the residents in Belgrave Lodge Nursing Home.

We saw that residents were well cared for. Residents and relatives/carers indicated that overall they were satisfied with the standard of care and support the service provided. Positive comments were given about the staff.

The recording in medication administration records had improved, particularly around the area of application of creams/ointments. This ensured that the residents were receiving their medication as prescribed.

Staff spoken with had a good knowledge of residents' current care and support needs.

Since the previous inspection the amount of agency staff being used had reduced. This provided better continuity of care.

Staff were respectful, patient and considerate in their approach to residents, with requests for assistance promptly responded. Staff regularly checked on those less able to call for assistance and/or who preferred to spend their time in their bedroom.

Expected maintenance checks were routinely carried out thereby ensuring that the environment and equipment were safe, and residents and staff were protected.

Checks were carried out prior to new staff starting work in the service to ensure that people were recruited safely and had the necessary skills and aptitude for the post.

Regular checks were made with the Scottish Social Services Council and Nursing Midwifery Council to make sure that staff were appropriately registered.

New staff received an induction appropriate to their role.

Staff were supported to maintain safe working practices and helped to maintain the safety of residents through training, monitoring of practice, as well as health and safety policies and procedures.

The manager had a clear overview of staff training. This helped to identify and prioritise future training requirements.

The service used a dependency monitoring tool, along with observing practice and monitoring accidents and incidents to assist with the planning of staffing.

What the service could do better

Recording the effectiveness of prescribed creams as part of monthly evaluations of care would help to assess if the current frequency of application was appropriate.

We asked that the provision of meaningful activities was developed to support residents to maximise their mental and physical wellbeing **(see recommendation 1)**. There should be more activities for those that do not like the group activities and consideration of supporting requests for trips and outdoor activities.

Work was currently underway to review the present menu. The plan was to develop a three-week menu rota by the end of January 2018 which would take into account residents' preferences and requested dishes. We suggested that when completed that the new menu should be nutritional assessed to confirm that it fully met residents' dietary needs. The supplementary and alternative menus should also be promoted to help people to be aware of other food choices. We will follow-up progress of this at our next inspection.

Residents' risk assessments and plans of care should be reviewed and updated when changes occur **(see recommendation 2)**. This will evidence the care that is currently being provided and support good communication.

To aid communication at staff handover, we suggested that the handover sheet should record which residents were on a position change chart and the time of the last position change prior to handover.

Improved completion of six monthly reviews of care would help to improve communication and continuity in care, as well as evidencing the good level of care being provided.

On reviewing staff recruitment files, we identified some gaps in information that we would have expected to see in these files **(see recommendation 3)**.

Some staff had received formal supervision, however, not all staff were receiving regular supervision. This is important in supporting staff with development, training and providing opportunities to discuss work practice **(see recommendation 4)**.

Staff were to be reminded to wear name badges as this helps visitors and residents to identify staff and to know who to raise concerns with.

The management team should promote systems for giving feedback and demonstrate how they have listened and responded to this feedback in order to develop people's confidence in the management of the service **(see recommendation 5)**.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 5

1. It is recommended that the service reviews how activities for residents are organised and delivered to support residents to maximise their mental and physical wellbeing.

This takes account of National Care Standards, Care homes for older people – Standard 5: Management and staffing arrangements, Standard 14: Keeping well – healthcare and Standard 17: Daily life.

Also see: Living well through activity in care homes: the toolkit. Available from the Care Inspectorate Hub.

2. It is recommended that residents' risk assessments and plans of care are reviewed and updated when changes occur. This will evidence the care that is currently being provided and support good communication.

This takes account of National Care Standards, Care homes for older people – Standard 6: Support arrangements.

3. It is recommended that recruitment files evidence that appropriate safe recruitment practices have been completed and record any additional evidence gathered to support the application.

This takes account of National Care Standards, Care homes for older people – Standard 5: Management and staffing arrangements and Scottish Social Services Council (SSSC) Code of Practice for employers of social service workers.

4. The provider should ensure that all staff receive regular planned supervision to allow for discussion on staff practice, training needs and future development.

This takes account of National Care Standards, Care homes for older people - Standard 5: Management and staffing arrangements.

5. It is recommended that the management team promote systems for giving feedback and demonstrate how they have listened and responded to this feedback. This should help people to develop confidence in the management of the service and feel listened to.

This takes into account the National Care Standards, Care homes for older people - Standard 5: Management and staffing arrangements.

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	
6 Dec 2016	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	Not assessed
		Management and leadership	Not assessed
24 Mar 2016	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
16 Jan 2015	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	3 - Adequate
		Management and leadership	3 - Adequate

Date	Type	Gradings	
3 Mar 2014	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
6 Aug 2013	Unannounced	Care and support	2 - Weak
		Environment	Not assessed
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
14 Jun 2013	Re-grade	Care and support	2 - Weak
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
20 Dec 2012	Unannounced	Care and support	3 - Adequate
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	3 - Adequate
13 Aug 2012	Unannounced	Care and support	3 - Adequate
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	3 - Adequate
9 Feb 2012	Unannounced	Care and support	3 - Adequate
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
30 Sep 2011	Unannounced	Care and support	2 - Weak
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
10 Aug 2011	Re-grade	Care and support	2 - Weak
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed

Date	Type	Gradings	
10 May 2011	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
22 Feb 2011	Announced (short notice)	Care and support	2 - Weak
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
16 Dec 2010	Unannounced	Care and support	2 - Weak
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	2 - Weak
28 Sep 2010	Announced	Care and support	2 - Weak
		Environment	2 - Weak
		Staffing	2 - Weak
		Management and leadership	2 - Weak
23 Mar 2010	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
3 Nov 2009	Announced	Care and support	2 - Weak
		Environment	2 - Weak
		Staffing	2 - Weak
		Management and leadership	3 - Adequate
9 Jan 2009	Unannounced	Care and support	3 - Adequate
		Environment	4 - Good
		Staffing	Not assessed
		Management and leadership	Not assessed
8 Aug 2008	Announced	Care and support	3 - Adequate
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good

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