

Eastleigh Care Home Care Home Service

110 North Deeside Road
Peterculter
AB14 0QB

Telephone: 01224 734718

Type of inspection:

Unannounced

Completed on:

20 December 2018

Service provided by:

Pepperwood Care (Management)
Limited

Service provider number:

SP2013012037

Service no:

CS2013316167

About the service

The service is provided by Pepperwood Care (Management) Limited. The care home provides residential accommodation, nursing care and support to a maximum of 34 older people to one named adult under the age of 65.

The care home is a traditionally built home near the centre of Peterculter and is close to local amenities and transport links. There are 35 bedrooms, one of which can be used as a shared room. All of the bedrooms have en suite facilities. There are a variety of communal sitting and dining areas. Accommodation is provided on two levels.

The service's written statement of aims states that the care service aims for care to be delivered "in a non-discriminatory fashion, with respect for independence, privacy and the right to make informal choices and to take risks" and "ensuring choice and the rights of our residents are our focus at all times."

This service registered with the Care Inspectorate on 15 July 2013.

What people told us

We spoke to six residents, who stay at Eastleigh Care Home. We also spent time observing staff practice in the home and how the staff interacted with residents. We received very good feedback regarding the food and how much the residents enjoyed staying at Eastleigh. They described staff as "great".

We saw residents and staff interacting in a warm, relaxed and caring manner. We also sent 20 questionnaires to residents, of which 15 were completed. Some were completed with the assistance of staff and/or relatives. There were no concerns raised, all respondents indicated that they were very happy with the service received. Their comments included:

- "Very good, excellent in fact."
- "Everything is fine."
- "I am happy."

We spoke to three relatives during our inspection. They expressed how "happy" they were with the support and care that their relative had received. We sent 20 questionnaires to relatives or friends of residents, of which six were completed and returned to us. All relatives indicated that they were very happy with the service received. Their comments included:

- "A very caring environment."
- "Staff are keen to make visitors feel welcome."
- "Efficient with a very concerned attitude towards the residents."

The views of the residents and their families have greatly informed the findings of this inspection and are included throughout this report.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	4 - Good
How good is our leadership?	not assessed
How good is our staffing?	not assessed
How good is our setting?	not assessed
How well is our care and support planned?	5 - Very Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

4 - Good

We found that people's experiences have significantly improved since our last inspection. There were many examples of very good practice where the outcomes for many residents were exceptional. However, more could be done to ensure that all residents were being encouraged or supported to get the most out of life.

It is important that residents experience warmth, kindness and compassion. There was a very positive culture and ethos within the home. One staff member said "we work as a team. The team is only as good as its weakest cog. If we don't get it right there will be an impact on the outcomes for the residents and we don't want that." Residents spoke very highly of the staff and the kindness they were shown. We saw residents being treated with dignity and respect. They were not hurried; staff were working at the residents pace. It was clear that the residents' wishes were very important to staff. We saw that a staff member patiently rearrange a gentleman's collar, to ensure he remained well presented, while he ambled around the home. We were told that communication between residents, relatives and staff was very good. Relatives spoke highly of being involved in the life of the home and being made to feel welcome. Staff and visiting professionals spoke of the systems that were in place to make sure information about changes in the residents' care and support needs were passed on to other staff. This had assisted in providing good continuity of care for the residents.

Residents should be able to maintain and develop their interests, activities and what matters to them in the ways that they like. There was a wide range of activities or events on offer to residents. This was led by a dynamic enthusiastic activity coordinator. There was a focused on improving and enhancing the residents' quality of life. A resident was assisted to collect the towels every day from the laundry to fold. The resident described this as her "job". Another resident had created art murals, in discussion with the other residents, to bring a more distinct feel to the corridors. The ethos and practice of increasing the levels of physical activity and also providing the residents with a purpose, no matter how small, was having a very positive outcome for many

of the residents. However, this was not always being applied consistently. This resulted in some residents not always getting the most out of life.

Residents should experience care and support that is right for them. There was a strong stable, compassionate team of staff. It was clear that staff knew the clients very well. They were aware of how they like to spend their time and tried hard to ensure the clients remained as independent as possible within the home. Staff were able to discuss in detail, clients abilities and how they were encouraging and supporting them. There was an ethos of kindness and compassion in the home, led by the manager. Staff spoke of the systems that were in place to make sure information about changes in the residents' care and support needs were passed on to other staff. This had assisted in providing good continuity of care for the residents. Staff had identified two areas in the home, which acted as 'choke - points' for those residents with dementia who liked to amble around the home. We saw staff defuse and manage situations, where residents were starting to become distressed and anxious, very well. This was done with kindness, compassion and understanding.

The treatment or interventions that residents experience should be effective. If a resident needs medication this should be given in the best way suitable for the resident's needs. Residents were receiving their medication in accordance with the prescriber's instructions. Good practice was being followed. We received very good feedback, from visiting healthcare professionals, about the communication and the way requests, advice and support had been put into practice.

If a resident's independence, control and choice are restricted any restrictions are justified, kept to a minimum and carried out sensitively. There was a culture of trying to balance risks and safety within the home. Action taken by staff to protect some residents from harm was always clearly assessed, recorded and evaluated.

Staff had a clear understanding of safeguarding and the Adult Support and Protection (ASP) procedures. Appropriate steps were in place to report any incidents or concerns promptly to the ASP team.

It is important that residents' needs are met by the right number of staff. The management team had reviewed how staff were deployed in the home. The manager was formally reviewing the staffing levels. This assisted in ensuring that the staffing levels and deployment of staff is based on the residents' needs and dependencies. Staffing levels have recently increased.

The recommendations made following the last inspection in relation to enhance the residents' daily life and promote positive outcomes for the residents, infection control and effective communication have all been met.

How good is our leadership?

This key question was not assessed.

How good is our staff team?

This key question was not assessed.

How good is our setting?

This key question was not assessed.

How well is our care and support planned?

5 - Very Good

Residents' personal plans should be right for them. It should set out how their needs will be met, as well as their wishes and choices. We found that many elements of residents' personal plans contained a lot of details that were specific to each resident. The quality of the documentation had significantly improved. Two recommendations made following the last inspection were met. There were some very good examples of where care was focused on outcomes for people. These examples should be shared to promote consistent practice. Residents said that they felt that the staff knew them very well and were able to give the care they wished. Although the standard of documentation was good, there were some areas that did not always clearly show the changing care and support needs. This resulted in the good practice and the many positive improvements and achievements in the residents' welfare and wellbeing not being documented. Therefore there was a potential for care practices to be inconsistent, specifically in supporting residents with medical needs, for example cellulitis. The management team and staff were working together to improve the documentation.

Residents should be involved in developing and reviewing their personal plan and it is important that residents' views are sought and their choices respected, especially if they have reduced capacity to fully make their own decisions. Where residents had someone else with the legal responsibility for acting on their behalf there was clear evidence that staff were fully aware of their legal powers.

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

The provider should assist and support staff to enhance the residents' daily life and promote positive outcomes for the residents.

National Care Standards Care Homes for Older People - Principles: Realising Potential; and Standard 17: Daily Life.

This area for improvement was made on 30 May 2017.

Action taken since then

See body of report. This recommendation was met.

Previous area for improvement 2

The provider should ensure that all residents can meaningfully contribute to their six-monthly care review using methods that suit their communication needs and preferences.

National Care Standards, Care Homes for Older People – Standard 11: Expressing your Views.

This area for improvement was made on 30 May 2017.

Action taken since then

See body of report. This recommendation was met.

Previous area for improvement 3

The provider should ensure that the content of residents' care plans and evaluations are accurate and person-centred and enhance the provision of safe, consistent and effective care.

National Care Standards Care Homes for Older People – Principles: Realising Potential; and Standard 6: Support Arrangements.

This area for improvement was made on 30 May 2017.

Action taken since then

See body of report. This recommendation was met.

Previous area for improvement 4

The provider should develop a formal process and guidance for staff on cleaning and maintaining equipment.

National Care Standards Care Homes for Older People – Standard 4: Your Environment.

This area for improvement was made on 30 May 2017.

Action taken since then

See body of report. This recommendation was met.

Previous area for improvement 5

The provider should ensure that the communications systems between staff are reviewed to ensure their effectiveness.

National Care Standards Care Homes for Older People – Standard 5: Management and staffing arrangements.

This area for improvement was made on 30 May 2017.

Action taken since then

See body of report. This recommendation was met.

Complaints

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

Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	4 - Good
1.3 People's health benefits from their care and support	5 - Very Good

How well is our care and support planned?	5 - Very Good
5.1 Assessment and care planning reflects people's planning needs and wishes	5 - Very Good

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