

Inspection report

Pentland Hill Nursing Home Care Home Service

23/27 Gylemuir Road
Edinburgh EH11 2RG

| | |
|--|-------------|
| Inspected by: (Care Commission Officer) | Janet Smith |
| Type of inspection: | Unannounced |
| Inspection completed on: | 4 May 2006 |

Service Number

CS2003010660

Service name

Pentland Hill Nursing Home

Service address

23/27 Gylemuir Road
Edinburgh EH11 2RG

Provider Number

SP2003002226

Provider Name

BUPA Care Homes (CFHCare) Limited No.
2741070

Inspected By

Janet Smith
Care Commission Officer

Inspection Type

Unannounced

Inspection Completed

4 May 2006

Period since last inspection

4 months

Local Office Address

Stuart House
Eskmills
Musselburgh
East Lothian
EH21 7PB
0845 6008335

Introduction

Pentland Hills Nursing Home is a purpose built home registered by the Care Commission on 1st April 2002 for the care of 120 older people.

The Home is situated close to a variety of local amenities including public transport, parks, supermarket and shops.

The accommodation is divided into 4 separate units, 2 of which are on the upper level and can be accessed by either a lift or stairs.

Each of the units has 30 single bedrooms with en-suite washing facilities.

There are communal lounge/dining facilities in each of the units.

The aims and values of the service are displayed in each unit.

The service states that they aim to "provide our customers with the highest quality care service. We will use our health and care knowledge, specialist skills and values to deliver an individual service to our customers".

Basis of Report

The visit was unannounced and the allocated Officer was accompanied by William Morrison and Maureen Campbell, Care Commission Officers.

During the visit which took place on 4th May 2006, the Care Commission Officers spoke with:
the Nurse Manager

the Clinical Service Manager

6 service users individually. Others were spoken with in group settings in the communal areas.

3 staff members on an individual basis and others in group settings.

The Care Commission Officers also looked at a range of policies, procedures and records including the following:

Fire logs

Financial records

11 Staff files

4 Personal plans

and spent time observing interaction between service users and staff.

The Care Commission Officers took all of the above into account and reported on progress made since the last inspection where the following National Care Standards had been inspected.

Care Homes for Older People:

Standard 1: Informing and Deciding

Standard 5: Management and Staffing Arrangements

Standard 6: Support Arrangements

Standard 7: Moving In

Standard 18: Staying in Touch

The Officers reported on the themes of inspection as follows:

Single, double, and multiple occupancy

Safer Recruitment

Fire safety

Nutrition.

Additionally, the following Standards were inspected at this visit.

Care Homes for Older People:

Standard 13 - Eating Well

Standard 5 - Management and Staffing Arrangements

Standard 4 - Your Environment

The Officers also took into consideration The Regulation of Care (Requirements as to Care Services) (Scotland) Regulations 2002.

Action taken on requirements in last Inspection Report

3 requirements had been made at the last inspection. 2 of these had been completed and 1 remained outstanding at this inspection.

Comments on Self-Evaluation

Not applicable.

View of Service Users

Service users spoken with were positive in respect of aspects of care. They stated that the staff were helpful and "great".

Service users, who were unable to give views, on observation, appeared to be comfortable in their surroundings.

In respect of 'food'. Service users stated:

"Too much food", "plenty tea and coffee", "get a choice" and "like to have a cup of tea and a snack before bed".

View of Carers

There were no family carers seen at this visit.

Regulations / Principles

Regulation :

Strengths

Areas for Development

National Care Standards

National Care Standard Number 4: Care Homes for Older People - Your Environment

Strengths

The environment was seen to be spacious, clean and appeared well maintained. Many of the furnishings had recently been renewed.

Bedrooms seen were bright and personalised. Doors were able to be locked with staff being able to access in the case of an emergency.

Information was available to service users on actions to take in the event of fire or emergency evacuation.

The Officers spoke with the Manager regarding the 'Single, Double and Multiple Room Occupancy' theme of inspection.

The service currently has 120 single, en-suite rooms.

Areas for Development

The infection control policy was not seen at this inspection due to a corporate review of the policies.

This will be reviewed at the next inspection.

None arising from this inspection.

National Care Standard Number 5: Care Homes for Older People - Management and Staffing Arrangements

Strengths

The Officers did not complete all of this Standard at this visit.

The management of medication will be inspected at the next visit.

The Manager provided the Officers with a copy of the 3 monthly medication audit carried out

by the pharmacist. This had not been available at the last inspection.

Each of the units were reviewed in respect of storage, administration, disposal and education of staff. This provided the service and the pharmacist the opportunity to discuss and consider areas of best practice.

The elements of fire safety required to be inspected by Care Commission Officers as detailed in the Regulation of Care (Scotland) Act 2001, SSI 2002 No.114 and the National Care Standards were at the time of this inspection found to be satisfactory. It should however be noted that this is not an indication that the Care Home complies with the minimum standards of fire safety under separate, more detailed Fire Safety legislation.

The Officers carried out the 'Safe Recruitment' Theme during this inspection. The audit of the service's safer recruitment procedures was carried out and found to be satisfactory.

It was noted that Enhanced Disclosure checks had been carried out, 2 satisfactory references had been received and there were records of skills, experience and appropriate qualifications.

Checks were seen to be made of up to date registration with professional bodies.

Areas for Development

The recruitment policy was not viewed at this inspection.

A recommendation was made at the last inspection with regard to the policies and procedures. Many of these were seen to be out of date.

The Manager responded that a corporate review of the policies was due to be completed by August 2006.

The Officers planned to report on the policies and procedures at the next inspection.

National Care Standard Number 13: Care Homes for Older People - Eating well

Strengths

The menu offered choices and variety of foods. Food was seen to be made available in the form of textured diets as needed.

Food was seen to appear well presented and appetising.

Staff stated that the service had 'visual aids' in the form of pictures to assist service users decide what they wished to eat.

The kitchen staff had access to a policy on menu planning. This gave guidance on 'five a day' and what this should consist of.

Personal plans seen gave good information on the dietary needs of individuals. Instances of referrals and guidance was seen from other professionals.

The Manager stated that all care staff had completed the nutrition training through the company distance learning pack. The Officers saw that this was comprehensive and gave clear, understandable information to staff and included serving food and assisting with eating.

Areas for Development

The pass results of the training had not been received by the Manager at the inspection but the findings will be discussed at the next inspection.

The policy on nutrition was brief and did not contain pertinent information which was seen to be available in the training pack.

This was discussed with the Manager who was aware of this.

This will be monitored following the corporate review of the policies.

A previous requirement had been made at the last inspection:

"The service must ensure that there is management of mealtimes."

In order to achieve this the Manager must:

Ensure that there is appropriate direction given to staff in serving and assisting with meals at all times.

Ensure that staff are competent in implementing the nutritional training provided by the home.

During the inspection, the Officers noted that the management of mealtimes in two (2) of the units was calm and organised. In the other two (2) units, the Officers observed the same problems that had been seen at the last inspection. This was in the form of the organisation of mealtimes and the assistance given to service users.

The Manager stated that a system of management had been implemented in 2 of the units over meal times. These were operating well and this would be introduced in the others where areas for development had been identified.

A range of fluids was offered at mealtimes however, the availability of fluids to service users throughout the day was variable. Some individuals had access to jugs of fluid in their rooms. Notices to staff were seen in relation to making available jugs of juice in the day rooms. This was not seen to be in place.

As a result of the findings, the previous requirement has been carried forward and includes advice on fluid intake of service users.

See Requirement 1.

Enforcement

There has been no enforcement action taken by the Care Commission since the last inspection.

Other Information

The Manager informed the Officers that she was now based permanently at Pentland Hills. It was agreed that a new Certificate of Registration would be issued with an agreed staffing schedule. She planned to carry out a needs analysis of the service users and forward this to the Care Commission in the first instance.

Requirements

1. The service must ensure that there is management of mealtimes.

In order to achieve this the Manager must:

Ensure that there is appropriate direction given to staff in serving and assisting with meals at all times.

Ensure that staff are competent in implementing the nutritional training provided by the home.

Ensure that staff comply with the internal policy to meet the fluid intake needs of service users.

This is to comply with:

SSI/114 Regulation 4(1)(a) and (b), Welfare of Users - a requirement to ensure the proper provision for the health and welfare of service users.

SSI/114 Regulation 13 (a) Staffing - a requirement to ensure that staff are competent in the care service.

Timescale: Within one (1) month from receipt of this report.

Recommendations

None arising from this inspection.

Janet Smith

Care Commission Officer