Rosepark Care Home
Care Home Service

261 New Edinburgh Road
Uddingston
Glasgow
G71 6LL

Telephone: 01698 816161

Type of inspection:
Unannounced

Completed on:
24 September 2019

Service provided by:
Renaissance Care (No 8) Limited

Service provider number:
SP2007009451

Service no:
CS2007166021
About the service

Rosepark Care Home was registered with the Care Commission on 15 February 2008 to provide care to a maximum of 60 older people with dementia, learning disabilities, physical disability or illness, sensory or visual impairment and palliative care needs. It recently changed provider to Renaissance Care (No 9) Limited.

The care service consists of two separate buildings, Rosepark Care Home and Rosehill House.

The home is in the town of Uddingston and is in a quiet residential area. People living in the home have a choice of single or double bedrooms in two well-kept and welcoming buildings. There is an enclosed garden beside the Rosepark building for people to use and a patio area beside Rosehill House.

There is a café within the home which is well used by people living in the home and their visitors. There is a choice of sitting areas for people to use.

The provider’s philosophy of care is “to provide the highest standard of individual care in a safe, friendly and homely setting, where caring staff maintain residents’ dignity, privacy, independence and choice”.

What people told us

10 residents and 6 relatives returned completed care standards questionnaires prior to the inspection visit. From these, 15 were overall happy with the care and support provided and one was undecided. We gathered feedback from residents in the service and their families by speaking to people during the inspection. An inspection volunteer was involved in the inspection. An inspection volunteer is a member of the public who volunteers to work alongside the inspectors. Inspection volunteers have a unique experience of either being a service user themselves or being a carer for someone who has used services. The inspection volunteer role is to speak with people using the service being inspected and gathering their views.

People told us that the staff were very caring and that they were very friendly. Some told us that they were like their extended family. Relatives told us that they were always made to feel very welcome. People spoke very positively about the range of activities on offer to them. Comments received included:

- I think it’s fabulous, no complaints.
- Generally, I’m quite happy here.
- At times I feel the staff are a little ignorant with my condition and how it effects my body.
- I have everything that I could possibly want. You would be awfully hard to please if you didn’t like it here.
- What I like about the home is that I can talk to anybody and they listen to me.
- I’m happy here, everything I need is under one roof and I’m able to continue my active lifestyle by being taken out for regular walks around the area.
- The atmosphere is warm, friendly and has a family feel to it.
- I feel confident that my relative is being well cared for and in safe hands.
- I remain impressed at the quality of my relative’s care.

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? | 5 - Very 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? | 4 - Good

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

**How well do we support people’s wellbeing?** 5 - Very Good

In order to answer this question we considered and evaluated the following Quality Indicators:

1.1 People experience compassion, dignity and respect - graded as very good.
1.2 People have a good quality of life as a result of their care and support - graded as very good.
1.3 People’s health benefits from their care and support - graded as very good.

It is important that staff across the home treat residents with compassion, dignity and respect. We found staff to have good relationships with residents with relatives. They spoke to them in a warm and dignified way. Residents and relatives we spoke with told us that this was usually the case and spoke very highly about the staff. We observed residents being offered choices throughout their day including where they wanted to sit and what they wanted to eat or drink. Residents looked clean and tidy and well presented and relatives we spoke with told us that this was always the case.

The way people spend their day should promote feelings of purposefulness and wellbeing. The service had two dedicated activity staff. There was a weekly activity programme which included some group activities, weekly visiting entertainers and time spent doing crosswords or daily exercises. We heard how residents continued to be involved in the local community including going to local events and having the church and nursery to visit. We spent time with the management team discussing the best way to now build on how people spend their day to look at any wishes and aspirations they could be supported to achieve. We looked forward to seeing how this has evolved at the next inspection.

It is important for residents to enjoy a healthy and balanced diet and have access to plenty of drinks throughout the day. We observed a choice of food to be offered each mealtime for people to choose from and alternatives made for anyone who asked. Snacks and drinks were served between meals. We observed people who required help to be supported by staff in an unhurried manner. Residents we spoke with told us how good they food was and that they had plenty of choices.

We found that those at risk of malnutrition or dehydration were being monitored by senior staff and that steps were being taken to address this. However, we asked the service to introduce NHS Lanarkshire’s best practice guidance for managing weight loss as staff we spoke with were not aware of this. Please see area for improvement 1.
Residents could be confident that senior staff had an overview of their physical and mental health care needs and consulted with relevant health care professionals including the podiatrist, GP, dietician and community mental health team as needed.

We spoke with staff from various departments within the service and everyone spoke positively about working at the care home and had a genuine interest in enhancing the lives of the residents.

**Areas for improvement**

1. The service should ensure that staff are aware of the NHS Lanarkshire best guidance ‘Nutrition Matters’ and be competent in implementing ‘MUST Step 5’ when they identify a resident meets the criteria. This ensures care and support is consistent with the Health and Social Care Standards, which state: “I experience high quality care and support based on relevant evidence, guidance and best practice.” (HSCS 4.11)

**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?** 4 - Good

In order to answer this question we considered and evaluated the following Quality Indicator 5.1 Assessment and care planning reflects peoples’ needs and wishes - graded as good.

Residents should be confident that their care plans give clear direction on how to deliver their support and that they are reviewed and updated when there are any changes in their health or circumstances. We sampled plans and found that the majority of these were completed on an individual basis and reflected each person’s current care and support needs. When we spoke to staff they knew the residents’ care needs very well. There were a few areas we highlighted that needed improved and these were addressed during the inspection. This led us to question how effective the current care plan audit system was. Please see area for improvement 1.

We sampled charts that should be completed by staff to enable them to monitor certain aspects of care delivery including, skin care, food and fluid charts, topical medication administration records and concluded that people could be assured that these were being well completed and that senior staff had an overview of these.
We found that risk assessments to assess resident’s care needs were carried out regularly and then used to inform the care plan. These covered a range of key areas including nutrition, skin integrity and falls.

People who use the service should be confident that the service carry out regular checks on the hot water they can access, to ensure that it is at a safe temperature and that they are not at risk from scalding. We found that checks were being carried out for this, however, there were several that were extremely high, and had been like this for the past few checks. No action had been taken to address these. We discussed this with the service who immediately took action to rectify this. Please see area for improvement 2.

Residents and/or their representatives should be involved in reviewing their needs at least every six months. We sampled this and found that there was a system in place to ensure that these took place. Feedback during the reviews was very positive with an action plan being created to address any agreed areas moving forward. The reviews did mainly focus on the health of the resident and we have asked the service to also look at how people spend their day and are supported to get the best out of life.

**Areas for improvement**

1. The service should ensure there is a robust audit system in place to ensure that care plans are always up to date. This ensures care and support is consistent with the Health and Social Care Standards, which state: “My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices.” (HSCS 1.15).

2. The service should ensure that staff and management who are responsible for ensuring that residents only have access to hot water at a safe temperature have the correct training and knowledge to allow them to carry this out. This ensures care and support is consistent with the Health and Social Care Standards, which state: “My environment is secure and safe.” (HSCS 5.16).

**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**

<table>
<thead>
<tr>
<th>How well do we support people’s wellbeing?</th>
<th>5 - Very Good</th>
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</thead>
<tbody>
<tr>
<td>1.1 People experience compassion, dignity and respect</td>
<td>5 - Very Good</td>
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<tr>
<td>1.3 People’s health benefits from their care and support</td>
<td>5 - Very Good</td>
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<td>1.4 People are getting the right service for them</td>
<td>5 - Very Good</td>
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<tr>
<td>How well is our care and support planned?</td>
<td>4 - Good</td>
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<td>-----------------------------------------</td>
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<tr>
<td>5.1 Assessment and care planning reflects people’s planning needs and wishes</td>
<td>4 - Good</td>
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</tbody>
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