

Murrayfield House Nursing Home Care Home Service

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Unannounced

Completed on:

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Service provided by:

HC-One Limited

Service no:

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About the service

Murrayfield House Nursing Home is a care home service registered to provide 24 hour care for 100 older people and is provided by HC-One Limited which is an organisation providing care homes for older people throughout the UK.

The home is situated in a quiet residential area to the west of Edinburgh in the Murrayfield area, close to transport links, amenities and the city centre. The service is provided over two buildings and is set within its own well maintained extensive grounds and gardens. Care and support is provided by a team of nurses and care staff.

The original house has been extended and accommodation is provided on the ground and first floors. There is easy access to a central courtyard garden. This building houses a cafe providing drinks and hot snacks for residents and visitors to the home.

The newer of the two buildings provides accommodation over three floors and provides care for people with frailty who may also have dementia. There are several lounges and dining rooms throughout the home. There is a central kitchen, a laundry and hairdressing facility.

At the time of this inspection there were 88 residents living at Murrayfield House.

What people told us

We spoke with a number of residents and relatives during this inspection visit. In addition, in advance of this inspection we had received 5 completed on-line surveys from residents and 6 from relatives.

People commented very positively about the support provided by this service. Comments included:

"Everything is adjusted to what his needs are at the time."

"Staff are very attentive."

"Mum says everyday is a happy day."

"Does a lot more activities than they did at home."

"Delighted with the care."

"My father is extremely well looked after. He has been a resident for x years and has gained so much from being in the home."

"Many of the staff are extremely warm and friendly. They have a sense of humour and are always ready to chat. I feel they know my father very well."

"All staff are very professional, well trained and well managed. All go the extra mile to perform well. Great team."

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?	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?

4 - Good

We observed residents being cared for with sensitivity by staff who were patient, responsive and supportive. "I am always listened to and the care and support is excellent" said one resident.

We saw that the provider's effective monitoring systems contributed to the management of people's health and promoted the positive health outcomes we heard about.

Staff we spoke with demonstrated a good understanding of the support people needed to maintain optimum health and we saw that staff supported residents discreetly to help maintain their dignity.

And whilst staff demonstrated the principles of the Health and Social Care Standards in their practice, their understanding of these remained variable. These underpin practice and help staff to improve the quality of care experienced by people and provide better outcomes for everyone. We asked the provider to consider how they can support staff become more conversant with these. Within team meetings and supervision were some of the opportunities for continuous staff development that we suggested.

Residents we spoke with said that they were treated with respect and able to make choices. An example of this was that many chose to have their breakfast in their rooms. They told us this helped them ease into the day ahead at their own pace.

During this inspection we spent time watching how well staff engaged with residents. This included during mealtimes in two of the households. We saw that the mealtimes experience was calm and relaxed and free of distractions. Interactions observed were generally affectionate and respectful and staff were attentive without being intrusive.

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Staff encouraged people to be as independent as possible at mealtimes, maintaining their skills and those who needed assistance were appropriately supported. We suggested using heated plates to maintain the temperature of food and promote the meal experience for a few residents who took a bit longer to eat their meals.

Wellbeing coordinators worked across the service facilitating activities and opportunities for social stimulation and engagement. Activities were on offer each day and displayed prominently. There were weekly bus trips and people who had been on these told us that they had enjoyed it.

Whilst it was evident from our observations, conversations and records that people participated in the activities on offer some said that they just weren't for them. Activity that is meaningful is essential to human well-being, helps maintain a person's sense of self-worth and gives purpose and enjoyment to the day.

We suggested that there was scope for a more person centred approach to support residents to pursue the very specific interests and aspirations that had been identified often in collaboration with family members.

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

People's health needs and their preferred daily routines were clearly documented within the support plans that we looked at. Information was regularly reviewed to ensure that it was up to date. This meant that staff had access to the most relevant information to be able to support people.

Resident monthly summaries captured the significant information, experiences and changes that had occurred during the previous month. Those we looked at focused mostly on people's physical health. These helped to inform the ongoing monitoring of residents and contributed to the formal reviews of care. We saw that relatives were involved in these discussions and could provide valuable insights.

Where appropriate we felt that there was opportunity for care plans to be written in the first person. This would mean that they were more evidently developed from the residents' perspective and could help people feel in control and engaged in their plan. At the last inspection we asked that consideration be given to making care

plans accessible to residents, including where people wished, keeping these in their rooms. We noted that was still an area for further improvement.

In most of the files we looked at that there was some life story information and a new document was being rolled out to help give more of a sense of people's rich history. This will help residents, particularly those with dementia to share their stories and enhance their sense of identity. This will be especially useful when people are having difficulty in sharing this information themselves. Life Story work can help encourage better communication and an understanding of the person's needs and wishes.

We found that the important details about people's interests and aspirations provided by residents and their relatives was often either generalised or in other parts of the care plan. This meant that activities were not always being tailored to people's specific interests. Auditing the quality of information in support plans could help address this.

We discussed ways to improve how the service records people's experience of the activities that they took part in. Evaluating the activities being provided will be pivotal to understanding what people gain from these, if these are meaningful and enjoyable, and if they meet people's needs. We suggested that it is important to reflect people's feedback from their own perspective.

One person told us, "The home is extremely well managed, the manager is visible and always willing to listen" and overall people we spoke with were very happy with the quality of care provided by this service.

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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?	4 - Good
5.1 Assessment and care planning reflects people's planning needs and wishes	4 - Good

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