

## Eildon House Care Home Service

23 Eildon Street  
Edinburgh  
EH3 5JU

Telephone: 01315 571 481

**Type of inspection:**  
Unannounced

**Completed on:**  
13 September 2021

**Service provided by:**  
Eildon Care Limited

**Service provider number:**  
SP2013012074

**Service no:**  
CS2013317488

## About the service

Eildon House Nursing Home is registered to provide a care home service to 24 older people. The provider is Eildon Care Limited.

The home is a three-storey converted terraced house, situated within a central position in Edinburgh. All bedrooms were single occupancy. There are double rooms. Double rooms are registered to support people in relationships to continue to live together if they wish. Each room, except for two, had en-suite facilities. There was a passenger lift that supported people to move between floors.

The service aims and objectives stated: 'All our staff strive to create a warm, friendly atmosphere where comfort, safety and security are paramount, and where each resident can be the person he or she has always been'.

This inspection was carried out by two care inspectors on 07 September 2021. We reviewed the progress made in meeting requirements from previous inspections and looked at how well the service supported people's wellbeing.

## What people told us

At the inspection there were 14 people were living in the home. We spent time with people around the home and had general conversations with eight people. We spent time observing how staff and people interacted to help us evaluate experiences of people who cannot always tell us about their care. People responded positively when offered support from staff and had built up positive relationships, they were relaxed in their company. People were comforted and reassured.

We contacted four relatives by email but did not receive any responses. We spoke to three relatives by telephone. Overall relatives were happy with the care and support provided. They said that staff were kind and caring but had some concerns that there was not enough staff. Comments included "they're doing their best" and "my impression is that there's not enough staff".

There were mixed views about communication with the home staff. Some people felt that they were contacted when there were changes in their relative's health or care needs. Some also said they were kept up-to-date by newsletters and contact from the manager. Others commented that information shared between staff could be improved and some requests they had made were not always acted upon. Some people felt that staff shared information about how their relative had spent their time, however, we also heard that others found it hard to get a sense of how their relatives spent their days.

## 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?	3 - Adequate
How good is our care and support during the COVID-19 pandemic?	3 - Adequate

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

## How well do we support people's wellbeing?

### 3 - Adequate

Overall we evaluated that the support for people's wellbeing was adequate. There were strengths but some important areas for improvement.

#### 1.1 People experience compassion, dignity and respect.

Overall people were supported in a dignified and respectful way and staff knew people well. Staff attended to important details when helping people, to be smartly dressed, wear make-up or their favourite items of jewellery. Mealtimes were relaxed and enjoyable for some, whilst for others, they were not a sociable experience and support could have been provided in a more positive way. Some people were not assisted in a considerate manner or given the full attention of the staff who were helping them with their meal. People's preferences and choices should be consistently recorded in their personal plans. This will help ensure that people experience care that is right for them and reflects their wishes.

In order to ensure that people experience positive outcomes from the care and support they receive, ongoing monitoring of staff practice was needed. Support for staff to develop skills in person centred care and to put training in to practice will support this.

(see requirement 1)

#### 1.2 People get the most out of life.

There were two activity workers in the home, one had recently been employed. Activities were organised on a daily basis, which included group activities and individual one-to-one time.

People spent time together in communal areas of the home and enjoyed flower arranging and planting window boxes. At other times, people were watching films in both lounge areas. Some people did not participate in the group activities and appeared not to be interested, or able, to watch the films that were on. Some people spent periods with little stimulation or interaction, other than socialising with staff when they were being supported with their care.

There were missed opportunities for people to have meaningful social contact at times throughout the day. For example, when staff put on a film for people they could also have used this as an opportunity for reminiscence or creating a cinema experience or gathering people together for snacks and drinks. Social opportunities and activities could be improved for some people to support them to pass their time in ways that reflected their interests or hobbies.

The manager and activity workers had started to review the planning and provision of activities for people living in the home. This included evaluating all social and activity related documentation. More sensory related activities and further training in supporting people with dementia, or those less able to communicate, may be helpful in supporting people to be occupied and engage with others during their day. This will help support a more individualised approach to social activities for people and support them to live as active and interesting a life as possible. We will look at the progress with this at future inspections.

People were able to have visitors in line with the Scottish Government Open with Care guidance. Relatives

told us that they were able to visit when they wished. People were also supported to keep in touch with families and friends by telephone or other technology.

### 1.3 People's health benefits from their care and support.

Personal plans contained a range of information and showed that key care needs were assessed and planned for. Some sections contained very personalised information, such as plans for people who experienced episodes of stress or distress. The information helped staff understand what may cause people to become distressed and what they could do to alleviate this.

Whilst recognising strengths and the on-going development of personal plans, we discussed with the manager some areas for further improvement. Some plans needed more detail, such as the type of topical creams to be applied, settings for pressure relieving mattresses, or choices, such as when people wanted to retire to bed. Anticipatory care plans should be developed to ensure that people's wishes for their end of life care are recorded. Detailed evaluations of people's care will support plans to remain up-to-date and personalised (see area for improvement 1).

Overall, staff were knowledgeable about people's care and support needs. However, some staff were not aware of important information such as if people were on fortified diets. Good communication and information sharing is important in ensuring that staff have up-to-date knowledge of the care and support people need and any changes that have occurred. The manager provided reassurances that this will be addressed.

Staff responded to changes in people's condition and liaised with health professionals. Medicines were managed well and documentation was well completed.

The deployment of staff had improved, which meant staff were more organised and the home had a calm atmosphere. Staff attended promptly to people's requests for assistance. The manager told us that they had reviewed staff rotas to help ensure there was a good range of skills and knowledge with the staff team on each shift. To support positive outcomes for people living in the home, the provider should ensure that there are skilled and experienced staff on each shift to help monitor and guide staff practice.

We have updated the outstanding requirement on staffing to reflect the findings at this inspection. Please see requirement one.

## Requirements

1. People should experience respectful and dignified care from competent and skilled staff. By 21 November 2021, the provider must ensure that people's care and support needs are effectively met. In order to achieve this, the provider must ensure:

- people are supported to have a positive dining experience and are assisted in a respectful way by staff.
  - there is on-going, evidence-based assessments of staff competence and skills reflecting training given.
- This should include but not be limited to, PPE use, promoting choices and supporting people in respectful and dignified ways which reflect their wishes and preferences.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: 'If I need help with eating and drinking, this is carried out in a dignified way and my personal preferences are respected' (HSCS 1.34); 'People have time to support and care for me and to speak with me'. (HSCS 3.16) and 'My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected' (HSCS

1.23) and in order to comply with Regulation 15(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

### Areas for improvement

1. People should be confident that their personal plans reflect things that are important to them. The provider should continue to develop and improve personal plans to ensure they reflect people's needs and wishes and how these are to be met. In order to support this, plans should include, but not be exclusive of;
  - people's wishes and preferences for their care at the end of life
  - information on topical creams/ointments, settings for pressure relieving mattresses and people's re-positioning needs
  - detailed evaluations of people's care and support

This is to ensure care and support is consistent with the Health and Social Care Standards which state that "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).

### How good is our care and support during the COVID-19 pandemic?

**3 - Adequate**

#### 7.2 Infection control practices support a safe environment for people experiencing care and staff.

At this inspection we followed up on the requirement made at the inspection completed 17 May 2021. Due to the progress made on this, we have re-evaluated Quality Indicator 7.2. Please see the section of this report entitled 'what the service has done to meet any requirements we made at, or since, the last inspection' for progress made in meeting the requirement. Improvements had been made around infection, prevention and control. The home was clean, tidy and free from clutter. There was a good supply of personal protective equipment (PPE) which was easily accessible by staff.

The laundry had been upgraded making important improvements since the last inspection. The laundry had been upgraded to improve infection prevention and control. For further information see requirement 2 in 'What the service has done to meet any requirements we made at, or since, the last inspection'.

Staff had received training in infection prevention and control. However, this learning was not always evident in their practice. For example, some staff touched their facemasks but did not change these or had their facemasks under their chin. On one occasion, a member of staff had removed their facemask whilst in the lounge area where people were. On-going observation of staff practice will help senior staff to identify and support staff development (see requirement 1 in Key Question 1, 'How well do we support people's wellbeing').

#### 7.3 Staffing arrangements are responsive to the changing needs of people experiencing care

We reviewed staffing arrangements when looking at Key Question 1 'How well do we support people's wellbeing' and as a result we have increased the evaluation (see Key Question 1, quality indicator 1.3).

## What the service has done to meet any requirements we made at or since the last inspection

### Requirements

#### Requirement 1

People should experience care and support from the right number of staff. By 14 June 2021, the provider must ensure that a full assessment of staffing is undertaken to reflect both the environmental layout of the home and that people's care and support needs are effectively met. In order to achieve this, the provider must:

- Ensure there is sufficient staff to assist people to eat and drink promoting a positive dining experience.
- Re-assess the level of staff in the home to ensure there are sufficient nurses and care staff on each shift to fully meet people's health and care needs. This should include the deployment of staff on a day-to-day basis.
- Re-evaluate and evidence that there is enough domestic cover throughout the day to ensure cleaning meets best practice guidance.
- Ensure there is an on-going, evidence based assessment of staff competence and skills reflecting training given. Including but not limited to hand hygiene, PPE use and promoting positive dining experiences.

This is to ensure care and support is consistent with the Health and Social Care Standards which state:

'If I need help with eating and drinking, this is carried out in a dignified way and my personal preferences are respected' (HSCS 1.34); and 'People have time to support and care for me and to speak with me'. (HSCS 3.16) and

'My needs are met by the right number of people' (HSCS3.15) and 'My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected'. (HSCS 1.23) and

In order to comply with Regulation 15(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

**This requirement was made on 17 May 2021.**

#### Action taken on previous requirement

During our inspection visit, there were sufficient staff numbers to meet people's needs.

Domestic cover was provided until 6.30pm each day. The home was clean and tidy and we identified no concerns with cleanliness throughout the home. The care staff also completed cleaning of frequently touched points around the home. At the current level of occupancy there appeared to be sufficient staff to ensure cleaning meets best practice guidance. However, we discussed with the provider the need to keep this under review as occupancy in the home increases.

While not all elements of this requirement have been fully met we have concluded that overall it is met and the areas needing further improvement are identified under key question one, requirement one

### Met - within timescales

#### Requirement 2

People should have their laundry undertaken in a way that reduces cross-contamination or infection. By 26 May 2021, the provider must ensure the home's laundry room complies with Health Protection Scotland, (HPS), COVID-19 Information and Guidance for Care Home Settings. In order to achieve this, the provider must ensure:

- the laundry room is in a good state of repair and fit for purpose;
- that laundry room equipment is safe, effective and fit for purpose;
- that used linen is managed in line with Health Protection Scotland (HPS) COVID-19 Information and Guidance for Care Home Settings.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state that: 'I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment.' (HSCS 5.22); and In order to comply with Regulation 10(2) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

**This requirement was made on 17 May 2021.**

#### Action taken on previous requirement

The laundry has been upgraded since the last inspection. New washers and driers have been fitted, along with a new wash hand basin. A system for keeping clean and dirty laundry separate was in place, helped by the placing of a screen between the washers and driers. A separate area for clean clothes to be ironed had been created in a small room near the laundry. The laundry worker described a clear system for managing linen through the laundry and out to the ironing room.

The ironing room is very small with no natural ventilation or light. We have asked the provider to check and ensure the safety of this regarding ventilation and use of a hot iron.

### Met - within timescales

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## Detailed evaluations

How well do we support people's wellbeing?	3 - Adequate
1.1 People experience compassion, dignity and respect	3 - Adequate
1.2 People get the most out of life	3 - Adequate
1.3 People's health benefits from their care and support	3 - Adequate

How good is our care and support during the COVID-19 pandemic?	3 - Adequate
7.2 Infection control practices support a safe environment for people experiencing care and staff	3 - Adequate
7.3 Staffing arrangements are responsive to the changing needs of people experiencing care	3 - Adequate



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Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

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