

## Eildon House Care Home Service

23 Eildon Street  
Edinburgh  
EH3 5JU

Telephone: 01315 571 481

**Type of inspection:**  
Unannounced

**Completed on:**  
10 December 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 was an unannounced inspection which took place on 02 December 2021 between 11.45 and 18.30. Three inspectors carried out the inspection. We reviewed the progress made in meeting requirements from previous inspections.

## What people told us

There were 14 people living in the home at the time of our inspection. We spoke with six people individually and one relative during our visit. People were complimentary about the staff although some commented that they thought there was not enough staff at times. One person felt there was not much going on within the home. Another said they can spend a lot of time by themselves but staff do their best. Comments included;

"The staff are good"

"Sometimes there isn't enough staff"

"Staff listen to me, I can speak with them".

We spoke with one relative during the inspection visit. Overall, they were very happy with the care their relative received. They felt welcome when they visited and the communication from staff was good.

We contacted people by email and invited them to complete electronic questionnaires with their feedback on the care and support the staff provide.

We received three completed questionnaires from relatives/carers. All agreed/strongly agreed that their relative was treated kindly and respectfully. One commented that "my relative is well looked after and supported with his care". Another relative commented "am updated with my mum's changes of circumstances and the home do their best to make my mum as comfortable as possible". People were happy with how visiting is organised.

We received completed questionnaires from two visiting professionals. Both agreed/strongly agreed that people received compassionate, respectful and dignified care. They agreed/strongly agreed that staff communicated well with them regarding people's health needs and were confident any concerns they raise will be dealt with.

Their comments included;

"Most carers were very familiar with care needs of residents"

"I have found the manager very approachable when I have raised any concerns. She has acted swiftly to respond to concerns or queries"

"Staff have very good relationships with residents. The small size of the care home means that there is a homely atmosphere".

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

At this inspection we followed up on the areas for improvement made at the inspection completed on 13 September 2021.

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.

Whilst the focus of this inspection was to review the progress made in meeting the requirement and area for improvement from the last inspection, we provided feedback on other observations we made during our visit.

Social opportunities and activities were organised by a well-being coordinator. A game of dominoes was organised for a small group, which they enjoyed. Another resident also enjoyed watching this even though they were unable to join in. Other people liked spending time together in the lounges and had formed supportive friendships. There were periods of time where there were no staff in the lounges beside people. This which meant they had little stimulation or social interaction, other than when they were being supported with their care or when staff came in to complete checks.

One person commented that "There isn't much going on" and that they "would like to go for longer walks, go to the museum and art galleries". Another said that they felt they can spend a lot of time by themselves with no staff interaction but that staff do their best.

Social and activity opportunities needed to improve in order for people to be as active as they can be and to enjoy activities that are meaningful for them. The manager was aware of this and was taking action to address this. This should be progressed in order that people are able to have a sociable and active life in ways that reflect their own interests or preferences.

As some further improvements were identified, we did not re-evaluate the service. The grades from the previous inspection remain relevant to the outcome of this inspection.

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

### Requirements

#### Requirement 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).

**This requirement was made on 13 September 2021.**

## Action taken on previous requirement

There were problems in staffing the kitchen during our visit, however, staff managed this well and ensured that mealtimes were calm and organised.

There was a relaxed atmosphere during mealtimes and people were supported in a respectful manner by staff.

People were offered visual choices for drinks and condiments, which helped them choose their preferences at meal times. Staff supported people to eat at their own pace and were attentive to people's requests.

To help promote good infection prevention and control, people should be offered the opportunity to cleanse their hands before meals.

In one dining room, residents were sat at separate tables which meant they were less able to chat and interact with each other, resulting in a less sociable mealtime experience for them. The manager advised this was not normally the case but is taking action on this.

Overall, mealtimes for people had improved and people had a better dining experience.

There was a calm and relaxed atmosphere during our visit and people experienced respectful and caring support. People were approached and spoken to in a pleasant manner by staff and one person told us that staff listened to her and she could speak with them. This reflected our observations.

People were supported to develop friendships in the home and we saw one person being comforted by others when they became upset.

Observations of staff practice were completed by the manager. These had identified where improvements in practice could be made. These could be further developed by having staff reflect on their practice where issues are identified and linking this to training and support they may need. An overview of observations will support the manager to plan and monitor observations.

Overall, staff use of personal protective equipment (PPE) was good. Staff should be observant about when facemasks should be changed in order to continue to promote good infection and control practice.

## Met - within timescales

## 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

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).

**This area for improvement was made on 13 September 2021.**

#### Action taken since then

Since our last inspection, the provider had introduced an electronic personal plan system and was in the process of transferring all personal plans over to this.

There was lovely personalised information in some sections of the plans. This helped the reader understand what was important to the person and how their specific support needs were to be met.

Risk assessments were completed and had helped inform the development of plans. Care plan sections had been devised in response to specific needs of individuals such as how staff should support someone in managing their pain or where they had specific preferences for a care need such as their skin care.

End of life plans were in place but would benefit from including more detail relating to people's individual preferences and wishes.

There was inconsistent recording of some care charts such as those for topical creams and ointments, fluid intake and re-positioning.

The staff had worked hard to transfer personal plans over to the new system and in developing these to be more person-centred. Some personal plans were at different stages of completion than others and staff should develop these to in order to ensure that plans set out how people's needs are to be met, as well as their wishes and choices.

Whilst some plans need some further development, sufficient progress had been made in order to meet this area for improvement.

## 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).

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Compass House  
11 Riverside Drive  
Dundee  
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[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

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