

Parkholme Care Home Service

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Telephone: 01343 814 581

Type of inspection:
Unannounced

Completed on:
29 March 2022

Service provided by:
Cornerstone Community Care

Service provider number:
SP2003000013

Service no:
CS2005091582

About the service

Parkholme is a care home operated by Cornerstone Community Care. Parkholme is registered to provide a care home service for six adults with learning disabilities and at the time of the inspection there were six people living in Parkholme.

Parkholme provides modern purpose built accommodation. The environment enables people to have en-suite bedrooms with shared communal spaces. The service has a sensory room, a craft room and a large enclosed garden.

Parkholme's aims were:

"Our Purpose

To deliver high quality care and support that enables everyone to live a valued life - the life they choose.

Our Vision

To be the 1st choice for care and support in Scotland.

Our Values

- Customer focussed
- Professional
- Caring
- Pioneering"

What people told us

The people we saw in the home were not able to chat with us. They appeared to be happy in their home.

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 care and support during the COVID-19 pandemic?	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

Support for people's well-being was good. A small number of improvements were needed, but the service's strengths resulted in a positive experience for people.

There were natural, warm, compassionate interactions between staff and people who used the service. It was clear that staff knew the people well and recognised them as an expert in their own lives. We met people who appeared confident, partly because staff had taken time to help them look their best by styling their hair, helping them choose their clothes, making sure they were comfortable. Also, different techniques were used to enable people to make choices which reflected their wishes and personality. Everyone appeared relaxed within their own home.

There was a large range of activities available for people to choose from within their home and in the community. They were encouraged to take part in activities that suited their preferences. Following the easing of covid restrictions, staff supported people to again attend local community groups. Everyone in the home had access to communal areas including the garden, whatever their abilities. Lots of these activities were displayed in a photograph album for people and their relatives to enjoy.

People were supported to maintain their relationships. This was done through technology including phones and iPads, as well as visits. This meant people could maintain contact with those important to them.

The environment was welcoming and homely. The large kitchen/diner was used as a gathering point for people to have a coffee and a chat. Artwork and photos were displayed on the corridor walls, people had decorated their bedrooms to their own taste. The manager told us that before somebody moves into the service, they ensure the room is as they would like it, making the transition easier.

Staff were enabled to offer individual support guided by support plans that were person-centred and promoted a positive "can do" approach. People's abilities and choice were stated in the plans, along with guidance about how to support people appropriately. Goals which would benefit people's well-being were identified along with a plan for achieving these. In the longer term, reviews were being carried out with involvement from key people and updates to support plans were completed.

There was a clear system for recording accidents and incidents. Information was accurately recorded, but not always evaluated to identify areas for improvement. There was a system for auditing people's finances which sometimes duplicated information. We found medication records were not always completed accurately. This meant that we could not be assured people had received their medications as prescribed. The management team had identified and taken action to discuss with the staff concerned. However, this had not brought about improvement. We recommended the service should ensure that their systems are used effectively to inform good practice.

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

4 - Good

It was good that the service had altered the way they worked with people in response to guidance for the Covid-19 pandemic. Several strengths impacted positively on outcomes for people and outweighed any areas for improvement.

People should expect to be kept safe from Covid-19. Guidance in relation to Covid-19 was readily available for all staff. All staff had completed training in infection prevention and control (IPC) and were confident in their knowledge and procedures for minimising risk. We identified and discussed some small areas for improvement with the manager, who understood and took immediate action.

A good supply of PPE was available within the service and was stored securely in a clean and dry place.

Managers observed staff practice in correct use of PPE, to ensure that best practice was being maintained. The service was clean and clutter free, cleaning schedules and the appropriate cleaning products were viewed. This promoted a safe environment for everyone.

People's needs were met by the right number of staff, who were confident in all aspects of support and their role. A staffing assessment had recently been completed and new staff had been recruited. The service had their own relief pool of staff available, meaning the use of agency staff was minimised. This ensured that people were familiar with everyone who cared for them. The service had a contingency plan in place, which clearly demonstrated actions to be taken if staff were absent from work due to Covid-19. This would result in continuity of care for people who use the service.

Staff spoke to us confidently about testing and isolation requirements in line with their role and we saw this confirmed through records. We noticed that staff adhered to social distancing guidance.

Overall, we felt that people were at low risk of cross infection.

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	4 - Good
1.2 People get the most out of life	4 - Good
1.3 People's health benefits from their care and support	4 - Good

How good is our care and support during the COVID-19 pandemic?	4 - Good
7.2 Infection control practices support a safe environment for people experiencing care and staff	4 - Good
7.3 Staffing arrangements are responsive to the changing needs of people experiencing care	4 - Good

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