

Braid Hills Nursing Centre Care Home Service

77 Liberton Drive
Edinburgh
EH16 6NS

Telephone: 01316 721 084

Type of inspection:
Unannounced

Completed on:
13 June 2022

Service provided by:
BUPA Care Homes (ANS) Limited

Service provider number:
SP2003002354

Service no:
CS2003010604

About the service

Braid Hills Nursing Centre is a care home that is registered to provide care to a maximum of 119 people; 95 older people and a maximum of 24 people with a physical disability. It is owned and run by BUPA Care Homes (ANS) Limited.

The home is situated in a residential area to the south of the city of Edinburgh, close to local bus routes. The building sits back from the road, and is surrounded by landscaped gardens, some of which are enclosed. There is off-road parking available at the front of the building.

Accommodation is provided on two floors, and access to the first floor is by stairs, passenger lift or stair lift fitted to the main staircase. The home is divided into four units, at the time of our visit one of the units was closed. One unit provides care for young people aged 21yrs to 65yrs, three units care for people over 65yrs, with one unit specialising in the care of people living with dementia. Each unit has a lounge, dining area, shared bathrooms and toilets. All bedrooms have en-suite toilet and wash basin, with a small number also having en-suite shower facilities. Some units have a visitor lounge and the ground floor units have direct access to enclosed garden areas. There are central facilities in the home for cooking and laundry.

The provider states it's core purpose is 'longer, healthier, happier lives'. The aims and objectives for Braid Hills Nursing Centre include providing a service that is safe, effective, caring, responsive and well-led. The specific aims for the care home include;

- To treat our residents as individuals, supporting independence and lifestyle choices
- To enable our residents to meet their full potential through well planned support and care
- To provide opportunities for residents to participate in activities tailored to their individual needs and preferences to maintain physical and mental well-being
- To meet the emotional, social and physical needs of our resident in a secure and homely atmosphere.

The inspection was unannounced and carried out by two inspectors on 6 June 2022. This inspection was undertaken to follow up on a requirement following a complaint investigation which took place in April 2022. At the time of our visit there were 84 people being supported.

What people told us

One person we spoke with spoke positively about the staff.

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?	not assessed
How good is our leadership?	not assessed
How good is our staff team?	not assessed
How good is our setting?	not assessed

How well is our care and support planned?	not assessed
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Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

This key question was not assessed.

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?

This key question was not assessed.

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

Requirements

Requirement 1

The provider must support people to assess risks and maintain their safety.

By 2 May 2022, the provider must ensure a robust risk assessment process is in place to keep people safe.

This must include, but is not limited to:

- i. Ensure consultation and involvement with the person experiencing care and / or their representative in the development and review of risk assessments;
- ii. Review and update risk assessments to reflect any mental health issue which may impact on the person's capacity to make decisions regarding their own safety;
- iii. Use the risk assessment process to inform how risks will be managed through their care plan.

To be completed by: 02 May 2022

This is to ensure care and support is consistent with Health and Social Care Standard 1.15: 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.

This is in order to comply with:

Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This requirement was made on 1 April 2022.

Action taken on previous requirement

This requirement was made following a complaint investigation. The provider did not submit an action plan to detail how the requirement would be met until after we attended the service to follow up this requirement.

We looked at records and found that although risk assessments had been completed, these were not always updated appropriately when people's needs had changed. Some risk assessments contained conflicting information. Risk assessments lacked detail on how people or their representatives were involved in this process. There was a lack of detail on how equipment was to be used and the risks associated with this. Risk assessments stated that checks were to be completed to ensure people's safety. However, we found these were not being completed in line with people's assessed need.

This requirement was not met and an extension until 11 July 2022 has been granted.

Not met

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

In order to ensure positive outcomes for people, a full post fall assessment should be undertaken and should be inclusive of a pain assessment which would then inform decision making. This should be fully documented.

This is to ensure care and support is consistent with Health and Social Care Standard 3.14: I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes.

This area for improvement was made on 1 April 2022.

Action taken since then

This was a focused inspection and we did not review this area for improvement.

Previous area for improvement 2

People should be confident risk assessments are undertaken and appropriate action taken to minimise risks if people are seen and/or assessed at being at risk.

This is to ensure care and support is consistent with Health and Social Care Standard 1.19: My care and support meets my needs and is right for me.

This area for improvement was made on 1 April 2022.

Action taken since then

There is a requirement in place in relation to risk assessments therefore this area for improvement no longer applies.

Previous area for improvement 3

People should be confident that if concerns are raised these should be acted upon and for outcomes for people to improve and for people to be kept safe.

This is to ensure care and support is consistent with Health and Social Care Standard 4.21: If I have a concern or complaint, this will be discussed with me and acted on without negative consequences for me.

This area for improvement was made on 1 April 2022.

Action taken since then

This was a focused inspection and we did not review this area for improvement.

Previous area for improvement 4

Further assessment, opportunities and review of meaningful activities is needed. This would include people being able to make use of the local community, external activities and more meaningful activities within the home. This would reflect individual interests and preferences and link into the residents committee.

This is also to ensure care and support is consistent with the health and social care standards which state: 2.22 I can maintain and develop my interests, activities and what matters to me in the way that I like.

This area for improvement was made on 3 February 2022.

Action taken since then

This was a focused inspection and we did not review this area for improvement.

Previous area for improvement 5

Accurate schedules of cleaning and completion records should be maintained. These should be reviewed to ensure that there are sufficient domestic staff to undertake effective cleaning of the home.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state that: 5.22 I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment. 5.17 My environment is secure.

This area for improvement was made on 3 February 2022.

Action taken since then

This was a focused inspection and we did not review this area for improvement.

Previous area for improvement 6

A review of staffing should be undertaken and continually monitored to show that there are sufficient numbers of staff to support people's preferences of activities, including but not limited to, the use of community settings. The review should also show how people's social needs were being met, when they spend time in their room, either through choice or because of isolation due to coronavirus.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state that: 3.15 My needs are met by the right number of people and 3.16 People have time to support and care for me and to speak with me.

This area for improvement was made on 2 February 2022.

Action taken since then

This was a focused inspection and we did not review this area for improvement.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Detailed evaluations

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