

Murrayside Care Home Service

34 South Beechwood Edinburgh EH12 5YS

Telephone: 01315 168 548

Type of inspection:

Unannounced

Completed on:

8 June 2022

Service provided by:

Care UK Community Partnerships Ltd

Service provider number:

SP2016012818

Service no:

CS2018365368



Inspection report

About the service

The service is a care home providing care and support for up to 63 older people, located in Edinburgh. The care home was registered with the Care Inspectorate on 31 October 2018. The service is managed by Care UK Community Partnerships Ltd. The service consists of three floors, each organised for people with a specific level of need. Roseburn unit on the ground floor, provides residential care; Nisbet unit on the first floor, provides dementia care; while Broomhouse unit on the second floor, provides nursing care. Each floor is similar in layout with a large lounge, a small quiet lounge and a dining room. The home also has a hair salon, activities room, small cinema room and a family friendly café with roof terrace on the second floor. The service has an enclosed garden also.

About the inspection

This was an unannounced inspection which took place on 31 May to 2 June 2022. The inspection was carried out by two inspectors from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

We evaluated how well people's health and wellbeing was being supported, the infection protection and control practices in place as well as quality of staffing and management.

To inform our evaluation we:

- observed practice and daily life
- spoke in detail with nine people using the service and five family members
- spoke with staff, management and professionals visiting the service
- assessed the environment of the service
- reviewed documents.

Key messages

- Staff interacted warmly and respectfully with people.
- There were a good selection of activities, though more activities staff are needed.
- The environment was very clean and tidy and in good condition.
- Staff were well trained and supported.
- Managers were competent and approachable.
- The service had comprehensive auditing of care.
- Personal plans were thorough and up to date though need to focus more on people's outcomes.

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?	4 - Good
How good is our staff team?	4 - Good
How good is our setting?	5 - Very Good
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 evaluated this service as operating at a good level where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

People were free to move around the home and make use of communal areas which were clean and welcoming. Staff interacted warmly and respectfully with people and knew their history, routines and preferences. Staff were well-trained in dementia care, assisting people who were anxious in a caring and calming way. One person experiencing care told us "if they can do something for you they will do it". When assisting people to move about, staff interacted supportively and with encouragement. Staff spoke positively about their role in improving people's lives and used people's preferred names when communicating with them. This meant people could build trusting relationships at the service.

There were a good selection of activities including including games, Namaste sessions, pet therapy and physical exercises. There were dementia specific activities being used well with people. The service had dedicated staff for these group activities, but more one-to-one time with people to chat or undertake an activity is needed. People were accessing the enclosed garden regularly. A relative told us "activities staff are good at picking up what she enjoys and good at encouraging her to take part".

To improve further, the service could arrange more outings for people and more community involvement, entertainment and exercise-based activities. More activities staff are being recruited to. These opportunities to take part in meaningful activities supports people to be involved and valued.

Staff were attentive to people's needs. Support with eating and drinking was undertaken in a dignified way. Mealtimes were well staffed and people were not kept waiting for their meals or being rushed. The staff knew people's preferences and good quality meals and snacks were available for people. This meant people enjoyed their meal time experience, one relative told us "the food is brilliant, dad thinks it's great".

People had nutritional risk assessments completed. When there were concerns about a person's food and drink intake this was regularly monitored. There needs to be more detail recorded about the amount of food and drink people had taken. This is to support the service to effectively respond to signs of deterioration in people's health.

Medication administration was very well organised with regular audits by management. This ensured that people experienced safe and effective medication.

Visits to the service did not require booking beforehand with no restrictions on the length or frequency of visiting. Visits took place in people's rooms and outside. This ensured that people's emotional and physical wellbeing was supported, and their rights protected in the service's approach to visiting.

Relatives we spoke with commented positively about the friendliness of staff. They were confident in staff who they described as responsive and understanding. Communication was effective and relatives felt involved in their family member's life, for example, there was a recent meeting regarding activities. One relative told us "there is good communication, they are quick to call me". This promoted people experiencing care to stay connected with the people who are important to them.

People's bedrooms, en suite rooms and communal areas were very clean and tidy, though retaining a

welcoming and comfortable setting.

The service had a well-managed process for laundry collection to support good infection, prevention and control practice and their laundry room was clean and tidy. The cleaning products and solutions were suitable for a range of cleaning purposes during the Covid-19 pandemic.

Frequently touched areas (for example, door handles and light switches) were being cleaned regularly.

There was a good supply of personal protective equipment (PPE) such as gloves and masks. The PPE stations were readily available throughout the home. Staff were seen to wear, use and dispose of PPE in line with guidance. People and staff had ready access to alcohol-based hand rub. This ensured people are protected as staff take all necessary precautions to prevent infection.

How good is our leadership?

4 - Good

We made an evaluation of good for this key question, we found significant strengths in aspects of the leadership and clearly outweighed areas for improvement.

People we spoke to considered that management were accessible and responsive. One relative told us "the care staff are very nice, helpful, and management is getting there".

There were regular observations of staff competence in infection protection and control. Various quality checks were taking place, such as personal plans, medication administration and the environment. Health issues of people experiencing care were monitored thoroughly and actions taken when needed. A satisfaction survey for relatives had been completed and there were regular relative meetings. This ensured there is a culture of continuous improvement for people experiencing care.

How good is our staff team?

4 - Good

We evaluated the service to be operating at a good level where we found significant strengths in aspects of the staffing and clearly outweighed areas for improvement.

Staff recruitment and induction processes were thorough. Training was comprehensive with a high level of completion. Staff had received Covid-19 and infection, prevention and control training, key features included the importance of correctly wearing masks, gloves and aprons as well as regular hand washing. Good staff competence means better understanding and responsiveness of people's needs and wishes.

As the service moves to more electronic records, it would be useful for a greater availability of computers and improved Wi-Fi for staff to record quickly.

Formal face-to-face supervision was taking place though staff team meetings needed to happen more regularly. This is to ensure staff had the necessary information and support to provide quality care based on relevant evidence, guidance and best practice.

There had been a reduction in agency staffing, therefore the care staff were more consistent and stable which meant they knew people's needs and preferences well. A relative told us "Staff know her well, her likes and dislikes". We observed that staff worked together well, in a positive and calm manner. A visiting professional told us "the nurses are caring and well trained".

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This ensured people benefited from a warm atmosphere because there are good working relationships.

How good is our setting?

5 - Very Good

We found significant strengths in the environment and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

There were arrangements in operation for maintenance of the premises and the equipment to ensure residents are safe.

The service was very clean, tidy and spacious. The furnishings and equipment were in good condition. People's rooms were comfortable with personal decoration. There was an enclosed garden from the ground floor and spacious balconies on first and second floors. The setting is well-designed with plenty of communal activity and relaxation space. A relative told us "the café is brilliant and is like having time out, the decking area is also great".

This ensured people experienced an environment that has been adapted, equipped and furnished to meet their needs and wishes.

How well is our care and support planned?

4 - Good

We evaluated this service as operating at a good level where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

People's personal plans detailed each area of care, for example, mobility, and set out any needs for support. Updates were recorded regularly as were any changes in actions needed. Personal plans were regularly reviewed with people experiencing care and their relatives. One person experiencing care told us "they are very good at looking after you". This meant that personal plans remain right for people as their needs change.

Personal plans noted people's choices and preferences, however these were not always written in a personalised way. There needs to be more detail regarding what people consider is important to them and what outcomes do they want to achieve.

Observations and actions of when people are feeling distressed needed to be recorded in more detail. This supports people to communicate in a way that is right for them and staff to become more aware of people's needs.

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

To ensure infection, prevention and control practice supports a safe environment for people experiencing care the provider should:

- a). Make sure that PPE stations are fully stocked.
- b). Make sure that cleaning takes place of all items used in the service.

This is to ensure that care and support is consistent with the Health and Social Care Standards, 'I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment' (HSCS 5.22).

This area for improvement was made on 12 November 2021.

Action taken since then

There was a good supply of personal protective equipment (PPE) such as masks, gloves and aprons. The PPE stations were readily available throughout the home and located by clinical waste bins.

Shared equipment for manual handling was being cleaned after each use and recorded as undertaken.

This area for improvement has been met.

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 and wellbeing benefits from their care and support	4 - Good
1.4 People experience meaningful contact that meets their outcomes, needs and wishes	4 - Good
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	5 - Very Good

How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good

How good is our staff team?	4 - Good
3.2 Staff have the right knowledge, competence and development to care for and support people	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good

How good is our setting?	5 - Very Good
4.1 People experience high quality facilities	5 - Very Good

How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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Care Inspectorate Compass House 11 Riverside Drive Dundee DD1 4NY

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