

# Whitdale House Care Home Service

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Telephone: 01501 744 445

Type of inspection:

Unannounced

Completed on:

8 August 2022

Service provided by:

West Lothian Council

Service no:

CS2003011084

Service provider number:

SP2003002601



# Inspection report

#### About the service

Whitdale House Care Home provides accommodation for up to 32 older people. The service has been registered with the Care Inspectorate since April 2012. At the time of inspection there were 31 people living in Whitdale House.

The care home is situated in Whitburn and has a range of amenities, shops and public transport close by.

The accommodation is all at ground floor level and divided into four small group living units; Mull, Islay, Colonsay and Jura. Each unit has eight rooms with en-suite toilets and wash basins. There are communal toilets and bathing facilities throughout the building. There are small lounge and dining areas in each unit. A central area offers communal seating, and there is a conservatory available for group activities.

The care homes states its objectives as;

"The home provides a warm, secure and caring environment where each resident can live comfortably and securely, maintaining as far as possible, their independence individuality and interests."

## About the inspection

This was an unannounced inspection which took place on 3 August 2022 and on 4 August. The inspection was carried out by one inspector 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. In making our evaluations of the service we:

- -spoke with ten people using the service
- spoke with seven family members
- spoke with five staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals

## Key messages

Staff demonstrated, kind, compassionate care and developed meaningful relationships with people .

The service was embracing the Scottish Governments 'Open with Care' guidance.

Staff had good knowledge and practice relating to infection prevention and control.

Staff felt supported by the management team

People were regularly involved in meaningful activities and interactions within the wider community.

Relatives were positive about communication from the service, particularly when access to the care home was limited

## 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?	5 - Very Good
How good is our leadership?	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?

5 - Very Good

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

There was a range of effective systems in place that monitored and evaluated people's health needs. People benefited from regular access to local health professionals to support their health and wellbeing. Staff had good working relationships with health professionals and sought advice when required. Personal outcome focused plans were in place which were monitored and reviewed regularly. We saw evidence that any potential risks for people were assessed with clear strategies in place to guide staff on how best to minimise risk. This helped to keep people safe. Relatives we spoke with were confident that the service was very responsive to their loved ones healthcare needs when required.

Medication was well managed. The service had recently changed to an electronic system for medication support. Staff had received training in the new system and received support from the dispensing pharmacy. Staff were carrying out medication support safely.

We observed practice over lunchtime and saw warm and compassionate interactions between staff and those they supported. There was no indication of urgency and people were relaxed and unhurried. People were happy with the mealtime provision and that menu suggestions could be made. The catering team were praised for the enjoyable meals and choices on offer. People were able to choose from the menu or alternative options. One person told us "the meals are very good here, choices suit me but I know if I didn't like anything I could just ask for something else". We were also told "The fridge in the lounge has drinks in it and I can help myself or ask the staff to make me a cup of tea, nothing is too much bother for them".

The service was following the Scottish governments 'Open with Care' guidance. People were able to stay connected to family and other people who were important to them. This was supported well and helped people keep up the relationships that mattered the most to them. Visiting was encouraged and a flexible approach was taken to suit people. Feedback from all people and relatives spoken with was very positive about the opportunity to visit at any time and get out and about again.

At our visit there was a range of activities going on including the 'Inter Home Games'. Until the pandemic, this was an annual event with people getting involved in a range of sports and competing with other care homes in the area. People were pleased that this had resumed and were enjoying being involved in the activities. The service employed two activity co-ordinators who offered varied activities, in groups and one to one, based on peoples wishes and choices. Colourful posters on notice boards alerted people to the daily activities and forthcoming entertainment and outings. Detailed records identified peoples interests, hobbies and desired outcomes. The activity co-ordinators kept these up to date and evaluated them monthly to ensure people were achieving their outcomes and identifying meaningful activities for people.

Overall, the standard of cleanliness throughout the home was very good. Communal areas, corridors and lounges were clean and free from clutter. We found that there were plentiful supplies of cleaning materials. Personal protective equipment (PPE) stations were located at regular intervals in the care home.

Staff knowledge and awareness was reinforced with training and public education posters. Staff confirmed that they had received training at an early stage in the pandemic which had been firmly embedded into

practice. We observed staff following the correct infection prevention and control (IPC) practices by using masks and carrying out hand hygiene correctly. This reduced the risk of infection spread.

### How good is our leadership?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

It is important that services have effective systems to assess and monitor the quality of service provision. This helps drive service development and improvement which results in good outcomes for people living in the home.

Leaders had the skills, and systems in place to identify risks to people and make plans.

There were good systems to monitor and assess the standards of service provision. However, there were some audits that were not carried out as regularly as they should have been and some outcomes of audits that had not been fully addressed. This resulted in some documentation not being as up to date as it should

be. (See area for improvement 1)

The manager was very responsive to any issues identified on inspection and we were confident that through strong, responsive leadership they would further establish robust quality assurance processes.

Relatives and people we spoke with, told us that they felt that they could speak to one of the senior staff, or the manager if they had any concerns. They told us that they felt confident that any issues raised would be addressed. One person told us "we always see the manager going about, she's very nice and we can have a good chat with her". Another said "I have had minor concerns in the past but they get resolved very quickly, the manager always has time to listen".

The service was in the process of implementing self-evaluation. Quality assurance will inform the process of self evaluation will support improvements within the service and, establish what is working well for the service and where improvements are required.

#### Areas for improvement

1. 1. To enhance the culture of continuous service improvement the provider should implement a plan to support the service to achieve a consistent approach to assessing and monitoring service provision.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes" (HSCS 4.19).

## 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?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
1.4 People experience meaningful contact that meets their outcomes, needs and wishes	5 - Very 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

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