

Enable Scotland (Leading the Way) - Rosehill Place

Care Home Service

56 Rosehill Place
Livingston
EH54 7DW

Telephone: 01506 418 193

Type of inspection:
Unannounced

Completed on:
31 October 2022

Service provided by:
Enable Scotland (Leading the Way)

Service provider number:
SP2003002584

Service no:
CS2003011013

About the service

Rosehill is a care home which is registered to provide care and support to four adults who have a learning disability. Care and support is available 24 hours per day and is provided by Enable Scotland (Leading the Way).

The property is located in a residential area of Livingston comprising of a lounge, dining room, kitchen, one bathroom, one shower room, five bedrooms and utility room. The accommodation has its own enclosed garden and parking.

The aim of the service is to "provide accommodation with high support to people with learning disabilities. The service aims to support people to have a home of their own, where they are supported to live a life that has meaning for them. They are encouraged to be as independent as possible and be part of the local community".

There were four people living at Rosehill at the time of the inspection.

About the inspection

This was an unannounced inspection which took place on 5 October 2022 between 09:00 and 16:15 and on 6 October 2022 between 09:00 and 14:00. 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:

- spent time with and spoke with three people using the service
- spoke with three of their family members
- spoke with four staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

- People were settled and happy.
- The house was homely and welcoming.
- Staff knew people very well.
- People had good opportunities to spend time outside of the 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?	5 - Very Good
How good is our leadership?	4 - Good
How good is our staff team?	5 - Very 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?

5 - Very Good

The service was performing at a very good standard at the time of the inspection. There were major strengths in supporting positive outcomes for people with very few areas for improvement.

People looked well and care was delivered in a personalised way, where people were treated with dignity, respect and genuine affection. There were warm and friendly interactions between staff and people living at Rosehill Place. People were being supported by staff who were familiar and there was consistency in the staff team. People told us that they were happy living at Rosehill and that they like the staff. This was supported by relatives. One family member said that "staff are excellent, they are friendly and approachable" and another said "I can't praise them [staff] highly enough".

Staff demonstrated the principles of the Health and Social Care Standards in their day to day practice. Care and support was being delivered in a personalised way which recognised each person's needs and wishes. People were encouraged to be independent and were involved in decisions about their lives and together as a household.

Staff were aware of and responsive to changes in people's health needs. They were following guidance from visiting professionals and were supporting people to attend health appointments including health screening. Staff were aware of and responsive to changes in people's health needs and were confident taking action to promote people's health and wellbeing. This was helping to keep people healthy.

Staff were trained in key areas such as moving and assisting, epilepsy, first aid, medication administration, eating and drinking and adult protection. The provider was also supporting staff to complete qualifications to promote good practice and meet registration requirements with the Scottish Social Services Council. This was ensuring staff were confident in supporting people with all aspects of their lives and ensuring good health and wellbeing of people living in the home.

People chose their own meals and when they ate. They were supported to be independent in cooking and cleaning up afterwards. Mealtimes were flexible to suit people's activities. People's individual dietary requirements and preferences were respected. This was helping to support people's health and wellbeing.

People were able to maintain relationships with people important to them. Family members were welcomed and involved in shaping the support that their relative received. Family members reported that they felt involved and that "communication was excellent". One family member told us of their relative's holiday and receiving photographs and updates everyday from the staff. People were going out during the day and meeting friends at local day services and going to local community centres to take part in activities of interest. There was a clear understanding and strong value placed on relationships and how these can help to improve people's wellbeing.

The staff team were knowledgeable about infection prevention and control. They were following best practice guidance. Supplies of personal protective equipment (PPE) were available including hand sanitiser and separate bins for disposal of PPE. The house was clean and well presented. This was helping to minimise the risk of infection for people receiving care and support.

How good is our leadership?**4 - Good**

We evaluated this key question as good as there were a number of important strengths which outweighed areas for improvement.

The manager knew people well and was providing good leadership to the team. Everyone said they felt confident speaking to the manager and sharing feedback on the service.

Staff reported that they felt supported and there were opportunities for staff training and development. Team meetings and staff supervision had recommenced following a period where there were gaps in formal supervision and support. However, during this time, informal observations of staff practice and supportive discussions were taking place. During the inspection, we discussed the benefits of recording informal supervision for service improvement and staff development. The manager agreed to address this.

The service had a culture of learning. They had systems in place to manage complaints, accidents and incidents which enabled them to take action to address and learn from events.

The provider was evaluating people's experiences to ensure that people are provided with the right care and support. Enable Scotland had recently issued a questionnaire to people and family members seeking feedback on the service. The provider was planning to share feedback so that the manager could ensure that feedback was used for the improvement of the service.

People could be assured that there were systems in place to monitor standards of care within the service. This included audits for key areas including management of medication and finances.

As a result of the service responding to the pandemic, some of the usual quality assurance had understandably fallen behind. However, the management team were committed to getting these back up and running. We will look at progress at our next inspection.

At the last inspection there were concerns noted about the management arrangements. These were addressed with a permanent manager in post and everyone reported stability and improvement in the service with this consistent manager.

The manager and the staff team demonstrated an understanding about what was working well and what improvements were needed within the service. The service had an improvement plan. However, the main focus was on the actions following the last inspection which was out of date. The manager had started to look at the Care Inspectorate quality framework and we look forward to seeing progress with this at the next inspection.

How good is our staff team?**5 - Very Good**

We evaluated this key question as very good as there were a number of important strengths in the recruitment and induction of new staff which outweighed areas for improvement.

The provider was following recruitment best practice guidelines. They had detailed procedures in place to ensure that staff were recruited well. People could be assured that staff had been recruited in safe and robust manner.

The provider was involving people who lived in Rosehill in the recruitment of new staff. This was carried out in a way that suited the people living at Rosehill. People had the opportunity to meet new staff before they started work in the service. This let the manager confirm their suitability for the role and ensure that the right staff were employed for the service.

Staff were well supported when they started work. The manager was providing regular support and supervision for new staff to ensure they settled into their new role. There was a thorough induction and training programme with core and individualised training for the service. This was helping to ensure that staff were competent.

Newer staff told us that they felt supported and confident in carrying out their roles.

How good is our setting?

5 - Very Good

We found significant strengths in the setting and how this supported positive outcomes for people, therefore we evaluated this area as very good.

People benefitted from a comfortable, warm and homely environment. People were able to sit together and also spend time alone in their rooms. They were able to move around as they wished and choose where to spend their time.

We spoke with people who said that they were helped to personalise their bedrooms by choosing furniture, décor and personal items. We observed this to be the case as bedrooms were individual to each person and reflected their interests and personalities.

People could be assured that there were planned arrangements for regular monitoring and maintenance of the premises and of the wide range of specialist equipment that was in use.

The property was purpose built and was spacious and accessible for people who used wheelchairs. Tracking hoists were installed to assist people with moving.

People benefitted from having access to a large, well kept garden and accessible garden.

How well is our care and support planned?

4 - Good

We evaluated this key question as good as there were a number of important strengths which outweighed areas for improvement.

People could be assured that they had a personal plan in place that included risk assessments. Some of the personal plans were detailed, however, others would benefit from more information. While regular staff knew people well, there was a risk that new staff would not have enough information to ensure people were receiving the right support at the right time. The manager had recently introduced a new personal planning approach. Updated personal plans had good information to guide staff around how to provide good care and support to people. The manager agreed that this format would be used for everyone living at Rosehill.

Key workers had recently been appointed and given the responsibility for reviewing and preparing new personal plans. Reviews of personal plans were being carried out regularly with each person and where appropriate family members. This meant that people benefitted from their personal plans as they were up to date.

There were no consent forms for the use of bed rails and wheelchair lap straps. This support had been agreed and some people could direct staff to use their wheelchair lap strap. We consider it good practice to obtain written consent where there are potential restrictions to people's movement. The manager acknowledged this and agreed to put these in place immediately.

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

Whilst the support planning process is comprehensive, much of the documentation was found to be unnecessary, for example containing information on personal budgets and housing support paperwork. The use of various detailed risk assessments could simply be recorded as a support issue and be incorporated into the support plan, which as a key document and tool, is lost in the standardised folder.

The red standardised folder also distracts from the organisation's person centred ethos.

Support plans should therefore be reviewed and streamlined to ensure that they contain the necessary information to support residents on a day to day basis and be a useful working document. (Other information can be stored and accessed as and when necessary).

Tools to monitor the achievement of outcomes to aid evaluation and as feedback to residents and relatives should be identified and used.

This area for improvement was made on 4 December 2022.

Action taken since then

The service was using a standardised planning record which is used in all Enable (Scotland) services. Personal plans contained good information about each person identifying key areas of support. The service design document contained additional information for staff to have an awareness of how people's support was arranged. The management team acknowledged that some parts of the papers were not being completed correctly and could be viewed as unnecessary. However, this additional information did not detract from the quality of the personal plans or lead to poor outcomes for people. The management team advised that they would review the folders to ensure that key information is the focus of the personal plan folder.

There were risk assessments in place for each person and the tool in place was appropriate for identifying and assessing areas of risk. Risk assessments outlined how the service would support people to manage and minimise risks. It would be beneficial for the service to prioritise risks to ensure that the greatest risks were considered as part of the risk assessment process and other low risks being acknowledged within personal plans. The manager acknowledged and agreed to address this as part of each person's personal plan review.

People's personal plans noted personal outcomes. These were being considered as part of personal planning and reviews. The manager had plans in place to develop these further with the team.

Overall, this area for improvement had been met. The actions noted will be looked at in the next inspection.

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
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	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
How good is our staff team?	5 - Very Good
3.1 Staff have been recruited well	5 - Very 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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