

Livingston Care Home Care Home Service

Bankton Gardens Livingston EH54 9DZ

Telephone: 01506 434 003

Type of inspection:

Unannounced

Completed on:

16 February 2023

Service provided by:

Livingston Care Home Limited

Service no:

CS2019378594

Service provider number:

SP2019013440



Inspection report

About the service

Livingston Care Home is registered to provide support to 58 older people and has been registered with the care inspectorate since 22 May 2020. The service provider is Livingston Care Home Limited, an independent care and support provider.

The care home is situated in a quiet residential area of Livingston, West Lothian.

The home is set out over two floors, with a variety of lounges, dining areas, bathing and toilet facilities. There is also a pleasant well maintained garden and outside spaces for socialising.

The service state their core values are:

'To provide excellent care in a safe and happy environment.

To have a professional, caring team dedicated to improve and develop.

To be honest, transparent, and fair in all we do.

To have a team of directors, management and staff committed to making this a rewarding environment for all.'

About the inspection

This was an unannounced inspection to follow up on requirements and areas for improvement from the previous inspection. The inspection took place on 16 February 2023. 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 four staff and management, observed practice and daily life and reviewed documents.

Key messages

A new manager was in post and staff were positive about the new management structure

Sufficient progress had been made to meet the requirement under 'How good is our leadership'.

The care home was clean, tidy and had a calm, relaxed atmosphere.

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 good is our leadership?	4 - 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 good is our leadership?

4 - Good

We carried out an initial inspection of the service on 12 May 2022 and on 29 November 2023 to follow up on requirements and areas for improvement. The overall evaluation for

this key question was adequate. We completed a further visit to the home on 16 February 2023 to follow up on the requirements that had not been met at the previous visit.

We have reported on our findings under the following sections of this report:

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

The service had made sufficient improvement and progress to re evaluate this key question from an adequate evaluation to a good evaluation.

How well is our care and support planned?

4 - Good

We carried out an initial inspection of the service on 12 May 2022 and on 29 November 2023 to follow up on requirements and areas for improvement. The overall evaluation for

this key question was good. We completed a further visit to the home on 16 February 2023 to follow up on the area for improvement that had not been achieved at the previous visit.

We have reported on our findings under the following sections of this report:

'What the service has done to meet any areas for improvement made at or since the last inspection'.

The service had made progress and improvements for 'How well is our care and support planned.

We have not made any changes to the evaluation of good.

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

Requirements

Requirement 1

By 03 February 2022 the provider must develop and implement internal auditing systems to ensure effective oversight and monitoring of all aspects of the service including all care and support records. In order to achieve this, the provider must ensure:

- a) the auditing systems effectively enable areas for improvement to be promptly and accurately identified.
- b) the outcomes as a result of any audit are clearly recorded.

- c) where areas for improvement are identified an action plan is developed detailing timescales and the person responsible.
- d) subsequent action plans are reviewed and updated to completion
- e) information from quality assurance is communicated where required to the appropriate people

This is order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI2011/210) Regulation 4 (1) (a) provider must make proper provision for the health, welfare and safety of service users.

This also ensures that care and support is consistent with the Heath 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)

This requirement was made on 12 May 2022.

Action taken on previous requirement

A new manager was in post and had made good progress with implementing a quality assurance system to ensure good outcomes for people. A plan was in place to delegate audit activity to specific members of staff, timescales and responsibilities. The manager had clear oversight of quality assurance processes.

A daily environmental assessment was carried out by the manager and findings, responsibilities and actions recorded. We saw where actions were identified these were signed of when undertaken.

Processes were in place to ensure there was good communication between management and staff across all disciplines within the care home. This was carried out through daily 'flash' meetings where all disciplines within the care home were represented and information of the conversations recorded with actions identified and signed off when completed.

Met - outwith timescales

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 people achieve good outcomes, the provider should ensure that care plans contain information that reflects peoples choices, preferences, needs and wishes, and there is a robust and consistent approach to assessment, care planning and recording.

This takes into account Health and Social Care Standards which states "I experience high quality care and support that is right for me" (HSCS 1.12, 1.15)

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This area for improvement was made on 12 May 2022.

Action taken since then

Care planning had improved. Care plans were accessible and indexes highlighted where information was held. This meant it was easy to access specific information. Life stories were now included in the care plans with peoples wishes, choices and preferences recorded. This information was also evident within the activity co-ordinators records. Good records were held identifying peoples interests, how the person had engaged and participated in the activity and their outcomes from the activity.

Summary care plans were also held within the persons room and contained information on how people liked their care and support to be carried out and what their preferences and interest were. This meant the information was readily accessible for staff to be guided and carry out support in ways that were meaningful to people.

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