

# Burngrange Care Home

## Care Home Service

Burngrange Park  
West Calder  
EH55 8ET

Telephone: 01506 872 346

**Type of inspection:**  
Unannounced

**Completed on:**  
15 May 2023

**Service provided by:**  
West Lothian Council

**Service provider number:**  
SP2003002601

**Service no:**  
CS2003051731

## About the service

Burngrange Care Home is registered with the Care Inspectorate to provide accommodation and care for up to 40 older people. The service also provides support to people who have a history of enduring mental illness. The service is managed by West Lothian Council.

The service is located in a residential area of West Calder and is close to services such as local shops, churches and public transport.

This is a purpose-built care facility with accommodation on ground level. All bedrooms are for single use and have en-suites with bathing facilities. The building is divided into four separate living units named Burnlea, Fernlea, Gowanlea and Rowanlea. Each unit has a small kitchen, dining and sitting area. The lounge/dining areas are open plan leading to a hallway and residents' bedrooms. There is a designated smoking room in two of the units. A café at the entrance area of the building is accessible from all units. The home has an enclosed garden and a small car park. There is a separate main kitchen, a hairdressing room, laundry and staff facilities.

The aims of the service include:

- To enhance the independence of residents
- Provide the highest possible standards of care to promote the ethos of our care facilities
- Ensure the comfort and wellbeing of the residents in our care.

## About the inspection

This was an unannounced inspection which took place on 10 and 11 May 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 12 people using the service and five family members
- Spoke with six staff and management
- Observed practice and daily life
- Reviewed documents
- Spoke with three visiting professionals.

## Key messages

- People experienced very good outcomes supported by skilled, compassionate staff and motivated leaders.
- People's health and wellbeing benefitted from a professional approach to supporting healthcare.
- People benefitted from a clean and comfortable environment that was well maintained and equipped.
- Personal plans were outcome focused and gave a clear view of people's likes and dislikes.
- Service performance would be enhanced through self-assessment and implementation of a service development plan.

## 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.

Staff delivered kind, caring support and there were lots of friendly and warm interactions between staff and the people they supported. Support was delivered at a pace that suited people's needs and wishes. Staffing levels were good which meant people received the right support at the right time. People we spoke to were happy with the support provided and families spoke positively about the staff and the care service in general. Comments from people and families included "My (relative) settled in very quickly and this was down to the friendly approach by staff making them feel very welcome" and "the staff are very good, they can't do enough for me. They know me very well and let me get on with things I can do for myself but are always there if I need help."

People's health was well managed and care plans held good details and risk assessments of people's healthcare needs. A new electronic medication system was in place and people's medication was managed safely. The service had developed strong links with health care practitioners which meant that people were seen timely when needed by the health care team. This included access to specialists such as the district nurses and regular GP visits. Families were confident that any healthcare needs would be dealt with and managed well.

Mealtimes were pleasant and unhurried. People said they had a good choice and variety of meals and alternatives were offered to the regular menu. Staff were knowledgeable about people's likes, dislikes and dietary requirements. People who needed support to eat and drink received this in a dignified manner, with unhurried and respectful support. Drinks and snacks were provided throughout the day. Each living area had its own small fridge which people could help themselves to drinks, fruit and snacks. Overall people's wishes and choices about nutrition and hydration were catered for, this meant people were supported with drinks meals and snacks that met their individual needs.

Two staff were employed to support people's wellbeing and meaningful engagement. Planned, structured activities were in place and records kept of people's participation and enjoyment. People were able to access the local community with staff support. People attended regular 'residents meetings' where they discussed meaningful activities, care and support and general management of the care home. We saw from the minute of the meetings suggestions put forward had been implemented. This meant that people's views and feedback were valued by the service.

A proactive approach was taken by the service to ensure people kept in contact with their loved ones. Communication was regular and families could access information on a private Facebook page which contained information and participation in activities. Families could visit their loved ones at any time that suited them both. One relative said "I enjoy coming into Burngrange to visit my (relative), I receive a warm welcome, whenever I visit."

At the previous inspection two areas for improvement were made in relation to infection prevention and control. We reviewed the actions taken and found that the areas for improvement had been achieved. Cleaning schedules were in place and these were enhanced when a transmissible outbreak occurred. Staff were knowledgeable, competent and followed guidance in their daily work. There was good management oversight and this helped to keep everybody in the home safe and healthy by reducing the risk of infection.

## 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.

People's feedback on the quality of leadership within the home was very positive. Families and people told us the management team were approachable and were visible in the care home. People found the manager and other senior staff very accessible and responsive. This helped to make people feel confident about the service and made them feel involved and listened to.

The provider followed safer recruitment procedures. This ensured that the right staff for the service were recruited. There was a clear induction process and staff had a range of appropriate training relevant to their role. Staff were positive about the support they received from the leadership team. Staff at all levels were knowledgeable about their individual role and how that contributed to safe support for people.

There were a range of audit tools that were used to help inform the leadership team about how well the service was performing. Audits associated to healthcare, accidents and incidents and concerns were recorded and actioned. Where required, the service ensured that appropriate agencies were informed of events. This helped to ensure good governance of the service.

Team meetings were held for staff from all departments on a regular basis. Staff were able to have discussions on aspects of the service and delivery of care and support. The daily handover meetings and team meetings supported effective communication and helped identify priorities and actions needed to promote positive outcomes for people.

Oversight and governance of the service could be further improved with implementing self-evaluation and a development plan. A plan for formal feedback from people experiencing care and other stakeholders should be implemented to inform the development plan. This would ensure leaders had the information to implement the necessary improvements to drive further development of the service. We look forward to seeing progress at the next inspection (**see area for improvement 1**).

### Areas for improvement

1. In order to ensure the service has a clear vision for providing high quality care and support, a development plan should be created with input from the people who use the service, families/representatives, staff and stakeholders in line with the Care Inspectorate's 'Quality Framework for Care Homes for Adults and Older People: For use in Self-Evaluation, Scrutiny, and Improvement support' (published April 2022).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

## 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

People should feel confident that they are living in a safe environment where staff are practising good infection prevention and control. The manager should also have a good oversight and quality assurance processes to ensure this is maintained. The manager and staff should ensure:

- Clinical waste bins in the female changing room and laundry are put in place;
- Attention to detail in relation to high surfaces are addressed;
- Shared equipment should be cleaned and stored in an area where it is protected from dust and regularly cleaned and ready for use;
- Comfy chairs, dining chairs and tables should be checked to ensure they are free from contamination from body fluids or food residue and develop systems and processes to ensure these items are clean;
- Chairs in the smoking room should be replaced with chairs that are free from breaks to enable effective cleaning; and
- Cleaning records should be fully reflective of the above points to enable management to have a good oversight and identify any issues as they arise.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'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 21 January 2021.**

#### Action taken since then

The service submitted an action plan to address the areas for improvement. We found that action had been taken on all aspects of the areas for improvement. Infection prevention and control (IPC) guidance, cleaning schedule and records were in place and being implemented. Monitoring of IPC identified areas for action and were addressed timely. Management had more robust oversight of all areas within the care home that required to be cleaned effectively, actions to be taken and implemented.

#### Previous area for improvement 2

To ensure people have safe management of laundry; safe handling of all items is important. Achievement of thermal disinfection temperatures are essential. The laundry staff should ensure:

- Alginate bags are not opened at any point in the laundry cycle;
- There is appropriate oversight and quality assurance to ensure this is being maintained.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment' (HSCS 5.22); and

'My environment is secure and safe' (HSCS 5.17).

**This area for improvement was made on 21 January 2021.**

#### Action taken since then

The service submitted an action plan to address the areas for improvement. We discussed infection prevention and control with domiciliary staff and found them to be knowledgeable and aware of current guidance. Management had good oversight of infection prevention control procedures. We were satisfied this area for improvement had been achieved.

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://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

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



## To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at [www.careinspectorate.com](http://www.careinspectorate.com)

## Contact us

Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

0345 600 9527

Find us on Facebook

Twitter: @careinspect

## Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.