

Queens Bay Lodge Care Home Service

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Edinburgh
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Type of inspection:
Unannounced

Completed on:
11 October 2023

Service provided by:
Church of Scotland Trading as
Crossreach

Service provider number:
SP2004005785

Service no:
CS2003010907

About the service

Queens Bay Lodge is a residential care home, registered to provide a care service to a maximum of 28 older people, 2 of whom may be receiving respite care. The home is owned by Crossreach, the social care arm of the Church of Scotland and a registered charity. During the visit, 21 people were living in the home. The home sits in private grounds on the outskirts of Edinburgh, close to bus routes and local shops. The provider's headquarters is located in the grounds.

Accommodation is set over two floors with lift access to the first floor bedrooms. Bedrooms and communal sitting and dining areas are located on the ground floor. Each bedroom has a toilet and wash hand basin. There are shared bathroom and toilet facilities on each floor in addition to this. The home has a kitchen and laundry area. The rear grounds offer an enclosed secure patio area and to the front open gardens provide seating and access.

About the inspection

This was an unannounced inspection which took place on 29th September and the 2nd October 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 twelve people using the service and six of their family
- Spoke with nine staff and management
- Observed practice and daily life
- Reviewed documents
- Spoke with three visiting professionals

Key messages

- People's health and wellbeing needs were being met.
- People enjoyed family and friends visiting them.
- The home offered a warm, clean welcoming environment.
- People were cared for by a staff team who knew them.
- Staff recruitment was ongoing to reduce agency use.

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?	3 - Adequate

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

For this key question we evaluated the home as good, with important strengths outweighing areas for improvement. We observed kind, caring interactions, between staff and people living at the service. There was a calm atmosphere throughout the home. People's rooms were personalised and contained items that were important to them. The home had open visiting and relatives and families visited their loved ones as they wished.

Each person had an electronic personal plan in place. The plans were person centred and contained people's preferences to guide staff caring for them. Staff recorded people's daily care interactions. People consulted told us they were happy with their support staff. This meant that staff had accessible information about people's health and wellbeing needs and cared for people well.

Six monthly reviews were planned and family members had the opportunity to be involved and offer feedback. The manager had recognised that some reviews were late and had addressed this with staff and added to the improvement plan. Staff maintained regular contact by phone, email and in person when relatives visited their loved ones. This approach allowed for ongoing communication with people and their families in relation to their health and wellbeing.

People were supported by a range of visiting health professionals who told us that staff were responsive and communicated well with them about health issues. These approaches helped keep people well and ensured their health needs were being met.

Medications were managed effectively with safe systems in place for storage, administration and recording. Regular audits were undertaken and staff had regular training. This ensured people were supported well with their medication to maintain their wellbeing.

Mealtimes were well managed overall and were conducive to a pleasant dining experience. Dining tables were decorated and had a range of condiments to choose from. People chose where to sit. Menus on entering the dining room displayed what was on offer and a range of juices were offered over lunch. Alternatives were available if people did not like the food provided. People told us meals were lovely, and the food was very good food. However we observed that staff needed more protected time to support people who required assistance. We spoke to the manager during the inspection regarding this, we suggested that they undertake audits of the mealtime experience for people, this will support improving the mealtime experience for those people needing additional support. We will monitor this at our next inspection.

An activity coordinator supported people in the home with activities. An activity plan detailed activities over the week. We observed entertainers in on each day of our inspection with people attending and enjoying the singers. We observed individualised support to participate in activities. People had access to outdoor spaces. Some family members supported their relatives to access the garden grounds. The home had access to a bus for outings and some people enjoyed visiting local cafes. The mobile library visited regularly for those who enjoyed reading. A Facebook page for families allowed them to see what activities their relative has been taking part in. The resident's meeting gave people the opportunity to discuss activities and things they would enjoy. The home was considering ways to build stronger links with the local community. People told us their relatives' enjoyed the activities and singalongs. This meant people experienced a range of opportunities to support their wellbeing.

The home was clean and comfortable and free from unpleasant odours. The home had robust infection control arrangements in place to promote people's safety and wellbeing. Staff used personal protective equipment (PPE) appropriately and had access to supplies throughout the home. These measures helped people stay well and minimised the risk of infection.

How good is our leadership?

4 - Good

We evaluated this key question as good. The service demonstrated important strengths in supporting outcomes for people with areas that could be further improved.

The manager had a service development plan in place this would be enhanced by management recording dates, actions and outcomes. Regular medication audits were carried out and any actions from these communicated to the team at the regular handover meeting. A range of policies and procedures were available and staff were encouraged to read these. Resident and staff surveys were carried out annually. Resident's meetings took place giving people the opportunity to be included in developments. Families were included in regular reviews and social media provided additional updates about their relatives, which they found beneficial. Relatives and staff told us the management were approachable and communication was good. These measures meant people had responsive care and support because of the quality assurance processes in place.

The service had complaints policy and procedure in place should they need to investigate any complaints raised. Any incidents and accidents were being recorded, with the manager checking these regularly. A process was in place to support people with their finances. This meant that people could be assured that their care provider had robust procedures in place to regularly monitor their support.

The service demonstrated that there were robust safe recruitment processes in place to keep people safe from potential harm. Staff had access to face to face and on line training opportunities and regular sessions were planned for moving and handling and medication training and refresher courses. Staff had access to regular supervision which supported their ongoing learning and development. There were effective systems for sharing information about people's needs at the daily handover. The management were planning to further improve internal communication through holding more regular team meetings. This meant people could be confident about their care and support because staff were safely recruited and supported in their learning and development.

There were effective systems in place to ensure that people's environment was well maintained and promoted their safety and wellbeing. This included the checking of their personal and communal equipment and the cleanliness of their home. People were consulted about changes in the decoration of the home. This supported people's wellbeing because they lived in an environment that was clean, tidy and well maintained.

How good is our staff team?

3 - Adequate

We made an evaluation of adequate for this key question, whilst we identified strengths, these only just outweighed weaknesses.

During our visit we observed and inspected the rotas which evidenced the high use of agency staff. As a result of a lower number of permanent staff in post, the provider used agency staff to ensure direct care needs were being met. We observed people to be well cared for. Where possible the service used regular agency staff and aimed to book shifts in advance to maintain consistency and continuity. However, over reliance on agency staff can lead to inconsistency in the support people experience.

The service had experienced on-going difficulties with staff recruitment. These actions provided the service with some consistency; however, agency staff were not able to undertake all roles in the service putting additional added pressures on the permanent team on each shift. The service had successfully recruited to some vacant posts and were in the process of inducting the recently appointed team leader and a further two new recruits were awaiting recruitment checks. Recruitment remained ongoing. We discussed exploring staff retention and recruitment and the incentives the service had put in place to attract high quality staff to the vacant posts.

The service had also broadened its use of recruitment platforms to reach more recruits. This meant that people could be assured that their care provider was actively looking at ways to improve the continuity and quality of their care and support. We will monitor progress made at our 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?	4 - Good
1.1 People experience compassion, dignity and respect	4 - 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

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

How good is our staff team?	3 - Adequate
3.3 Staffing arrangements are right and staff work well together	3 - Adequate

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