

Claremont Park Nursing Home Care Home Service

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Leith Links
Edinburgh
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Telephone: 01315 546 868

Type of inspection:
Unannounced

Completed on:
2 November 2023

Service provided by:
Claremont Park Limited

Service provider number:
SP2003002447

Service no:
CS2003010622

About the service

Claremont Park Nursing Home is a care home for older people situated in Leith, an area to the east of Edinburgh city centre. The service provides nursing and residential care and are currently registered for 33 people.

Claremont Park Nursing Home is owned and managed by Claremont Park Ltd.

Accommodation is provided on the ground, lower ground and first floor of the main building and a single level extension to the rear of the property. The lower ground and first floor can be accessed by stairs or a stair lift. All bedrooms in the extension open onto the garden area. There are landscaped gardens and a small driveway to the front of the home and a secure garden and patio area to the rear. The home is located on a bus route and is near local shops and amenities

About the inspection

This was an unannounced follow up inspection which took place on 26 October 2023 between 9:00 am and 16:00 and 30 October 2023 between 08:00 and 15:45. 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 people using the service and their families/friends.
- we talked with members of staff and the management teams
- observed staff practice and daily life and reviewed a range of documents

Key messages

- Staff interactions with people were warm and kind.
- Care and support plans were informative on the persons health and how to support them well
- Accidents and incidents need to be notified to the care inspectorate as per conditions of registration.
- Recruitment of staff must be in line with the "safer recruitment through better recruitment guidance"
- Mealtime experience should include access to a variety of meals and drinks and choice promoted.
- People get involved in a wide range of activities and interests and have opportunities to explore the community.

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?	3 - Adequate
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 well do we support people's wellbeing?

3 - Adequate

We evaluated this key question as adequate. While the strengths can be identified, key areas must continue to improve.

People experienced warmth and kindness from staff who had built up positive relationships with the people they support. Staff encouraged people to be independent and promoted choice.

There were opportunities for people to participate in a range of activities. These were either in a group setting or on a one-to-one basis. There were two activity coordinators, and this ensured activities were available to everyone seven days a week. Monthly dates for entertainers to visit the home was also part of the programme of activities. For those that could opportunities to access the community was available. One relative told us "She enjoys looking at the activities held on their social media page which is updated regularly." One to one was also offered to those who preferred to stay in their bedroom however, one relative had concerns stating, "sometimes the staff are busy and don't have enough time to spend with individuals who cannot take part in activities."

Mealtimes were unhurried and staff were attentive, and time was taken with people who needed more encouragement or support to eat or drink. However, there was no choice in place at mealtimes though the chef did state he was happy to offer an omelette or sandwich if requested. People have a right to have access to a variety of meals, drinks and choice promoted. A good dining experience can help enhance social interaction, build a sense of community, and increase nutritional intake. See Area for Improvement 1

Nurses oversaw the medication. This was audited regularly by the manager which enabled good oversight where any issues could be picked up swiftly. There were good relationships with the GP who had a monthly meeting to discuss all the residents to promote good outcomes for those in their care. The nursing team were aware when to refer to community specialists such as dieticians. People could be assured staff were competent and able to involve other professionals as required. Relatives were kept updated of any health concerns or interventions which meant they were confident that their relatives health was well looked after.

Claremont currently offers rooms that can be shared. That is, a bedroom that is used by two people. Whilst we acknowledge some people may chose to share a room this should be for people who have a prior close personal relationship and where they have made an informed decision and provided written consent to share a room. This is to ensure peoples privacy and dignity is maintained especially at times when people's health deteriorates, or end of life care is given. We discussed this with the manager to look at how this could be improved.

There were no restrictions on visiting, relatives told us they felt able to visit at any time and welcomed by staff.

Areas for improvement

1. To support people to receive a balanced and nutritious diet which is appropriate to their individual needs, the provider should ensure people have choice and should be consulted at the menu development stage and on an ongoing basis.

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

"I can choose suitably presented and healthy meals and snacks , including fresh fruit and vegetables and participate in menu planning" (HSCS 1.33)

"I have confidence in people because they are trained, competent and skilled, can reflect on their practice and follow their professional and organisational codes. "(HSCS 3.14).

How good is our leadership?

4 - Good

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

Systems were in place to assess and monitor the quality of the service and environment. Good communication between staff and management took place in a daily flash meeting. These meetings ensured all staff were up to date with any changes to resident's health, planned activities, and meetings.

Audits were carried out by the management team and high standards promoted this, however this did not include any observations of practice. Observations of practice of staff can highlight areas of care that could be improved upon and ultimately improve outcomes for people residing in the home. We have made an area for improvement to ensure observations of practice are not only carried out but evidenced and used in supervisions and appraisals as part of the drive for improvement. See area for Improvement 1

Team meetings and supervisions were regularly taking place. This ensures people benefit from a culture of continuous improvement. All staff received a good induction, and a good range of training was completed. We could see evidenced through a good training matrix where we could see when staff received training and when it was due. This ensured people experiencing care that the staff supporting them were competent skilled and knowledgeable.

Recruitment did not follow the care inspectorate guidance "safer recruitment through better recruitment". To ensure the right people with the correct knowledge and skills are recruited the manager should be more knowledgeable regarding the above guidance to reassure people are recruited in line with best practice. See area for improvement 2

Accident and incidents were recorded though events were not notified to the Care Inspectorate as per conditions of the homes registration. It is important all staff are aware of what is a notifiable event for the care inspectorate. This will ensure people can be confident that staff are competent and skilled and follow their professional and organisational codes. See area for improvement 3

Areas for improvement

1. To ensure people have confidence that the service they use is led well and managed effectively, the provider should improve management oversight, underpinned by robust quality assurance measures. This includes, but is not limited to the following:

- (a) assessment of staff practice by observations and link these to supervisions and appraisals.
- (b) improve the service's performance through effective audit which is followed through to ensure actions are completed and evaluated.

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

2. To ensure people experience care where staff recruitment practices is within the service to the standard detailed in the Scottish Social Services Council (SSSC) and Care Inspectorate guidance, 'Safer Recruitment through Better Recruitment (2017) the provider must include the following in their recruitment process :

- a) recruitment records are in place for all staff and all staff have outstanding pre-employment checks submitted to Disclosure Scotland in line with the Protection of Vulnerable Groups (Scotland) Act 2007.
- b) that you obtain two references in place for each staff member recruited, one of which, where possible, from their previous employer.
- c) that where there are clear gaps in people's work history, a reason for this should be obtained
- d) there are robust recordings, shortlisting, interviewing, and assessing of staff to make certain they have the correct knowledge and skills to support people.
- e) that those responsible for undertaking safer recruitment are skilled and competent in their role.

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

"I am confident that people who support and care for me have been appropriately and safely recruited" (HSCS 4.24).

3. To ensure that people experience care that is safe regarding any adverse events that could affect people's health and wellbeing. The manager should ensure they report incidents, accidents and adverse events in line with the care inspectorate guidance "Records that all registered care services (except childminding) must keep and guidance on notification recording".

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

"I experience high quality care and support based on relevant evidence, guidance and best practice" (HSCS 4.11)

'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20).

How well is our care and support planned?

4 - Good

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

Care plans were well written and contained very informative detailed information about the person. The plans were easy to follow and gave a good background on the person, their life, medical history and who and what was important to them.

Families were invited to the six-monthly reviews of the care plans with the allocated nurse. The plans were regularly updated and reviewed. This demonstrated there was a sustained approach to ensuring support plans held relevant information to deliver the right care and support for that person.

The service has just recently introduced a new digital care planning system. This ensures that people benefit

from care planning that consistently informs all aspects of care and support they experience. The system highlights to the manager and staff what care plans are needed to be updated and the most relevant and up to date information is available.

Anticipatory care plans were in place and it was evident families were involved but not enough detail was in place regarding end of life care, specific needs and wishes need to be discussed regarding what and who is important to the person. These include emotional, spiritual and social needs. This makes certain that each person's wishes and choices are respected in such an event.

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 the care home is well led and managed at all times a robust management contingency plan should be developed which addresses all eventualities for when there may be no appropriate management cover.

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

"I use a service and organisation that are well led and managed" (HSCS 4.23)

"I experience high quality care and support because people have the necessary information and resources" (HSCS 4.27).

This area for improvement was made on 2 June 2022.

Action taken since then

A contingency plan is in place which looks at all eventualities. The manager is currently interviewing for a deputy which will strengthen the plan. This area for improvement has been met.

Previous area for improvement 2

To ensure people are helped to live well right to the end of their life, anticipatory care plans should be developed. They should include information received both from the person and those important to them, which ensures staff know what they should do if a person's health deteriorates.

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

"I am supported to discuss significant changes in my life, including death or dying, and this is handled sensitively" (HSCS 1.7)

"My future care and support needs are anticipated as part of my assessment" (HSCS 1.14)

"I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability or frailty" (HSCS 3.18).

This area for improvement was made on 2 June 2022.

Action taken since then

There have been significant improvements made to the anticipatory care plans, however, there was not enough detail in place regarding end-of-life care. Specific needs and wishes would need to be discussed regarding what and who is important to the person. Therefore, we will carry this area for improvement forward.

Previous area for improvement 3

To make sure people's care plans are easy to follow and accessible to all, including supported people and family/representatives, the method and format of care planning should be reviewed and improved. This might include developing plans which are on a computer or care planning platform whereby access could be via a personal computer/tablet as well as paper copies.

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

"My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choice" (HSCS 1.15)

"I am fully involved in developing and reviewing my personal plan, which is always available to me" (HSCS 2.17).

This area for improvement was made on 2 June 2022.

Action taken since then

Improvement regarding support plans was noted. They are informative, and person centred. They enable care providers to understand a person's health and needs to achieve the outcomes agreed.

All assessments are up to date and families are involved with the reviews with the assigned nursing staff. This area for improvement has been met.

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?	3 - Adequate
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	3 - Adequate

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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