

# Blenham House Care Home Care Home Service

3 Sighthill Court Edinburgh EH11 4EU

Telephone: 0131 458 9820

# Type of inspection:

Unannounced

## Completed on:

27 March 2020

# Service provided by:

Service provider number:

Randolph Hill Nursing Homes (Scotland) SP2003002451 Ltd

#### Service no:

CS2006140016



# **Inspection report**

#### About the service

We used the new quality framework for care homes for older people and the Health and Social Care Standards to evaluate the care and support people living in Blenham House experienced. The standards focus on the experience of people using services and describe what people can expect, they can be accessed at <a href="http://www.gov.scot/Publications/2017/06/1327/downloads">http://www.gov.scot/Publications/2017/06/1327/downloads</a>

Blenham House is a care home for older people and was registered with the Care Inspectorate in April 2011. It is registered for 60 places and has nurses and carers who support and care for people. The provider of the service, Randolph Hill Nursing Homes (Scotland) Ltd also has other care homes across Scotland.

Blenham House is in Sighthill in Edinburgh, situated opposite the health centre and has some parking available for visitors. There are accessible local amenities and transport links to the city centre and outlying areas. The accommodation includes 60 single ensuite rooms over 3 floors which have stair and lift access. There are 6 dining rooms and 9 lounges throughout the home. Central areas with sofas are also available. There is a hairdresser and communal space on the ground floor with a small secure garden.

The services aims and objectives include: "Our aim is to enable our 60 residents to enjoy the later stage of their lives to the full." You can find out more about the home by going to the website, <a href="https://www.randolphhill.com/our-homes/blenham-house">https://www.randolphhill.com/our-homes/blenham-house</a>

# What people told us

During the inspection we were able to speak individually with 11 residents, 12 relatives and four members of staff. All the feedback that we received was positive.

Several consistent themes emerged from the comments we received; firstly staff are regarded as very kind and attentive to the needs of the people living in the home. People thought staff did a lot to get to know what was important to the people they support and were also considerate of relatives opinions and wishes. Relatives said they noticed how well their family member had settled and they felt the home kept them well informed of any changes to their health needs.

Both residents, relatives and visiting professionals that we spoke with were complimentary about the number and variety of activities organised within the home to offer something meaningful to keep people stimulated.

The inspection visit was curtailed initially due to be reavement within the home and then following the government guidance around COVID 19. Therefore we conducted phone interviews with three health professionals who are regular visitors to the homes and requested that the manager send us various reports to allow us to conclude the inspection.

# 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 w	e support people's wellbeing?	5 - Very Good

How good is our leadership?	not assessed
How good is our staffing?	not assessed
How good is our setting?	not assessed
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

People told us that they were happy with their care and support and residents looked relaxed around staff. Relatives told us that the home keeps them well informed about their loved one and staff were always kind towards them when they visited, giving them peace of mind that their relatives were being well looked after.

Residents are recognised as experts of their own experiences, needs and wishes. This means that they have a say in decisions about the care and support which affect them, including end of life. Residents choose where and how to spend their time and participate in a range of activities. Three activity co-ordinators work within the home, one was working on the weekend we visited, it is good practice to have activity staff on at the weekends and not just during the week. We also observed care staff engage residents in activities whenever they weren't needed for caring tasks.

The home had entered residents into competitions with other care homes in the area, for things like dominoes. This increased the social circle of people residents were able to mix with, residents who took part told us of the fun that they had got out of the experience.

We observed a good mealtime experience for residents. The dining areas were calm and relaxed, ensuring residents had the opportunity to enjoy their meals. Meals were of a good quality and people spoke highly of them. One relative who regularly has meals in the home with his wife told us that both he and his wife have put weight on since she moved into the home because they enjoy the food so much.

People have a right to expect that the care and support that they receive is based on relevant evidence, guidance and best practice; to ensure that they can enjoy the best health possible for them while living in the home. We case tracked a plan for someone who had recently lost weight and found staff had been proactive in monitoring the person's weight, referring onto a dietician and contacting the doctors for further investigations. This reinforced the feedback we received from relatives and visiting health professionals who told us that staff were attentive to the needs of residents and were quick to act if their needs changed and were proactive at seeking outside professional help if required.

Safe practice was in place for the management of medicines including the use of topical lotions. While a regular in-house audit of medication was carried out by nursing staff there was also a detailed audit carried out by an external pharmacy. The manager forwarded the external audit report to us which provided a glowing report of the procedures in place within Blenham House for managing resident's medication.

# **Inspection report**

Following discussions with the manager and staff as well as the feedback we received we were satisfied that the areas for improvement mentioned under this heading in the previous report have been met. Staff were given training on the national health and social care standards and demonstrated an awareness of the principles of the standards by the way they interacted with residents.

# How good is our leadership?

This key question was not assessed.

## How good is our staff team?

This key question was not assessed.

#### How good is our setting?

This key question was not assessed.

#### How well is our care and support planned?

4 - Good

There are various relevant sections within care plans to guide staff on how best to support individuals with different aspects of their care. We were able to see evidence that care plans were adapted as individuals needs changed.

At the last inspection a suggested area for improvement was to ensure plans only reflect what an individual's needs and wishes were and to remove sections which were not pertinent to them. The manager explained that care plans had been reviewed following the last inspection and residents and relatives we spoke with confirmed that they were involved in creating their own plans. The care plans we sampled didn't contain unnecessary sections, which indicates that the area for improvement had been met.

While both residents and relatives told us that they were involved in creating care plans and they are reviewed twice a year there is still room to improve them. Where someone has a particular condition, rather than just recording this in the care plan, the implications of the condition for the individual should be detailed as symptoms are often unique to the individual.

The management team should consider introducing a section within care plans relating to physical activity, to identify how individuals can be supported to remain as physically active as possible. This should be different for each resident and capture what the outcome has been for the individual and if changes in their support are required.

# 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 make sure people experience care and support that promotes their rights, independence and dignity all staff should understand the outcomes that people can expect, described in the standards. Staff should be supported to explore the standards with people and consider new and innovative ways to care and support people that help them achieve their wishes, choices and care needs.

#### This area for improvement was made on 13 November 2018.

#### Action taken since then

Staff were given training on the Health and Social Care Standards from the management of the home and the standards also formed one to one discussions between staff and the nurses within the home.

#### Previous area for improvement 2

To make sure people get the most out of life and are healthier, asking them about lifestyle preferences and aspirations and supporting them to achieve these is important.

#### This area for improvement was made on 13 November 2018.

#### Action taken since then

Residents and their relatives confirmed that they are involved in creating care plans and this involved being asked about their life style preferences and aspirations.

#### Previous area for improvement 3

To make sure people's planned care reflects needs and wishes that are important to them they should be involved and central to planning and reviewing care and support. The plans should only cover their needs and wishes and be concise and easy to read.

#### This area for improvement was made on 13 November 2018.

#### Action taken since then

Residents and their relatives confirmed that they are involved in creating care plans and unnecessary sections were removed from individuals care plans to make them more concise

# Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

# **Inspection report**

# 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 benefits from their care and support	5 - Very Good
1.4 People are getting the right service for them	5 - Very Good

How well is our care and support planned?	4 - Good
5.1 Assessment and care planning reflects people's planning needs and wishes	4 - Good
5.2 Families and carers are involved	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

#### Contact us

Care Inspectorate Compass House 11 Riverside Drive Dundee DD1 4NY

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 cànain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

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

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.