

Holmesview Care Home Service

2 Holmes Road
Broxburn
EH52 5JZ

Telephone: 01506 859 660

Type of inspection:
Unannounced

Completed on:
10 June 2022

Service provided by:
Randolph Hill Nursing Homes
(Scotland) Ltd

Service provider number:
SP2003002451

Service no:
CS2010270153

About the service

Holmesview is a care home providing care and support for up to 60 older people. The service is owned and managed by Randolph Hill Care Homes Ltd and has been registered since 2011.

The service is situated on the main street in Broxburn and has some local shops, public transport and amenities within walking distance. Accommodation is provided over two floors, in six living units, each containing ten single en-suite bedrooms, a lounge and dining area, and a communal bathroom.

There is also a larger public lounge on the upper floor, and an enclosed sensory garden with access from some bedrooms and one of the downstairs lounges. Kitchen and laundry facilities are situated on the ground floor.

About the inspection

This was an unannounced inspection which took place on 9 June 2022 from 07:00 to 17:45 and on the 10 June 2022 from 09:00 to 14:30. The inspection was carried out by two inspectors from the Care Inspectorate. An inspection volunteer was involved in the inspection. An inspection volunteer is a member of the public who volunteers to work alongside the inspectors. Inspection volunteers have a unique experience of either being a service user themselves or being a carer for someone who has used services. The inspection volunteer role is to speak with people using the service being inspected and gathering their views.

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 13 people using the service and eight of their family members
- Spoke with staff and management
- Observed practice and daily life
- Reviewed documents
- Spoke with 2 visiting professionals.

Key messages

- The staff team knew residents very well and there was not an over-reliance on agency staff.
- The management team were now embracing 'Open with Care' guidance.
- How people spend their day around their hobbies and interests could be improved.
- People's health needs were escalated to other health professionals when needed.
- The dining experience needed reviewed to make it a more positive experience.
- The staff team worked hard to ensure the care home was kept clean.
- Training opportunities for staff were much improved.

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?	4 - Good
How good is our setting?	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?

4 - Good

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

Staff demonstrated the principles of the Health and Social Care Standards in their day-to-day practice, which promoted a culture of respect. There were lots of friendly interactions between staff, residents and visitors. One person told us "The staff are all very nice". Whilst another said "Staff are all fine, I have no complaints".

People benefited from regular access to relevant professionals to support their health and wellbeing. Staff had good links with local health professionals and sought their advice as needed. However, we discussed how this was then communicated to families needed to be improved and recorded.

We found that the service had improved many aspects of the dining experience since our last visit. Meals now arrived hot with tables nicely set and we observed people being supported to have drinks and snacks in between set mealtimes. Although improvements had been made, people had to wait an unacceptably long time between courses of around 40 minutes. During this time people either fell asleep or got up and walked away from the table (see area for improvement 2).

People were well supported to maintain contact with their family and friends, as the home were working in line with Scottish Government's 'Open with Care' guidance. One person told us "I am in and out at all times".

People were currently enabled to get the most out of life by a team of four activity staff across the week and including some evenings. There was a programme in place that mainly focused on group work, trips out on the minibus and visiting entertainers. We received mixed feedback though from people. One person said "Things are much better and we mix now for activities" whilst another told us "It's ok here, but not much to do although I like the bus trips". We had made an area for improvement at the previous visit, but this had not yet been met and is repeated (see area for improvement 1).

We found overall that infection prevention and control procedures helped to protect people from infection. The general environment was clean, tidy and free from any offensive odours. Cleaning schedules were in place to ensure that all areas of the care home were included in the domestic staffs' routine. People could be assured that staff were knowledgeable in their job role.

Areas for improvement

1.
The service should fully support people to get the most out of life. To do this, the provider should, at a minimum:

- a) ensure all people living at the care home benefit from a range of activities both within and out with the care home
- b) ensure that staff who lead activities encourage people to remain active on a regular basis
- c) ensure activities are based on people's preferences, wishes and past hobbies and that personal plans reflect involvement in meaningful activities and outcomes.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: 'I can maintain and develop my interests, activities and what matters to me in the way I like' (2.22).

2. To ensure that people are supported to enjoy their meals, the service should review the mealtimes arrangements to ensure that there are no unnecessary lengthy gaps between courses.

This ensures care and support is consistent with the Health and Social Care Standards, which state: " My meals and snacks meet my cultural and dietary needs, beliefs and preferences." (HSCS1.37).

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 could be assured that there were systems in place to monitor standards within Holmesview. We found that this included audits for key areas, including medication, care plans and the environment.

The management team had a monthly overview of key areas for residents including nutrition, skin integrity and falls management. The outcomes of these were collated and reviewed with action plans devised to improve outcomes for people.

Feedback from staff indicated that management were very approachable and supportive, and we heard that there was very good team working with less of a reliance on agency than before.

Management had worked hard to meet the requirements made at previous inspections and demonstrated sufficient capacity and skill to support improvement effectively and were now in a good position to embed the changes they'd made in practice.

How good is our staff team?

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 could be assured that training opportunities for staff had increased since our last visit. Learning opportunities had been developed to support the staff to meet the needs of people living in the service.

Staff benefited from regular staff meetings and supervision to support their personal and professional development.

Staff we spoke told us how much they had enjoyed and benefited from all the extra support and training recently and how they had seen outcomes for people improve at Holmesview.

People could be assured that the provider had been responsive to our request to review the staffing levels and we heard the benefits that this made on a day to day basis.

How good is our setting?

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 benefitted from a bright clean and homely environment. They were able to move freely around the home and across floors to access activities or to go out in the garden.

Some rooms had access directly to the garden whilst others and in particular those people living on the first floor needed supported with this.

People would benefit from some more directional signage to support them to move around the home easier, particularly if they were living with a cognitive impairment or had poor eye sight. We signposted the service to look at best practice guidance 'Is Your Home Dementia Friendly' assessment tool by The King's Fund for ideas.

How well is our care and support planned?

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 could be assured that they had a personal plan in place that included, relevant risk assessments. These were then used to inform the care plans. Overall, there was good detail to guide staff around how best to care and support for each person.

We saw improvements had been made around personal plans, especially around supporting people who experience stress and distress. The benefit of this was that there was individual guidance for staff to follow with tried and tested interventions that had worked well in the past.

The service could improve how people and their families are involved in the development and on going review of their personal plan to ensure that their wishes and expectations are fully met.

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

Requirements

Requirement 1

By 3 June 2022 the provider must ensure that people's outcomes are not compromised when they experience stress or distress. To do this, the provider must, at a minimum:

- a) have up to date personal plans in place for people who may experience stress or distress, that contain established triggers, tried and tested alleviation techniques and strategies to provide support
- b) ensure that staff are familiar with people's personal plans and are able to identify triggers for stress or distress and use alleviation techniques consistently in practice
- c) staff are clear about when health care needs are not being met due to stress or distress and how to record and report that

d) management have a robust process in place for reviewing all incidents including incidents of stress or distress and that these reviews are used to inform and support staff in the provision of care that meets people's health outcomes

e) staff and management recognise potential harm and understand their duty to report this under the Adult Support and Protection Act (Scotland) 2007.

This is to comply with: Regulation 4(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure care and support is consistent with the Health and Social Care Standards which state: 'My care and support meets my needs and is right for me' (HSCS 1.19) and 'any treatment or intervention that I experience is safe and effective' (HSCS 1.24).

This requirement was made on 3 March 2022.

Action taken on previous requirement

Please see information under key questions 1, 2 and 5.

Met - outwith timescales

Requirement 2

By 1 April 2022, the provider must ensure that people can be confident that staff receive training appropriate to the work they are to perform. To do this the provider must, at a minimum, ensure staff receive up to date training in:

- a) Infection Prevention and Control, Covid-19, safe use of personal protective equipment (PPE) and hand hygiene.
- b) Practical moving and handling.
- c) Adult support and protection.
- d) Supporting people with stress and distress.

This is to comply with Regulation 4(a) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations, Scottish Statutory Instruments 2011/210.

This is also to ensure that care and support is consistent with the Health and Social Care Standards which state that: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational code.' (HSCS 3.14)

This requirement was made on 3 March 2022.

Action taken on previous requirement

Please see information under key question 3.

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 fully support meaningful contact to resume between adult care home residents and their loved ones, the provider should work within the Scottish Government Guidance - 'Open with Care'. They should also support people to get the most out of life by the re-introduction of external activities and entertainers. To do this, the provider should, at a minimum:

- a) ensure people benefit from a range of activities that takes account of the current restrictions resulting from Covid-19
- b) ensure staff are available to lead activities and encourage people to remain active on a regular basis
- c) ensure activities are based on people's preferences, wishes and choices and personal plans reflect involvement in meaningful activities and outcomes.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: 'I can maintain and develop my interests, activities and what matters to me in the way I like' (2.22).

This is also to ensure that care and support is consistent with Open with Care, Supporting Meaningful Contact in Care Homes. Published by The Scottish Government, February 2021.

This area for improvement was made on 3 March 2022.

Action taken since then

Please see information under key question 1.

This area for improvement had not been met

Previous area for improvement 2

To ensure that people can be confident that their nutrition needs are fully met, the provider should ensure that:

- a) Fluids and snacks are offered out-with set mealtimes.
- b) Hot food that is cooked or reheated must be kept at a temperature above 63°C.
- c) Reheated foods must be raised to a temperature of not less than 82°C.

This ensures care and support is consistent with the Health and Social Care Standards, which state: "My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected." (HSCS1.23) and "My meals and snacks meet my cultural and dietary needs, beliefs and preferences." (1.37).

Please see information under key question 1.

This area for improvement had been met.

This area for improvement was made on 3 March 2022.

Action taken since then

Please see information under key question 1.

This area for improvement had 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?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good
1.4 People experience meaningful contact that meets their outcomes, needs and wishes	4 - Good
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	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?	4 - Good
3.2 Staff have the right knowledge, competence and development to care for and support people	4 - Good
How good is our setting?	4 - Good
4.2 The setting promotes people's independence	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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