

Inspection report

Claremont Park Nursing Home Care Home Service

6 Claremont Park
Leith Links
Edinburgh EH6 7PH

Inspected by: Beryl Hogg
(Care Commission Officer)

Type of inspection: Unannounced

Inspection completed on: 11 February 2009

Service Number

CS2003010622

Service name

Claremont Park Nursing Home

Service address6 Claremont Park
Leith Links
Edinburgh EH6 7PH**Provider Number**

SP2003002447

Provider Name

Claremont Park Limited

Inspected ByBeryl Hogg
Care Commission Officer**Inspection Type**

Unannounced

Inspection Completed

11 February 2009

Period since last inspection

8 months

Local Office AddressStuart House
Eskmills Estate
Musselburgh
East Lothian
EH21 7PB
Local Tel No 0845 600 8335

Introduction

Claremont Park Nursing Home was registered with the Care Commission on 1 April 2002 to provide 24 hour nursing care to 34 older people. The home is owned and managed by Mr W Brodie, Mr A Thain and Mrs A Spence.

The home is situated in private grounds on the main route through Leith, close to local amenities and bus routes. There is private parking, a garden area to the front of the home and a large landscaped garden and patio area to the rear. Accommodation for residents' use is provided on ground and first floor levels of the main home and on ground floor level in the extension to the rear of the home overlooking the garden. The upper floor is accessed by stairs or chairlift.

There are sixteen single bedrooms, seven with en-suite facilities and nine double bedrooms, one of which has en-suite facilities. A sitting and dining room are situated on the ground floor of the main house and a further sitting/dining room is available in the extension building. Appropriate bathing and toilet facilities are available throughout the home. There are separate kitchen and laundry facilities in the home.

The Home's philosophy of care is based on the following principles:

To provide a friendly, homely, caring and secure environment for residents.

To promote the independence of residents for as long as possible.

To liaise and give support to relatives and friends of residents.

To consistently provide the best quality of nursing care to enable residents to enjoy the highest possible quality of life.

To accept and respect each resident's social, emotional, religious, cultural and ethnic needs.

To respect the right of each resident to be informed and as far as possible, be enabled to participate in decisions about care plans and treatment, involving relatives and friends if so desired.

To provide occupational therapy, entertainment, outings and other services for residents wishing to participate.

To consistently provide meals of high quality sensitive to the desires of each resident.

To make regular training and updating of knowledge and skills available to staff.

To manage business affairs prudently and efficiently to ensure a stable and secure environment for residents.

To carry out property maintenance timeously and in a manner causing least possible disturbance to residents.

The Deputy Manager has been promoted to Manager since the last inspection visit.

Based on the findings of this inspection the service has been awarded the following grades:

Quality of Care and Support - 4 - Good

Quality of Environment - 4 - Good

This inspection report and grades represent the Care Commission's assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. Please refer to the care services register on the Care Commission's website (www.carecommission.com) for the most up-to-date grades for this service.

Basis of Report

Before the Inspection

The Annual Return

The service submitted a completed Annual Return as requested by the Care Commission.

The Self-Assessment Form

The service submitted a self-assessment form as requested by the Care Commission. This contained information on what the manager thought they did well. Some areas for improvement were identified.

Views of service users

The Officer spoke with 11 service users individually and one relative during the course of the visit.

Regulation Support Assessment

The inspection plan for this service was decided after a Regulation Support Assessment (RSA) was carried out to determine the intensity of inspection necessary. The RSA is an assessment undertaken by the Care Commission Officer (CCO) which considers complaints activity, changes in the provision of the service, nature of notifications made to the Care Commission by the service (such as absence of a manager) and action taken upon requirements. The CCO will also have considered how the service responded to situations and issues as part of the RSA.

LOW

This assessment resulted in this service receiving a low RSA score and so a low intensity inspection was required. The inspection was based on the relevant Inspection Focus Areas and associated National Care Standards, recommendations and requirements from previous inspections and complaints or other regulatory activity.

The inspection was unannounced carried out by Beryl Hogg Care Commission Officer.

During the inspection process

Staff at inspection

Beryl Hogg Care Commission Officer met with the following;

The Manager

Members of staff who were on duty at the time of the visit.

Evidence

During inspection evidence was gathered from a number of sources including: discussion with 11 service users and one relative.

A review of a range of policies, procedures, records and other documentation, including the following:

- Four service users' personal plans
- minutes of staff and service users' meetings
- accident/incident records
- complaints

Discussion took place with a range of care staff including:

- the manager
- Five care staff
- a member of the domestic staff

Observation of staff practices

Examination of the environment.

The above information was taken into account during the inspection process.

Inspection Focus Areas and links to Quality Themes and Statements for 2008/09

Details of the inspection focus and associated Quality Themes to be used in inspecting each type of care service in 2008/09 and supporting inspection guidance, can be found at:

<http://www.carecommission.com/>

Fire Safety Issues

The Fire (Scotland) Act 2005 introduced new regulatory arrangements in respect of fire safety, on 1 October 2006. In terms of those arrangements, responsibility for enforcing the statutory provisions in relation to fire safety now lies with the Fire and Rescue service for the area in which a care service is located. Accordingly, the Care Commission will no longer report on matters of fire safety as part of its regulatory function, but, where significant fire safety issues become apparent, will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Further advice on your responsibilities is available at www.infoscotland.com/firelaw

Action taken on requirements since last inspection

There were no requirements in the previous report.

A requirement was made following regulatory activity since the last inspection.

1. The provider is required to review the present staffing levels using a recognised dependency tool and ensure that sufficient staffing levels are being provided to meet the assessed needs of the service users. The written outcome of the review should be sent to the Care Commission.

This is in order to comply with SSI 114 13 (a) a provider shall, have regard to the size and nature of the service, the statement of aims and objectives and the number and needs of the service users- ensure that at all times in such numbers as are appropriate for the health and welfare of service users. This also takes account of the National Care Standards for Older People Standard 5 Staffing and Management.

Timescale within eight weeks of receipt of this letter. The timescale has not yet expired. The manager was in the process of carrying out a review. This will be followed up on receipt of a response from the service.

Information about complaints that have been upheld or partially upheld can be found on the Care Commission website.

Comments on Self Assessment

A fully completed self assessment document was submitted by the service. This was completed to a satisfactory standard and gave relevant information for each of the Quality Themes and Statements. The service identified its strengths and some areas for future improvement and gave evidence of service user involvement.

View of Service Users

The Officer spoke with eleven service users. All of the service users described the care as being good. The staff were described as being friendly and kind. The accommodation was described as being comfortable and the food good. All service users felt comfortable to raise concerns and felt confident action would be taken. The following are some of the comments offered.

"This is a lovely place to be in. I enjoy the garden."

"It is good care here. The staff are busy but they always have time for you."

"Food is terrific. I have put on weight."

"Very good staff. Anything they can do for you they do it."

"Staff are very obliging and the food is great. "

" Staff are kind and very helpful. "

Other comments are incorporated into the body of the report.

View of Carers

The one relative spoken with stated that the care was very good and that staff were always pleasant to them when they visited. They felt comfortable to raise concerns and were confident that action would be taken. The communication was described as being good.

Quality Theme 1: Quality of Care and Support

Overall CCO Theme Grading: 4 - Good

Statement 1: We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service Strengths

This report should be read in conjunction with the report of the visit on 11 and 12 June 2008.

As stated in the previous report the service had a number of ways in which service users could participate. This process was continuing to be developed.

At the previous visit the manager planned to meet with staff to explore ways of involving them to further support service users to express their views. This was being progressed.

There was evidence that participation was being discussed at staff meetings

The manager had written to relatives asking about separate relative meetings. Responses were awaited.

Areas for Development

Areas identified by the service to support and improve service user participation should be taken forward. Progress will be reviewed at the next inspection.

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

0

Statement 3: We ensure that service user's health and wellbeing needs are met.

Service Strengths

This report should be read in conjunction with the report of the visit on 11 and 12 June 2008.

The service continues to have a number of good methods to ensure service user's health and wellbeing needs are met. This was supported by comments from service users.

Training in dementia care was being progressed.

A method of involving service users and relatives in the review of care documentation was being introduced.

Areas for Development

A new set of care documentation was being introduced. It is recommended that timescales are identified for the completion of the transfer and that these are fully audited to ensure that staff are utilising the documentation correctly. See recommendation 1.

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

1

Quality Theme 2: Quality of Environment

Overall CCO Theme Grading: 4 - Good

Statement 1: We ensure that service users and carers participate in assessing and improving the quality of the environment within the service.

Service Strengths

This report should be read in conjunction with the report of the visit on the report of the visit on 11 and 12 June 2008.

At the previous visit the manager had commented on the difficulty in ascertaining views of service users who had memory impairment and agreed to explore methods which could facilitate this process. This was being progressed.

Areas for Development

Areas identified by the service to support and improve service user participation should be taken forward. Progress will be reviewed at the next inspection.

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

0

Statement 2: We make sure that the environment is safe and service users are protected

Service Strengths

This report should be read in conjunction with the report of the visit on 11 and 12 June 2008.

The service continues to have very good methods of ensuring that the environment is safe and service users protected.

Service users again commented that they felt safe.

Training as recommended in the previous report had been undertaken by domestic staff.

There was now a formal system in place to check window safety, hot water temperatures and bed rails.

Areas for Development

The service should continue to maintain and develop current good practice.

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Quality Theme 3: Quality of Staffing

Overall CCO Theme Grading: 0 - Not Assessed

Quality Theme 4: Quality of Management and Leadership

Overall CCO Theme Grading: 0 - Not Assessed

Regulations / Principles

National Care Standards

Enforcement

There has been no enforcement action against this service since the last inspection.

Other Information**Requirements**

There are no requirements following this visit.

Recommendations

1. It is recommended that timescales are introduced for the completion of the transfer of the documentation and a full audit carried out on their completion of the transfer. National Care Standards for Older People Standard 6. 1. Support Arrangements.

Beryl Hogg
Care Commission Officer