

Inspection report

The Elms - Edinburgh Care Home Service

148 Whitehouse Loan
Edinburgh EH9 2EZ

Inspected by: Lesley Scriven
(Care Commission Officer)

Type of inspection: Unannounced

Inspection completed on: 4 March 2009

Service Number

CS2003010915

Service name

The Elms - Edinburgh

Service address148 Whitehouse Loan
Edinburgh EH9 2EZ**Provider Number**

SP2004005785

Provider Name

Crossreach

Inspected ByLesley Scriven
Care Commission Officer**Inspection Type**

Unannounced

Inspection Completed

4 March 2009

Period since last inspection

Three months

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Introduction

The Elms is a residential care home which provides care and support to up to forty older people; it was registered by the Care Commission in 2002. The home is owned and managed by Crossreach - the social care arm of the Church of Scotland. Crossreach is a registered charity.

The home - a detached period villa with a modern annexe - is situated in private grounds in a quiet residential area of Edinburgh. It is within walking distance of a good range of shops and places of worship, and is also near to a bus stop on a route into the city.

Accommodation is spread across two floors in the main building. There are three large and traditionally decorated communal sitting rooms, a dining room and a number of bedrooms on the ground floor, and an additional sitting room and further bedrooms on the first floor. For service users with restricted mobility, a passenger lift provides alternative access to the first floor, which is set out over two levels. A stairlift is installed between levels.

The single storey annexe provides more bedrooms and an activities room, which may also be used as a 'quiet' sitting room by users and their visitors. A number of small informal seating areas have been created in the hallways. All bedrooms have ensuite showering and WC facilities and the home provides sufficient suitable shared accessible bathrooms and WCs. There are separate kitchen and laundry areas.

Outdoors there is a large enclosed garden around the property, with a summer house and a range of all-weather seating which can be used by service users and their visitors.

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

Quality of Staffing - 4 - Good

Quality of Management and Leadership - 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

This report was written following an unannounced inspection of the service, carried out by Lesley Scriven, Care Commission Officer. The inspection took place between the hours of 10:20 am and 5:25 pm on 4 March 2009.

Before the Inspection

The Annual Return

As requested by the Care Commission, the service submitted a completed Annual Return ahead of the last inspection. This was carried out in November 2008.

The Self-Assessment Form

The service also submitted a self-assessment form as requested.

Regulation Support Assessment

The inspection plan for this service was decided after a Regulation Support Assessment (RSA) was carried out to determine the necessary intensity of inspection. The RSA is an assessment undertaken by the Care Commission Officer (CCO) which considers complaints activity, changes in the provision of the service, the nature of any 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.

This assessment resulted in this service receiving a low RSA score and so a low intensity inspection was required. The inspection was based on recommendations made at the last inspection, which was carried out on 19 & 20 November 2008.

During the inspection process

Evidence

During the inspection, evidence was gathered from a number of sources.

Some time was spent checking records, including four service user care files, and the CCO talked with the home's Manager and staff about how the service is run and how users' changing needs are identified and met.

The majority of the time was spent gathering views from the people who live at the home, and observing staff practice. A partial tour of the premises looked at the standard of accommodation and facilities on offer and arrangements for maintaining safe living and working conditions.

Staff spoken with during the inspection

The home's Manager

Two Senior Care Workers

One acting Senior Care Worker

Two Care Workers

One Activities Co-ordinator

One Cook (employed by Caterplus, a catering firm subcontracted by Crossreach)

One Catering Assistant (again employed by Caterplus)

One Domestic

Service users and carers/visitors spoken with during the inspection

Ten service users were spoken with. Time was spent with users both in private and in small groups.

Two visitors (including one volunteer visitor)

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 arising from the last inspection.

Comments on Self Assessment

The home's self assessment was submitted prior to its last inspection, which took place in November 2008. It would therefore be helpful to read this report in conjunction with the last.

View of Service Users

During the inspection, the Care Commission Officer (CCO) talked with ten service users, gathering their views about the quality of the service offered by The Elms. Time was also spent with a number of people, who because of their dementia related needs or cognitive impairment experience difficulty expressing themselves. Where two-way conversation was limited, communication was based on careful observation and interpretation by the CCO of each individual's gesture and facial expression.

Feedback was very positive.

Most people said they were "... well looked after", and that they viewed the home as "... a very good place".

Those spoken with confirmed that they were able to make choices in relation to daily rising and retiring routines and the activities they took part in. One service user told the CCO that whilst they might be invited and choose to spend time with staff doing crafts or a crossword puzzle, they could equally decide to spend time alone in their room to enjoy quiet privacy, and their decision would be respected.

Another user described the home as "... a very pleasant place to live", and the garden as "... a glorious place to spend time in summer."

A number of service users confirmed that family and friends were able to visit at any time of the day, and that visitors were made to feel welcome by the home's staff.

A small group of users described staff as "... very obliging". They offered an example of how alternative meals are offered when someone doesn't like what's on the menu.

Only one concern was raised, by a person who told the CCO that since the number of service users with dementia related needs at the home had increased, the environment had become less stimulating. Their concern was discussed with the Manager and staff who recognised that this can be a frustration for more able users.

View of Carers

The CCO spoke with one visitor, who was also concerned about the lack of stimulating conversation between service users. Another visitor - a regular volunteer at the home, placed by a local independent school - told the CCO that he enjoys his visits. He spends these talking with service users, and occasionally in better weather walking with them in the home's grounds.

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 document should be read in conjunction with the home's last inspection report from November 2008. It more fully describes evidence of the strengths already demonstrated by the service in relation to achieving service user and carer participation.

Further progress towards improving participation was being slowly made.

Recent measures included the reintroduction of group meetings with relatives, and an agreement from one relative to resume the task of writing the home's newsletter. The newsletter hadn't been published since last spring, but was enjoyed by service users and their carers until that time.

The Manager also stated that she intends to encourage people to use the home's dedicated website for sharing suggestions for developing the service.

Areas for Development

The home's last inspection identified three main areas for improvement, including the need for the service to:

Put CrossReach's corporate participation policy into action; and introduce a way of action planning any improvements which result from user/carers consultation, and feeding back progress to the people who suggest the change.

These areas for improvement remained relevant. However, because they were identified just three months ago, and the new Manager only took up post at the end of December, there had been little time for the service to make any significant change in this regard. Progress will be reviewed at the next inspection.

The third area for improvement, regarding the reintroduction of regular meetings, was being satisfactorily addressed.

See recommendations two to four at Quality Statement 4.4.

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

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

This document should be read in conjunction with the home's last inspection report from November 2008. It more fully describes evidence of the strengths already demonstrated by the service in relation to ensuring that service user's health and wellbeing needs are met.

During the inspection the CCO observed staff assisting service users in a respectful and relaxed way, offering choice and helping people to make informed decisions. For example, people were able to choose which activities they wished to take part in and which lunchtime meal sitting they preferred to attend. Relationships between key workers and service users appeared genuinely warm and caring, and people living at the home told the CCO that they were confident that staff would take good care of them.

One recent improvement included a change introduced by the Manager to reduce the number of service users allocated to 'key workers'. The CCO noted that most staff already had a good knowledge of user's needs and preferences, but with the new arrangements in place, Care Workers should be able to spend more time getting to know each individual even better. The intention is that this will help them build up a clearer picture of the person's needs and the way they prefer these to be met, and result in the delivery of more person-centred care and support. Senior Care Workers will no longer hold a 'key worker' role; this should enable them to focus on more supervisory tasks.

Areas for Development

The CCO was informed that before a person moves to The Elms, they will have had their needs assessed either by a health or social care professional, or by a senior member of Crossreach staff. The Crossreach assessment tool - which is used to supplement any assessment supplied by the other agencies - is designed to prompt the assessor to look at the different aspects of each person's life. This includes what they can do to take care of themselves, and what support they will need from staff with the tasks of daily living and personal and health care.

Once a person has moved in, the Manager or Senior Care Workers should use the assessment information to put together a care plan. This should provide clear written guidance for staff about how the person prefers to be cared for and supported in a way that helps them to stay as independent as possible for as long as possible. It should also be kept up to date and altered as the individual's needs change.

The CCO looked at four service user care plans, none of which fully reflected the areas of ability, need or preference identified by the assessment documentation for each person. Few included sufficient detail to guide staff to deliver the right kind of support at the right time. One of the plans had been drawn up for a service user who has very complex physical health needs, and as a result of dementia is unable to communicate verbally. The plan did not explain what kind of mobility assistance or pressure relieving equipment the person needs, or how this should be used by staff. It identified that the person can communicate through facial expression, but did not describe how different expressions should be interpreted. The plan was not dated or signed.

This needed to be improved. Detailed plans are essential to the delivery of good quality, timely, person-centred care. Staff who have worked at the home for a long time may know service users well and have a good understanding of their needs and how these should be met, but new staff and agency workers will not share this depth of knowledge. They need robust documentation to guide them in their work. It is also important to sign and date plans, so that changing needs can be tracked and plans revised accordingly, and a full picture of a person's health and wellbeing can be established over the timeline of their stay at the home.

Risk assessment documents and risk management plans were noted to be kept for service users. These addressed identified risks relating to the different aspects of each person's care plan. One of the risk plans had been drawn up for a service user who has dementia and who is unable to express themselves clearly. The person can be easily misunderstood, and their behaviour often upsets the other people who live at the home. The plan said that staff would devise ways of 'easing communication', but did not describe how. It did not address how the person's challenging behaviour might be minimised, or how the negative impact on other service users might be reduced. The CCO also noted that this plan was overdue a review, and like a number of other risk documents, needed to be updated.

This too needed to be improved. Comprehensive risk assessment and management documentation needed to be developed for everyone who lives at the home. This should allow for individualised guidelines to be put in place to protect service users who become more vulnerable as they become more dependent. Keeping risk assessment and risk management plans up-to-date should ensure that the guidelines properly reflect each new risk as it presents.

See requirement number 1.

CCO Grading

4 - Good

Number of Requirements

1

Number of Recommendations

0

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 document should be read in conjunction with the home's last inspection report from November 2008. It more fully describes evidence of the strengths already demonstrated by the service in relation to achieving service user and carer participation.

As described at Quality Statement 1.1, progress towards improving participation was being slowly made.

The CCO was told that the work taking place to change the annexe sitting room into an activities room came about as a result of consultation with service users and their carers. The Manager and staff also described how service users were able to help choose new colour schemes for the home's refurbishment with the aid of colour and fabric samples. Some of the people spoken with during the inspection remembered being involved.

Areas for Development

One area for improvement that was identified at the last inspection still needed to be met.

The CCO who visited in November 2008 noted that Crossreach's corporate quality assurance system could be improved to include ways of involving service users and carers in assessing the quality of the home's environment. There was no evidence of change in this respect. The Manager said she had shared the CCO's advice with the organisation and hopes that the system can be developed to take this into account. Progress will be reviewed at the next inspection.

See recommendations numbered two to four at Quality Statement 4.4.

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

0

Statement 3: The environment allows service users to have as positive a quality of life as possible.

Service Strengths

This document should be read in conjunction with the home's last inspection report from November 2008. It more fully describes evidence of the strengths already demonstrated by the service in relation to offering an environment which allows service users to have as positive a quality of life as possible.

New evidence of further strengths included the introduction of additional small, informal seating areas throughout the home, and changes taking place to develop the annexe sitting room into an activities room following consultation with service users and their carers. Another room, in the past used as an office, was being changed into a 'treatment room'. Service users will soon be able to use this - if they wish - when they are visited by health professionals such as GPs, District Nurses or Podiatrists.

Areas for Development

At the last inspection it was suggested that management and staff should consider the introduction of risk assessment/risk management plans for service users who enter other people's bedrooms uninvited.

No progress had been made in this respect. At this visit the home's new Manager agreed to address the issue without delay.

See recommendation number one.

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

1

Quality Theme 3: Quality of Staffing

Overall CCO Theme Grading: 4 - Good

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

Service Strengths

This document should be read in conjunction with the home's last inspection report from November 2008. It more fully describes evidence of the strengths already demonstrated by the service in relation to achieving service user and carer participation.

This inspection identified further strengths. Last year carers expressed concern about the ability of staff whose first language is not English to communicate effectively with service users who have dementia related needs. By way of response an English Tutor was invited to the home and visited over a period of two months to offer support to Care Workers with their spoken and written English.

Areas for Development

One area for improvement that was identified at the last inspection still needed to be met.

The CCO who visited in November 2008 noted that Crossreach's corporate quality assurance system could be improved to include ways of involving service users and carers in assessing the quality of staffing at the home. There was no evidence of any change in this respect.

The Manager said she had shared the CCO's advice with the organisation and hopes that the system can be developed to take this into account. Progress will be reviewed at the next inspection.

See recommendations numbered two to four at Quality Statement 4.4.

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

0

Quality Theme 4: Quality of Management and Leadership

Overall CCO Theme Grading: 4 - Good

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

Service Strengths

This document should be read in conjunction with the home's last inspection report from November 2008. It more fully describes evidence of the strengths already demonstrated by the service in relation to achieving service user and carer participation.

Areas for Development

One area for improvement was identified at the last inspection, when the CCO noted that Crossreach's corporate quality assurance system could be further developed to include ways of involving service users and carers in assessing the quality of management and leadership at the home. This had not changed.

The Manager said she had shared the observation with the organisation and hopes that the system will be changed to take this into account. Progress will be reviewed at the next inspection.

See recommendations numbered two to four at Quality Statement 4.4.

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

0

Statement 4: We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide.

Service Strengths

This document should be read in conjunction with the home's last inspection report from November 2008. It more fully describes evidence of the strengths already demonstrated by the service in relation to achieving service user and carer participation.

Whilst the service was noted to have maintained the strengths evidenced at the last inspection, the Manager has reported that no progress has yet been made to action the areas for improvement that were identified at that time.

Areas for Development

Two areas for improvement were identified at the last inspection, and both still need to be actioned. The CCO who visited in November 2008 noted that :-

CrossReach's corporate quality assurance system was quite limited in respect of the areas of service quality it measured, and didn't fully involve service users and their carers in the process.

And

The Elms' in-house quality assurance questionnaire could be further developed to seek service user and carer views about the quality of management and leadership at the home. The Manager should also consider how any improvements that are made as a result of in-house consultation are fed back to those who make the suggestions.

The Manager says she has shared the CCO's advice about the corporate quality assurance system with the organisation, and hopes that the tool will be further developed to broaden the aspects of service provision audited. Since the Manager only took up post just after the Christmas holidays she has had little time to improve the in-house questionnaire.

Progress will be reviewed at the next inspection.

See recommendation number one at Quality Statement 2.3, and recommendations numbered two to four for this Quality Statement.

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

3

Regulations / Principles

National Care Standards

Enforcement

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

Other Information

The Care Commission received an action plan from the service indicating how it would consider meeting the recommendations arising from the last inspection. The plan lacks detail in relation to how suggested improvements will be implemented; this may in part be due to the fact that some of the recommendations would mean changes to systems at a corporate level.

Requirements

1. After consultation with each service user, and/or where appropriate their representative, the provider must prepare a written plan which sets out how the user's health and welfare needs are to be met. This will include details of how any risks associated with the person's physical and mental health will be safely monitored and managed. The risk management element of the plan must address communication needs and behaviours which challenge the service. The plan must be reviewed and updated on an at least six-monthly basis, or more frequently if changing needs dictate or if requested by the user or their representative.

This is in order to comply with Scottish Statutory Instrument 2002 No. 114, The Regulation of Care (Requirements as to Care Services) (Scotland) Regulations 2002, Regulation 5 (1) 'Personal Plans'.

It also takes into account National Care Standards, Care Homes for Older People - Standard 6, 'Support Arrangements' and Standard 9, 'Feeling Safe and Secure'.

Timescale: Three months from receipt of this report

Recommendations

1. Care planning and risk assessment/risk management documentation should be developed to address service user's dementia related needs, where these result in behaviours that impinge on the privacy of fellow users. Such behaviours would include entering other people's bedrooms uninvited.

This takes into account National Care Standards, Care Homes for Older People - Standard 6, 'Support Arrangements', Standard 9, 'Feeling Safe and Secure', and Standard 16, 'Private Life'.

2. The organisation should consider further developing its corporate quality assurance systems to broaden the aspects of service provision audited, and more fully engage service users and their carers in the process.

The aspects of provision which service users and their carers should be involved in assessing and improving should include:

quality of care and support;
quality of the environment and its impact on service users' quality of life;
quality of staffing; and
quality of management and leadership.

Identified improvements/changes should be action planned and progress fed back to service users and their carers.

This takes into account National Care Standards, Care Homes for Older People - Standard 11, 'Expressing Your Views'.

Recommendation first made 20 November 2008

3. Once completed and endorsed by the organisation, the home's draft 'Participation Policy' should be implemented. Relevant accompanying staff training should be provided to ensure that staff are aware of their responsibility to promote and support service user and carer participation, and understand how this can be achieved.

This takes into account National Care Standards, Care Homes for Older People - Standard 11, 'Expressing Your Views', and Standard 5, 'Management and Staffing Arrangements'.

Recommendation first made 20 November 2008

4. The home's Manager should consider how any improvements that are made as a result of in-house quality assurance consultation (e.g. via the questionnaire and service user/carer meetings) are fed back to the people who make the suggestions.

This takes into account National Care Standards, Care Homes for Older People - Standard 11, 'Expressing Your Views'.

Recommendation first made 20 November 2008

Lesley Scriven
Care Commission Officer