

# Inspection report

## Belhaven Nursing Home Care Home Service

Beveridge Row  
Dunbar EH42 1TR

**Inspected by:** Jan McIntosh  
**(Care Commission Officer)**

**Type of inspection:** Unannounced

**Inspection completed on:** 6 March 2009

**Service Number**

CS2004062389

**Service name**

Belhaven Nursing Home

**Service address**Beveridge Row  
Dunbar EH42 1TR**Provider Number**

SP2003002600

**Provider Name**

East Lothian Council

**Inspected By**Jan McIntosh  
Care Commission Officer**Inspection Type**

Unannounced

**Inspection Completed**

6 March 2009

**Period since last inspection**

4 months

**Local Office Address**Stuart House  
Eskmills  
Musselburgh  
EH21 7PB  
Local Tel No 0845 600 8335

## **Introduction**

Belhaven Nursing Home has been registered with the Care Commission since 29 March 2004 to provide accommodation and care to a maximum of 23 older people. The Home is situated in a rural setting in the grounds of Belhaven Hospital in Dunbar and is contained within two buildings which were previously used as wards in the hospital. One building is known as Belhaven Nursing Home and the other as Hollytrees. All the bedrooms in both parts of the home are single and have en-suite facilities.

The provider for this service is East Lothian Council, however the Home operates according to the policies and procedures of the NHS Trust who are also responsible for the recruitment of the staff.

The Home states that its' aim is to "provide a friendly, caring environment in which residents will be enabled and assisted to maintain maximum independence in their lifestyle."

Based on the findings of this inspection the service has been awarded the following grades:  
Quality of Care and Support - 4 - Good  
Quality of Staffing - 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](http://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 before the last inspection.

The Self-Assessment Form

The service submitted a self-assessment form as requested by the Care Commission before the last inspection.

Views of service users

No questionnaires were issued before this unannounced inspection.

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.

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 Area and associated National Care Standards, recommendations and requirements from previous inspections and complaints or other regulatory activity.

This service will receive a number of inspections over the year 08/09. This inspection report will include a service user quality statement from each Quality Theme and an additional Quality Statement (chosen by the Care Commission Officer) in each theme.

During the inspection process

Staff at inspection

The inspection was carried out by Care Commission Officer (C.C.O.) Jan McIntosh. The C.C.O. spoke with the Manager and three other members of staff. Feedback was given at the end of the inspection to the Manager.

Evidence

Evidence was gathered from a number of sources including:

Discussion with two family carers who were visiting.

Discussion with staff.

A review of a range of policies and procedures, records and other documentation including care plans, the service provider's quality assurance systems and staff training records.

Observation of staff practices.

Examination of the environment and equipment.

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](http://www.infoscotland.com/firelaw)

### **Action taken on requirements since last Inspection**

There were no requirements made following the last inspection.

### **Comments on Self Assessment**

An updated self-assessment was not requested before this unannounced inspection.

### **View of Service Users**

The CCO spoke with two residents during the inspection. Comments made were positive and included "the staff are really kind" and "I think you wouldn't find much better anywhere".

Due to the levels of physical and mental frailty it was not possible to consult with the majority of residents at length, however interactions between staff and residents were observed and noted to be relaxed and respectful.

**View of Carers**

The CCO spoke with two family carers who were visiting during the inspection. Both stated that they enjoyed visiting as they were made to feel welcome in the home and that they thought the standard of care was very 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 together with the report of the inspection on 23 October 2008.

A recommendation was made following the last inspection:

"It is a recommendation that the service carries out an assessment of the current systems for reviewing care plans to ensure that all plans are fully reviewed at least 6 monthly."

Progress

Reviews had been carried out for the majority of residents and the remainder were planned.

The Manager had implemented a new system to ensure reviews were carried out regularly.

The recommendation was met.

The service had implemented some systems for gathering views from residents and relatives about the service. These included care plan reviews, relatives meetings and questionnaires for relatives.

### **Areas for Development**

A recommendation was made following the last inspection:

"It is a recommendation that the provider develops a strategy for participation, including staff training about how the strategy is to be delivered."

Progress

A strategy had been developed but had not yet been implemented. Staff training was to take place once the strategy had been ratified. The recommendation is carried forward. (see recommendation 1)

### **CCO Grading**

4 - Good

### **Number of Requirements**

0

### **Number of Recommendations**

1

**Statement 2: We enable service users to make individual choices and ensure that every service user can be supported to achieve their potential**

### **Service Strengths**

This report should be read together with the report of the inspection on 23 October 2008.

All service users had a care plan detailing their assessed needs.

A recommendation was made following the last inspection :

"It is a recommendation that the service reviews the care planning process to ensure that assessment of residents' social, emotional and mental health care needs is carried out in an integrated way. This should include staff training to support the process."

Progress

The care plans examined contained more detailed information about the residents' social care needs and how these were being met. The activity co-ordinator also kept separate records and reviewed the social activities with residents and carers regularly. The recommendation was met.

It was noted that the home used documentation designed for use in a hospital setting. The Manager reported that a new care plan format was being developed to make the plans more suitable for a care setting.

### **Areas for Development**

A recommendation was made following the last inspection:

"It is a recommendation that the provider reviews the provision of meals for residents to ensure that there is flexibility in meeting individual needs and preferences."

Progress

There had been some adjustment to the ordering system from the central hospital kitchens to allow for fewer courses at lunchtime with additional courses at the evening meal. There were limited supplies available in the home to allow some flexibility, however this was mainly restricted to tinned foods. The recommendation was partially met and is amended and carried forward. (see recommendation 2)

### **CCO Grading**

4 - Good

### **Number of Requirements**

0

### **Number of Recommendations**

1

**Quality Theme 2: Quality of Environment**

**Overall CCO Theme Grading: 0 - Not Assessed**



### **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 report should be read together with the report of the inspection on 23 October 2008.

Relatives and residents spoken with stated that they were able to raise any issues about staffing with the Manager.

Comments made under Quality Statement 1.1 are also applicable to this Quality Statement.

#### **Areas for Development**

Comments made under Quality Statement 1.1 are also applicable to this Quality Statement.

#### **CCO Grading**

4 - Good

#### **Number of Requirements**

0

#### **Number of Recommendations**

0

**Statement 3: We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.**

#### **Service Strengths**

This report should be read together with the report of the inspection on 23 October 2008.

Staff spoken with were enthusiastic about their work and reported that there was training ongoing. A Knowledge Skills Framework was in place covering recent training in topics such as adult and child protection, equality and diversity, food hygiene, and infection control.

#### **Areas for Development**

The service was maintaining current good standards.

#### **CCO Grading**

4 - Good

#### **Number of Requirements**

0

**Number of Recommendations**

0

**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 were no requirements made following this inspection.

**Recommendations**

1. It is a recommendation that the provider develops a strategy for participation, including staff training about how the strategy is to be delivered.

This takes account of the National Care Standards for Care Homes for Older People : Standards 8 and 11

2. It is a recommendation that the provider reviews the provision of meals for residents. This should ensure that supplies of fresh foods are available in the home to ensure flexibility in meeting individual nutritional needs and preferences.

This takes account of the National Care Standards for Care Homes for Older People : Standards 13.2 and 13.3

**Jan McIntosh**

**Care Commission Officer**