

# Fords Road Home for Older People Care Home Service

8 Fords Road  
Edinburgh  
EH11 3HP

Telephone: 0131 443 3731

Type of inspection: Unannounced  
Inspection completed on: 31 October 2016

**Service provided by:**  
City of Edinburgh Council

**Service provider number:**  
SP2003002576

**Care service number:**  
CS2003010931

## About the service

Fords Road Home for Older People is owned and managed by the City of Edinburgh Council Health and Social Care Department. It is registered to provide residential care and accommodation for up to 36 older people. The home is situated in South West Edinburgh close to local shops, amenities and public transport.

Accommodation is provided over two floors. There are two units on both floors, each of which has bedrooms for single use, a lounge, dining room/kitchen and shared toilet and bathing facilities. The upper floors can be accessed by stairs or a lift.

There is a conservatory and large shared lounge and TV area on the ground floor. There are a variety of smaller seating areas around the home. Kitchen, laundry and office facilities are also on the ground floor. There are gardens around the property. There is parking to the side of the building and in front of it on the road.

At the time of inspection the home had 35 residents.

## What people told us

We received a total of nine questionnaires prior to our inspection of the service. These were completed by residents' relatives. Overall 100% of responders either agreed or strongly agreed that overall they were happy with the quality of care provided at Fords Road Home for Older People. They told us:-

"No complaints, best of care and attention, also he is safe. My other half said staff all good in care home"

"There appears to be a use of agency staff, but the regular staff seem fine and caring. There is an activity board but not many of the activities take place. It would be good to have an Activities Coordinator and some meaningful activities. There are some outings but not many residents can go each time. The Care Home Olympics was a good thing enjoyed by my (relative)"

1. Most of the staff are friendly and interact with visitors. I feel there could be better communication in between care reviews.
2. The chairs that the residents sit on need to have their cushions examined regularly and a plan to change them if they are soiled or smelly.
3. I don't feel that two showers a week is enough when residents are incontinent or have problems remembering [...].
4. There's a lot of sitting around or watching TV but I feel there could be more mental stimulation provided."

We spoke to a further two relatives and three residents as part of the inspection. We carried out general observations throughout the inspection. We also observed residents using the SOFI 2 tool, this is an approved tool which provides a framework to enhance observations and standardise recordings. For this observation we focused on a further two residents in a group of nine relaxing in the lounge in the evening. The views, opinions and results of observations obtained during the inspection visits are considered throughout this report.

## Self assessment

The Care Inspectorate received a fully completed self assessment document from the provider. We were satisfied with the way the provider had completed this and with the relevant information included in relation to the Quality Themes we were assessing.

## From this inspection we graded this service as:

<b>Quality of care and support</b>	5 - Very Good
<b>Quality of environment</b>	4 - Good
<b>Quality of staffing</b>	4 - Good
<b>Quality of management and leadership</b>	not assessed

## What the service does well

We found that the service provided a very good level of care and support. We found that the quality of the staffing was good as was the environment.

We saw that the quality of the care plans in place for the residents was very good and these were reviewed regularly with the participation of residents and their family members, where possible.

We found that medication was managed well and was audited on a monthly basis, although there were some areas of improvement identified during the inspection. The medication recording was also regularly reviewed by a local pharmacy which evidenced to us that the service strove to ensure they were administering medication properly.

We spent time in the service and observed staff practice. We also spoke to some residents and relatives. We found that staff were caring, well-trained, professional and supportive in their approach.

We found the service monitored residents' weights and where issues or concerns arose liaised with other health professionals to ameliorate them. We also saw records of health professionals' visits to residents and communications with the service, these included Caring for Smiles (oral health support), dietitians, physiotherapists and GPs. This assured us that the service obtained professional interventions and guidance when needed.

We spoke to staff and discussed their ability to report any harms or potential harms under the organisational Adult Support and Protection policy. We were confident that staff were able to report under this and the organisational whistleblowing policy appropriately.

To maintain the very good grade for care and support awarded at this inspection all requirements, recommendations and areas for improvement identified below must be fully met within the agreed timescales.

Although the building was not ideal, as facilities were shared and space limited, the environment was friendly, clean and safe. The staff made the best possible use of the space available and the atmosphere was conducive with the very good level of care we could see was being provided.

The maintenance logs we reviewed were up to date. We saw that when repairs were requested these were monitored by the Business Manager and signed off by the Handyman when completed. This assured us the environment was monitored properly and maintained to a good standard.

The staff we spoke to told us they had received a good training package which was regularly refreshed. We saw the management maintained a log that ensured any refresher training took place as it should. This gave us confidence that staff were well-trained and could deliver safe, supportive care.

We found that relevant staff were properly registered with the Scottish Social Services Council (SSSC) or Nursing and Midwifery Council (NMC) as required.

## What the service could do better

We found that the service had not been compliant with the minimum staffing level in the staffing schedule agreed with the Care Inspectorate on 26 May 2016. This document is displayed in the entrance foyer of the service. Staff we spoke to told us they were stretched and felt the service was short-staffed. The dependency tool used by the service to identify residents' needs and provide associated guidance to staffing levels was in deficit. We clarified the content of the staffing schedule with the manager and found it had been misinterpreted. As the staffing schedule must be complied with as a condition of the service registration we have made a requirement in this report.

(See requirement 1)

We found that there were some errors made by staff when recording the administration of medication. We discussed these at the time of inspection with the management. The instances we reviewed and discussed with the manager identified that medication had been given but staff had failed to record it.

(See recommendation 1)

After a review of feedback provided in our questionnaires by relatives, and our discussions with staff and management it was evident that occasionally the activities provided to residents would sometimes be cancelled. It is important that activities are regularly provided for residents to assist with social interaction, improve health and meaningfully occupy their time.

(See recommendation 2)

We noted that a Do Not Attempt Cardiopulmonary Resuscitation (DNACPR) form was invalid as it had not been signed off as agreed by a senior doctor. We also saw an Adults With Incapacity (AWI) certificate (a certificate provided under section 47 of the Adults with Incapacity (Scotland) Act 2000) that did not have a signed associated treatment plan. The Code of Practice to Part 5 of the Adults with Incapacity Act recommends the use of treatment plans attached to the Section 47 certificate where there are "multiple or complex healthcare interventions".

These documents must be signed and dated appropriately. We made the service aware of these issues and asked that it review, for all residents, the relevant paperwork and follow up appropriately with the relevant healthcare professionals. The manager should record progression in this regard with healthcare partners particularly if difficulties arise.

We found the environment in the service to be safe and clean, however areas of the home could do with being redecorated and refreshed, or elements replaced, to make the environment a little more homely.

(See recommendation 3)

We noted that care staff had been trained in dementia care to the "informed" level of the Scottish Social Services Council (SSSC) Promoting Excellence education framework. Due to the level of need of the residents living with dementia within the home this training should be advanced to the "skilled" level.  
(See recommendation 4)

In discussions with staff and after a sample review of staff files it was evident that staff supervision meetings had not taken place with everyone on a regular basis in line with organisational policy. It is important that staff have regular protected time with their line managers to review their performance, training and development, service improvement and raise issues or concerns.  
(See recommendation 5)

We found when speaking to staff and reviewing records of all meetings that staff team meetings were not held regularly and attendance was low. It is important that staff meet as a group regularly to share best practice, and receive and give updates on service provision. It was also apparent that in meetings with staff, residents and relatives any actions agreed were not explicitly reviewed at subsequent meetings to ensure they had been carried out to timescale and/or monitored as necessary.  
(See recommendation 6)

## Requirements

### Number of requirements: 1

1. The provider must ensure that the staffing schedule minimum staffing level is met at all times. The number of persons working in the care service must be appropriate for the health and welfare of service users.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations, Scottish Statutory Instruments SSI 2011/210 Regulation 15(a) - requirement about staffing.

Timescale: with immediate effect

## Recommendations

### Number of recommendations: 6

1. The service must ensure that medication is administered in line with the prescriber's instructions and this is recorded fully in line with policy and best practice at the time of administration. Audit processes should be effective in identifying and rectifying recording issues.

National Care Standards. Care Homes for Older People. Standard 15 Keeping well - medication.

2. The service should ensure that activities are prioritised, provided in line with people's needs and preferences, and go ahead as planned.

National Care Standards. Care Homes for Older People. Standard 17 Daily Life

3. The service should review the décor throughout the building and where necessary replace elements, or redecorate to ensure a suitable, well-presented environment.

National Care Standards. Care Homes for Older People. Standard 4 Your Environment

4. The service should ensure that staff have the appropriate levels of training that reflect the needs of residents. With regard to dementia care the service should ensure staff are trained to the "skilled" level, or equivalent, of the SSSC Promoting Excellence education framework.

National Care Standards. Care Homes for Older People. Standard 5 Management and staffing arrangements.

5. The service must ensure that staff receive regular, recorded supervision meetings with their line manager in line with organisational policy.

National Care Standards. Care Homes for Older People. Standard 5 Management and staffing arrangements.

6. The staff team should meet regularly and these meetings should be planned in such a way to maximise attendance. Records of staff and all other meetings held within the service should include a review of previously agreed actions.

National Care Standards. Care Homes for Older People. Standard 5 Management and staffing arrangements, and, Standard 11 Expressing your views

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## Inspection and grading history

Date	Type	Gradings
2 Dec 2015	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and leadership 4 - Good
27 Mar 2015	Unannounced	Care and support 3 - Adequate Environment 3 - Adequate Staffing 4 - Good Management and leadership 4 - Good
		Care and support Not assessed Environment Not assessed

Date	Type	Gradings	
		Staffing	Not assessed
		Management and leadership	Not assessed
8 Dec 2014	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	4 - Good
		Management and leadership	4 - Good
18 Mar 2014	Unannounced	Care and support	3 - Adequate
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	3 - Adequate
4 Sep 2013	Unannounced	Care and support	2 - Weak
		Environment	3 - Adequate
		Staffing	2 - Weak
		Management and leadership	Not assessed
27 Feb 2013	Unannounced	Care and support	2 - Weak
		Environment	2 - Weak
		Staffing	2 - Weak
		Management and leadership	2 - Weak
18 Dec 2012	Unannounced	Care and support	2 - Weak
		Environment	2 - Weak
		Staffing	2 - Weak
		Management and leadership	2 - Weak
15 Dec 2011	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	Not assessed
		Management and leadership	Not assessed
7 Jan 2011	Announced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	Not assessed
22 Feb 2011	Unannounced	Care and support	4 - Good
		Environment	4 - Good

Date	Type	Gradings	
		Staffing	Not assessed
		Management and leadership	Not assessed
14 Jan 2010	Announced	Care and support	4 - Good
		Environment	3 - Adequate
		Staffing	4 - Good
		Management and leadership	4 - Good
24 Mar 2010	Unannounced	Care and support	4 - Good
		Environment	3 - Adequate
		Staffing	4 - Good
		Management and leadership	Not assessed
3 Mar 2009	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
21 May 2008	Announced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good



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