

# Lethen Park Nursing Home Care Home Service

Berrymuir Road  
Portlethen  
Aberdeen  
AB12 4UF

Telephone: 01224 782 666

**Type of inspection:**  
Unannounced

**Completed on:**  
3 October 2023

**Service provided by:**  
Barchester Healthcare Ltd

**Service provider number:**  
SP2003002454

**Service no:**  
CS2007142948

## About the service

Lethen Park Nursing Home is owned and managed by Barchester Health Care. The service is registered to provide nursing care, accommodation and support to a maximum of 57 people.

Lethen Park Nursing Home is a purpose-built home located within the residential area of Portlethen, Aberdeen. The accommodation includes bedrooms (some full en suite), communal lounges and dining areas. The home is divided into two main areas, with one unit being specifically for older people living with dementia. The home has sheltered enclosed gardens. The service is close to local amenities and transport links.

## About the inspection

This was an unannounced inspection which took place on 27 September 2023 between 09:30 and 15:30. A further visit took place on 3 October 2023 between 09:30 and 15:00. The inspection was carried out by one inspector from the Care Inspectorate.

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 or made contact with eight people using the service
- spoke with ten of their friends and family members
- made contact with the local GP practice
- spoke with staff and management
- observed practice and daily life
- reviewed documents.

## Key messages

- Staff were welcoming, warm and working hard to meet people's needs.
- The service had met the areas for improvements made at the last inspection.
- There was very good oversight in the home, meaning people's needs were being addressed promptly or managed effectively.
- Communication with families was very good.
- There was a stable staff team who were visible and readily available to respond to people's requests and needs.
- There was a culture of trying to make people's life and experiences better.

## 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?	5 - Very Good
How good is our leadership?	5 - Very Good
How good is our staff team?	5 - Very 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?

## 5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

Staff were visible throughout the home and available to attend to people's requests. People showed genuine pleasure, as they engaged in warm and friendly conversations. A staff member said, "I am whatever they need, whenever they need it." This contributed to the high levels of satisfaction expressed about the quality of care and support people received. We received mainly very positive feedback about the service and carers. People told us they, "were very impressed with the service" and "the care and attention are excellent." However, some concerns were raised regarding personal care, the laundry facilities and the cleanliness of a person's bedroom.

People were empowered and positive about how they spent their days because their views and skills were utilised. The staff involved people in the life of the care home in ways which were meaningful to them, such as helping the maintenance person with some 'jobs' or interviewing potential staff. People's skills and abilities were valued, for example, a retired engineer was assisting with an activity involving construction.

There was a whole team approach focussed on ensuring people were getting the most out of life. Staff clearly knew people's likes and dislikes and supported and encouraged them to maintain or develop their hobbies or interests. There were strong links with community groups and clubs, both in the home and out with. Relatives said, "they enjoy being included in many of the activities" and "although my mum doesn't get too involved in activities there is always something going on for the residents." The care and attention taken with people's social health contributed to their general health and wellbeing.

People were very positive about the quality and choice of meals, which were enjoyed in a pleasant sociable environment. A relative said, "they are treated to some lovely meals and treats from the chef." People were frequently given the opportunity to discuss their views on the meals, with suggestions fully considered and changes implemented. Staff formally monitored and recorded people's fluid intake, where appropriate reducing the risk of weight loss for people. The number of people at risk of weight loss had significantly reduced.

People were supported to maintain pride in their appearance and were well presented. People were supported to bathe or shower on a frequent basis. Any concerns in relation to personal hygiene and appearance were quickly addressed by the senior team.

The documentation to support wound management and pressure prevention was well maintained. Staff had undertaken appropriate training. There were good links with visiting healthcare professionals. This ensured that the risk of people's skin breaking down was reduced and people were receiving the care that was right for them.

The management and prevention of accidents, incidents and falls was good. Appropriate actions were taken immediately after a fall and there was ongoing follow up and a holistic review undertaken. Families described the outcome for their relative following a recent fall as, "the staff have been very attentive to making sure she's comfortable and pain free." People's quality of life was improved by the focus on rehabilitation and enabling people to maintain their mobility and dexterity.

People were experiencing well-coordinated consistent care and support. We received very positive feedback from visiting professionals and clearly there was a trust in the professional judgment made by the staff. Actions and advice were being implemented into the care and support provided. This meant that outcomes for people were positive and exceeded some relatives' expectations. Relatives said, "the difference since they moved in has been unbelievable and amazing to see!" Information sharing was mainly by verbal handovers and open discussions throughout the shift. The more formal approaches in place such as the handover sheets could be further developed, to ensure all staff have access to historical changes in care that may have occurred when they were not on shift. This would ensure that all staff remain up to date with people's changing needs and care continues to remain consistent.

### How good is our leadership?

**5 - Very Good**

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

There was a stable management team in place who were visible and approachable to all. People and visiting professionals spoke highly of the new management team saying, "since this manager took over last year it has definitely changed for the better," and the home was, "very well run and organised." Staff spoke highly of the support given to them by the management team and the impact that this has had on developing a positive culture in the home. People's roles and responsibilities were clearly defined and the management team and staff were working well together. The management team were open, transparent, responsive and have worked hard to make improvements.

There was a culture of trying to make people's lives and experiences better. There were a range of quality assurance processes and audit tools that were used, to inform the management team and senior staff about how well the service was performing and gave a very good oversight of those people who were at risk or potential risk and of people's changing needs. Significant work had been undertaken to improve the health and wellbeing of people as well as improving how people experienced their care and support. A detailed service improvement plan was in place, based on on-going self-evaluation of people's experiences and changing needs. This document was supported by specific action plans, clinical governance meetings and evaluation of practice, which all assisted in driving continuous improvement.

Systems and processes were in place to gain people's views, thoughts and ideas for future improvements that could be made to people's lives. Issues or concerns raised by people or relatives were addressed promptly and concerns and complaints were fully investigated and addressed. The management team were working closely with families to build trust. This maintained the focus on improving people's experiences and life at Lethen Park.

### How good is our staff team?

**5 - Very Good**

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

There was a stable staff team which provided consistent care and support. People and their families knew the staff well and this contributed to the high levels of satisfaction and confidence. Relatives and people said, that staff were "friendly and pleasant to deal with" and "the nurses in charge are excellent." The staffing arrangements allowed for staff to be able to spend time with people, having chats or helping them with an activity. Staff did not appear rushed and people were supported in a relaxed unhurried manner.

Staff were respectful of their colleagues and all people. There was good team working and staff said, "the staff morale has improved so much, and I feel we now have an open, honest and respectful way of working." Staff felt the management were listening to their concerns regarding improving outcomes for people. The named nurse, key worker systems helped build relationships with people and their families. Staff appreciated being able to meaningfully contribute to people's ongoing care reviews, ensuring they were detailed and informed.

Staff supervision, one to one support and team meetings were becoming established. The program of staff development included the opportunity to demonstrate their learning and what still needs to improve at Lethen Park. The views and thoughts of people who live at Lethen Park had begun to be used as part of staff's annual appraisal. The feedback from staff was that incorporating people's views on their experience of care was a powerful motivator. The management team had a good oversight of staff training, with a mix of eLearning and face to face training. The manager was supporting and encouraging staff to further develop their careers through accredited training. Staff competencies, monitoring of practice and sharing of learning had all taken place. Concerns were addressed where necessary through supervision, with a focus on developing a positive culture within the home. As a result, staff knowledge and understanding had improved. Staff were putting their learning and ethos into practice. This ensured that people were receiving the care that was right for them.

## 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.

The home was friendly and welcoming. It was very clean, tidy and clutter free, with no unpleasant smells. Staff took pride in the service and appreciated that it was people's home. The home was well maintained and decorated to a good standard. People and staff were excited about the plans for a whole home refurbishment, which was due to commence shortly. The management team were continually reviewing the environment through their improvement plan, to ensure the home continued to enhance and promote a good quality of life for the people who live there.

Some work was being undertaken to replace flooring within people's bedrooms. Families and people had been consulted where room changes were necessary. The contractors were unobtrusive and people were unrestricted and could access their bedrooms as and when they wished. There was good oversight by the maintenance person of the ongoing work and contractors. Maintenance records were in good order, with a clear process for highlighting any required work. As a consequence, the general environment was safe and secure.

People were supported and encouraged to move freely around the home. All toilet and shower rooms were readily accessible. There were several communal areas that people and their families could choose to spend time in. Furniture was positioned to encourage socialising and there were plenty of places for people to sit and rest. The garden areas which people could easily access were a pride and joy for people and staff. A person said, "I love the garden." People's bedrooms were homely and contained their own bits and pieces around them, which promoted each person's experience, dignity and respect.

**How well is our care and support planned?****4 - Good**

We evaluated this key question as good. There were a number of important strengths which taken together clearly outweigh areas for improvement.

The service aimed to move to an electronic care planning system in the near future. In the meantime, people's care plans were detailed and contained some very important person-centred information. People said that they felt that the staff knew them very well and were given the care they wished. Although the standard of documentation was good, there were some areas in which the good practice and the many positive improvements and achievements in the residents' welfare and wellbeing, were not being fully documented or evaluated. (See 'How well do we support people's wellbeing'). This was discussed in detail with the management and remained a work in progress. The quality of documentation and personal plans formed part of their improvement plan.

**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 ensure service users experience well coordinated care, the provider must undertake a review of how information is shared with staff to ensure consistent current care is maintained. This should include promoting good practice, role modelling and supporting a positive culture within the service.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience stability in my care and support from people who know my needs, choices and wishes, even if there are changes in the service or organisation.' (HSCS 4.15)

**This area for improvement was made on 23 August 2022.**

**Action taken since then**

This area for improvement was met. See 'How well do we support people's wellbeing?' for more detail.

**Previous area for improvement 2**

To ensure the proper provision for all service users to get the most out of life, the provider must at a minimum ensure that the meaningful information about people's likes and dislikes are shared with staff in a constructive way that support people getting the most out of life.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I get the most out of life because the people and organisation who support and care for me have an enabling attitude and believe in my potential' (HSCS 1:16) and 'I am empowered and enabled to be as independent and as in control of my life as I want to be and can be.' (HSCS 2.2)

**This area for improvement was made on 23 August 2022.**

## Action taken since then

This area for improvement was met. See 'How well do we support people's wellbeing?' for more detail.

## Previous area for improvement 3

To ensure the service users have a nice place to stay, the provider must ensure that:

- a) the whole home is kept free from offensive odours
- b) service users have access to communal toilets and showers
- c) the environment is reassessed in line with the best practice guidance of 'Is your care home dementia friendly?'
- d) outside space is readily accessible for service users to use safely.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSC) which state that: 'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment.' (HSCS 5.22)

**This area for improvement was made on 23 July 2022.**

## Action taken since then

This area for improvement was met. See 'How good is our setting?' for more detail.

## Previous area for improvement 4

To support people to experience care and support which is consistent, safe and meets their needs, the provider must ensure personal plans are written in a personalised, individualised manner and reflect people's choices, wishes and views.

This should include but not limited to:

- a) ensuring detailed strategies to support people with stress or distress
- b) ensure staff have a clear understanding of their role regarding skin integrity and wound management
- c) ensure all care plans and assessments are effectively and accurately evaluated and changes in needs are promptly addressed
- d) have in place anticipatory care plans that reflect people's wishes and where appropriate, those of their representatives



e) ensure the legal powers or delegated powers around Power of Attorney (POA) are detailed.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My personal plan is right for me because it sets out how my needs will be met, as well as my wishes and choices.' (HSCS 1.15)

**This area for improvement was made on 23 August 2022.**

#### Action taken since then

This area for improvement was met. See 'How well is our care and support planned?' for more detail.

## Complaints

Please see Care Inspectorate website ([www.careinspectorate.com](http://www.careinspectorate.com)) for details of complaints about the service which have been upheld.

## Detailed evaluations

How well do we support people's wellbeing?	5 - Very Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good

How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good

How good is our staff team?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good

How good is our setting?	4 - Good
4.1 People experience high quality facilities	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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Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

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