

Oakeshott House Care Home Service

Glaive Avenue
Stirling
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Telephone: 01413331495

Type of inspection:
Unannounced

Completed on:
30 May 2024

Service provided by:
Stirling Care Home Limited

Service provider number:
SP2021000158

Service no:
CS2021000261

About the service

Oakeshott House Care Home is a purpose-built, 84 bed care home, situated in Stirling, close to the city centre. Arranged over three floors, Oakeshott House Care Home offers individual and spacious bedrooms. The bedrooms have en-suite toilet and shower facilities and are arranged in eight small, homely clusters around a lounge/dining room, quiet room and assisted bathroom.

The home has a wide variety of social areas including a café & bar area, vintage tea room, cinema room and hair salon. The provider is Stirling Care Home Ltd and Oakeshott House has been registered with the Care Inspectorate since September 2021.

About the inspection

This was an inspection to follow up on a requirement and areas for improvement made at previous inspections. The inspection took place on 30 May 2024 from 09:00 until 14:00. 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 with eight people using the service
- spoke with nine staff and management
- observed practice and daily life
- reviewed documents
- spoke with one visiting professional.

Key messages

The service had improved practice in the administration of topical medication such as prescribed creams and lotions and people were receiving these as prescribed.

Accountability training for staff had led to better outcomes for people through improved record keeping.

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?	4 - Good
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Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

4 - Good

A requirement and two areas for improvement had been made at previous inspections in April 2024 and July 2023. The service had put an action plan in place to manage the improvements needed. The service had met the requirement and areas for improvement at this inspection.

The requirement and areas for improvement were in relation to improving outcomes for people through ensuring that people's health and wellbeing benefits from their care and support (see section: What the service has done to meet any requirements we made at or since the last inspection and What the service has done to meet any areas for improvement we made at the last inspection).

We saw improvement in recording, care and support and planning for people to get the most out of life and we have re-evaluated quality indicator 1.3 from adequate to good.

The overall evaluation for this key question is good.

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 23 May 2024 the provider must ensure that topical medication is stored appropriately and people receive all of their medication as prescribed. This must include the development and implementation of effective administration of topical medication procedures and include regular audit processes.

This is to comply with Regulations 4 (1) (a)(welfare of users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24).

This requirement was made on 19 April 2024.

Action taken on previous requirement

We reviewed this requirement at our inspection. Storage of topical medication was improved. Most packaging had pharmacy label with names and instructions and staff had taken care to record when opened. Medications were stored in a clean environment appropriate to their content.

People were receiving medication as prescribed and prescription was documented clearly with details of application. Records were up to date, audited and management had good oversight of the administration of topical medication.

Met - within timescales

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

The service should carry out a review of how they support people to spend their day. This should include consideration on how to support people to fulfil their individual wishes and aspirations.

This ensures care and support is consistent with the Health and Social Care Standards, which state: "I can

choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors". (HSCS 1.25) and "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 1.6).

This area for improvement was made on 11 July 2023.

Action taken since then

We reviewed this area for improvement at our inspection. The service had continued to make good progress in this area. Further staff had been employed to enhance the wellbeing of people living in Oakeshott. The manager had been supported by the CI improvement team to develop a new programme that would support staff to identify and meet peoples individual aspirations. Although this work was still in progress, the area for improvement was met.

Previous area for improvement 2

The service should ensure that all staff are aware of their responsibilities in effective and meaningful record keeping and the importance of maintaining up-to-date and accurate documentation, including but not limited to: the recording of wound care and the recording of personal care support provided daily.

This is in order to comply with Health and Social Care Standards (HSCS) HSCS 1.13 I am assessed by a qualified person, who involves other people and professionals as required, HSCS 3.14 I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes and HSCS 4.27 I experience high quality care and support because people have the necessary information and resources.

This area for improvement was made on 19 April 2024.

Action taken since then

We reviewed this area for improvement at our inspection. The service had arranged training for all staff on the importance of record keeping. Individual staff meetings had focussed on accountability and professional codes of practice.

We noted that record keeping had improved, particularly where people were supported with wound care and personal care. The team had introduced a monitoring review of record keeping which included daily checks and regular audits. Improvement in file organisation could enhance this further and the manager told us of their plans to address this. The service had met their plan of action and this area for improvement was met.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good

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