

Leys Park Care Home Care Home Service

Leys Park Road
Dunfermline
KY12 0AB

Telephone: 01383 723 790

Type of inspection:
Unannounced

Completed on:
15 May 2024

Service provided by:
St Philips Care Limited

Service provider number:
SP2003003516

Service no:
CS2004085047

About the service

Leys Park is a care home for older people situated in a residential area of Dunfermline, Fife. It is close to local transport links, shops, and community services. The service is registered to provide care for up to 66 people.

The home has an enclosed garden area, and accommodation is provided over two floors. The lower floor has a large dining room, two lounges and an activities room. The upper floor has an open plan lounge/dining area and a second separate lounge. There is a passenger lift providing access to and from the lower floor.

A refurbishment plan is in place and extensive work is being undertaken to improve facilities.

About the inspection

This was an unannounced which took place on 13 and 14 May. The inspection was carried out by three inspectors 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 8 people using the service
- attended a relatives meeting
- spoke with fourteen staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals

This service was subject to an Improvement Notice that was issued on 27 November 2023. All improvements have been met. For further details of this enforcement see the service's page on our website at www.careinspectorate.com.

Key messages

Quality assurance processes were being developed

Staffing levels were adequate

Refurbishment of the service was ongoing

Personal plans contained adequate information

Risk assessments were being improved

We had taken enforcement action to require the provider to improve the quality of people's care. Please see the service's page on our website for more information.

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?	3 - Adequate
How good is our leadership?	3 - Adequate
How good is our staff team?	3 - Adequate
How good is our setting?	3 - Adequate
How well is our care and support planned?	3 - Adequate

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

3 - Adequate

We had taken enforcement action to require the provider to improve the quality of people's care. The service has now complied with the required improvements. As a result, we have re-evaluated this key question to 'adequate', where strengths just outweigh weaknesses. Please see S62 (improvement notice) dated 23 May 2024 on the service's page on our website for more information.

How good is our leadership?

3 - Adequate

We had taken enforcement action to require the provider to improve the quality of people's care. The service has now complied with the required improvements. As a result, we have re-evaluated this key question to 'adequate', where strengths just outweigh weaknesses. Please see S62 (improvement notice) dated 23 May 2024 on the service's page on our website for more information.

How good is our staff team?

3 - Adequate

We had taken enforcement action to require the provider to improve the quality of people's care. The service has now complied with the required improvements. As a result, we have re-evaluated this key question to 'adequate', where strengths just outweigh weaknesses. Please see S62 (improvement notice) dated 23 May 2024 on the service's page on our website for more information.

How good is our setting?

3 - Adequate

We had taken enforcement action to require the provider to improve the quality of people's care. The service has now complied with the required improvements. As a result, we have re-evaluated this key question to 'adequate', where strengths just outweigh weaknesses. Please see S62 (improvement notice) dated 23 May 2024 on the service's page on our website for more information.

How well is our care and support planned?

3 - Adequate

We had taken enforcement action to require the provider to improve the quality of people's care. The service has now complied with the required improvements. As a result, we have re-evaluated this key question to 'adequate', where strengths just outweigh weaknesses. Please see S62 (improvement notice) dated 23 May 2024 on the service's page on our website for more information.

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

Requirements

Requirement 1

By 27 October 2023, the provider must provide service users with the care and support they need to achieve good health, wellbeing, and quality of life outcomes.

To do this, the provider must, at a minimum:

- a) ensure a full pre-admission assessment is carried out, involving prospective service users, and where practicable, their representative prior to admission.
- b) ensure healthcare risk assessments, including skin care, continence care, and foot care, are fully and accurately completed, involving service users, and where practicable, their representative.
- c) ensure care plans reflect the views, choices, and preferences of service users, and where practicable, their representative.
- d) ensure documentation is accurate and sufficiently detailed to demonstrate that people who use this service receive care and support that is in line with their assessed needs, planned care, and personal preferences and choices.
- e) ensure any concerns raised about care provision and care outcomes are listened to, and acted upon, to ensure improvements are made.

This is in order to comply with Regulation 4(1)(b) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure care and support is consistent with Health and Social Care Standard which state that: 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

This requirement was made on 12 July 2023.

Action taken on previous requirement

This requirement was not assessed at this inspection.

Not assessed at this inspection

Requirement 2

By 8 December 2023, you must protect the health, welfare, and safety of service users. In particular, you must ensure that all personal plans are reviewed regularly (at least once in every six-month period) and contain up-to-date risk assessments and care plans which:

- a) accurately reflect the assessed current health and care needs of service users, with particular attention being given to stress and distress; and
- b) accurately reflect the views, wishes, and feedback of people and their relatives.

This is in order to comply with Regulation 4(1)(a), (Welfare of Users), Regulation 5(1), and Regulation 5(2)(b) (Personal Plans) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This requirement was made on 1 June 2023.

Action taken on previous requirement

This requirement was not assessed at this inspection.

Not assessed at this inspection

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

In order to ensure good outcomes for people experiencing care, continence care should be improved. When concerns are noted, the continence assessment and care plan should be revisited, to identify how improvements can be made to support people's dignity and respect.

This is to ensure care and support is consistent with Health and Social Care Standard 1.15: My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices.

This area for improvement was made on 18 August 2023.

This area for improvement was made on 18 August 2023.

Action taken since then

Not assessed at this inspection.

Previous area for improvement 2

In order to ensure good outcomes for people experiencing care, the manager should make sure that people have a say in their assessments and care plans. Care plans should clearly reflect people's individual choices and preferences for personal care, with regular reviews being carried out to ensure needs are being met.

This is to ensure care and support is consistent with Health and Social Care Standard 2.11: My views will always be sought and my choices respected, including when I have reduced capacity to fully make my own decisions.

This area for improvement was made on 18 August 2023.

This area for improvement was made on 18 August 2023.

Action taken since then

Not assessed at this inspection.

Previous area for improvement 3

In order to ensure the safety of people's belongings, and to support their sense of identity, the manager should improve the admission process and laundry systems. Where people's belongings have gone missing, they should receive an apology, and where appropriate, reimbursement.

This area for improvement was made on 18 August 2023.

This area for improvement was made on 18 August 2023.

Action taken since then

Not assessed at this inspection.

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?	3 - Adequate
1.1 People experience compassion, dignity and respect	3 - Adequate
1.3 People's health and wellbeing benefits from their care and support	3 - Adequate
How good is our leadership?	3 - Adequate
2.2 Quality assurance and improvement is led well	3 - Adequate
How good is our staff team?	3 - Adequate
3.3 Staffing arrangements are right and staff work well together	3 - Adequate
How good is our setting?	3 - Adequate
4.1 People experience high quality facilities	3 - Adequate
How well is our care and support planned?	3 - Adequate
5.1 Assessment and personal planning reflects people's outcomes and wishes	3 - Adequate

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