

Leonard Cheshire Disability - Pinewood Care Home Service

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Deans
Livingston
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Type of inspection:
Unannounced

Completed on:
9 August 2024

Service provided by:
Leonard Cheshire in Scotland

Service provider number:
SP2003001547

Service no:
CS2003010997

About the service

Pinewood is a care home service provided by Leonard Cheshire Disability. The service is registered to support a maximum of seven people with learning disabilities, physical disabilities, and sensory impairment.

The home is located within a residential area of Livingston and is close to local amenities. The accommodation is bright and spacious, with landscaped gardens to the front and rear of the property. It is accessible on ground level and each bedroom has en suite facilities. People have use of a communal lounge and dining room with an open plan kitchen.

There were seven people living at Pinewood during the inspection.

About the inspection

This was an unannounced inspection which took place on Monday 5 August to Wednesday 7 August 2024. 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, and received questionnaire feedback, from seven people living at Pinewood
- received questionnaires from five family members
- spoke with four, and received nine questionnaires, from staff and management
- observed practice and daily life
- reviewed documents
- received feedback from supporting professionals.

Key messages

- Staff knew people well and treated them with kindness and respect.
- The home had benefitted from a programme of refurbishment and redecoration.
- As part of this inspection, we assessed the service's self evaluation of key areas. We found that the service had an effective and well completed self evaluation that was reflective of our findings.

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 staff team?	4 - Good
How good is our setting?	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.

People were treated with kindness and respect. There were warm and friendly interactions between staff and people living at Pinewood. People experiencing care expressed that they liked the staff and were happy living at Pinewood. Family members told us that staff are "very pleasant" and "[my relative's] welfare is always catered for". People were happy with the care and support they received.

The service worked with other health and social care professionals to ensure that people's wellbeing was promoted. One visiting professional told us that the service has "regular communication with professionals to meet residents' needs timely and effectively". This meant that people's needs were being met in the right way.

There were good systems of recording accidents and incidents. Where events had occurred, these were acknowledged and managed well. This was enabling the team to address and learn from events.

The service had recognised the importance of supporting people to eat well in a pleasant environment. People had the choice to eat together in a relaxed and sociable atmosphere and told us that they enjoyed their meals. The menu planner was varied, nutritious with many meals homecooked. Fruit was freely available. This was helping to support people's physical health and wellbeing.

Everyone had a detailed personal plan and risk assessments in place which reflected their care and support needs. People, and their representatives, were involved in sharing information to inform the personal plan and taking part in reviews to ensure that information was up-to-date. This meant that staff had the right information to support people.

How good is our staff team?

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 service benefitted from a staff team that worked well together. Although some relatives had concerns that there had been staff turnover, it was acknowledged that there has been a national shortage of care staff and that the manager was working to ensure appropriate staffing levels within the service.

The management team were monitoring service delivery and staffing arrangements, ensuring this was informed by assessments of people's needs. The manager had adjusted service delivery in conjunction with the local health and social care partnership to ensure overnight support arrangements were meeting people's changed needs. Recruitment was planned to enable the service to put in place additional daytime support that had recently been approved. People could be confident that the management team were deploying staff in a way that best met their needs.

Bank staff were available when additional staffing was required. This meant that the service was not relying on unknown staff, such as agency. This helped to provide continuity for people using the service.

How good is our setting?**4 - Good**

When we inspected Leonard Cheshire Disability - Pinewood in January 2024, we made a requirement under key question 4 'How good is our setting?'. This related to the environment and the need for refurbishment and redecoration.

We followed up this requirement on 5 August 2024. We found that there were improvements and assessed that they had met the requirement. We have re-evaluated quality indicator 4.1, 'People experience high quality facilities', from adequate to good.

We have reported our findings under 'What the service has done to meet any requirements made at or since the last inspection' within this report.

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

Requirements

Requirement 1

By 31 July 2024, the provider must ensure that the home is well maintained and promotes people's safety and wellbeing. To do this, the provider must, at a minimum:

- a) carry out a room by room environmental audit;
- b) use the audit findings to develop a refurbishment and redecoration plan;
- c) undertake a planned programme of refurbishment and redecoration; and
- d) evaluate progress and take action to rectify any issues identified.

This is in order to comply with Regulation 10(2) (Fitness of premises) 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: 'The premises have been adapted, equipped, and furnished to meet my needs and wishes' (HSCS 5.16).

This requirement was made on 29 January 2024.

Action taken on previous requirement

We followed up this requirement on 5 August 2024.

We observed that the manager had put in place a refurbishment and redecoration plan. Work had started, with rooms redecorated, flooring replaced, and more homely touches added to the home. Residents were involved in choosing the décor for the home.

Further work was planned for the kitchen, en suite bathrooms, and garden. Progress was being monitored and reviewed by the manager.

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 provider should ensure that care and support is respectful and promotes people's dignity. To do this, the provider should:

- a) ensure that records are written in a way that is respectful of people's needs and wishes;
- b) provide staff training and support to staff, ensuring they understand their role in recording;
- c) examine and review language on organisational recording templates; and
- d) undertake regular audits of records in the service, provide feedback to staff, and further support where this is required.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience care and support where all people are respected and valued' (HSCS 4.3).

This area for improvement was made on 29 January 2024.

Action taken since then

We looked at progress with this area for improvement on 5 August 2024.

Staff training on recording had been completed by the team. We noted that records were written in a respectful way.

This area for improvement has been 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?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good
How good is our setting?	4 - Good
4.1 People experience high quality facilities	4 - Good

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