

Viewpark Care Home Service

15 Abercorn Terrace Edinburgh EH15 2DE

Telephone: 01314 681 631

Type of inspection:

Unannounced

Completed on:

20 August 2024

Service provided by:

Abercorn Care Ltd

Service no:

CS2007162742

Service provider number:

SP2003002437



Inspection report

About the service

Viewpark is one of two care homes owned by Abercorn Care Ltd and is situated in Portobello. At the time of the inspection eighteen people lived in the home. The beach and town centre as well as access to bus links, are all within a short walk from the home.

The home offers parking to the front and consists of an older building, with a newer extension over the ground and first floor. The bedrooms vary in size, some offer ensuite facilities.

Communal areas include a sitting and dining room facing the front with a conservatory to the rear with access to an enclosed garden, courtyard area. Some rooms benefit from direct access to the garden.

People were supported by a team of nurses, senior carers and carers, led by the manager.

About the inspection

This was an unannounced which took place on 13 and 14 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. We also reviewed the questionnaires that were submitted.

In making our evaluations of the service we:

- · Spoke with seven people using the service and three of their family
- Spoke with eleven staff and management
- · Observed practice and daily life
- · Reviewed documents
- Spoke with one visiting professional

Key messages

- · People were supported by a staff team they knew well.
- · Staff supported people with their health and wellbeing.
- · A range of activities supported people well.
- As part of this inspection, we assessed the service's self evaluation of key areas. We found the
 service was not yet undertaking self evaluation. We discussed the benefits of self evaluation and
 how this approach should be adopted to support improvement in the service.

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?	5 - Very 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 evaluated this key question as very good. The service demonstrated major strengths in supporting positive outcomes for people.

People who lived in the home had their own bedroom where they had items that were special and personal to them. Some rooms had access directly to the garden and courtyard areas. One person told us they enjoyed this and liked looking into the garden. People could choose to come together in the lounge and dining room or stay in their own space as they wished.

We observed kind, caring interactions between people and the staff team. A consistent staff team supported people each day and the service had it's own internal pool of staff they used to cover shifts when required. The service were not using agency staff. The staff team consisted of both registered nurses and carers. An involved professional told us they had good communication with the service and made appropriate referrals for people to get additional support. This approach meant people had access to the right staff at the right time to help support their health and wellbeing.

People each had a personal plan that was relevant to them. Where additional risk assessments were required, these were in place and reviewed regularly. The plans contained information about people's like, dislikes and preferences. The plans were audited regularly and the manager had oversight of the audits and any actions that were generated. Families were supported to be involved and participate in review meetings. This meant people had a plan that was right for them as it set out how to support them and meet their needs.

Medication recording, storage and administration processes were in place to support people. The manager audited medication regularly. Staff had regular training and updates. This meant that people could have confidence in staff who supported them with their medication.

A range of professionals visited the service to support people. A professional we spoke to told us the service provided a caring, stable place for people to live in. Family members told us the service kept in touch about their relative and any health related issues they may have. This meant people received responsive care and support from professionals to maintain their health and wellbeing.

Mealtimes were supported in the dining room or people's rooms as they chose. People had access to jugs of water or juice in their rooms. The dining room was bright and the tables set nicely. A pictorial menu displayed the meals and alternatives were available. Where people were supported heated plates kept their food warm. We observed no sense of rush over lunchtime for people. People had access to juice, fresh fruit and warm drinks during the day. Home made cakes were served during afternoon tea. Visitors to the home could help themselves to tea and coffee in the conservatory area. One relative told us they had enjoyed a meal with their relative when they had visited them. As a result of these approaches people enjoyed a positive mealtime experience.

The chef knew people's preferences, cultural or dietary choices. People were involved in focus groups where new additions to the menus were discussed. We observed people's preferences were also recorded within their personal plans. This meant people participated in menu planning and chose things they enjoyed.

The service had an activity co-ordinator and staff also took part in supporting activities for people. One staff member told us, 'I help with the activity. People love it, we follow the routine they like'. For those who wished group activities were planned most days. The home had access to it's own minivan to take people out and about in the local community. They enjoyed trips to the local theatres, fringe shows or the promenade and beach for cake and coffee. The home promoted exercise and a group of people in addition to the co-ordinator, visited to support these activities. The service had recognised the need to enhance the 1:1 support for people who preferred to stay in their rooms or not join in group activities. People's choices were promoted and some really enjoyed the history talks. These approaches meant people had choice and took part in meaningful activities that supported their wellbeing.

How good is our staff team?

5 - Very Good

We evaluated this key question as very good. the service displayed major strengths to support positive outcomes for the people they cared for.

On entering the service, we found the staff to be warm and welcoming. It was evident that staff and residents knew each other well and had formed positive relationships. Staff were aware of what people liked and how they wished to be cared for. The service was comfortable and homely. One family member we spoke to told us 'staff are kind and caring, I would recommend this place'.

New team members had a period of induction which included the opportunity to shadow with experienced staff members. A new staff member told us the induction was 'awesome' and included practical and visual training. Staff had access to an online training platform as well as some face to face sessions. Staff told us team meetings took place, these recently included discussions regarding safer staffing and skill mix. As a result of this people could be confident that the staff had the right information, training and resources to care for them.

The service used a dependency tool to establish people's care needs. This showed the number of staff required each day on a shift to support them. The service displayed the tool at the front entrance notice board. The tool was reviewed regularly. Staff had a handover for each shift. In addition a mid morning meeting was held where staff and the manager could update each other and share relevant information. This meant people benefitted as the staff team were responsive and worked together to support and care for them.

We observed the staff team worked well together. The service did not use agency but had a pool of staff who worked in the service if required. One staff member told us 'it's a good staff team'. Staff told us that communication was effective with supportive relationships between management and staff. One staff member told us 'I feel supported with wellbeing'. This meant people and staff benefitted from these positive working relationships.

Inspection report

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?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good

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