

Forthland Lodge Care Home Care Home Service

Forthland Lodge Care Centre
6 Ale Moor Park
EDINBURGH
EH7 6US

Telephone: 0131 5550601

Type of inspection:
Unannounced

Completed on:
23 October 2024

Service provided by:
Forthlands Care Limited

Service provider number:
SP2021000166

Service no:
CS2021000269

About the service

Forthland Lodge Care home is registered to provide care and accommodation for 35 older people and 12 adults with acquired brain injury.

The home is conveniently located close to the city centre of Edinburgh and offers residents safe and comfortable surroundings in a purpose-built nursing home. The building provides accommodation for residents in four wings with connecting corridors.

Each wing has their own bathroom, kitchen, dining and lounge facilities. All bedrooms are single occupancy with en-suite shower facilities.

There are enclosed gardens to the rear of the home, accessible from each unit, and a communal conservatory and coffee lounge.

The service was supporting 46 people at the time of our inspection

The service provider is Meallmore Limited.

About the inspection

This inspection which took place on-site on 15 October 2024 between 09:00 and 17:00 and 17 October 2024 between 09:00 and 14:30.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, complaints activity, information submitted by the service and intelligence gathered since the last inspection.

The inspection was carried out by two inspectors from the Care Inspectorate. Our visit was then followed by time examining evidence remotely.

In making our evaluations of the service we:

- spoke with people using the service, relatives and staff at our visit
- considered feedback from completed and returned MS Forms questionnaires from supported people, relatives, staff and visiting professionals
- observed practice and daily life
- reviewed documents.

Key messages

- Staffing arrangements currently met the needs of supported people.
- People experienced warmth, kindness and dignity in how they were supported and cared for.
- Families were contacted about health and wellbeing concerns and kept up to date.
- There was good involvement from health professionals including general practitioners (GPs) and district nurses.
- Management have made improvements with oral care support and advice has been given to make further improvements.
- There were good systems in place to support people with their medication.
- We have given improvement advice around personal planning to ensure staff have sufficient and accessible information to support each person to meet their care needs.
- Internal and organisational quality assurance systems and processes were in place to support continuous improvement.

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
How good is our leadership?	4 - Good
How good is our staff team?	4 - 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?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

We observed supported people experiencing warmth, kindness and dignity in how they were supported and cared for. Family members told us they considered their relatives were treated kindly and fairly and were accepted, valued and safe. Staff demonstrated fun and humour, enabling people to feel included and accepted. One family member told us "My relative is supported as well as can be at Forthland Lodge. Staff have a good relationship and engage well".

People's health and wellbeing was monitored through various means. These included daily "flash" meetings and daily handovers. Staff who knew people well could recognise if there were any changes to the person's health and wellbeing needs. A number of carers were relatively new in their roles and were in the process of building up relationships with supported people. Various charts were in place to monitor people's wellbeing and support given. People's weight was monitored to identify if further support was needed from a health professional, for example a doctor or a dietician.

Where concerns were identified, referrals were made to appropriate professionals. There was good involvement from health professionals including GPs and district nurses. People were supported to make and attend health care appointments. Families were also contacted about health and wellbeing concerns and kept up to date. This reassured them about the care and support their relative received.

Personal plans listed people's health conditions. We advised including additional information on the health condition itself in the plan and how the condition impacts on the person's life. This will give staff a clearer understanding about people's health needs.

In July 2024, management had identified improvements needed with oral care support. Actions were taken to remedy this. We advised further actions to support improvement. These include developing a specific oral hygiene care plan for each person with details as to the level of support needed and to also include oral care in the service's auditing process. Management had also made recent improvements to enhance the prevention and monitoring of people's skin integrity. There were good systems in place to support people with their medication.

Food was cooked and prepared in the care home. The chef knew people's food and drink preferences well and which person required fortified or special diets. There were nutritious meals available and homemade cakes throughout the day with snacks available for people in each unit. People were supported well at mealtimes. A visual choice of meal was offered which was helpful for people with cognitive difficulties.

The activities coordinator post was currently vacant and being advertised. Despite this there were opportunities for meaningful engagement and activities within the home. People were supported to celebrate notable events and birthdays. We have suggested care workers complete a Scottish Social Services Council (SSSC) Open Badge on meaningful connections. This should give staff more confidence and skills to ensure people are consistently supported to be active, engaged and stimulated throughout the day.

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

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

People's views about the quality and improvement in the home were sought through quarterly meetings. Family were updated about activities through the care home's Facebook page. A new newsletter had just been introduced and the first edition published in September. Having these newsletters should increase involvement and communication with both supported people and family.

The quality of the service was being checked through various quality assurance systems and processes including internal and organisational audits. We have advised personal care and oral hygiene are included in the service's auditing process. Also for personal plan audits to be undertaken on a more regular basis to support personal planning improvements.

The manager completed a monthly clinical service review which analysed audit outcomes and made comparisons with previous months. These included accidents and incidents and falls. Another report system enabled the manager to analyse aspects of staffing and overall management. Both of these avenues enabled the manager to have good oversight of the home's activities and care outcomes.

Formal complaints were progressed as per organisational procedures. Expressions of dissatisfaction and concerns need to be better logged, documented and tracked to record end outcomes and identify trends and provide learning.

We have discussed some incidents and events which should have been notified to the Care Inspectorate. Going forward we now expect notifiable events to be reported to the Care Inspectorate in a timely manner.

Self-evaluation based on the Care Inspectorate core assurances had been completed to aid improvement. A service improvement plan was in place. We have advised this is reviewed, revised and updated regularly.

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.

People could be confident staff were recruited in line with safer recruitment practices with any necessary checks completed prior to any new staff starting in post.

At the inspection visit there were sufficient staff on duty to meet people's needs. Most staff told us they had enough time to care and support people without rushing. Most family members considered there were enough staff on duty to care for their relative. Recently new staff had been recruited into vacant posts and recruitment continued to take place. We were satisfied staffing arrangements currently met the needs of supported people.

During the inspection we observed staff working well together when supporting people throughout the day. With new staff on board, the team was currently developing. Steps were being taken to boost morale and to integrate and bring the new staff team together.

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.

People who regularly visited told us they found the home to be clean, comfortable and homely. We found the atmosphere in the home to be calm and relaxed. The communal areas of the home were clean and tidy and uncluttered. Cleaning schedules were being used and environmental checks and audits were completed.

Requests for repairs by staff were recorded in the maintenance diary and actioned upon by the maintenance worker. Checks of appliances, equipment and water temperatures were being undertaken effectively and within designated time scales to ensure people's safety.

There were areas throughout the home which needed refurbishment. These included re-painting of walls, doors and frames and skirting boards. The management were aware of this and were waiting for people employed by the organisation to come and undertake the work.

There are plans for the extension and alteration of staff rooms which will include the manager's office being moved from upstairs to downstairs.

How well is our care and support planned?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Family were involved in six-month reviews with staff about their relatives care and support. Where people were unable to make choices or decisions, supporting legal documentation was in place. This meant staff were clear about their responsibilities and supporting people with any decisions to be made or need support to make.

Plans included background information about the person which helped staff see behind the tasks and provided topics to chat about which enhanced positive relationships.

Personal plans were reviewed on a monthly basis. We have advised new information recorded from the monthly review to be included in the care plan section, so the information is not lost.

Overall, personal plans sampled held good information about the person's care and support needs. However, some plans sampled, particularly relating to stress and distress, needed more detail about the level of support needed, and how staff should engage with the person when they were distressed.

A summary of care document was available to care staff. We have advised this document is reviewed and revised to ensure care staff have relevant information pertinent to their caring role. Personal plans and associated documentation were held on the organisation's electronic system. We have advised for care staff to have better access to these plans.

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 people experience high quality care, the provider should ensure that there is a structured team meetings and support and supervision system in place for staff. This is to support the ongoing development of staff, ensuring they are competent, skilled and able to reflect on their practice to continue to meet people's needs.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: "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." 3.14.

This area for improvement was made on 22 September 2023.

Action taken since then

A colleague forum had been introduced which is designed to enhance communication, collaboration and knowledge sharing across the organisation. There was a new approach in ways of working for supervisions, appraisals and practice observations. This included competency observations, "ad hoc" supervisions, "check in" supervisions" and appraisals. These provided avenues for staff to reflect on their work practice. There was better oversight of staff competencies to ensure their development and work practices were monitored.

This area for improvement was met.

Previous area for improvement 2

To ensure people experience high quality care and support that is right for them, the provider should have appropriate systems in place for the ongoing monitoring of the premises, This includes, but is not limited to the following: Boiler checks, hot water temperature checks, legionella checks and the use of any equipment; for example wheelchairs.

This is to ensure care and support is consistent with Health and Social Care Standard 5.24: "I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment.

This area for improvement was made on 22 September 2023.

Action taken since then

Since the last inspection a new maintenance worker had been employed. Checks of appliances, equipment and water temperatures were now being undertaken effectively and within designated time scales to ensure people's safety.

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
How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - 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
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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