

Roselea Court Care Home Care Home Service

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Type of inspection:
Unannounced

Completed on:
30 October 2024

Service provided by:
Roselea Court Care Limited

Service provider number:
SP2021000202

Service no:
CS2021000341

About the service

Roselea Court Care Home is a purpose-built care facility, situated in a quiet cul-de-sac in the town of Stirling. Arranged over two floors, the home offers 52 spacious bedrooms each with an en-suite wet room, some of which have direct access to the garden.

The home has a wide variety of social areas including a cafe, cinema room, hair salon and a bar area and provides residential, nursing and short break care services. The service has been registered with the Care Inspectorate since November 2021.

About the inspection

This was an unannounced inspection which took place on 29 and 30 October 2024. The inspection was carried out by two 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:

- spent time with 19 people using the service and spoke to 18 family representatives;
- spoke with staff and management;
- observed practice and daily life;
- reviewed documents;
- spoke with visiting professionals.

Key messages

People living in Roselea and their families were happy with the care and support they received.

People's health needs were escalated to other health professionals when needed.

People could be confident in the staff team because they were motivated, worked well together and had formed good relationships.

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 found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated quality indicator 1.3 as very good.

People experienced warmth, kindness and compassion in how they were supported and cared for. The service was good at ensuring people-maintained relationships with those important to them. Family and friends were made to feel welcome and we heard from families that people who lived at Roselea were very important to the staff and staff knew people very well.

People could be confident that their health and wellbeing was supported well because the service had good oversight in falls management and a proactive approach to falls prevention and we saw evidence of supportive and responsive wound care.

Medication was well managed. We had initial concerns about the prescription and storage of topical medication however this was resolved quickly during our inspection and the management team had made arrangements to improve practice and audit processes. Care plans were well organised and gave a clear summary of peoples care and support needs and wishes. Mealtimes were relaxed and followed good practice guidance about eating and drinking well.

People could be confident that any new health needs would be quickly addressed because the service had made good links with healthcare professionals for example, dietician, podiatrist and tissue viability nurses and requested specialist support when required.

How good is our staff team?

5 - Very Good

We found significant strengths in aspects of staffing and how these supported positive outcomes for people, therefore we evaluated quality indicator 3.3 as very good.

There was respectful communication within the team and this created a warm atmosphere because there were good working relationships between staff. People benefitted from this when staff spent time with them in the communal areas and people enjoyed staff company.

Staff told us that they enjoyed working within the service, there were low level of staff sickness and minimal use of agency staff and when agency staff were used, they were usually well known. One person said 'Staff are helpful and understanding' while another said "all the staff are lovely and friendly to me." Staff were visible and available to people and their visitors throughout the day and were seen to be very responsive to peoples needs.

People could be confident that the service had the right numbers of staff because the service used a dependency tool to ensure that staffing levels were correct. Dependency levels were assessed well and took account of all factors including the environment. The outcomes were analysed to arrange the best skill mix throughout the service and deploy staff where they were most needed throughout the day and night.

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 help to give purpose to peoples day, and support their wellbeing, people should have opportunities to take part in engagement that is meaningful to them. In doing so, there should be more emphasis placed on;

- a) exploring and recording of peoples aspirations and wishes;
- b) supporting engagement with people who choose to remain in their own rooms to help them live a meaningful and fulfilling life.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'My care and support meets my needs and is right for me' (HSCS 1.19).

This area for improvement was made on 5 May 2023.

Action taken since then

We evaluated this area for improvement at this inspection. The service had introduced booklets that provided good information about people and their life before Roselea. The information was helpful in getting to know people but did not give the opportunity to identify aspirations and wishes. Where preferences were mentioned they were not explored further to provide information about getting the most out of life or used to create wellbeing opportunities.

There was a full and varied activity programme for groups, which included skills, entertainment and intergenerational work and people enjoyed the events on offer. However we were unable to see how people who stayed in their rooms were supported unless they chose to join in events.

This area for improvement will be reviewed again at our next inspection.

Previous area for improvement 2

So that people can have confidence in the organisation providing their care and support the provider should ensure that robust and effective quality assurance processes are in place that identify proactive or preventative strategies. This should include, but is not limited to, falls management and risk reduction.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: "I use a service and organisation that are well led and managed." (HSCS 4.23)

This area for improvement was made on 5 May 2023.

Action taken since then

We evaluated this area for improvement at this inspection. The service had made improvements in their quality assurance process. Audits and feedback mechanisms gave good oversight to the leadership team about people's care and support. Information was well recorded and analysed and was used to reduce risk and improve outcomes for people. This area for improvement was met.

Previous area for improvement 3

So that people are supported by well trained staff whose skills and knowledge are kept up to date, the service should ensure that learning opportunities are developed to meet the needs of people who live in the care home based on evidence and good practice guidance. This should be regularly analysed, with new training planned as people's needs change and should include, but is not limited to, training to support people who may experience stress and /or distress.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS), which state that: '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.' (HSCS 3.14)

This area for improvement was made on 5 May 2023.

Action taken since then

We evaluated this area for improvement at this inspection. Training for staff was regular and robust and was followed up by competency assessments and supervision. Staff had opportunities to identify training that would enhance their practice and all staff had an appropriately assessed level of training to recognise and support people who may experience stress and or distress.

The service had met this area for improvement.

Previous area for improvement 4

To improve outcomes for people experiencing support, the service should ensure that risks are fully assessed, and outcomes are used to inform care plans to promote consistency of support and reduce the level of risk or injury. Detailed records should be kept ensuring that the effectiveness of the care plans can be evaluated and monitored.

This is in order to comply 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 5 May 2023.

Action taken since then

We evaluated this area for improvement at this inspection. The service had a robust system to ensure that care plans were regularly reviewed and risk assessments were risk assessments were clear, easy to follow and up to date. The service could further improve if six monthly reviews with people and their families were undertaken timeously and they had introduced a system to arrange this.

This area for improvement was met.

Previous area for improvement 5

So that people are supported well and in line with current best practice guidance, the service should ensure that restrictive practices are appropriately assessed, regularly reviewed and that informed consent is in place for the use of any equipment and is signed by the resident or their representative.

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) and 'I experience high quality care and support based on relevant evidence, guidance and best practice.' (4.11).

This area for improvement was made on 5 May 2023.

Action taken since then

We evaluated this area for improvement at this inspection. Individual care plans had been developed to identify what and when restrictive practices were used to keep people safe. The care plans were full and regularly reviewed however we could not see how practices were explained to people or how consent was gained, following good practice guidance. We were confident in the service's approach to addressing this and we will review this area for improvement again at our next 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?	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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