

Glendale Lodge Care Home Service

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Type of inspection:
Unannounced

Completed on:
5 December 2024

Service provided by:
Glendale Lodge

Service provider number:
SP2003001663

Service no:
CS2003007571

About the service

Glendale Lodge is a small family owned business. It is located in the small village of Townhill, just north of Dunfermline. The home is in a quiet residential street and is adjacent to a public bus route. There is adequate parking and a pleasant garden area. Accommodation is provided in single rooms over two floors serviced by a passenger lift.

The service is registered to provide 24 hour care and support for up to 15 older people. During the inspection there were 15 people were residing in the home

About the inspection

This was an announced inspection which took place on 05 December 2024 between 10.00 and 19:45. The inspection was carried out by one inspector from the Care Inspectorate. To prepare for the inspection we reviewed information about the service. This included previous inspection findings, registration and complaints information, information submitted by the service and intelligence gathered throughout the inspection year.

This was a pilot inspection to test a new way of inspecting to provide assurance that better performing services continue to deliver a very good level of care and support. No new evaluations (grades) have been awarded.

This inspection is called a core assurance inspection. This is because research tells us that these core assurances are the key areas that are essential to a service being safe. We report on them under the headings: legal assurances, wellbeing, leadership, staffing, the setting, and planned care/support.

We confirmed that the service continued to provide a very good level of care and support. We know this because on this inspection we:

- spoke with seven people using the service, and four of their friends and family members
- spoke with seven members of staff and management
- observed practice and daily life
- reviewed documents.

Key messages

Legal Assurances

We found the service was operating legally and in line with their conditions of registration, including having current and appropriate insurance in place. A range of policies and procedures that promoted good outcomes for people were implemented and adhered to. This meant that people were safe and protected from harm and could have confidence in the organisation providing their care and support.

Wellbeing assurances

Our observations concluded that people were supported and cared for in a very kind and compassionate way. This was reflected in what people told us. One visitor said "Brilliant. She is safe, well looked after, and couldn't be in a better place. It's a home from home. I'm in every day and this is ideal for us".

Staff we spoke to were aware of their roles and responsibilities in relation to safeguarding people. They described confidently what they would do if they had concerns. Systems were in place for safeguarding people's finances but they couldn't always access their funds. This was swiftly addressed during the inspection.

The home had a warm, relaxed feel, was very clean and free from offensive odour. PPE (Personal Protective Equipment) was readily available, cleaning schedules were in place, and the manager checked hygiene standards regularly. This reduced the risk of people getting avoidable infections.

We looked at medication administration, recording, and review systems and we were confident people were getting medication that was right for them, at the prescribed time.

People received safe, dignified and person-centred support with eating and drinking. They told us they really enjoyed the food and were encouraged to discuss, and suggest changes to the menu.

Relatives confirmed they were kept up-to-date with their loved one's health and wellbeing and were always welcomed into the home. Cordless phones and technology were available to keep people connected. People told us they loved the monthly entertainment and daily activities. Keeping connected and stimulated supports good physical and mental health. One person said "I can't tell you how much I've come on. I fell to bits and couldn't walk. I wanted to walk again, they watched me, helped me and encouraged me. I can walk again. I started with colouring in and they got me into diamond art; this is all my work. I have a vegetable patch in the garden and I grow my own vegetables. Top marks".

Leadership Assurances

The management and leadership team had a very good oversight of the service as a whole. Quality assurance systems were effective in identifying areas for improvement, prompting action plans to address them. A culture of continuous improvement was promoted, which was evident in the very good outcomes experienced by people.

It is important that people and their representatives have regular opportunities to discuss their care and support as well as wider elements of the service. We saw that people were supported to be involved in decisions relating to service delivery and the environment.

There was very good oversight of risks to people's health; for example accidents, incidents and falls. Where people were identified as being at risk of harm, action was taken to mitigate the risks and maximise people's safety.

People, including staff spoke highly of the support they received from management and everyone spoken with said they were confident any concerns or suggestions would be addressed.

Staffing assurances

People were supported by a very stable staff team with minimum turnover. Staff retention rates had a positive impact on people's outcomes and experiences as they provided consistent care and support.

We were confident safe staff recruitment practices were being adhered to, which evidenced a commitment to maximising people's safety. New staff were supported by a robust induction, and regular reviews were carried out during their probationary period. This ensured they were being supported to develop the necessary skills, knowledge and abilities.

Staff demonstrated a good level of knowledge and competency in their roles and were supported to develop their skills, which enabled positive outcomes for people who used the service. The manager had a good overview of staff training and their training needs.

Staff benefitted from a culture of good communication and regular supervision which gave an opportunity for open dialogue about any suggestions, concerns, and learning and development needs. Staff we spoke with told us they were happy in their roles, felt valued and supported.

One person residing in the home said "How can you not be happy here when they treat you like they do? I've had a wonderful birthday; they're all so kind. People work so hard, they've been well-trained and know how to respect human life".

Setting assurances

People benefitted from a warm, welcoming, friendly and comfortable environment which they were supported to contribute to. The home had been extended and some rooms reconfigured. People residing in the home helped to choose the décor, which promotes a sense of belonging and ownership.

People were encouraged to personalise their bedrooms with their own furniture and belongings to make them feel more at home. The kitchen had been refurbished, and the dining room was set out in a way that lent itself to very pleasant mealtime experiences.

There were arrangements in place for maintenance of the premises and equipment to maximise people's safety. This ensured an environment that has been adapted, equipped and furnished to meet people's needs and wishes. Maintenance records showed maintenance requests and repairs were addressed timeously.

Planned care/support assurances

Care plans we sampled reflected people's healthcare needs, likes, dislikes and abilities. Effective assessment and evaluation provided staff with enough information on how to best meet people's needs and plan future care. When we identified an example of improving someone's care plan by adding information relating to stress and distress, it was addressed straight away.

People had access to external professional supports, such as GPs, opticians and district nurses when this was needed. This ensured that people were receiving regular routine health screening and had access to other peripatetic professional supports. We found that guidance from other professional staff was recorded within plans sampled.

People residing in the home and their families said they were involved in developing the care plans and invited to formal six month reviews. This reflected the Health and Social Care Standards which state that people should be fully involved in developing and reviewing their personal plans. We were confident that people experienced good outcomes as a result of living at Glendale Lodge.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

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