

Cherry Road Resource Centre Support Service

8 Cherry Road
Bonnyrigg
EH19 3ED

Telephone: 01315 615 402

Type of inspection:
Unannounced

Completed on:
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Service provided by:
Midlothian Council

Service provider number:
SP2003002602

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CS2003017838

About the service

Cherry Road Resource Centre is run by Midlothian Council and is a purpose-built centre which is accessible for people with physical disabilities. Cherry Road is a resource centre for adults with learning disabilities to access service and facilities, whether within or out with the centre. It is situated within a housing estate in Bonnyrigg close to all local amenities and public transport links.

The service also provides an element of care at home/outreach in the community, in addition to the use of the day centre premises. Support to people is provided on a one-to-one basis.

About the inspection

This was an unannounced inspection which took place between 25 February 2025 and 27 February 2025. 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:

- We spoke with and gathered feedback via an electronic questionnaire from three people using the service, nine relatives and nine health professionals.
- We talked with eight members of staff and the management teams. Sixteen staff members completed the electronic questionnaire.
- Observed staff practice and daily life.
- Reviewed a range of documents.

Key messages

- People experience compassionate care and support because there was warm, encouraging, positive relationships between staff and people using the service.
- The manager and senior staff modelled the practice they expected, and this led to good outcomes for the people using the service.
- There were a range of audit tools which informed the manager and senior management about how well the service was performing.
- There were very good systems in place to evaluate staff's understanding or ability to transfer learning into practice.
- Care and support plans were personalised and gave good guidance to ensure people were well supported and safe.

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 leadership?	5 - Very Good
How good is our staff team?	5 - Very Good
How good is our setting?	4 - Good
How well is our care and support planned?	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 this key question as very good.

The centre had a nice, relaxed and homely feel. Staff knew people well and all enjoyed friendly interactions. People told us, 'I like it very much here; the staff are very good to me', and 'staff are friendly we have lots of fun'. This meant people were reassured they were being looked after in a caring environment.

People were being encouraged to enjoy opportunities to engage in a range of activities which were meaningful to them. Many of these activities encouraged people to move and change positions, for example, seated exercise groups. Some people enjoyed quizzes, participated in swimming, entertainment and musical events. People were able to choose how to spend their day, and this meant they were listened to, and treated respectfully.

We made a previous area for improvement relating to enabling people to meet their full potential at the last inspection, this area for improvement has now been met.

Staff had developed very good relationships with people who used the service, and their family and friends. Care plans provided clear information about who was important to people supported, and how to support people to maintain relationships. Relatives told us, 'Communication is very good' and 'staff contact us regularly, keeping us informed'. This demonstrated staff recognised the importance of nurturing relationships for, and with people, which benefited their overall wellbeing.

The centre welcomed visitors and there were no restrictions in place at the time of inspection. As a result, staff supported people to maintain meaningful connections with the community.

There was a varied menu on offer and staff were knowledgeable about people's needs and preferences. Visual choices were offered, which helped people who had memory difficulties. We were told, 'the food's really nice' and 'the food's good, there is plenty of choice'. It was positive to see staff encouraging people to eat their meals together in the dining room, staff sat alongside people to provide reassurance or to assist people with eating. This inclusive atmosphere provided natural prompts and encouraged people to eat and drink well.

There was an organised system in place for administration of medications. This was audited on a regular basis by the senior team. A protocol was in place for administration of 'as required' (PRN) medications, and where this was prescribed, was given appropriately. This meant people could be confident their medication was available and being administered safely.

Care plans were informed by a range of recognised assessment tools which helped to maintain and improve people's health and wellbeing. The information held within plans had been monitored regularly and we saw appropriate referrals had been made to other health professionals if required. Their advice and guidance was reflected in relevant care plans. Care plans were personalised and regularly updated as people's needs and preferences changed. One health professional told us 'Staff are always very appreciative of any advice and support the team can give. They take on board any issues and work to improve where required.'

How good is our leadership?**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.

Management had a good overview of the centre. Staff told us the manager and management team had an open-door policy, where any aspect of care, support or development could be discussed and was listened to. The manager and senior staff modelled the practice they expected, and this led to good outcomes for the people who used the centre.

The manager knew the care and support needs of people and was able to direct care in a supportive and professional manner. An established staff team supported each other well through clear channels of communication. This ensured any changes to care were consistently achieved. Regular team meetings offered an opportunity for staff to share and contribute to the development of the service.

There were a range of audit tools used to inform the manager and senior management about how well the service was performing. A service improvement plan was in place which was supported by action plans to drive continuous improvement. Management meetings were in place to ensure all aspects of the service had an overview by the manager. We discussed with the manager, the need to ensure identified actions resulting from audits were evidenced as complete when work had been undertaken, ensuring that they captured the impact of improvements and overall outcomes for people using the service.

Audits linked to healthcare were regularly completed. This enabled overview of any actions needed to be put in place to improve individual health. This led to positive outcomes for people using the service.

All accidents, incidents and concerns had been appropriately recorded and actioned. This included notifications to the Care inspectorate. The manager ensured where needed, that any identified risk led to changes in planned care.

The manager ensured confidence in the leadership of the centre. People told us: 'The manager is supportive, you can ask anything, and communication is always fantastic, which is good, the care can't be faulted.' 'All the leaders are visible each time I'm in to visit, they are welcoming and friendly'. Relatives were offered the opportunity to meet and discuss any suggested improvements on a regular basis.

How good is our staff team?**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 could be confident staff were recruited safely with all pre-employment checks completed prior to the staff member starting employment.

Staff were working hard and were enthusiastic about their work. They were clear about their roles, what was expected of them and demonstrated a very good knowledge of people's care and support needs. Staff were working well together as a team and were visible within the centre. Relatives told us, 'The staff are all supportive, loving and kind' and 'I can talk to any one of them and they always help if I'm worried or concerned'. People had confidence in the team who supported them with their care.

People experiencing care had the opportunity to meet any new staff being introduced. This meant staff had time to get to know people and learn what was important to them. Staff confirmed they had a good induction with regular ongoing support from the management team.

Staff completed a range of online and face to face training courses relevant to people's needs. There were very good systems in place to evaluate staff's understanding or ability to transfer learning into practice. The provider ensured staff training and support provided the skills, knowledge and understanding required to meet people's needs.

We made a previous area for improvement in relation to infection prevention and control training at the last inspection, this area for improvement has now been met.

Supervision records were completed for all staff; staff told us they could speak with a manager at any time, and they attended regular team meetings. We sampled records of supervision meetings and observations of staff practice and found very good evidence of discussions held, feedback on practice, reflection on any training undertaken and aspects of care they did well or found more challenging. This aided staff development. We discussed with the manager, ensuring staff observations of practice captured all aspects of care and support, including but not limited to manual handling practice, Infection control practice and general care.

Morale across the service was high, staff we spoke to said they were very happy at their work. Staff felt well supported by management and confident in raising concerns. This enabled people to have a positive experience of their care as the staff team were enthusiastic and happy.

How good is our setting?

4 - Good

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

The management team had developed a maintenance improvement plan since the last inspection. The plan was reviewed on a monthly basis, with appropriate actions identified. Staff reported any defects or repairs, and these were actioned quickly, or referred on to an outside contractor. This helped to maintain a safe environment for people using the centre.

Some areas of the centre had been redecorated and created warm and inviting spaces for people to use. The centre had a relaxed welcoming atmosphere and reflected the ages of the people attending. People had the choice of what they wanted in their individual spaces re entertainment, radios, televisions etc.

The garden areas to the front and rear of the building were well kept and easily accessible. One of the advantages of the centre was its proximity to local shops and amenities, which enabled people to be part of the local community.

Overall, the centre was clean and tidy, free from odours or intrusive noises. Upgrading was required in some areas, for example, the corridors and conservatory. A refurbishment plan was in place, and we could see improvements being made.

We had made a previous requirement in relation to maintaining the environment at the last inspection, this requirement has now been met.

How well is our care and support planned?

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 benefited from dynamic and aspirational care and support planning which consistently informed all aspects of the care and support they experienced. People, and where relevant, their families or those important to them, were fully involved in developing their personal plans. Strong leadership, staff competence, meaningful involvement and embedded quality assurance and improvement processes support this happening.

Monthly summaries of people's achievements and outcomes with using the service were captured well and were person centred. These summaries provided a timeline of key events and achievements to their overall six-monthly review meetings with relatives and health professionals.

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

Requirements

Requirement 1

By 30 June 2023, the provider must ensure people experience high quality facilities that are well maintained, furnished, and decorated to a good standard.

To do this, the provider must, at a minimum:

- a) develop an improvement plan which has involved those using and working at the resource centre and share this with the Care Inspectorate by 30 April 2023;
- b) where areas can be addressed quickly these should be prioritised; and
- c) set realistic timescales for the areas of work required.

This should include but not be limited to:

- the flooring of bathrooms and communal areas;
- door frames to support cleaning and provide a pleasant environment of people;
- ensuring surfaces, (including kitchen worktops), are easy to wipe clean using appropriate cleaning products;
- the redecoration of areas to improve the appearance and provide high quality facilities; and
- ongoing upkeep of the premises.

Any essential repairs and redecoration are logged and carried out within timescales ensuring there is no compromise to people's safety.

This to comply with Regulation 10 (2) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that: 'I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment' (HSCS 5.22).

This requirement was made on 14 March 2023.

Action taken on previous requirement

The service had developed a maintenance improvement plan which had involved service users and care staff, realistic timescales of work completion were noted and those responsible for actions identified. We could see work had been prioritised with many current actions awaiting quotes and invoicing. From our observations, spaces available to service users had been painted, the outdoor space at the back of the building had been newly renovated ensuring a safe environment for service users.

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

To ensure people are kept safe and limit the spread of infectious diseases, (including but not limited to Covid-19), the care provider should ensure that staff are trained to have the knowledge and application of guidance from the Infection Prevention and Control Manual.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state that: 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

This area for improvement was made on 14 March 2023.

Action taken since then

Staff completed regular infection prevention and control training in line with best practice guidelines; we observed staff following best practice guidance in relation to infection control.

This area for improvement has been met.

Previous area for improvement 2

To ensure people experience care that increases their quality of life and experience, the provider should engage with people, their relatives and staff, to explore how a cultural change could focus on an enabling attitude to support people to fully achieve their potential.

This is in order to comply with the Health and Social Care Standards which state: 'I get the most out of life because the people and organisation who support and care for me have an enabling attitude and believe in my potential' (HSCS 1.6).

This area for improvement was made on 14 March 2023.

Action taken since then

The management team gathered people's view through regular discussions and reviews of care these were recorded well and where further actions had been identified these were acted upon appropriately. Following the Covid-19 pandemic the service had resumed normal levels of activities with groups and individuals enabling individuals to fully achieve their potential.

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 leadership?	5 - Very Good
2.4 Staff are led well	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
How good is our setting?	4 - Good
4.1 People experience high quality facilities	4 - Good
How well is our care and support planned?	5 - Very Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	5 - Very Good

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