

Elderslie Care Home Care Home Service

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Type of inspection:
Unannounced

Completed on:
8 May 2025

Service provided by:
Advinia Care Homes Limited

Service provider number:
SP2017013002

Service no:
CS2017361010

About the service

Elderslie Care Home is registered with the Care Inspectorate to provide a service to 120 older people. The provider is Advinia Care Homes Ltd.

Elderslie is a large purpose built care home situated on the outskirts of Paisley. The home is set out over two floors and there are four separate areas. Each area has dining and lounge areas, and other smaller rooms for people to use. The ground floor has access to well-developed garden areas.

Whilst the service has capacity for up to 120 single bedrooms with ensuite shower facilities, managers have undertaken a process of consolidation. There were 58 people using the service at the time of the inspection, with a current operating capacity of 60 single rooms across two units. The service is currently exploring the potential of opening one other unit, which would bring the operating capacity up to 90.

About the inspection

This was an unannounced inspection which took place on 28, 29 April and 1 May 2025, between the hours of 6:45 and 18:00. The inspection was carried out by three inspectors and an inspection volunteer 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:

- spoke with 20 people using the service and nine of their relatives
- spoke with 26 staff and management
- reviewed electronic feedback from people supported, relatives, staff and external professionals
- observed practice and daily life
- reviewed documents

Key messages

- Management and staff knew each person well and were very good at building positive relationships with people and their families.
- Staff were highly motivated and strived to provide the best support to people.
- The service should continue to develop more meaningful day to day activities to improve people's quality of life.
- Leaders were knowledgeable about aspects of the service which required improvement, to enhance consistency and quality of support.
- The provider should improve communication in relation to the staffing configuration, to give relevant parties assurances that peoples' needs can be appropriately met.
- The management team has worked on improving the environment, to enhance peoples overall experiences. Ongoing commitment has been made by the provider to continue to develop this.

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?	5 - Very 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. The strengths had a positive impact on people's experience and outcomes.

People experienced respectful and compassionate support, which demonstrated how well staff knew people and their preference of how support should be provided. We saw warm and genuine relationships between people supported and staff. A person supported shared "The lassies (and laddies) are all great, they look after me well, I have no complaints whatsoever".

The nursing and care team effectively supported health and wellbeing. Staff used their knowledge of people to identify any changes in health and wellbeing, ensuring timely referrals to relevant health professionals when necessary. Relatives appreciated contact making them aware of any changes or concerns, building confidence in the service. A relative shared "x is prone to infections, staff are very quick to pick this up and let the GP know medication is required. They are great at letting us know of any worries".

An electronic care planning system was well utilised for monitoring people's health. Documentation regarding health concerns, including wound management, was clear with recorded advice and follow-up actions detailed. Feedback from external professionals indicated "staff were well-informed and communicated efficiently, facilitating integrated care".

Medication administration was managed safely, with effective use of electronic systems for recording. Protocols to guide staff on the use of medication prescribed "as required" varied in detail. Some provided comprehensive information on how to support individuals, especially during periods of anxiety. However, not all were as detailed which may cause inconsistencies in support.

People should expect their meals and snacks to meet their cultural and dietary needs, beliefs and preferences. Whilst observations of mealtimes generally demonstrated a positive experience, with people enjoying their meals, some areas could benefit from improvement to enhance the consistency of a positive experience.

Feedback from people regarding the quality of food was mostly positive, with relatives reporting that their loved ones appeared to be gaining weight, reinforcing confidence in the service. The kitchen team demonstrated enthusiasm for meal provision. It remains important for the provider to continue incorporating people's views into menu planning. Families were able to visit over mealtimes. The management team agreed to revisit communication and signage regarding this to improve understanding among relatives.

People can expect to have confidence in staff because they are trained, competent and skilled. Training was widely accessible, primarily online with a high uptake. Exploring further opportunities for in-person learning would enhance staff development. A new dementia training programme will be rolled out to staff in Autumn this year. This would ensure staff have the ongoing skills and knowledge to support people effectively.

Staff engaged warmly with people throughout the day, while assisting with tasks and in informal interactions. However, there was a noticeable lack of meaningful activity and stimulation across both areas. Staff expressed concerns that current staffing levels limited their ability to spend quality time with people outside of completing functional duties. Whilst some group and one-to-one activities were happening, opportunities for more meaningful engagement were often missed.

The service promoted meaningful opportunities to connect with loved ones through special celebrations, including birthdays, valentines day and planned events which were greatly valued. It was encouraging to see continued engagement with the local nursery, fostering intergenerational relationships. Spiritual needs were also acknowledged, with regular visits from the church. The focus of attention in relation to planned activities promoted connectivity and people's sense of belonging.

Activity planners lacked clarity regarding daily events. This made it difficult for people to determine what activities were scheduled and where they would take place. However, it was good to see activities adapted when the weather was nice, enabling people to spend time outdoors. Whilst we appreciated the challenges with activity staff resources and the diverse needs of people, the organisation should explore ways to improve peoples' daily experiences (please see area for improvement one).

Staff demonstrated a strong commitment to infection prevention and control, consistently following best practices outlined in national guidance. Regular cleaning routines were well-established, ensuring a high standard of hygiene. Clear cleaning schedules outlined required tasks and timing, contributing to the maintenance of a fresh and odour-free environment.

Laundry operations were effectively integrated into the home's overall hygiene processes, supporting a clean, safe, and comfortable living space. Staff displayed a thorough understanding of infection risks, particularly during outbreak.

While staff largely adhered to safe Personal Protective Equipment (PPE) protocols, there were a few instances where immediate disposal of PPE following personal care tasks should be reinforced. This would further minimise infection risks and strengthen existing practices.

Areas for improvement

1.

The provider should enhance the provision of day to day activities linked to people's choices and preferences, to support people's wellbeing.

This should include regular peer and one to one interactions, based around individuals' preferences being accessible to all. Effective evaluation should be used to inform future plans.

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

"I can maintain and develop my interests, activities and what matters to me in the way that I like." (HSCS 2.22)

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.

The management team had developed a comprehensive improvement plan, incorporating feedback from previous the previous inspection, internal and external sources. While some areas had clear action steps, others lacked detail, making it more difficult to track developments effectively. To enhance this, it would be helpful to have clearly defined measurable actions for each area. The plan was regularly updated, with completed actions being recorded.

People should benefit from a culture of continuous improvement. Various quality assurance systems were in place, offering the management team and the organisation an overview of key areas across the service. Senior staff were involved which ensured information was current and accurate, allowing for meaningful analysis. Actions for improvement were identified through audits and tracked until completion. Where improvements required a change in practice, it is important these are implemented prior to the action being closed.

At the start of the year, the organisation carried out a staff survey. Overall, staff provided positive feedback regarding the service, management, and people supported. However, some strong concerns were raised about staffing levels and budgetary constraints imposed by the provider. We appreciated that the summary of responses was still being compiled, however it is essential that the provider creates opportunities for meaningful communication with the staff team regarding their responses.

Staff expressed high levels of confidence in the local management team, stating that they felt comfortable sharing worries, concerns, and ideas for improvements. There was a strong sense of a shared vision among staff, with a collective commitment to addressing issues and continually improving the service for the benefit of people.

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.

Peoples' care and support should be consistent and stable because staff work together well. We observed the staff team working cohesively. There was clear recognition of each others role and the importance of each of their contributions. Staff acknowledged they each had unique strengths that complemented one another, enabling them to provide the best possible support to people. People and their relatives spoke highly of staff and appreciated the way they were spoken to and cared for. Those strong relationships positively influenced their experiences.

The management team swapped a number of staff between night and day shifts, which enhanced the understanding of the different pressures and challenges faced by each shift. This supported more effective and efficient working relationships.

Peoples' needs should be met by the right number of people. We were confident in the consideration given to the mix of skills and experience on each shift. Staffing arrangements were directed by the provider and

not always directly linked to people's care and support needs. We heard mixed feedback in relation to staffing levels across the home. Whilst we observed people's care and support needs being met. This was largely due to the commitment and dedication of the staff team, who worked hard to minimise the impact of having less staff allocated throughout the day.

Staff teams should have time to provide care and support and to speak with people. Staff expressed frustration about how the changes in the staffing configuration affected people. Many shared concerns that they no longer had time for meaningful engagement beyond completing practical tasks. We were not able to ascertain that staffing levels determined by the provider had taken into account non contact staff breaks, and have requested this be explored further. The service provider should reassess the process of determining staffing levels in collaboration with relevant parties, ensuring that staff and others are well-informed and actively involved in these decisions.

(Please see area for improvement one).

The management team had been proactive in developing new supervision templates, which proved to be highly effective. It was encouraging to see staff reflecting on their work and recognising their achievements. Supervision was being used appropriately as support mechanism to identify areas where staff could improve their skills and understanding. This included themed sessions tailored to training needs identified through audits. These sessions enabled staff to reflect on their practice and allowed management to determine where additional support was needed.

There was overwhelming positive feedback from staff regarding the support provided by the management team. Staff appreciated the personal and professional support they received, which helped them grow in confidence and improve their practice. A staff member shared "The management team are open and approachable. They come in early and stay late if needed and are visible around the home. Any issues we speak to them about are listened to action taken to make things better where possible. Whilst we might not always agree with the response they always take time to explain the rationale behind decisions".

Areas for improvement

1.

The provider should ensure communication in relation to staffing requirements is open and transparent with staff, people supported and their relatives. Staffing requirements should be based on an assessment of people's care needs and other relevant factors, ensuring involvement of interested parties.

This is to ensure the provision of safe and high-quality care, whilst delivering the best outcomes for people who use services and the wellbeing of staff.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that:

"My needs are met by the right number of people" (HSCS 3.15)

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 should expect their environment to be relaxed, welcoming, peaceful and free from avoidable and intrusive noise and smells. We found that the home provided a safe, comfortable, and generally welcoming environment. The furniture and décor created a homely feel that respected people's dignity and personal preferences. While some areas had been updated to a high standard, others would benefit from further attention to ensure the environment is consistently well-presented throughout.

The management team had developed an environmental improvement plan, which outlined clear goals for enhancing the home, as identified above. Since the last inspection, a number of improvements had taken place both inside and outside. Staff across the service went above and beyond what could be expected of them, being actively involved in these developments, reflecting a team effort. Ongoing provider commitment will be key to achieving consistent quality across all areas.

The garden was tidy, secure, and easy to navigate. It offered comfortable seating, clear pathways, and greenery that encouraged people to spend time outdoors. Regular maintenance ensured it remained a valued part of the home. To ensure people gain the most benefit from the space, it is important use of this resource is built into day to day operational plans.

The layout of the building and choice of furnishings supported people's independence and comfort. People could move freely between their rooms and shared spaces, with no unnecessary restrictions. Communal areas were accessible, and people could choose whether to spend time with others or enjoy privacy in their own rooms.

Maintenance was generally well managed, with routine checks and prompt responses to repairs. The maintenance officer worked closely with care staff and attended management meetings, supporting a joined-up approach.

Most signage was clear and helpful in supporting people's routines and wayfinding. It is important that signage remains current and up to date to minimise confusion. Personalised signage on room doors helped people locate their rooms independently, reinforcing dignity and autonomy.

Accessibility had been improved in some areas following a Kings Fund audit, with features such as colour-contrasted toilet seats and light switches. These adaptations were being implemented throughout the home. A follow-up audit was underway, showing the service's continued commitment to creating an inclusive and supportive environment.

Overall, management demonstrated a proactive and responsive approach to maintaining and improving the environment. While there were clear strengths and ongoing developments, further progress is needed to ensure consistency and maximise the positive impact for all.

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.

Senior staff were actively involved in assessing new referrals, which reflected a strong team-based approach. This level of engagement was encouraging to see.

People should benefit from care plans which are person centred, up to date and reflect their rights, preferences and desired outcomes. Care plans covered a wide range of support areas and detailed lots of information. It was nice to see information relating to people's lives before they moved into Elderslie Care Home. However, some plans could have been more focused on individuals' strengths and providing clearer details about personal preferences regarding how support should be delivered.

Care plans were updated regularly, and added narrative which helped track people's journeys. However, updates were not always reflected in the care plan itself, leading to some inconsistencies. Given the size of the full care plan document, it is crucial that care plans remain accurate to ensure safe and consistent support.

Many risk assessments were being utilised, covering a range of areas to identify and minimise risk. For these to be meaningful it is important that they are kept updated and linked to the care and support plan.

Significant efforts had been made to improve how daily notes were recorded by staff. However, due to the large number of entries and reliance on standardised statements, it was difficult to see a clear picture of people's daily experiences, whereabouts, and interactions. The notes tended to be task-focused rather than capturing meaningful and supportive interactions throughout the day.

We could see from observations and discussions with the staff team that people's needs were identified and staff were able to engage and support people with dignity and respect. Staff knew people well which may lessen the reliance on care plans. However, inconsistencies within care plans may cause confusion in relation to how staff are guided to provide support. To ensure care plans are effective in directing care and support a robust system was necessary to ensure all care plans remained accurate and aligned with the evolving needs of individuals.

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

Taking into account the abilities and preferences of everyone experiencing care, the service should:

- a) ensure personalised programmes of activities are in place for individuals;
- b) develop a delivery framework and communicate planned activities; and
- c) regularly evaluate the level of available resources and the impact of meaningful engagement.

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

‘I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day’ (HSCS 1.25).

This area for improvement was made on 29 June 2023.

Action taken since then

An improvement plan detailed developing meaningful activity care plans for each person supported. Whilst meaningful engagement plans were not yet in place for everyone, they were in development. Some sampled included strengths based person centred information, of what people would like get involved with and the support required. These were continuing to be developed for all.

There was a 4 week planner of activities in place and displayed on the tv's across the home. This included a variety of activities, which could take place across both floors. We were not always able to see these activities happening at the time detailed on the planner or being updated when the plan changed. It was good to see activities adapted when the weather was nice, with people spending time outside in the afternoons. Plans were not visible across the home to prompt staff, people or visitors about what was happening that day.

We were not able to see the current activity plans being evaluated and amended following feedback from people.

This area for improvement is not met and will be incorporated into new area for improvement that will reflect current guidance.

Previous area for improvement 2

To help support meaningful engagement with people living with dementia, the provider should:

a) ensure that staff are supported with appropriate training, such as, the Promoting Excellence 2021, a framework for all health and social services staff working with people with dementia, their families and carers.

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 29 January 2024.

Action taken since then

The provider had explored an updated training resource in relation to supporting people living with dementia. An initial pilot took place in the organisation and it was found that changes were required. As such staff in Elderslie Care Home will take part in the new training in the Autumn of this year. That was included within their improvement plan.

Supporting people living with dementia is a skill and staff need to know how to respond to people's differing needs. The management team prompted all staff to complete an online training resource, whilst they were awaiting the roll out of the amended training.

This ensured all staff had a broad introduction to specific support needs. People supported could therefore be confident that staff had the knowledge and understanding to support them.

We were satisfied that work had started on this important aspect of training and have confidence that staff will participate in the next level of training.

This area for improvement has been met.

Previous area for improvement 3

To ensure people's outcomes benefit from staff who regularly reflect on and discuss their practice, the provider should:

a) ensure they have in place a robust and regular staff supervisions process in line with providers policy, meaning staff can provide a good level of care to people they support.

This is to ensure that 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 29 January 2024.

Action taken since then

The local management team had been very proactive in developing new supervision templates. These were very effective and it was a joy to see staff reflecting on their work and how well they were doing. Equally supervision was being used to reflect on where staff felt they could develop skills and understanding in areas of their work.

Supervision was offered in different formats. Themed supervision was used effectively where a training need was identified from the results of audits. Staff reflected on their practice and knowledge and management were able to identify where more support was required. It also offered an opportunity for staff to have their good work recognised.

Staff spoke highly of the support they received from management in terms of their practice but also their wellbeing.

A matrix was in place which identified when supervision or other related tasks had taken place or was due. Management reflected on the matrix and agreed it could be better set out.

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?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
1.4 People experience meaningful contact that meets their outcomes, needs and wishes	4 - Good
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	5 - Very Good
How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very 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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