

Holmesview Care Home Service

2 Holmes Road
Broxburn
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Telephone: 01506 859 660

Type of inspection:
Unannounced

Completed on:
24 October 2024

Service provided by:
Randolph Hill Nursing Homes
(Scotland) Ltd

Service provider number:
SP2003002451

Service no:
CS2010270153

About the service

Holmesview is a care home providing care and support for up to 60 older people. The service is owned and managed by Randolph Hill Nursing Homes (Scotland) Ltd and has been registered since 2011. The service is situated on the main street in Broxburn and has some local shops, public transport and amenities within walking distance.

Accommodation is provided over two floors, in six living units, each containing ten single en suite bedrooms, a lounge and dining area, and a communal bathroom. There is also a larger public lounge on the upper floor, and an enclosed sensory garden with access from some bedrooms and one of the downstairs lounges. Kitchen and laundry facilities are situated on the ground floor.

About the inspection

This was an unannounced inspection which took place on 23 and 24 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:

- spoke with 14 people using the service and received feedback via our survey from 12 people
- spoke with two relatives and received feedback via our survey from 22 relatives
- spoke with 14 staff and management and received feedback via our survey from 15 staff
- observed practice and daily life
- reviewed documents
- received feedback from three professionals.

Key messages

- People were treated with dignity, compassion and respect.
- There were warm, encouraging, positive relationships between staff and people.
- Staff were invested in ensuring people were supported to live as meaningful a life as possible.
- Staff were flexible and supported each other to work as a team to benefit people.

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?	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?

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.

Staff demonstrated the principles of the Health and Social Care Standards in their day-to-day practice, which promoted a culture of respect. Relationships between people and staff were warm and staff demonstrated kind and caring support within a relaxed, homely environment. This meant that people living in Holmesview experienced care that promoted their dignity and choice. People told us they were treated kindly, fairly and with dignity and respect and relative said, "*[my relative] is extremely well looked after in every way*" and "*I feel the team have built a really good relationship with [my relative]. I feel like they know when to coax and when to leave her be*".

Staff knew people well and were genuinely interested in their wellbeing. People felt respected as they were enabled to maintain and develop relationships within and outwith the home and there were meaningful interactions between staff and people living in the home. There were improved opportunities for people to engage in meaningful activity. A relative said, "*[My relative] is encouraged to participate in activities which the staff know she'd enjoy. They encourage her to get out of bed and not stay there all morning which I agree with. She is encouraged to go out on outings for a change of scene*".

People were involved in decisions about the care home in ways which were meaningful to them. This meant that people felt empowered because their voice was heard. Staff were responsive to people's needs and wishes and all relatives who provided feedback told us that they were happy with the care and support their relative receives. A relative told us, "*I am confident that [my relative] is well cared for and content in this home. She is treated as an individual and her interests and abilities are nurtured to benefit her wellbeing*". This meant people were being supported to get the most out of life.

A new system had been implemented to enable better oversight of personalised, meaningful engagement and activities, and work was ongoing to ensure this area was further developed to ensure that people's interests informed the range of activities on offer.

There was a robust medication management system which adheres to good practice guidance and people's medication was regularly reviewed to ensure it met their identified health needs.

Care Plans held valuable information about people's needs and wishes, preferences and what was important to them and were very respectfully written. This meant people's care and support met their needs, wishes and preferences.

Information about people's health and wellbeing was well documented and we could see that staff knew when to involve health professionals, and that they did this without delay. Management of people's skin integrity was robust and proactive and involved appropriate professionals when required. Supporting people who experienced stress and distress was done in a warm, reassuring manner. People's care plans were well documented with triggers and de-escalation techniques which meant that as-required medication was only used when necessary. This resulted in positive outcomes for people when they needed it most.

People's nutritional needs were well supported and well documented. One person told us, *"The food is good and there's always a choice. I can ask them to make something else if I don't want the choices on offer"*.

The service were making improvements to infection prevention and control (IPC) audits, including exploring options to ensure IPC was adequately maintained within the laundry function.

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.

There was respectful communication within the teams, and this created a warm atmosphere within the home. Staff worked very well together and understood the needs of people living in Holmesview. Staff were clear about their roles and were deployed effectively. They supported each other by being flexible in response to changing situations to ensure that care and support was consistent and stable. People could have confidence in their support because staff had ready access to the right information about their specific needs and outcomes.

Staffing arrangements were appropriately assessed and staff had enough time to provide compassionate care and support. There were dedicated staff to provide meaningful interaction and activity within and outwith the home and staff knew people well. This resulted in improved outcomes for people living in the home.

Staff induction was thorough and staff said the induction process supported them to develop into their role. All staff had received training appropriate to their role, and clearly understood their roles and responsibilities. People and relatives told us that staff were kind and caring.

Relatives told us that staff were professionally friendly, and took time to make family feel involved in their relatives' care.

One relative told us, *"Everyone I interact with at Holmesview seems to genuinely care about the residents and the joyfulness of some moments I walk into always reassure me that my [relative] is in a good place for him. All of the staff are helpful and seem to be happy at their work. I really appreciate all they do for my [relative]"*. Another said, *"All of the staff no matter their role are friendly and caring. The staff working in my [relative's] wing know her well, and keep me updated and informed regularly of anything she requires or what she has been engaging in"*.

Team meetings and supervisions were of good quality and ensured staff were kept up to date with people's changing needs.

Staff told us they enjoyed their work and worked well as a team though some did not feel confident in approaching management with concerns or suggestions for improvement. We spoke to the service about looking at ways to improve this so that staff could feel fully supported and that their suggestions could lead to improved outcomes for the people they support.

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

The service should fully support people to get the most out of life.

To do this, the provider should, at a minimum:-

- a) consistently offer personalised, meaningful activities and engagement that meets and develops people's interests
- b) ensure all people living at the care home can benefit from a range of activities both within and out with the care home
- c) ensure that staff who lead activities encourage people to remain active on a regular basis where appropriate
- d) ensure activities are based on people's preferences, wishes and past hobbies and that personal plans reflect involvement in meaningful activities and outcomes.

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, both indoors and outdoors' (HSCS 1.25); and

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

This area for improvement was made on 1 November 2023.

Action taken since then

The service had a good overview of what was happening for people throughout the home and we could see that people were regularly offered meaningful activities and engagement that met their interests and wishes. People's engagement in these activities were documented in a meaningful way and this was reflected in people's personal plans. This meant that the service could evaluate how well activities were meeting people's individual wishes and preferences.

The new system for documenting people's preferences and engagement in activities offered opportunities for the service to further develop meaningful interaction between people with similar interests.

Activities were taking place both within and outwith the home and there were a range of activities which supported physical activity for people who would benefit from this. The service was keen to further develop activities which would encourage people's mobility where this was appropriate.

This area for improvement was met.

Previous area for improvement 2

The provider should ensure people are safe and receive care and support that is well led and managed and which results in better outcomes for people through a culture of continuous improvement, with robust and transparent quality assurance processes.

This should include but is not limited to ensuring that:-

- a) robust systems of quality assurance and audits are in place, enabling areas for improvement to be promptly and accurately identified. This should include systems for feedback from people and relatives which is accessible to all people using the service and their relatives
- b) systems of quality assurance and audits are consistently completed and measure outcomes for people
- c) where areas for improvement are identified, an action plan is developed which details actions required, timescales and the person responsible
- d) regular oversight and discussions take place regarding clinical information about people living in the home.

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

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance systems' (HSCS 4.19).

This area for improvement was made on 1 November 2023.

Action taken since then

We could see that robust systems of quality assurance and audits were consistently completed and that these measured outcomes for people. This enabled areas for improvement to be promptly and accurately identified.

Feedback from people and relatives was gathered and actions from this informed a robust self-evaluation and service improvement plan which detailed actions required, timescales and the person responsible.

We saw that regular discussions were taking place regarding clinical information about people living in the home and there was good management oversight of this area.

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?	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?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good

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