

## Elderslie Care Home Care Home Service

20 Fulbar Road  
Paisley  
PA2 9AP

Telephone: 0141 889 2040

Type of inspection: Unannounced  
Inspection completed on: 15 June 2017

**Service provided by:**  
BUPA Care Homes (Carrick) Limited

**Service provider number:**  
SP2003002353

**Care service number:**  
CS2004071613

## About the service

Elderslie Care Home provides care for up to 120 older people. The Care Home is purpose-built and is situated in Paisley, near to local amenities. We undertook an unannounced inspection to the service on 5, 8 and 15 June 2017. We spent time speaking with residents, relatives and staff and we sampled paperwork. We also spoke with as many staff as we could including the manager, the external manager, the CSM's (Clinical Services Managers), nursing and care staff, maintenance, housekeeping staff and activity staff.

The accommodation is over two levels and in four individual units each with 30 single en-suite bedrooms. Each unit has a choice of lounge areas, a servery area, residents' kitchen and dining room. The home has pleasant garden areas for the use of residents and their families. There were 105 residents living in the home during the inspection.

The Philosophy of Care includes: "those who live in continuing care should do so with dignity, have the respect of those who support them and should live with no reduction of their rights as citizens."

## What people told us

We spoke with residents and relatives mainly on an individual basis. Inspectors and the Inspection Volunteers spoke with residents throughout the three days of inspection. We also received comments in our completed Care Inspectorate questionnaires.

Some of the comments received from residents were as follows:-

- 'I have no worries about living here.'
- 'Some staff know me well, but some don't. Previously there was a lot of activities but not anymore.'
- 'I am happy with my room. The carers are brilliant with me and I get the support I need.'
- 'I have no complaints.'
- 'Generally pleased with care provided. Room kept nice and clean and staff helpful.'
- 'I am bored.'
- 'I am really well cared for and the home is spotlessly clean.'
- 'The staff are excellent, they can't do enough for you.'

Some of the comments received from relatives were as follows:-

- 'The office staff are very helpful when we visit.'
- 'Staff are good, they have a nice rapport.'
- 'Staff are kind, they can't do enough for my loved one.'
- 'Staff are very pleasant but there have been some changes.'
- 'Laundry is the only weakness but it does get sorted eventually. All staff are very welcoming and the unit my loved one is in does feel like a family unit with lots of care and love around. I couldn't wish for a more caring environment.'
- 'I have nothing but help and understanding from the staff. We are sure we made the right decision choosing Elderslie. All in all the transition moving my loved one into the home has been made so much easier. The staff we have come in to contact with are just fantastic. I would hope all relatives are made to feel like this.'

## Self assessment

N/A

## From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of environment	4 - Good
Quality of staffing	4 - Good
Quality of management and leadership	not assessed

## Quality of care and support

### Findings from the inspection

During this inspection we found that staff knew the residents well and supported them with patience, warmth and kindness. We received positive comments about the care and support from both residents and their relatives.

We sampled care plans across the four units. We found that they were still clinical in tone and did not fully reflect the person centred practice we could see that staff delivered. Most of the care plans were up to date however some required to be updated with important information such as nutritional needs. We felt that the care plans particularly in Coates unit should relate more to people living with dementia. This will be a recommendation.

We looked at wound management practice and record keeping with the home. We did not find that all the records or treatment of wounds was consistent. Treatment plans needed to be more specific and staff needed to be more pro-active in seeking specialist advice where required. This will be a recommendation.

We also looked at the Adults With Incapacity paperwork and found that the treatment plans to support residents were sporadic. We asked the service to address this as a matter of urgency and by day three of the inspection, they had actively been discussing this with the relevant G.P.'s

We saw that the home did monthly audits of medication management. These audits identified what the home was doing well and any areas for improvement. We also looked at care plans for residents prescribed PRN (as required) anti-psychotic medication. We asked the service to develop these plans more so that the rationale for administering the medication and the outcome for the resident was more evident.

We observed the breakfast and lunchtime experience in all of the dining areas and found the experience to be calm and relaxed. Residents were being supported to eat their meals and staff were attentive.

There was a programme of meaningful activities, including outings and activities that promoted health and wellbeing. We spoke with the activities workers and we discussed what residents were doing and what they got out of the activities. The activity workers were enthusiastic and committed however there were vacancies within the team and it was hoped that they would be filled soon so that a more responsive programme of activities could be offered.

We looked at the way that residents' personal money had been managed. The records we looked at also showed that staff kept accountable records and receipts to evidence that residents' finances had been managed properly.

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 2

1. Care plans for residents were clinical in information and tone. Staff should develop the care plans to promote a more person centred style of recording. Care plans should be accurate and reflect all of the needs of each resident.

National Care Standards for Care Homes for Older People Standard 6 Support Arrangements.

2. The service needs to improve care plans for residents with assessed wounds. The care plan should be accurate and up to date and staff should seek the advice of external professionals in a timely manner.

National Care Standards for Care Homes for Older People Standard 6 Support Arrangements.

**Grade:** 4 - good

## Quality of environment

### Findings from the inspection

We walked around the home when we arrived to introduce ourselves and get a view on the environment. We found that the home was warm and offered a good variety of areas for residents to relax in. We spoke with housekeeping staff and they told us that they had plenty of equipment to keep the home clean and infection free.

On our walk around we saw that several areas required attention as they were looking 'tired'. We also found several areas to be malodorous despite the best efforts of the house-keeping staff. We discussed our findings with the manager and the maintenance staff and they agreed. By day three of the inspection some painting had commenced and a new carpet was on order for one of the units. We asked the manager to draw up a plan of action for the environment which would include the paintwork, squeaky floors and floor coverings. This will be a recommendation.

We were told that some staff were interested in developing a room to offer a Namaste programme of support for those residents who would benefit from more personalised, responsive care and therapy. Staff were actively pursuing this and were seeking training.

We looked at the maintenance records and found that they were all accountable and in discussion with the maintenance staff member it was evident that he was very experienced and was aware of his responsibility to keep the home safe and well maintained for the benefit of residents.

It was recommended to the home that they draw up an action plan arising from their own findings of the Kings Fund Audit. This audit is a tool to assist care homes to ensure that their environment is as good as it can be for residents living with dementia. An example of how the home could respond would be with the gardens as they were a feature that was complimented by residents and relatives however there was little signage to direct residents to the gardens within the units. We walked around the home with several members of staff discussing the Kings Fund Audit and it would be of benefit to residents if the home developed destination areas, appropriate signage and a more responsive environment for those residents living with dementia.

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 2

1. The home should continue to send their refurbishment programme to the Care Inspectorate.

National Care Standards for Care Homes for Older People Standard 4 Your environment

2. The service should draw up a plan outlining the action to be taken in response to the Kings Fund Audit recently undertaken.

National Care Standards for Care Homes for Older People Standard 4 Your environment

**Grade:** 4 - good

## Quality of staffing

### Findings from the inspection

We spoke with as many staff as we could, across all departments including night staff. We spent time with staff observing their practice and discussing their training and support within the home. We were told that staff morale was 'low' in some units but we were aware of specific reasons as to why this might be the case.

When we spoke with staff we could see that they were committed to offering good, safe care to residents. They told us that they received good training opportunities and they felt supported by the management team. The training records showed that staff had participated in sessions, for example, on falls, infection control and managing behaviour that challenges. We did feel that staff would benefit from more training in the field of Adult Protection as some staff were vague when asked about this. The service should also ensure that training records are kept up to date. This will be a recommendation.

We discussed the level of agency nursing staff being used within the home. It was agreed that the level was high but staff we spoke with stated that they were 'fine' working with agency staff as the home tried to get the same people to cover shifts. The management team were very aware of the possible impact this could have on the care and support for residents.

We looked at dementia training for staff. Some staff within the home were Dementia Ambassadors and they supported and trained other staff members. This ensured that residents living with dementia were cared for by skilled and experienced staff.

We discussed the need for staff to record in care plans in a more person centred way. This will be developed and discussed by the management team.

We asked about staff supervision and were advised that it was 'variable'. We discussed the need for all staff to receive regular, formal supervision to support them and their personal development. This will be a recommendation.

We were told that staff were supported to complete a qualification suitable for registration with the SSSC and we spoke with some staff who were completing their SVQ IV. They appreciated the support of the home with this.

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 2

1. Staff should receive regular, formal supervision.

National Care Standards for Care Homes for older people. Standard 5 management and staffing arrangements.

2. Staff would benefit from Adult Protection training which was 'fit for purpose' and covered not only the relevant legislation but also the expectations of local authorities and the responsibilities of staff in the area.

National Care Standards for Care Homes for older people. Standard 5 management and staffing arrangements.

**Grade:** 4 - good

## Quality of management and leadership

This quality theme was not assessed.

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

### Previous requirements

There are no outstanding requirements.

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

### Previous recommendations

#### Recommendation 1

The service provider should take measures to ensure that the environment of the care home is free from malodours.

**This recommendation was made on 1 September 2016.**

#### Action taken on previous recommendation

We found that some areas of the home were still malodourous and have asked for this to be addressed. This recommendation will continue.

#### Recommendation 2

The service provider should implement a system to ensure equipment is ordered promptly when this is required to meet assessed needs of residents.

National Care Standards for care homes for older people -  
Standard 4: Your environment  
Standard 6: Support arrangements  
Standard 9: Feeling safe and secure.

**This recommendation was made on 1 September 2016.**

#### Action taken on previous recommendation

We asked about equipment and were told that the system had improved and there were no concerns. This recommendation has been met.

## Recommendation 3

There was a recommendation from a previous complaint:

The manager should review:

1. How the care home manages the tissue viability care needs of service users.
2. The recording systems which are in place regarding tissue viability care needs,
3. How information is shared with relatives/next of kin regarding any health care changes.

**This recommendation was made on 12 October 2016.**

### Action taken on previous recommendation

We sampled care plans for resident with a tissue viability concern. We did not find the care plans to be accountable in all areas. This recommendation will continue.

## Recommendation 4

The manager should submit to the Care Inspectorate an action plan which confirms the measures which have been taken to review and improve upon the overnight management cover arrangements within the home.

**This recommendation was made on 15 December 2016.**

### Action taken on previous recommendation

The service responded with a comprehensive plan of action to address any concerns regarding overnight management cover. We discussed this with the manager who told us that this was working well. This recommendation has been met.

## Complaints

Please see Care Inspectorate website ([www.careinspectorate.com](http://www.careinspectorate.com)) for details of complaints about the service which have been upheld.

## Enforcement

No enforcement action has been taken against this care service since the last inspection.



## Inspection and grading history

Date	Type	Gradings	
27 Jul 2016	Unannounced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
2 Nov 2015	Unannounced	Care and support	Not assessed
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
30 Nov 2015	Re-grade	Care and support	Not assessed
		Environment	Not assessed
		Staffing	3 - Adequate
		Management and leadership	Not assessed
7 May 2015	Unannounced	Care and support	4 - Good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	4 - Good
8 May 2014	Unannounced	Care and support	5 - Very good
		Environment	4 - Good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
8 Jan 2014	Unannounced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	5 - Very good
15 May 2013	Unannounced	Care and support	4 - Good
		Environment	5 - Very good
		Staffing	4 - Good
		Management and leadership	Not assessed
31 Dec 2012	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	Not assessed

Date	Type	Gradings	
		Management and leadership	4 - Good
29 Jun 2012	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 3 - Adequate Not assessed
24 Jan 2012	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 4 - Good 3 - Adequate 4 - Good
3 Oct 2011	Unannounced	Care and support Environment Staffing Management and leadership	2 - Weak 3 - Adequate 2 - Weak 3 - Adequate
9 May 2011	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
18 Nov 2010	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 5 - Very good Not assessed
24 Aug 2010	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 5 - Very good 4 - Good
3 Dec 2009	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 5 - Very good Not assessed
9 Jul 2009	Announced	Care and support Environment Staffing	4 - Good 4 - Good 5 - Very good

Date	Type	Gradings	
		Management and leadership	5 - Very good
25 Feb 2009	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good
3 Oct 2008	Announced	Care and support Environment Staffing Management and leadership	3 - Adequate 4 - Good 4 - Good 4 - Good
8 Jul 2008	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate Not assessed Not assessed Not assessed
30 May 2008	Announced	Care and support Environment Staffing Management and leadership	1 - Unsatisfactory Not assessed Not assessed Not assessed

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