

The Manor Care Home Service

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Type of inspection:
Unannounced

Completed on:
14 August 2023

Service provided by:
Caring Homes (Edinburgh) Limited

Service provider number:
SP2021000056

Service no:
CS2021000091

About the service

The Manor is a care home providing care and support for up to 74 older people, located in Edinburgh near to public transport and shops. The service is owned and managed by Caring Homes (Edinburgh) Ltd and has been registered since June 2021.

Ensuite bedrooms are on the ground floor and first floor. There are a number of lounges, dining rooms and quiet rooms on the ground floor and first floor. There is also a bar on the first floor. The second floor has a hair salon, cinema, dining room and a café area with a balcony. The service has an enclosed garden and animals to the rear of the property.

About the inspection

This was an unannounced inspection which took place on 7, 8 and 14 August 2023. 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.

To inform our evaluation we:

- spoke with 13 people using the service and three family members/representatives
- spoke with staff and management
- observed practice and daily life
- assessed the environment of the service
- reviewed documents.

Key messages

- The service was calm and organised.
- Communal facilities were well used.
- People appeared well groomed and they were well cared for.
- Improvements were needed in the assessment of pain.
- Teamwork was good and people worked together to ensure that residents' experiences were as positive as possible.
- A more effective process was needed to calculate how the home is staffed.

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?	5 - Very Good
How good is our setting?	5 - Very 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 service as performing at a good level. This means that there were a number of important strengths which when taken together clearly outweigh areas for improvement. The strengths had a significant positive impact on people's experiences and outcomes.

There were kind, caring and patient interactions between staff and residents. Staff were respectful to people using the service, each other and visitors to the service. People could be assured that they were respected, cared for and treated as an individual. Staff made sure that they paid attention to how people's clothing was cared for, which looked neat and well stored and laundered. Bedrooms were well maintained, welcoming, personalised and comfortable.

Some pillows needed to be replaced and this was being carried out during the inspection.

People in the home were able to get the most out of life because staff knew them well and supported them to make decisions and choices about how to spend their time. A dedicated activity team helped people to maintain and develop their interests as well as try new things.

There were a good selection of activities including arts and crafts, games, regular physical activities and animals to visit in the garden. The well kept garden and balcony areas provided people with fresh air and easy access to outdoor space. People enjoyed visiting the animals kept by the home, planting flowers and walking in the garden or along the canal.

The activities team were adding to and improving outings and events for people. Taking part in meaningful activities supports people to be involved, valued and improves their overall wellbeing.

Visitors were encouraged and the bistro provided a large relaxed space where people could meet and have refreshments. Communal areas and cinema room, bistro area and cocktail bar provided additional spaces where residents could choose to relax and spend their time out with their bedroom.

There was good history of the residents and relevant contacts of people who should be involved in discussions about their care. Appropriate referral and links to other health care professionals helped people in the service maintain good health.

Residents' wellbeing benefitted from screening for a range of health issues such as weight loss, skin damage and falls. Effective analysis and changes to care had resulted in recent improvements in the number of residents who had fallen. These areas of care were well monitored and managed.

Residents benefited from having a range of equipment to prevent pressure damage to their skin. Improvements were needed to ensure that specialist mattresses were always maintained at the correct setting.

Staff knew the importance of providing a pleasant mealttime experience to maximise people's appetite and nutritional intake. Staff took time to support people who needed assistance with eating and drinking in an unhurried and dignified way. One to one assistance was carried out well with staff seated comfortably to help.

Offering people a visual choice at mealtimes can help to encourage eating and drinking, and make sure that they can have something they are tempted to eat. Visual choices were not always consistent to make sure they were beneficial. Improvements were planned to ensure all residents who would benefit from being offered a visual choice would receive it.

Topical medication should be individually named and dated when opened to ensure safe and effective use. Whilst this was the practice in the home, it was inconsistently applied.

This was subject to an area for improvement at the last inspection. This is carried forward with additional areas for improvement in medication. **(Area for Improvement 1)**

To ensure safe staffing levels, the provider and manager need to ensure that there is an effective process to calculate how many staff are needed to meet people's needs. More work was needed to make sure staffing could be calculated more comprehensively.

Managers planned to look at dependency calculations and staffing needs. They have been guided to our safe staffing information.

Areas for improvement

1. 1. The service must ensure that people experience safe and effective medicine administration and management, in a manner that protects the health and wellbeing of service users.

In order to achieve this the service should ensure that:

a) medication is administered as instructed by the prescriber

b) pain assessment charts and body maps for the use of patches should be in place

c) regular auditing of medication takes place, including actions taken when medication errors occur

d) medications which are creams and liquids should have the date opened recorded on the packaging so they are not used after expiry date.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'Any treatment or intervention that I experience is safe and effective.' (HSCS 1.24)

How good is our leadership?

5 - Very Good

The performance of this statement was evaluated at very good. This means that there were major strengths in supporting positive outcomes for people. This performance did not require significant adjustment.

Residents are well informed what is happening in the home. Proposed changes were being introduced to the use of the bistro as a result of consultation and discussion with people.

All staff were encouraged and supported to contribute to quality assurance which helps promote responsibility.

There was a clear understanding of what should be improved in the service and the needs of people using the service were key drivers for change.

Audits of care i.e. falls, skin care and nutrition were monitored monthly and appropriate action taken based on the findings. These all help to keep people well and identify when there may be a problem and can be resolved quickly.

A range of audits and action as a result of the audits helped keep people safe and well cared for.

Information on how to make a complaint did not always state that a complaint could be made to the Care Inspectorate at any time. The manager agreed to rectify this.

How good is our staff team?

5 - Very Good

The performance of this statement was evaluated at very good. This means that there were major strengths in supporting positive outcomes for people. This performance did not require significant adjustment.

Staff recruitment was safe. Staff had been recruited for their values and commenced employment only after all pre-employment checks had been completed and checked by the manager. The process was well organised with recruitment staff supporting the manager to ensure a smooth and efficient process.

Previous employers were approached for references and these were followed up to ensure previous knowledge, skills and conduct were considered. Gaps in employment history were appropriately explored.

The manager was knowledgeable about and made appropriate checks with government and regulatory bodies prior to making offers of employment. This ensured that people using the service were safe.

New staff were clear about their roles and responsibilities and were assigned a mentor during their induction period. This helped to prepare new staff and make sure they were able to provide a high standard of care to residents.

How good is our setting?

5 - Very Good

The performance of this statement was evaluated at very good. This means that there were major strengths in supporting positive outcomes for people. This performance did not require significant adjustment.

Residents benefited from a warm, comfortable and homely environment with access to fresh air by way of the gardens and balcony areas. The environment was clean, tidy and well cared for.

The home was welcoming and inviting. Bedrooms were personalised and tidy. This gave people a sense of being cared for and valued.

Additional facilities such as the bistro area, family dining room and cocktail bar gave people pleasant spaces to meet with family and friends.

The top floor space was well used and comfortable with facilities for tea and coffee. People had the opportunity to have family events in a private dining room which was very inviting.

The grounds were well maintained and people used them to plant, walk and meet the animals.

Alterations had been made to ensure medication storage was temperature controlled and this was well organised.

A range of audits were used covering the maintenance system.

Whilst there were appropriate checks and timescales for each, we felt that there was insufficient information to ensure that all checks were complete for example, all beds or hoists and slings were stated to be checked but we did not see any inventory which could be cross matched to make sure all were completed. An inventory of all equipment would reduce the risk of a piece of equipment being missed from routine checks. Detailed instructions of what should be checked as part of routine in-house maintenance was needed for equipment such as wheelchairs. This will ensure it is safe and well maintained.

This was accepted and agreed that this would be put right. A new maintenance person was being recruited.

The call bell system was being repaired and not in working order. An hourly check sheet was put in place for each resident to keep them safe and reassured.

We could not assess the area for improvement relating to this from the last inspection and have therefore carried this forward. (Area for Improvement 1)

Areas for improvement

1. To support people's health and wellbeing and that people feel respected and listened to, the service should improve their response time to call bells from people experiencing care.

The service should ensure that:

- a) Their response time to call bells from people experiencing care is improved.
- b) Their call bell system is audited regularly to see when and where responses need improving and actions put in place to improve responses.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state that: 'I am confident that people respond promptly, including when I ask for help.' (HSCS 3.17).

How well is our care and support planned?

4 - Good

We evaluated this service as performing at a good level. This means that there were a number of important strengths which when taken together clearly outweigh areas for improvement. The strengths had a significant positive impact on people's experiences and outcomes.

Care plan records were being moved from a paper based system to an electronic system. Information in the care plans was accurate, up to date and was observed being put into care practice. Some plans contained good information about people's likes and dislikes and things that were important to help staff deliver good care in way that people wanted. However, not all care plans were completed to the same standard. Some information was missing for example, how staff should best support a resident experiencing pain or emotional distress.

Important information about when to contact relatives, legal information about adults with incapacity certificates and who held relevant powers with power of attorney was also missing from some plans. Some sections had the potential for staff confusion by referring to mental health legislation that does not apply in Scotland. This needs to be rectified.

Adding relevant details about topical and covert medication and the type of pressure mattress in use, would enhance the consistency of care provided and help to keep accurate records.

Making improvements by including pain assessments for people who need support to manage pain and clear plans for people who experience stress and distress, would allow staff to work with other professionals to help optimise symptom management and wellbeing. Assessment and recording of findings would help optimise care for those experiencing pain.

Setting clear goals and evaluating the effectiveness of care regularly with residents helps ensure care is relevant and directed by people receiving care. Improvements to care planning and recording were agreed with the manager.

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 must ensure that people experience safe and effective medicine administration and management in a manner that protects the health and wellbeing of service users.

In order to achieve this the service should ensure that:

- a) medication is administered as instructed by the prescriber
- b) regular auditing of medication takes place, including actions taken when medication errors occur
- c) medications which are creams and liquids should have the date opened recorded on the packaging, so they are not used after expiry date.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'Any treatment or intervention that I experience is safe and effective.' (HSCS 1.24).

This area for improvement was made on 24 May 2023.

Action taken since then

Further work by the service was needed by the staff to ensure topical medication was dated when opened and administered as prescribed. This area for improvement is repeated. See 'How well do we support people's wellbeing?'

Previous area for improvement 2

To support people's health and wellbeing and that people feel respected and listened to, the service should improve their response time to call bells from people experiencing care.

The service should ensure that:

- a) their response time to call bells from people experiencing care is improved
- b) their call bell system is audited regularly to see when and where responses need improving and actions put in place to improve responses.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state that: 'I am confident that people respond promptly, including when I ask for help.' (HSCS 3.17).

This area for improvement was made on 24 May 2023.

Action taken since then

The call bell system was being repaired during inspection and therefore not in working order. An hourly check sheet was put in place for each resident to keep them safe and reassured.

A full audit of all of the call bells took place by an engineer. Some remedial work was taken immediately. A plan of action had been drawn for all of the additional repairs and to prevent future damage to the equipment causing failure of the call bell system. See 'How good is our setting?'

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
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	4 - 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?	5 - Very Good
3.1 Staff have been recruited well	5 - Very Good
How good is our setting?	5 - Very Good
4.1 People experience high quality facilities	5 - Very 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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