

Woodlands Nursing Home Care Home Service

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Type of inspection:
Unannounced

Completed on:
11 July 2023

Service provided by:
Peacock Medicare Ltd.

Service provider number:
SP2003002457

Service no:
CS2003010679

About the service

Woodlands Nursing Home is owned and managed by Peacock Medicare Ltd. The service is registered with the Care Inspectorate to provide care to a maximum of 82 older people.

The service has four units, two on the ground floor and two on the first floor. The upper level is accessed by lift or stairs. Each unit has individual lounges and a shared dining area. There are additional toilet and bathing facilities. All bedrooms are for single use and have en suite toilet and washing facilities. There is a separate laundry, main kitchen, offices and staff facilities. There is also an attractive, well-maintained garden and car parking facilities.

About the inspection

This was an unannounced inspection which took place on 3, 4 and 5 July 2023. The inspection was carried out by two inspectors from the Care Inspectorate and an inspection volunteer.

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 33 people living in Woodlands and nine of their relatives
- spoke with 12 staff and management
- observed practice and daily life
- reviewed documents
- received feedback from two professionals.

Key messages

- Staff were compassionate, reassuring and respectful in their interactions with people living in Woodlands, and people told us they felt happy and cared for living in the home.
- There were robust systems in place to monitor standards of care to help identify risks and drive improvement.
- Upholstery and wooden surfaces were badly worn due to use of additional cleaning products during the pandemic. This meant that these items were no longer able to be cleaned to a satisfactory standard to meet infection prevention and control guidelines. We made a requirement about 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 setting?	3 - Adequate

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 made an overall evaluation of good for this key question, as there were strengths that clearly outweighed areas for improvement.

Staff were compassionate, reassuring and respectful in their interactions with people living in Woodlands, and people told us they felt happy and cared for living in the home.

One person told us, *"Staff are respectful. Some are exceptional. Some of them I would adopt"*.

Other people told us, *"We've got great carers"* and *"The food is good, there's a choice of two meals and if I don't like either they'll make me an omelette or something"*.

Relatives told us, *"The staff are friendly"* and *"The food is good"*.

The standard of care in one unit was not as high as in others and we discussed this with management. We were confident by their response that they would put in place additional support and observations of practice and review the distribution of experienced staff, to ensure improvement in this area.

There were a range of activities available to people living in Woodlands. The activities co-ordinator and many other staff contributed to meaningful activity and interaction with people.

One person told us, *"The activities coordinator is brilliant. I've been out on a canal trip and to Beecraigs and been to a few good birthday parties with entertainment"*.

Some people said that activities were good but used to be better.

The garden space was a lovely area with a garden room for people and their relatives to use and we spoke with management about ways in which they could increase its use for everyone living in the home.

Most staff worked well together in a professional manner and knew enough about people to understand what was important to them and to build meaningful relationships with them. Management accepted that this was not the case in all areas of the home and were committed to ensuring that all staff achieved this standard so that people received personalised and meaningful support and interactions.

People's health benefitted through regular input from health professionals such as Speech and Language, Occupational Therapists, Dieticians, and the GP. We saw good evidence that staff in the home took quick action whenever people required health input.

Medication was managed well, in line with best practice guidance.

Professionals we spoke to said they had a good relationship with the home. They said that any issues were easily sorted with a meeting and that staff were responsive and followed any guidance well.

A relative told us, *"[my relative] has been out for a few hospital appointments and the home have organised transport with a taxi that takes him with his wheelchair"*.

Additional fortification was available with meals but not always offered and people who needed a modified diet were provided with this but were not always given a choice of meal. We were confident in the management team's plans to make improvements in these areas.

Increased fluids were encouraged during the recent period of hot weather and ice lollies were available for residents and staff.

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. An evaluation of very good applies to performance that demonstrates major strengths in supporting positive outcomes for people.

The management team was committed to ensuring people were well cared for and were well supported by experienced, skilled and knowledgeable staff.

People could be assured that there were systems in place to monitor standards of care. Staff and management demonstrated that they had the skills, capacity and systems in place to identify risks and drive improvement.

There were robust systems in place to monitor standards of clinical care within the home, in particular audits for nutrition, weight loss, pressure area care and falls. Actions identified from audits were carried out and well documented and we could see that these had greatly improved health outcomes for people. Clinical oversight throughout the home was very good.

Staff said management were approachable and supportive. There were regular meetings to keep staff up to date with developments within the home and to share the results of audits and recognise good practice.

Staff training and development opportunities were comprehensive and up to date and their practice reflected this. People could be confident that recruitment was carried out in line with safer recruitment guidance.

Incidents and complaints to the service were taken seriously and well-managed with appropriate actions thoroughly documented.

Management were responsive to any concerns which we raised during inspection, and took immediate appropriate action to resolve these.

How good is our setting? **3 - Adequate**

We evaluated this key question as adequate. An evaluation of adequate applies where there are some strengths but these just outweigh weaknesses. While the strengths had a positive impact, key areas need to improve.

We found the home to be spacious and comfortable with plenty of room for people to move around.

The general environment was tidy and free from any offensive odours. Equipment throughout the home was clean with a system in place to maintain it.

Leather sofas and upholstered chairs were badly worn. The additional cleaning products used on wooden surfaces during the pandemic had resulted in wood surfaces being severely degraded. This meant that these items were no longer able to be cleaned to a satisfactory standard to meet infection prevention and control good practice guidance. There were plans in place to replace some of these items and we made a requirement about this. **(See requirement 1.)**

Safety checks were regularly completed and any repairs were carried out quickly. This meant people could be confident their environment was safe and secure.

Some areas of the home would benefit from being refurbished and this was done in bedrooms before new residents moved in. There were no documented plans for refurbishment of bedrooms for people already living in the home so we made an area for improvement about this. **(See area for improvement 1.)**

Some areas of the home did not appear to be in use or were not used in a way which benefitted the people who lived in the home and we spoke to management about reviewing the use of space within the home. We were confident that this would be actioned so that the home could offer people a variety of private and communal areas which they could choose to use if they wished.

Many of the bedroom doors were closed, with no option to keep these open if people wished. We were confident in the plans the service had to introduce appropriate mechanisms to bedroom doors so that people could choose to keep their doors open if and when they wished.

Signage throughout the home needed to be updated and this was actioned as soon as we highlighted it to management.

Requirements

1.
By 10 January 2024 the provider must ensure that infection prevention and control is not compromised in the home by ensuring that degraded furnishings and fabrics including but not limited to wooden handrails, chairs and sofas, are adequately repaired or replaced.

This is in order to comply with Regulation 4(1)(a) and (d) (Welfare of users and procedures for the prevention and control of infection) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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

'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment' (HSCS 5.24).

Areas for improvement

1. To improve the setting, the provider should,

a) plan a programme of refurbishment that brings the setting up to the standard needed to promote and enable people's independence and comfort

b) include clear timescales for completion.

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

'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment' (HSCS 5.24).

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 keep people safe, the provider should introduce a system to ensure regular, robust checks are made of the environment and the equipment, to meet current legislation. Any system should include a process of escalation when equipment needs attention or repair.

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

'my environment is secure and safe' (HSCS 5.17); and

'I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment' (HSCS 5.22).

This area for improvement was made on 31 August 2022.

Action taken since then

The provider now has in place a system to ensure regular, robust checks are made of equipment to meet current legislation. This system includes a process of escalation when equipment needs attention or repair.

However, this has not resulted in improved outcomes for people, as the environment still needs substantial upgrading to meet Health and Safety Standards and IPC. **(We have made a requirement about this in the section '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	4 - Good
1.2 People get the most out of life	4 - 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 setting?	3 - Adequate
4.1 People experience high quality facilities	3 - Adequate

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