

# Roselea House Care Home Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
22 September 2023

**Service provided by:**  
Holmes Care Group Scotland Ltd

**Service provider number:**  
SP2020013480

**Service no:**  
CS2023000026

## About the service

Roselea House is registered to provide nursing care to 20 older people with dementia. The care service is based in a modern, purpose-built, single-storey building, which is owned by the Holmes Group. The service provides accommodation in 20 single ensuite rooms, along with a pleasant lounge and separate dining area. A well kept garden area is located to the rear of the property. The home is situated within the town of Cowdenbeath and has easy access to local amenities. There were 17 people living in Roselea House at the time of our inspection.

## About the inspection

This was an unannounced inspection which took place over 19 and 20 September 2023. The inspection was conducted by one inspector 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 six people using the service and six of their family members
- spoke with six staff, plus management
- spoke with two visiting professionals
- observed practice and daily life
- reviewed documents.

## Key messages

People were care for with kindness, by staff that knew them well.

Management was visible and well led.

People were supported to have a meaningful day.

The garden area required development to support easier access for people living there.

The mealtime experience was positive with the provision of high-quality food.

Families told us they felt valued and welcomed within the home.

## 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 leadership?	5 - Very 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 evaluated this key question as **very good** as the identified strengths supported positive outcomes for people's health and wellbeing.

We observed warm and caring interactions between staff and people during our inspection. Staff knew people well and were responsive to their needs. Families voiced high satisfaction with the care their loved ones were receiving with comments such as, 'exceptional care' and 'they see the person.' This improved people's outcomes and experiences.

People enjoyed high quality, home cooked meals. People could access snacks and drinks freely throughout the day. For people who required adapted diets such as pureed meals, the presentation was very good, with the meal looking appetising. Staff were observed supporting people discreetly as required. Mealtimes were relaxed, and in particular the afternoon high tea was a great social occasion for people and their families should they wish to join too. Creating a positive dining experience supports people's dietary intake.

People had access to a range of activities throughout the day which included being involved in everyday tasks including folding laundry or setting tables. People were supported to access their local community such as going shopping or attending local tea dances. For some people we observed doll therapy being used effectively to provide comfort and reduce stress and distress. Staff were proactive in engaging with people, supporting them to have a meaningful day. This supported positive outcomes for people's overall health and wellbeing.

There is an attractive, enclosed garden but access to it was dependent on staff facilitating this. To support people being able to have free access to the outdoor space the provider is reviewing how they can safely do this. We discussed this during the inspection, including the consideration of the provision of a covered area for people to access the garden throughout the year. We made an area for improvement relating to the garden use as this has been a long standing identified area of development, **see AFI 1**.

The manager and staff team had a good overview of people's needs. Support plans were regularly reviewed and contained detailed information on people's current health needs. People received timely referrals for any health appointments, with health colleagues describing the staff as 'very proactive.' Support plans provided staff with up to date and relevant information to direct the care. Some families commented on the high level of kindness that was delivered, 'it is one of the most important things.' People were being supported by staff who were able to provide person centred care.

Medication was on the main managed well with the occasional error being noted. The manager is aware of this and addressing this through regular audits and staff training. People's medication was regularly reviewed with a decrease in antipsychotic medication being recorded since January this year. Management and the senior staff demonstrated an awareness of the importance in working together with their health colleagues. People were supported to receive the appropriate medication for their current needs. This is beneficial for people's physical and mental health.

The environment was clean, fresh, and homely. People had personalised their bedrooms and there was discreet signage to aid people's orientation around the home. People had individualised memory boxes outside their rooms to help them identify their own room. It was acknowledged that the lounge can on occasion be crowded, and the manager had developed small break out spaces in the corridors which we observed being used. Further exploration is required to optimise the space available to them to enable people to have a range of choices as to where they wish to spend their time.

### Areas for improvement

1. To support people's needs and wishes being met, the provider should ensure that people can use the garden whilst being safe, in a way that promotes independence.

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

'My environment is safe and secure' (HSCS) 5.17 and 'If I live in a care home, I can use the private garden' (HSCS) 5.23.

### 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**.

For the purpose of this key question, we focused on quality assurance. Quality assurance are checks that make sure any issues are identified, and action taken to support improvements.

Staff did not start work until all the necessary pre-employment checks were completed. There was a range of training available with the manager being proactive in sourcing specific training for the needs of the service. Staff valued this and told us that the training opportunities supported their learning. A number of the staff had recently received awards from the Scottish Care Awards, including carer of the year, recognising the high level of dedication demonstrated by the team. Staff told us they felt valued by management and the provider as a whole. Comments from staff included, 'this is a great place to work' and 'we all work well as a team.' Providing a culture of continuous learning supports staff development and positive outcomes for people.

There were a range of robust audits in place which were regularly reviewed and evaluated by the manager and senior staff. This included falls, restrictive practices, and support planning. The external quality team supported this process of improvement and learning.

Staff received regular supervision and described an open door policy with regards raising any concerns or issues. Staff were aware how to report any concerns and were confident that these would be dealt with appropriately. Working in this way helps to keep people safe.

There is a service improvement plan in place which would benefit from evidencing people and families' views to ensure that they are the main drivers of any change. We made an area for improvement relating to this, **see AFI 1**.

## Areas for improvement

1. To support a culture of responsive and continuous improvement, which meets the health and wellbeing needs of supported people, the provider should ensure that people and their representatives' views, suggestions, and choices are gathered on a regular basis and that this information is used to improve people's outcomes and experiences.

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

'I am supported to give regular feedback on how I experience my care and support and the organisation uses learning from this to improve' (HSCS) 4.8.

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

Detailed evaluations

How well do we support people's wellbeing?	5 - Very 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	5 - Very Good

How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good

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