

# Marian House Care Home Service

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The Grange  
Edinburgh  
EH9 2HE

Telephone: 01316 684 743

**Type of inspection:**  
Unannounced

**Completed on:**  
11 October 2022

**Service provided by:**  
Viewpoint HA

**Service provider number:**  
SP2003002464

**Service no:**  
CS2006136953

## About the service

Marian House is a care home for 35 older people and was registered with the Care Inspectorate in April 2011. The provider of the service is Viewpoint Housing Association Ltd. who also have other care homes across Edinburgh.

The home is situated in the Grange area of Edinburgh, close to bus services and local amenities in nearby Marchmont. There is a small car park at the front of the home and an attractive enclosed garden to the rear that is accessible from the ground floor lounge.

Accommodation is provided over two floors with stairs and lift to the first floor. Each floor has a sitting room and dining room with a small kitchen area. All bedrooms are single with en-suite facilities and there are bathrooms and toilets on each floor. Some ground floor rooms have large windows, all with a view to the front or rear gardens. Catering and laundry services are shared with the adjoining St. Raphael's Care Home.

There is a Craft Café available to people in the home. This is a facility run in partnership with Impact Arts and provides a place where people can express their creativity and socialise.

## About the inspection

This was a full inspection which took place on 5 and 7 October 2022. 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
- intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with 12 people using the service and six of their family members
- spoke with 15 staff and management
- observed practice and daily life
- reviewed documents
- spoke with a visiting professional.

## Key messages

- People's health and wellbeing was at the heart of service delivery.
- The home was very clean and homely.
- People and their families were very satisfied with the service provided.
- Infection prevention and control was very well managed.
- The home actively promoted and enabled meaningful contact for people.
- Quality assurance was well led.

## 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 made an evaluation of very good for this key question. The service had major strengths in supporting positive outcomes for people. There were very few areas for improvement. Those that did exist had minimal adverse impact on people's experiences and outcomes. The service worked within a culture of continuous improvement to strive for excellence.

Staff knew people well, including their likes/dislikes and preferences. We observed warm, encouraging, positive relationships between people receiving support and their staff. People told us that they were happy living in the home and that staff were very caring, friendly and attentive. We spoke to family members who told us "it's excellent", "I can't fault them", "I take my hat off to them", "the staff and management are very responsive and approachable" and "it's a lovely, clean home and I'm so pleased my mum is there". This meant that people were respected and treated with compassion and dignity as an individual.

People's health and wellbeing benefitted from their care and support. We spoke with a visiting professional who told us that staff and management knew people well and made timely and appropriate referrals when further medical support was required. The service used a number of different health monitoring tools relevant to people's needs. Medication administration was well managed and recorded. Support with finances was also well managed and recorded. There was a well organised record of any accidents or incidents that had occurred which were detailed and clear. This meant that any treatment or intervention a person experienced was safe and effective.

People enjoyed positive dining experiences. People told us that the food is good and they enjoy it. People told us there's a choice and if they don't like something they can get something else. Staff knew people's dietary needs well and interacted warmly with each person, ensuring their individual needs and preferences were met. There were some areas that could be improved that would further improve outcomes for people and make mealtimes more of an occasion. There was a system in place to routinely gather people's opinions and feedback on meals, which the provider will strengthen and use to support a review. The dining experiences people had meant that their personal preferences were respected and they were able to enjoy unhurried meal times in as relaxed an atmosphere as possible.

Care plans had clear information on all important areas of people's lives and they supported staff to provide a consistent, personalised approach. People's likes/dislikes and preferences were clear throughout the plans and people's personalities shone through. Daily record keeping is good however they can often be task orientated and not reflect the person's experience or outcomes. The provider was already aware of this and were actively taking steps to improve. This meant that people's needs, as agreed in their personal plan, are fully met and their wishes and choices are respected.

People benefitted from a variety of planned activities. The provider was actively reviewing and developing their activities programme. There was a dedicated team of activity coordinators and volunteers who were passionate about supporting people to get the most out of life. As part of the review, we asked the provider to consider day-to-day quiet times for people and ensure there is sufficient opportunity for everyone. People told us they'd enjoyed trips on a barge and going to the theatre recently but also enjoyed visits to the home by entertainers, a Therapet dog and exercise classes. People also told us they enjoyed having access to the Craft Café where they could express their creativity and socialise. This meant that people could 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.

The service actively promoted meaningful contact between people and their families/friends. Families told us they received regular updates from the management team throughout the pandemic informing them of any changes to visiting the home. The service used creative solutions to ensure people maintained contact during periods of lockdown. There were no restrictions to visiting times or durations at the time of inspection, which was in line with current guidance. This meant that people could rely on the service to support relatives/friends to see them in person day-to-day and be directly involved in providing their care and support.

People's health and wellbeing benefitted from safe infection prevention and control practices and procedures. We observed plentiful stocks of PPE and staff told us they had enough to meet their needs. Staff undertook internal and external donning and doffing training with regular practice observations by management, to ensure consistent good practice. The home was very clean and homely. Fixtures, fittings and furnishings were well maintained to a high standard with a rolling programme of upgrades. There were clear systems in place to ensure cleaning was recorded and regularly audited. This meant that people experienced an environment that was well looked after with clean, tidy and well maintained premises, furnishings and equipment.

### How good is our leadership?

### 5 - Very Good

We made an evaluation of very good for this key question. The service had major strengths in supporting positive outcomes for people. There were very few areas for improvement. Those that did exist had minimal adverse impact on people's experiences and outcomes. The service worked within a culture of continuous improvement to strive for excellence.

People benefitted from very good leadership because quality assurance and improvement was led well. The management team regularly undertook numerous quality assurance audits throughout the service. These audits checked that health charts, medication and finance records and many other vital monitoring tools were complete, accurate and fit for purpose. Managers used the audits to spot errors or identify improvements. This was used to guide staff development, whilst ensuring compliance with local policies and procedures, best practice guidance and legislation.

Staff received regular training and spoke highly of the content. Staff were encouraged to develop their knowledge and skills. All staff, including domestic, kitchen and administration staff, had completed dementia training. A number of staff, including the deputy manager, were qualified as moving and handling instructors, which meant that staff had regular access to personalised training and competency observations. This meant that people could have confidence that their staff were trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes.

People's views were sought through regular residents meetings to ensure people had the opportunity to guide the development of the service. Staff views were sought through team meetings and staff surveys. Keyworkers also held regular meetings to ensure people's support was right for them based on up-to-date information. This meant that people experienced high quality care and support because staff and management had the necessary information and resources.

Whilst the provider had a number of areas they were progressing in the spirit of continuous improvement, there was not a development plan in place. We asked the provider to collate the information including actions, timescales and review points as part of an ongoing development plan. Having a development plan in place ensures creative ideas plans are not lost, are kept relevant and remain a focus. People did however,

benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.

## 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
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
1.4 People experience meaningful contact that meets their outcomes, needs and wishes	5 - Very Good
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	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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