

Care service inspection report

Follow-up inspection

St. Rognvalds House Care Home Service

off Old Scapa Road
Kirkwall

Service provided by: Orkney Islands Council

Service provider number: SP2003001951

Care service number: CS2003009102

Inspection Visit Type: Unannounced

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Contact Us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

www.careinspectorate.com

 [@careinspect](https://twitter.com/careinspect)

1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Information in relation to all care services is available on our website at www.careinspectorate.com

This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

St. Rognvald's House is registered to provide care for up to 40 older people on a permanent basis and four on a respite/holiday basis. The home is provided by Orkney Island Council (OIC). The care home is based around a central courtyard which has a water feature and aviary. There are also landscaped garden areas surrounding the buildings. The accommodation is split into St. Magnus for physically frail residents and St. Mary's for people with dementia. Each unit is made up of wings that have single rooms, toilets, shower rooms and bathrooms. Twenty eight bedrooms have ensuite facilities. There are also various sitting areas, two dining areas and office accommodation, kitchens and laundry.

As stated on the OIC website: St. Rognvald's staff try to create a happy and homely environment where individual's rights, freedom of choice, privacy, dignity and independence are promoted, respected and maintained. Residents are encouraged to lead as independent and normal a lifestyle as their abilities allow. All residents are encouraged to participate in the planning of their care needs and the formation of their individual care plans to reflect their individual choices and preferences.'

2 How we inspected this service

We wrote this report following an unannounced inspection, which was carried out by one care inspector. An inspector volunteer (IV) accompanied the inspector on the first day. The role of the IV was to speak to the residents and their relatives and find out their views. The IV compiled a report of the conversations she had with her impressions of the home.

We visited the home on 15 and 17 March 2016 between the hours of 10am and 7pm. We provided feedback to the registered manager at the end of the visit. The purpose of this visit was to follow up on the recommendations and requirements made from the last visit in December 2016.

During this visit we gathered evidence from various sources, including the following:

We spoke with:

- six people who used the service
- four relatives
- registered manager
- two senior social care workers
- five social care workers/assistants
- one housekeeper.

We looked at:

- personal plans of people who use the service
- formal care reviews and records
- accident and incident records
- medication records
- risk assessments
- notice boards
- health and safety records
- maintenance records
- minutes of residents' and relatives' meetings
- minutes of staff meetings.

We observed staff interacting with residents and looked round the building and grounds and at the equipment used.

- Consideration of the National Care Standards - Care Homes for Older People.

3 Taking the views of people using the service into account

During this visit the inspection volunteer spoke with six residents. She has reported their comments under the four inspection themes and meals and activities.

Quality of Care and support

"I am happy with the care I get."

"I'm just fine here."

"You fit in with the situation."

"I am well looked after."

"I'm happy here, it's nice."

"It's a fine place to live."

Quality of the environment

"It's a nice place to live, my room is kept clean and the wet room is nice and roomy. I have my own bedding."

"I stay in my room most of the day, I don't like the dado round the wall in my room."

"I have a comfortable bedroom with shower."

"I have a lovely bedroom. I use the communal bathroom."

"It's always nice and tidy. I have my own shower."

Activities

"We go out to other homes and get together for singing. I like the art and craft sessions. We went to the pantomime at Christmas."

"I prefer to stay in my room, sometimes I go to the lounge."

"I like to stay in my room and watch TV. I don't go for the activities."

"I enjoy the various entertainment we have. I get trips into town and I go to the hairdresser here."

"I go out in the car with staff sometimes and my grandson takes me out sometimes."

Meals

"You are given the choices on the day. I like the food, I can ask for a drink at any time."

"The meals are lovely, Chef makes the most marvellous soup. I have a fresh jug of juice in my room each day."

"The food is all right."

"I'm not keen on the food but you do get choices."

"It's nice food , you choose what you want from the menu, they use local produce."

"I enjoy the meals, I have no complaints."

Quality of staffing

"They are friendly I have a good banter with them."

"They are grand, very nice girls, they take the time to speak to you."

"If the staff are busy they take a while to attend to you."

"They are friendly, helpful and willing."

"They are fine."

"They are nice people. If I need anything or want to know something they will help."

Quality of management

Residents and relatives agreed that the manager is friendly and approachable; that they could go to her to have a chat or with any problems and that they were kept informed of their relative's progress.

4 Taking carers' views into account

The inspection volunteer spoke with four relatives. She has reported their comments under the four inspection themes and meals and activities.

Quality of care and support

"My relative is happy here, I am quite satisfied with the care."

"They do a good job."

"Quite good."

"Good but sometimes they are too busy."

Quality of the environment

"The layout of the home means they have a long walk along corridors to get to the dining room and lounge areas."

"The cleanliness is of a good standard."

"My relative is bedridden, they are kept clean and the room is always clean."

"They were able to choose their own décor for their room."

Activities

"They have various activities and outings which my relative enjoys. It's good to see the efforts made for special days e.g. Valentines and recently St. David's day."

"They have been taken out in the mini bus. The last key worker did one-to-one activities in their room. I'm not sure if that happens now."

"They are well catered for - there is the hairdresser every week, a church service every week and the chiropodist and community nurse visit regularly."

Meals

"My parent enjoys the meals. I am offered tea/coffee when I visit."

"They are given choices to encourage them to eat."

"My relative eats in their bedroom. The meals are often cold when they arrive. They need help with feeding; I had to ask the staff to assist."

Quality of staffing

"It's such a friendly oriented place - I have no complaints at all."

"They are very good and helpful but don't have time to sit and talk to residents. If called, it can take a while sometimes for them to come."

"Some are better than others but I would say my relative gets good attention."

"They are friendly, a lot of them are very young."

Quality of management

See above.

5 What the service has done to meet any requirements we made at our last inspection

Previous requirements

1. The provider must ensure that care plans are wholly reviewed with the resident if possible or their representative at least once in a six monthly interval, or when requested to do so by the resident or representative or when there has been significant change in a resident's health, welfare or safety needs.

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011/210 5 (1) (2) (a) (b) Personal Plans

Timescale: 2 months from receipt of report

This requirement was made on 17 December 2015

There had been very good progress to meet this requirement with only a few left to do. We looked at a dedicated folder for reviews as well as individual care plans and talked to staff.

It is important the whole care plan is reviewed with the resident if possible and/or a close family member at regular intervals to ensure that the plan is meeting the resident's changing needs and wishes.

Not Met

2. The provider must ensure:

a) that records of controlled drugs held within the care home meet best practice standards.

b) that staff competency is assessed at intervals. Management should consider the competency of relief staff who may only occasionally work within the home.

c) that all care staff who administer medication have training that is in line with accepted practice.

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011/210 Welfare of users

Timescale:

a) 2 weeks from receipt of report

b) 3 Months from receipt of report

c) 6 months from receipt of report.

This requirement was made on 17 December 2015

We found that the first part of the requirement had been met. The community nurses and the care home management had a meeting and had agreed a better method of recording controlled drugs that was continuing to be used. We could see that there was consistency of recording.

There had been some progress with the second section with a few assessments of competency carried out of staff members who administered medicines. There had been a recent change within the seniors and it was hoped that all who administered medicines would have their competency checked at intervals. This is to ensure that the staff member continues to be competent. This is particularly important for relief staff who are not regularly on shift.

A new senior had agreed to work to implement the new training for care workers who administer medication. She planned that staff would begin this training soon.

Not Met

3. The provider must, having regard to the size and nature of the care service, the statement of aims and objectives and the number and needs of service users – ensure that at all times there are sufficient suitably qualified and competent persons as are appropriate for the health, welfare and safety of residents.

This is in order to meet the Social Care and Social Work Improvement Scotland (Requirement for Care Services) SSI 2011/210 Regulation 15 (a) Staffing

Timescale: 1 month from receipt of report.

This requirement was made on 17 December 2015

Management have tried to recruit though there have been further problems with staff sickness and staff leaving. All staff indicated that often shifts are short of one and occasionally two staff. Management expect that this situation will gradually improve as new staff begin working. This requirement to be continued.

Not Met

6 What the service has done to meet any recommendations we made at our last inspection

Previous recommendations

1. It is recommended that management ensure:

a) That an inventory of all pressure relieving equipment is created with information how it is used and any other information staff should need to be able to use the equipment.

b) Care plans should have the information about the pressure setting of the active mattress for the resident that was using it.

c) There should be a system in place to make sure that foam pressure relieving mattresses are regularly turned and cleaned.

National Care Standards, Care homes for older people - Standard 5: Management and staffing arrangements.

This recommendation was made on 17 December 2015

This recommendation was met. Care staff need to keep care plans up to date if the active mattress is changed to another brand with different types of settings.

2. It is recommended that improvements are made to the dining experience of residents, and more effective use is made of fluid charts as outlined in the report.

National Care Standards, Care homes for older people - Standard 13: Eating well.

This recommendation was made on 17 December 2015

There had been some action to meet this. A new, large, easy to read clock had been installed in the large dining room. The part of the room not used for dining was now more obviously a sitting area, giving a more welcoming and comfortable atmosphere.

The inspector volunteer found the dining rooms very quiet with little staff conversation with residents. Skilled interventions by staff can support residents to have a pleasant, social experience at mealtimes.

We found fluid charts with records of several days on the one chart with the entries not totalled at end of day. There was no record of the target fluid total that they were aiming to give. Some charts indicated a very low intake of fluids. Therefore this recommendation is not met.

3. It is recommended that management consider improving the activity provision within the home on a day-to-day basis. Residents should be able to be engaged in some meaningful activity for some part of the day. Consideration should be given to leadership and training to improve delivery of this essential part of the care service.

National Care Standards, Care Homes for Older People – Standard 12: Lifestyle.

This recommendation was made on 17 December 2015

Staff consistently told us that they did not have time for activities as they were often short staffed. There were few records of activities though residents commented that they enjoyed some outings and entertainment. The manager had encouraged volunteers who were providing some one to one chats with residents. There was a carer who had 8 hours each week to organise and provide activities. She was well regarded by residents who enjoyed what she provided. There are plans to better organise activities. I will continue the recommendation.

4. It is recommended that the provider ensure the heating within the home is suitable for the residents at all times.

National Care Standards, Care homes for older people – Standard 4: Your environment.

This recommendation was made on 17 December 2015

There had been some action, with a plumber aiming to work on all radiators within the home. He had already worked on most of the radiators. The maintenance

folder showed that staff have stopped referring heaters to be fixed. Staff indicated that recently some radiators were not working though the manager thought that was because the plumber had not reached these radiators. Staff are not yet confident that individual radiators will not break down. Recommendation to be continued.

7 Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

8 Enforcements

We have taken no enforcement action against this care service since the last inspection.

9 Additional Information

The IV reported her observations:

The home seems very spread out with long corridors. The lounges had comfortable looking seating but I did not see any residents sitting in them when I arrived at 11am. I spoke to them in their bedrooms.

The bedrooms were clean and tidy and had large roomy shower rooms which were fresh and clean and uncluttered. Most of the residents had their own personal effects in their rooms, pictures, ornaments, small pieces of furniture and some had their own bedding.

The dining room in St. Magnus is large, with the dining area in one half and lounge area in the other. The lounge has a fish tank. St. Marys dining room is smaller with a "cosy corner" seating area in it.

The corridors were decorated with interesting pictures of old Orkney.

On entering St. Marys there was a strong smell of urine in the corridor. This was not

the case in the bedrooms which were very clean and well kept. The communal bathroom was also clean, fresh and uncluttered.

There was no organised activity going on during my visit. Most residents were in their own rooms.

The garden has an attractive patio area with a fish pond and an aviary for the wild birds with lots of bird feeders. This can be seen from the lounge and some of the bedrooms.

Only a few residents came to the dining room at lunchtime as most of them eat in their rooms. The tables were set with tablecloths, mats and condiments. There was little interaction. The staff assisted those who needed it with kindness and care but little or no conversation going on. I went into St. Marys just as they had finished lunch. There was a group of three residents in the cosy corner enjoying a conversation together.

Most of the residents I saw in their rooms had jugs of juice on their tables.

10 Inspection and grading history

Date	Type	Gradings	
17 Dec 2015	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	4 - Good
		Management and Leadership	4 - Good
2 Dec 2014	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and Leadership	4 - Good
16 Jan 2014	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	Not Assessed
		Management and Leadership	4 - Good

11 Jul 2013	Unannounced	Care and support Environment Staffing Management and Leadership	3 - Adequate 3 - Adequate 4 - Good 4 - Good
23 Jan 2013	Unannounced	Care and support Environment Staffing Management and Leadership	Not Assessed 3 - Adequate 3 - Adequate Not Assessed
17 May 2012	Unannounced	Care and support Environment Staffing Management and Leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
25 Jan 2012	Unannounced	Care and support Environment Staffing Management and Leadership	2 - Weak 4 - Good 4 - Good 3 - Adequate
4 May 2011	Unannounced	Care and support Environment Staffing Management and Leadership	2 - Weak 4 - Good 4 - Good 2 - Weak
17 Dec 2010	Unannounced	Care and support Environment Staffing Management and Leadership	4 - Good 4 - Good Not Assessed Not Assessed
16 Sep 2010	Unannounced	Care and support Environment Staffing Management and Leadership	4 - Good 4 - Good Not Assessed 4 - Good
23 Feb 2010	Announced	Care and support Environment Staffing Management and Leadership	4 - Good 3 - Adequate 4 - Good 3 - Adequate

2 Oct 2009	Unannounced	<div>Care and support</div> <div>3 - Adequate</div> <div>Environment</div> <div>3 - Adequate</div> <div>Staffing</div> <div>3 - Adequate</div> <div>Management and Leadership</div> <div>3 - Adequate</div>
11 Mar 2009	Unannounced	<div>Care and support</div> <div>2 - Weak</div> <div>Environment</div> <div>3 - Adequate</div> <div>Staffing</div> <div>4 - Good</div> <div>Management and Leadership</div> <div>3 - Adequate</div>
9 Jun 2008	Announced	<div>Care and support</div> <div>3 - Adequate</div> <div>Environment</div> <div>3 - Adequate</div> <div>Staffing</div> <div>4 - Good</div> <div>Management and Leadership</div> <div>3 - Adequate</div>

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Contact Us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

www.careinspectorate.com

 @careinspect

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