

## Pitkerro Care Centre Care Home Service

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**Type of inspection:**

Unannounced

**Completed on:**

8 August 2019

**Service provided by:**

Pitkerro Opco Ltd

**Service provider number:**

SP2011011698

**Service no:**

CS2011301452

## About the service

Pitkerro Care Centre is situated in large grounds near to a residential area in Dundee. The home benefits from adequate car parking and secure garden areas accessible from the ground floor units of the home. Local amenities are available a short distance from the home and the home itself is easily accessible using public transport.

Accommodation is provided in four units set over two floors, with each unit having a sitting room and/or kitchen/diner. All rooms are single and have en-suite facilities.

The home provides both residential and nursing care for up to 70 older people with a range of care needs and is operated by Pitkerro Opco Ltd.

## What people told us

Prior to the inspection we sent out 65 Care Standards Questionnaires (CSQs) in order to gather views from people using the service, their relatives and staff. Of these 14 were returned, with comments including:

'My mother is extremely well cared for at Pitkerro Care Centre.'

'She is thriving in a friendly, caring and helpful environment.'

'Laundry services ruin clothes.'

'I would prefer an increase in staff members.'

'She is well looked after.'

'There is very little time for social interactions.'

'I find no fault whatsoever with the care my mum receives.'

'There are very little external activities...nor any stimulation.'

'I am very pleased to be a staff member of Pitkerro Care Centre.'

During the inspection we had the opportunity to speak with many people staying within the home and a number of relatives who were visiting. Their comments included:

'First class.'

'It's fine, the food's fine.'

'Any assistance I need, I get.'

Relatives felt happy with the care being given and the friendliness and caring nature of the staff. Where negative comments were made these focused on staffing levels, which were felt to be low.

## 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?	2 - Weak
How good is our leadership?	not assessed
How good is our staffing?	not assessed
How good is our setting?	not assessed
How well is our care and support planned?	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?

**2 - Weak**

We inspected Pitkerro Care Centre during a period of recent change which has involved the appointment of a new manager and clinical lead. The home benefit from a core group of established care staff, many of whom have worked at Pitkerro for a number of years and provide continuity for those living within the home. We felt however that care was being provided at a weak level in some aspects, based on our direct observations, feedback from people using the service and their families and our examination of records held by the service.

We would expect that people experience compassion and are treated at all times with dignity and respect. This should be reflected in the environment as well as the care that people receive. Although some areas of the home have been recently upgraded we observed some areas on the upper floor which required attention, in particular the communal bathroom, which was not fit for purpose at the time of the inspection. The bathroom was being used to store equipment and was unclean. People could not therefore bathe there, limiting their choice and opportunity. Relatives reported that areas of the home would benefit from more frequent deep cleaning and we drew the same conclusion over the period of the inspection, observing the upper floor of the home to smell unpleasant at times. This created an environment which was not always dignified for those who lived in the home.

It is important that people feel listened to and that their wishes and preferences shape how they are supported. We saw evidence of choice being offered at meal times and people were able to move freely in their units and return to their rooms as they wished. We were pleased to see some warm and positive interactions during the course of the inspection but, at times, staff did not display the skills and knowledge required to avoid escalating situations with vulnerable people. This meant that people's independence and choice were not promoted and they were left feeling agitated or angry, which was unnecessary.

Some interactions from staff were abrupt and lacked the degree of respect which we expect. Care was being provided in a risk averse way, with limits to people's access to the outdoors, meaning that individuals' rights were not being respected and unnecessary restrictions were in place. A requirement is made. **See requirement 1.**

People should get the most out of life and be able to maintain and develop their interests. We were pleased to observe pet therapy sessions being conducted in the home on the second day of the inspection, which people reported to enjoy. Meetings are held quite regularly with residents to discuss their ideas and opinions on topics such as food, decor and an upcoming fete, which allows people to participate in the running of the home. We were concerned however that there were missed opportunities to promote independence, such as people being able to make their own drinks or access the outdoors by themselves. Staffing levels did not always allow for activities to take place, or to do so without interruption, leaving people feeling frustrated and without meaningful activity. Staff reported that they had limited access to equipment with which to engage people and we observed the same activity being repeated throughout the day. Residents reported that they rarely got out into the local community and we were concerned that free access to the outdoors was limited. We were able to discuss our concerns with the manager and suggest ideas for improvement.

It is important that people's health benefits from their care and support and that they have access to well presented food and drinks throughout the day. We could see that food and fluid intake was monitored closely for some people who had additional needs, which we felt was a strength. We could also see that people were assisted with meals and that adequate levels of staff were available over mealtimes. It concerned us however that people in the upstairs units were left for long periods of time without being offered drinks during the first day of our inspection. The weather was hot and jugs of juice were visible, but not accessible and no glasses were available. This creates a potential risk of dehydration for the older people involved. Food which had been pureed for people with swallowing difficulties was not presented in a dignified way, with food groups mixed together, resulting in a lack of choice. We were not confident that all staff had adequate knowledge about adapted diets and that this put people at risk. A requirement is made. **See requirement 2.**

## Requirements

1. In order to ensure that all care is delivered according to the principles of the Health and Social Care Standards, the provider must ensure that staff are suitably qualified and receive appropriate training to ensure that they can provide care and support to people in a safe, respectful, and supportive manner. This is also to ensure that all staff are upholding the Scottish Social Service Council's (SSSC) Codes of Practice. In order to comply the provider should:

- Demonstrate that all staff receive appropriate values-based training to carry out their work.
- Implement an action plan to meet the training needs identified.
- Ensure that there is an effective system to monitor staff practice and provide supervision and guidance when necessary.

This is to be in place by 30 November 2019.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that 'I experience people speaking and listening to me in a way that is courteous and respectful, with my care and support being the main focus of people's attention.' (HSCS 3.1) and 'I have agreed clear expectations with people about how we behave towards each other, and these are respected.' (HSCS 3.3).

It is also necessary to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(b) A provider must provide services in a manner which respects the privacy and dignity of service users of the Social Care and Social Work Improvement Scotland Regulations 2011.

2. In order to ensure that the provision of food and fluids is adequate to meet people's needs the provider must:

- Ensure that staff practice and knowledge reflects current best practice guidelines for adapted and specialised diets.
- Ensure that adapted foods are presented in a dignified way and in accordance with best practice guidelines.
- Ensure that fresh water and fluids are available at all times and in a way which is accessible to all people living within the home (including those who require assistance or prompting to ensure their fluid needs are met).

This should be achieved by 30th September 2019.

This is in order to ensure care and support is consistent with the Health and Social Care Standards, which state that 'I can choose suitably presented and healthy meals and snacks, including fresh fruit and vegetables, and participate in menu planning.' (HSCS 1.33) and 'I can drink fresh water at all times.' (HSCS 1.39).

It is also necessary to comply with Regulation 4 (1)(a) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

## How good is our leadership?

This key question was not assessed.

## How good is our staff team?

This key question was not assessed.

## How good is our setting?

This key question was not assessed.

## How well is our care and support planned?

**3 - Adequate**

It is important that assessment and care planning reflects people's needs and wishes and comprehensively guides staff in their practice. We found the service to be performing at an adequate level in this key question, with care plans setting out people's basic needs and being regularly reviewed. Certain areas of some of the care plans sampled showed a good level of detail, such as people's likes and dislikes around food and techniques to support people which had been successful.

Areas such as the support of people who experience stress and distress were less detailed and protocols to guide the use of 'as required' medication were not sufficient to consistently guide practice. As a result we could not be confident that these medications were being used to their best effect, at the correct times and in a consistent way by all staff. This creates a risk of potential overuse for people which may affect their quality of life.

The home are currently moving to an electronic care planning system and this will hopefully provide an opportunity to address the areas of concern which we raised at this inspection.

## Complaints

Please see Care Inspectorate website ([www.careinspectorate.com](http://www.careinspectorate.com)) for details of complaints about the service which have been upheld.

## Detailed evaluations

How well do we support people's wellbeing?	2 - Weak
1.1 People experience compassion, dignity and respect	2 - Weak
1.2 People get the most out of life	3 - Adequate
1.3 People's health benefits from their care and support	2 - Weak

  

How well is our care and support planned?	3 - Adequate
5.1 Assessment and care planning reflects people's planning needs and wishes	3 - Adequate

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