

North Inch House Care Home Service

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Telephone: 01738 632233

Type of inspection:

Unannounced

Completed on:

16 June 2020

Service provided by:

Balhousie Care Limited

Service provider number:

SP2010011109

Service no:

CS2003009765

About the service we inspected

North Inch House is located in Perth, on the edge of North Inch Park. It is within easy access of the town centre and other amenities. The care home is registered for 78 older people. The original building, 'North Inch House' is registered for 40 older people. The newer building, separate but within the same grounds, is called 'North Grove' and is registered for 38 people with a specific diagnosis of dementia.

The North Inch House part of the care home is on one level with five areas, each catering for eight residents. Each area has a separate lounge/dining room, bathroom facilities and a small kitchen. Some bedrooms have an en suite. There are two internal patios accessible to residents and a large function room, mainly used for dining, with an informal seating area.

North Grove has two floors with lift access. This part of the home has four named units but these are currently operated as two larger units, one on each floor. Each unit has a lounge/dining area and bathroom facilities. There is also an activity kitchen and a meeting room. The bedrooms are all en suite and there are two small enclosed gardens.

The service notified us about a confirmed outbreak of Covid-19 on 22 April 2020.

This was a focused inspection to evaluate how well people were being supported during the COVID-19 pandemic. We evaluated the service based on key areas that are vital to the support and wellbeing of people experiencing care during the pandemic.

This inspection was carried out by inspectors and advisers from the Care Inspectorate.

How we inspected the service

We wrote this report following an unannounced inspection on 16 June 2020. Two inspectors carried out a follow up visit. This was done to assess progress on the five requirements made at our inspection on 21 May 2020 which had identified significant concerns that the service needed to address as a priority.

Following our inspection, the service had undergone mass testing of both staff and residents where everyone who had agreed to be tested was negative.

Since our last inspection, a new manager had been appointed and was in post.

Taking the views of people using the service into account

Due to current public health guidance and social distancing, it was not possible to speak with people living in the home directly. We carried out observations of staff interactions with people to enable us to have a better understanding of how people are cared for within the service.

Taking carers' views into account

We did not meet with relatives or carers during this inspection.

What the service has done to meet any requirements we made at or since the last inspection

Previous requirements

Requirement 1

Staff were observed to move between units, lacked understanding of infection control practices and there was poor coordination of working practices.

Due to the severity of the concern you, the provider, must take the following action immediately:

Starting immediately but to be completed within 72 hours (by Monday 25 May 2020) you must put in place and implement measures to ensure consistent management and leadership in the service to support staff practice and to coordinate the delivery of care in a way which promotes good infection control practices. This should include, but is not limited to, reducing the flow of staff between units, managing the deployment of staff, implementing an enhanced cleaning schedule within the service and introducing improved communication practices between staff.

This is to comply with Regulations 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 requirement was made on 21 May 2020.

Action taken on previous requirement

The service had put in place social distancing measures which helped to ensure that people were encouraged to maintain a distance of 2m. This included moving furniture and staggering mealtimes to promote distance and improve safety for people experiencing care.

Staff told us that they were allocated a specific unit at the start of each shift where they were to work. This meant that staff were not moving between units during their shift and potentially cross contaminating areas.

An enhanced cleaning schedule was in place and being recorded with care staff undertaking cleaning duties such as wiping down handrails and door handles when there was no domestic service available. Staff told us that due to reduced occupancy levels, they had capacity to carry out this task. We also saw that care staff cleaned equipment such as hoists after each use.

A daily flash meeting system had been introduced to promote improved communication between care staff and the management team. We encouraged the manager to consider bringing in all departments such as catering, domestic and laundry to this meeting. This would ensure that all departments within the service were aware of any issues or plans for the home each day.

Met - within timescales

Requirement 2

Inconsistent Practice was observed in the use of PPE.

Due to the severity of the concern you, the provider, must take the following action immediately:

Starting immediately but to be completed within 72 hours (by Monday 25 May 2020) you must ensure all staff, including domestic and laundry staff, are trained in the correct procedure of donning and doffing PPE and have the correct type of PPE for the work they are to carry out as stated in "Covid-19 Information and Guidance for Care Home Settings".

This is 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 requirement was made on 21 May 2020.

Action taken on previous requirement

Staff were observed to be wearing PPE correctly for each specific procedure they were carrying out.

Staff had received further training on both infection control as well as in the safe donning and doffing of PPE. Competency assessments had been started to maintain proficiency and infection control was discussed in both supervision and team meetings with staff.

Met - within timescales

Requirement 3

Staff were observed not to understand, or be following Public Health Guidance around the control of infection.

Due to the severity of the concern you, the provider, must take the following action immediately:

Starting immediately but be completed within 72 hours (by Monday 25 May 2020) you must ensure that all staff (including domestic and laundry) are trained in infection control procedures appropriate to managing an outbreak of Covid-19 and are following all appropriate Public Health guidance Covid-19 Information and Guidance for Care Home Settings.

This is to comply with Regulation 15b ensure that persons employed in the provision of a care service receive (i) training appropriate to the work they are to perform. Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 SSI 2011/210).

This requirement was made on 21 May 2020.

Action taken on previous requirement

Staff described a safe clinical waste management system, which had been implemented since our previous visit, throughout the service. We saw that additional PPE stations and improved signage had been placed throughout the home at key areas to remind staff to regularly change their PPE, either when moving between areas or when undertaking different tasks.

Met - within timescales

Requirement 4

By 1 August 2020 the provider must ensure that people's care plans set out how their health, safety and welfare needs are to be met and are regularly updated, at least six monthly or as their needs change. In order to do this the provider must ensure that all residents have personal plans which:

- a) Reflect a person-centred, outcome focused approach and are developed in line with the Health and Social Care Standards.
- b) Accurately reflect their current needs by ensuring that plans are reviewed at least once every six months.
- c) Staff are supported to become competent in the use of the electronic care planning system.
- d) Evaluations must be outcome-focused and are reflective of how effective the planned care had been in promoting positive choices, experiences and quality of life for every person.

This is to ensure care and support is consistent with the Health and Care Standards which state that: 'My support plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met as well as my wishes and choices.' (HSCS 1.15)

It is also to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, Regulation 5 (2) (b) (iii).

This requirement was made on 21 May 2020.

Action taken on previous requirement

The service continued to implement an electronic care planning system.

We expect services to have an outcomes focused approach to assessment, care planning and reviews. Outcomes are the impact or result of care on a person's life such as ability to exercise choice or quality of life. The plans we sampled were not outcome-focused and did not reflect the person's individual wishes, choices or abilities. Six monthly reviews to monitor the person's experience of care had not always taken place and daily recordings were not always completed accurately. The manager advised that work was on-going to review and update the care plans which we will follow up on at our next inspection.

Not met

Requirement 5

By 14 June 2020 the provider must ensure that significant improvements are made to all aspects of the management of medication in line with best and legal practice.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state: 'Any treatment or intervention I experience is safe and effective' (HSCS 1.24) and 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11) and in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Regulation 4(1)(a) - requirement for the health and welfare of service users.

This requirement was made on 21 May 2020.

Action taken on previous requirement

Management and storage of medication had improved resulting in less medication errors. We saw evidence that people were being given their medication regularly as prescribed. Management audits were being carried out more regularly which enabled staff to identify discrepancies more quickly.

Met - within timescales

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