

Beechwood Park Care Home Service

136 Main Street
New Sauchie
Alloa
FK10 3JX

Telephone: 01259 720355

Type of inspection:
Unannounced

Completed on:
21 December 2020

Service provided by:
Caring Homes Healthcare Group
Limited

Service provider number:
SP2013012090

Service no:
CS2013318118

About the service

This service registered with the Care Inspectorate on 30 August 2013. Beechwood Park care home is provided by Caring Homes Healthcare Group Ltd, who are part of Myriad Healthcare Ltd, with care homes throughout the UK. The care home is registered to provide for 62 older people.

On the day of the inspection there were 43 people living in the care home.

The home is located on the main street of Sauchie and close to local amenities. The home is laid out over two floors and divided into five units providing single room accommodation, with all rooms having en-suite shower facilities. At the time of the inspection, four of the five units were in use.

There are also some enclosed garden areas and seating with direct access from ground floor lounges.

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.

The inspection was carried out by inspectors from the Care Inspectorate and NHS Infection Prevention and Control.

What people told us

We were not able to speak with many people during the inspection as they were isolating in their bedrooms.

We did speak with three residents who told us they felt well cared for and safe.

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 good is our care and support during the COVID-19 pandemic?	2 - Weak
--	----------

Further details on the particular areas inspected are provided at the end of this report.

How good is our care and support during the COVID-19 pandemic?

2 - Weak

7.1 People's health and well being are supported and safeguarded during the COVID-19 pandemic.

We carried out an inspection of the home during an outbreak of COVID-19. We found guidance published by Health Protection Scotland and the Scottish Government was not being followed. Appropriate signage was not used to alert people to areas of the home where COVID-19 had been confirmed. The unit was being used as a thoroughfare. This created a health and safety risk to residents and staff. People were at further risk

because they were not supported to self-isolate in their bedrooms to reduce the risk of cross infection. The necessary measures were quickly introduced when we drew these to the manager's attention. A requirement has been made in the Improvement Notice issued on 23 December 2020.

Visits to the home were suspended for 28 days due to the COVID-19 outbreak but essential family visits were supported as required. Residents were supported to stay in touch with their relatives and friends through the use of video calls and phone calls and this was facilitated via an appointment system. This was important to support residents to maintain their important relationships and emotional wellbeing. We asked the manager to ensure that the relatives and friends of residents who had tested positive for COVID-19 were provided with regular updates about their loved ones.

We observed warm, humorous and respectful interactions between staff and residents and it was apparent to us that trusting relationships had been established. Staff knew residents well and supported people to maintain their sense of identity and self esteem. This was achieved through resident's choice of clothing, personal grooming and personalisation of their bedroom.

We found residents care plans detailed their care and support needs as well as their choices and preferences. Care plans were reviewed regularly and we noted health and welfare checks were carried out as appropriate. We were assured that residents were being supported by all relevant professionals.

Residents were self-isolating in their bedrooms in three out of the four units in the home. Guidance should be available to support staff in meeting resident's needs while they are confined to their bedrooms. For example, support for eating and drinking, meaningful activity and ways to support health needs. This type of information would be a helpful way to reduce risk and inform temporary or permanent staff. This created a health and safety risk for residents. This was identified as an area for improvement at the last inspection which we have repeated (see Area for Improvement 1).

Residents were supported to complete anticipatory care plans but we noted the plans were brief and focused on practical arrangements. The service should ensure residents and relatives have the opportunity to discuss, plan and record their palliative and end of life care wishes as fully as they wish.

7.2 Infection control practices support a safe environment for people experiencing care and staff.

Cleanliness in the home was not to an acceptable standard, and as a result the risk of infection for people increased. Cleaning schedules lacked the necessary detail to ensure safe and effective cleaning of all areas of the home.

The service had an adequate supply of Personal Protective Equipment (PPE). However, PPE was not stored safely and this meant the supply of PPE risked becoming contaminated. This concern was highlighted at the inspection but not addressed to avoid risk to residents and staff.

Some care equipment was in poor condition. Some care equipment was rusty and held together with tape. Chipped or scraped paintwork on surfaces or equipment reduced the effectiveness of cleaning. We carried out mattress checks and identified areas for improvement. Repair or replacement of equipment, furniture and fixtures was required to enable effective cleaning. When we returned to the home we found replacement equipment had been ordered and a programme of repairs was planned.

Staff were generally using PPE appropriately. However, there was a lack of understanding about the use of PPE when residents had tested positive for COVID-19. This included the use and cleaning of eye protection.

There was a lack of guidance available to inform staff's practice. We made a requirement in the Improvement Notice issued on 23 December 2020.

7.3 Staffing arrangements are responsive to the changing needs of people experiencing care.

A number of staff were absent from work. The service had worked proactively to cover nursing vacancies and absence and agency staff had been block booked to ensure consistency. Stirling and Clackmannanshire Health and Social Care Partnership were also providing additional staff to the home. However, these staff were unfamiliar with the residents and their needs. This put additional stress on the home's staff so it was imperative that appropriate guidance was available to enable staff to meet resident's needs.

We were concerned about the low number of staff on shift and their ability to meet the needs of residents who were self-isolating in their bedrooms. A dependency tool had been used to calculate the staffing levels required. However, this had not taken into account the additional staff required when residents were being cared for in their bedrooms. Staff told us they felt under pressure and did not have enough time to spend with residents. We asked the manager to review the staffing levels and ensure there were enough staff on shift to meet residents' health and wellbeing needs. A requirement was made in the Improvement Notice issued on 23 December 2020.

There was a lack of effective leadership in the home. We were concerned about the lack of systematic and effective response to the outbreak. We identified communication as an area for improvement. Staff told us they did not feel informed about the spread of the virus in the home. Information about the outbreak was not communicated to staff, and staff said they were relying upon each other. Short update meetings took place each day between management and senior staff. There was no evidence that information was being cascaded consistently to care staff, who told us they felt exposed and at risk. Staff told us they were anxious about the outbreak and staffing levels. We discussed staff's feedback with senior managers and when we returned to the home we found staff were receiving additional support.

A COVID-19 folder was in place to provide information and guidance for staff. However, we found key information was missing and information published by Health Protection Scotland was out of date. Although information was provided, there was no effective system to monitor staff understanding or practice in relation to this. When guidance changed it was not clear how staff were updated. This was the subject of an area for improvement made at the last inspection which we have repeated (see Area for Improvement 2).

Quality assurance systems in the home were not robust or effective. Cleaning schedules were in place but these lacked the necessary detail required to prevent and control the spread of COVID-19. Observations of staff carrying out hand hygiene and donning and doffing PPE were not undertaken. A lack of understanding and guidance about the use of PPE was concerning. Management spot checks or audits were not taking place so areas for improvement were not identified or addressed. When we returned to the home cleaning schedules had been revised but further improvements were required. We made a requirement in the Improvement Notice issued on 23 December 2020.

As a result of the concerns identified, we issued the service with a letter of serious concern, detailing five key areas which required urgent improvement by Sunday 20 December. We returned to the service on Monday 21 December and some of the areas of concern had been addressed, however further improvement was required regarding leadership, communication, staffing levels and enhanced cleaning. We continued to have concerns about the performance of the service and have served an Improvement Notice to the provider who must make improvements by 16 January 2021.

Areas for improvement

1. The provider should ensure that people's personal plans and the systems that are in place to monitor people's health and wellbeing, clearly direct staff to effectively respond to changes or deterioration in their wellbeing.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: 'My personal 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).

2. To ensure that people are protected from the risk of infection, all staff should receive training in the current 'Health Protection Scotland Guidance COVID-19 Information and Guidance for Care Homes', and know how to access the most up to date version.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: 'I experience high quality care and support based on relevant evidence, guidance, and best practice' (HSCS 4.11) and 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes'. (HSCS 3.14)

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

In order to ensure that people feel safe and that the risk of infection is reduced, the service should ensure that staff receive further training on the donning and doffing of PPE.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS), which state that: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their own practice and organisational codes' (HSCS 3.14).

This area for improvement was made on 21 August 2020.

Action taken since then

We observed staff donning and doffing PPE and were satisfied they were complying with best practice guidance.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How good is our care and support during the COVID-19 pandemic?	2 - Weak
7.1 People's health and well being are supported and safeguarded during the COVID-19 pandemic	2 - Weak
7.2 Infection control practices support a safe environment for people experiencing care and staff	2 - Weak
7.3 Staffing arrangements are responsive to the changing needs of people experiencing care	2 - Weak

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.