

Lorimer House Nursing Home Care Home Service

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Juniper Green
Edinburgh
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Type of inspection:
Unannounced

Completed on:
8 February 2021

Service provided by:
Lorimer House Ltd

Service provider number:
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Service no:
CS2011299821

About the service

Lorimer House Nursing Home provides care for up to 37 older people and is owned by Lindemann Healthcare. Care is provided over 24 hours by a team of registered nurses, carers and support staff.

The home is situated in Juniper Green to the south west of Edinburgh. It is set back from the main road and by mature landscaped gardens with open views from the rear of the home to the Pentland Hills. Parking is available at the front within the care home grounds.

The original upgraded Edwardian building has been extended providing modern accommodation over two floors with access to the upper floors by lift. All residents have their own bedrooms with en suite facilities and there are additional bathrooms on each floor. In the modern extension sitting/dining rooms are situated on each floor.

There is a smaller additional sitting/dining area within the older part of the home from which there is easy access to an extensive south facing extensive.

This was a focused inspection to evaluate how well people were being supported during the Covid-19 pandemic.

What people told us

Residents we spoke with said that they were happy with the quality of their care and enjoyed living at Lorimer House. Staff were described as being friendly and caring.

Feed back from family representatives was positive. There was a consensus that staff knew their loved ones well and that they spoke about them with knowledge and with insight into their support needs. Communication was described as being effective and people felt they were kept up-to-date about family members.

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
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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

Our focus in this inspection was to establish if people's health and wellbeing benefited from their care and support in relation to COVID-19. We also wanted to ensure that people experienced high quality care and support that was right for them. We evaluated this area of support as good.

Residents said that they were happy with the quality of their care and enjoyed living at Lorimer House, describing the home as a friendly, kind and caring place to reside.

Feedback from family representatives was positive. There was a consensus that staff knew their loved ones well and that they spoke about them with knowledge and insight of their support needs. Communication was described as being effective. People were kept up-to-date about family members wellbeing.

Support plans contained a good level of personalised information, indicating people's choices, preferences and their routines of daily living. There was a good standard of documentation around resident's cognition, communication abilities, life history and family circumstances. This helped ensure that people experienced positive person-centred well-being outcomes.

Daily running notes provided a summary of a resident's day. However, some entries were too brief and on other days there were no entries at all. Recordings needed more evaluative detail in order to provide a meaningful account of the person's day and evidence key care outcomes.

Staff responded appropriately to stressed/distressed presentation from people experiencing care. However, support plans for these residents did not evidence the home's strategies for managing these situations or guide staff as to the use of as required medication.

In order to ensure consistent staff responses and ensure as required medication is administered in line with the principles of least restrictive intervention, Lorimer House should develop as required medication and stressed/distressed behaviour protocols (see area for improvement).

7:2-Infection control practices support a safe environment for people experiencing care and staff

During an outbreak of COVID-19 the application of strict infection control procedures is paramount to make sure the risk to people safety is minimised. Health Protection Scotland has issued practice guidance that all social care providers must follow to protect the safety and wellbeing of all people experiencing care and staff. We evaluated this area of support as weak.

The home have not followed essential guidance around the use of chlorine and cleaning products. The use of these products are considered essential to maintaining a safe and infection free environment. In order to prevent infection outbreaks and help ensure resident and staff safety outcomes, we requested that management took urgent action to address this (see requirement 1).

In order to safely dispose of clinical waste and reduce potential for infection outbreaks, the service must provide more readily accessible clinical waste disposal bins and develop systems to ensure that personal protective equipment (PPE) stations are always adequately stocked.

Mobile PPE stations were accessed via uncovered trolleys. The lack of adequate covering increased the risk of infection and transference of Covid-19 during care delivery. Laundry was moved around the care home on a wheeled open rail. This meant that residents' clothing was potentially exposed to infection from airborne viral particles.

These factors increased risk and there was a need for urgent action to prevent further outbreaks of infection (see requirement 2).

We checked a sample of mattresses, mattress covers and cushion covers used in the home . We found several items that were compromised and required urgent replacement. We also found some furnishings in one of the dining rooms had encrusted food debris. This meant that residents' were potentially exposed to risk of infection from contaminated furnishings. In order to prevent further outbreaks of infection and ensure resident safety outcomes we requested that the service took action to address these concerns (see requirement 3).

7:3-Staffing arrangements are responsive to the changing needs of people experiencing care

We evaluated that staffing arrangements were good and were responsive to the changing needs of people experiencing care.

Staff spoke knowledgeably to us about the people they support. We observed that their Interactions with residents were warm, friendly and appropriately good humoured.

Staff had undertaken training around infection prevention and control (IPC) and PPE. When we spoke with staff they understood key practice principles. Training records around these key areas of practice were sometimes difficult to interpret and should be more clearly documented, evidencing that all staff had access to essential learning around IPC and PPE.

Staff did not have access to the current Health Protection Scotland Covid-19 information and guidance for Care Home Settings. We highlighted this to management, requesting that they access and make available relevant guidance to ensure that staff remained up to date in their knowledge and practice.

The service should consider processes around observing staff practice and competency in respect of PPE, IPC and care delivery, ensuring these observations are carried out with regularity and are appropriately documented.

Family members told us that the staff they spoke with demonstrated good knowledge of their loved one's support needs. This helped reassure them as to the quality of care provided at Lorimer House.

Requirements

1. By 15 February 2021,, the provider must ensure that acceptable standards of infection prevention and control, and the cleanliness of the home and equipment used by people experiencing care are maintained.

To do this the provider must:

- Ensure appropriate cleaning solutions, diluted to the correct concentration of chlorine-releasing disinfectant, readily available and that their use and is clearly understood.

This is to ensure rooms, communal facilities, sanitary fittings and frequent touchpoints are cleaned in line with the latest available Scottish Government guidance.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state, " experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment." (HSCS 5.22) and

"I experience high quality care and support based on relevant evidence, guidance and best practice." (HSCS 4.11).

This is 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) and COVID-19: Information and Guidance for Care Home Settings (Adults and Older People) Version 2.1. Publication date: 31 December 2020

2. By 15 February 2021, the provider must ensure that service users experience a safe, clean and well-maintained environment. This must include, but not be limited to ensuring that;

- Clinical waste is managed safely, ensuring there are enough clinical waste disposal facilities and that they are easily accessible to staff;
- PPE stations must be readily accessible and fully stocked with the equipment required to support safe personal care delivery
- PPE stations must be kept free from risk of infection and cross contamination
- Laundry must be moved around the home in a way that minimises risk of infection.

This is in order to ensure that care and support is consistent with the Health and Social Care Standard (HSCS) which state that:

'I experience an environment that is well looked after with clean, tidy and well maintained premises (HSCS 5.22); and In order to comply with Regulation 4(1)(a) and (d) and Regulation 10(2)(b) and (d) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

See also See COVID-19: Information and Guidance for Care Home Settings (Adults and Older People) Version 2.1. Publication date: 31 December 2020.

3. By 15 February 2021, you must ensure that service users experience a safe, clean and well maintained environment. This must include, but not be limited to ensuring:

- the premises, furnishings and equipment are clean, tidy and well-maintained.
- In particular;
- mattresses and mattress covers that are soiled, stained or in a poor condition must be de-contaminated or replaced
 - chairs, tables and any other furnishings must be kept clean
 - effective arrangements are in place to prevent and control the spread of infection;
- and processes are in place to ensure that the environment is consistently safe and well maintained.

This is in order to ensure that care and support is consistent with the Health and Social Care Standard (HSCS) which state that:

'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment.' (HSCS 5.22); and In order to comply with Regulation 4(1)(a) and (d) and Regulation 10(2)(b) and (d) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

See also See COVID-19: Information and Guidance for Care Home Settings (Adults and Older People) Version 2.1. Publication date: 31 December 2020.

Areas for improvement

1. The service should develop detailed and personalised protocols around managing stressed /distressed presentation and the administration of as required medication. These protocols should indicate preventative strategies and indicate the basis for when as required medication should be used.

The care plan should include but not be limited to the following:

- The reasons for giving the 'when required' medicine
- How much to give if a variable dose has been prescribed
- What the medicine is expected to do.

National Institute for Health and Care Excellence "Managing Managing Medicines in Care Homes" 2014

'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event' (HSCS 4.14)

'My human rights are central to the organisations that support and care for me'(HSCS 4.1).

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

To make sure people's planned care reflects needs and things that are important to them they should be involved and central to planning care and support. The person should feel like they own the plan and decide who else can access it. This might include making access via a personal computer/tablet possible as well as paper copies.

This is consistent with the Health and Social Care Standards that states:

2.17 I am fully involved in developing and reviewing my personal plan, which is always available to me.

1.15 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.

2.9 I receive and understand information and advice in a format or language that is right for me.

2.2 I am empowered and enabled to be as independent and as in control of my life as I want and can be.

This area for improvement was made on 16 January 2020.

Action taken since then

We outlined further areas for improvement in this report that link to that made at our previous Inspection. We have repeated this element as part of a new area for improvement.

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	4 - Good
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	4 - Good

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