

Lomond Court Nursing Home Care Home Service

Woodside Way
Glenrothes
KY7 5RW

Telephone: 01592 754489

Type of inspection:
Unannounced

Completed on:
23 February 2021

Service provided by:
HC-One Limited

Service provider number:
SP2011011682

Service no:
CS2011300748

About the service

Lomond Court Nursing Home is a purpose-built home situated in a residential area on the outskirts of Glenrothes. The home provides 24-hour nursing care and support to 40 older people with mental frailty.

Accommodation is provided on two floors and each floor can accommodate 20 people in single occupancy rooms with ensuite facilities. There is substantial parking provision and landscaped gardens with a patio area for residents' use.

The service provider is HC-One Limited, a national provider of private health care. The manager was responsible for the supervision of staff and the day-to-day running of the home assisted by the deputy manager.

The organisation's philosophy of care states:

'Our aim is to be the provider of the kindest homes in the UK with the kindest and most professional staff, where each and everyone matters and each and every one can make a difference.

We will strive to provide all our residents with the highest standard of individualised care. We will do this within a warm, friendly, homely and supportive environment where quality of life is paramount and where residents' rights, habits, values and cultural background are safeguarded and respected.

We recognise that the number of years lived does not prescribe how a person should live, behave, think or feel. We value the life experiences and knowledge of every resident. We will spend time with every resident so that they can help us fully to plan their care, which will include opportunities for fulfilment and responsible risk taking.

We value the intrinsic role which relatives, friends and professionals play in the resident's care and we will work in partnership with them.

We will ensure that every resident is treated as an individual with courtesy and respect. We will protect their privacy and dignity and enable them to gain and maintain as much independence as possible'.

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 from the Care Inspectorate and inspectors from Healthcare Improvement Scotland.

What people told us

We spoke with people informally during the inspection, they told us they were being well looked after and that the staff were nice to them. We saw friendly and supportive interactions between staff and the people they were looking after.

We sought views from residents and their families during the first inspection of this service, please see our inspection report dated 19 January 2021.

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?	3 - Adequate
--	--------------

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? 3 - Adequate

Because of our findings during this inspection we have raised the grade for 7.2 to 3 adequate. Please see the outstanding requirements and areas for improvements sections of this report.

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

Requirements

Requirement 1

By Monday 01 February 2021, you must continue to ensure that people experience care in an environment that is safe, well maintained and minimises the risk of infection. In particular you must continue to:

- a) Ensure that the premises, furnishings and equipment are clean, tidy, and well- maintained
- b) Ensure that processes such as enhanced cleaning schedules and regular quality assurance checks are in place to ensure that the environment is consistently safe and well maintained
- c) Ensure that staff are supported to be fully aware of their responsibilities and that safe infection control practices are adhered to by all staff at all times.

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 19 January 2021.

Action taken on previous requirement

At the previous inspection we saw that the staff and management had worked hard to ensure the environment and equipment was clean however we saw some areas which required further attention.

There was a continued focus on training and development for a consistent approach to infection control and cleanliness by all grades of staff within the home.

We found new systems in place, including a cleaning schedule which covered daily, weekly and monthly cleaning as well as encouraging feedback from residents and reporting issues to the maintenance. Staff appeared to be proactive in their approach and highlighted potential concerns to be dealt with, this meant concerns were dealt with quickly and people were safer because of this. The manager carried out assurance visits throughout the home.

We found an increase in domestic hours by 40 hours per week and this had helped to make the necessary improvements in the cleanliness of the home. This is welcomed as when the number of residents increase again this would help to maintain the standard that staff have attained.

We found that public areas including these areas were clutter free, clean and free of dust. There was one small area in the hoist storeroom, where there was dust above the coat rail and one resident's personal chair that had food crumbs down the side and a possible tea/coffee stain. This was cleaned when highlighted to staff.

The domestic storeroom on the ground floor was clean and free of debris. We noted that new cleaning trolleys were in place, these have a locked area for cleaning fluids, and they were easier to keep clean. There were numerous cleaning products in use including detergent and chlorine-based solution. There was a COSHH poster in place and the manager stated she had new ones to keep the staff up to date. The cupboard next to the sink was in a poor state of repair due to water damage, we discussed this with the manager who explained that the provider had arranged for contractors to upgrade this. The floor in both domestic storerooms is much easier to clean as it has been replaced and this helped to reduce the risk of cross infection.

We found that the flooring in the laundry area remained in the same poor state of repair. However, we were satisfied with the plan the provider had in place to deal with this. The stained ceiling, which on previous visits was peeling, has been repaired and painted. The laundry was clean and well organised with the correct flow through from dirty to clean in place. The staff member we spoke to was knowledgeable about the processes in place.

All reusable equipment had a sticker which had a space for the date and time, as to when it was last cleaned. It was noted one linen trolley, while clean, had sticker residue, which would make it difficult to clean effectively. This was highlighted to the manager at feedback.

PPE stations were clean and well stocked. The COVID-19 information folder was visible and up to date.

Staff did not take every opportunity for hand hygiene when supporting residents in the lounge. This needed to be improved to protect residents from the risk of cross infection.

Overall, the inspection showed a sustained improvement in the cleanliness of the home. Staff were clear in their responsibilities and there was an attention to detail, which had been lacking on previous visits.

There were systems in place to ensure oversight and assurance to maintain the required standards. We discussed the importance of the manager continuing to audit cleaning schedules to make sure that cleaning continues to protect people from infection.

The manager should continue to acknowledge good infection control practice to encourage maintenance of good standards. This would help to staff to recognise the difference good practice made in keeping the residents, themselves and visitors safe.

The maintenance of the improvements made in the cleanliness of the home will continue to be monitored as part of future inspections.

Met - within timescales

Requirement 2

In order that people's care and support is planned, regularly reviewed and updated when needs change, the provider must ensure by 16 February 2021, personal plans contain sufficient, clear up to date guidelines to inform staff practice.

This is to ensure that care and support is consistent with the Health and Social Care Standards, which state that: '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) and in order to comply with Regulation 5 - Personal Plans of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011.

This requirement was made on 19 January 2021.

Action taken on previous requirement

At the previous inspection we found the quality and level of detail in care plans was not enough. At this inspection we found clear, detailed and up to date care plans were now in place to inform staff practice. The manager audits care plans routinely to ensure the improved standards are being maintained. This meant that the residents support plans contained the necessary information to guide staff how to support them to have their needs met in the way they wished.

Met - within timescales

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

The service needs to complete the end-of-life care plans for all people in the service, to ensure their needs and wishes are respected should they become unwell.

This is to ensure that care and support is consistent with the Health and Social Care Standards, which state that: 'I am fully involved in developing and reviewing my personal plan, which is always available to me'. (HSCS 2.17).

This area for improvement was made on 19 January 2021.

Action taken since then

At the previous inspection we found the level of meaningful detail in the end-of-life care plans was not enough to make sure that peoples wishes were being respected. At this inspection we found the quality of end-of-life care plans had improved. The service had spoken with relatives and people living in the home about their wishes and we found the care plans now contained detailed, person-centred and meaningful information to inform staff practice should the person become unwell. This meant that people could expect to receive the care they wanted at the end of their life.

This area for improvement was found to have been met.

Previous area for improvement 2

To support staff wellbeing, the provider should review the resources and opportunities available to debrief, reflect and manage loss and grief during the pandemic.

This is to ensure that care and support is consistent with the Health and Social Care Standards, which state that: 'I use a service and organisation that are well led and managed'. (HSCS 4.23).

This area for improvement was made on 19 January 2021.

Action taken since then

During our previous inspections it was evident that staff were working in challenging circumstances. The impact of loss and grief was significant. Staff told us about a lack of opportunity to debrief, reflect or manage loss, and further support was needed to improve staff wellbeing. For staff to be able to provide compassionate care, their own feelings needed to be acknowledged and they needed to be supported.

The manager advised that decompression sessions had been made available and some staff had attended these. Staff had also been given the numbers of independent councillors so they could talk to people who were independent from the workplace, the manager advised that some staff had taken advantage of these services and had found them helpful. The manager was also looking out for staff and was offering them individual support where required. This meant staff were being supported to discuss their feelings and to develop strategies for coping which allowed them to be able to support the residents better.

Staff told us that they supported each other by talking and remembering the residents who had sadly passed during the recent outbreak in the home. Staff and residents were also planning a memorial service for those who had passed where memories could be discuss, shared and celebrated.

This area for improvement was found to have been met.

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?	3 - Adequate
7.2 Infection control practices support a safe environment for people experiencing care and staff	3 - Adequate

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.