

Millburn Homes Care Home Service

Millburn Homes
3 - 9 Glencairn Gardens
Halfway
Cambuslang
Glasgow
G72 7QE

Telephone: 01416410407

Type of inspection:
Unannounced

Completed on:
22 February 2021

Service provided by:
Parkcare Homes (No. 2) Limited

Service provider number:
SP2003000147

Service no:
CS2012311539

About the service

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at www.careinspectorate.com.

This service registered with the Care Inspectorate on 20 December 2013.

The service is operated by Parkcare Homes (No. 2) Ltd, (part of the Priory Group). The service is registered to provide a care service to a maximum of 20 adults with either; a learning disability, mental health problem or diagnosis of autistic spectrum disorder. There were 20 people living in the service at the time of our inspection.

The service is located in a residential area of Halfway, Cambuslang and is close to local shops and public transport links. People who live in the service are accommodated in four separate bungalows adjacent to each other. Each bungalow has a combination of open and enclosed garden areas that service users can use.

Millburn had experienced an outbreak of COVID-19 previous to our inspection visit.

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.

What people told us

People told us they were happy living at their home in Millburn. They enjoyed the meals and liked the staff who supported them.

We also spoke to relatives who stated they had no complaints and were happy with the service (see body of report).

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 wellbeing are supported and safeguarded during the COVID-19 pandemic

Our focus in this inspection area was to establish if people's health and wellbeing benefitted 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.

People experiencing care looked well presented and appeared to be content. The people we spoke to liked living at the home and enjoyed their meals. We observed that staff were familiar with people and were aware of their support needs, particularly where people experienced stress and distress. We saw warm and compassionate exchanges between people and staff.

We spoke to two relatives who were happy with the care and support their relatives received. Garden visits and video communication had taken place. Relatives felt the communication from staff was regular and kept them informed of how their loved ones were doing particularly if they had been admitted to hospital. This meant that relatives built good working relationships with staff and trusted them.

Care plans for people had good information and covered all aspects of people's support needs. However, we found that some important information had not been updated to reflect the current needs of the individual. Reviews had not taken place in line with regulatory requirements which meant that any changes to the person's needs was not clear. This could lead to poor outcomes for people. **(See Requirement 1)**

During the inspection the service created a short care plan for each person for staff to read and follow if they tested positive for COVID-19. This meant that people would be supported in a person centred way for the duration of the infection.

Medication recording sheets did not always reflect what was written in an individual's care plan. This meant that information was not current and up to date which could lead to medication errors and impact on people's wellbeing. **(See Area for Improvement 1).**

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

Our focus in this inspection area was to establish if infection prevention and control practices supported a safe environment for both people experiencing care and staff.

During our initial visit on 18 February we found the cleanliness in the home was not at an acceptable standard. Domestic staff had not been appropriately trained in the correct use of cleaning products. There was a failure to follow the National infection prevention and control manual routines for decontamination of reusable equipment as the correct cleaning products were not being used.

Some care equipment inspected was found to be contaminated with body fluids and/or food residue. Systems and processes were not in place to ensure all care equipment was cleaned and disinfected following use. This meant people were open to infection and could spread easily.

The management team did not have a clear overview of standards of hygiene and cleanliness within the home. These were significant weaknesses where immediate action was required to ensure that people were safe and the risk of infection was limited.

On 18 February we issued a serious letter of concern outlining the actions required with regard to:

- the enhanced cleaning of the care home environment and equipment.
- the replacement of contaminated mattresses.
- staff understanding and being compliant with the most up to date Health Protection Scotland guidance specifically in relation to Care Homes.

We returned on the 22 February and found significant improvements had been made and the above requirements had been met. The service had implemented new paperwork for auditing to ensure all areas of the home were checked and monitored for cleanliness. However, we still had concerns that infection prevention and control was not embedded in staff practice.

The service was not using chlorine based cleaning agents however, they had purchased this on our return visit. **(see Area for Improvement 2)**

Cleaning schedules, routines and audits were not robust or clear in all areas therefore this needed improvement. PPE was not always stored correctly or in the most convenient point for use. There were a few PPE bins but again placement of these should be considered to ensure they are located to prevent 'travel' with dirty PPE. **(see Requirement 2)**

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

Staff had been working hard throughout the pandemic and demonstrated compassion and commitment to the people they supported. They also felt supported by their management team during this difficult year which helped to keep the team motivated.

Staff had received training, in relation to COVID-19 including the use of protective equipment to keep themselves and others safe. Spot checks to assess staff practice and identify areas for improvement had been undertaken however, staff required further training to understand the enhanced cleaning regime and the correct usage of cleaning agents to be used. The manager assured us that this would be put in place as matter of priority. This would also include domestic staff **(see Area for Improvement 3)**

We were confident that there was enough staff on to meet the needs of people. We noted that there was little turn over of staff and no use of agency staff. This meant that people received consistency in their support particularly for people who experienced stress and distress.

There was a team app created to allow effective and easy communication between staff and their managers. This was used to update staff on recent and changing guidance relating to COVID-19.

We will carry out another visit to follow up on the Requirements and Areas for Improvement.

Requirements

1.

In order to ensure personal plans fully address the assessed needs of individuals who reside in the service the provider must by 31 March 2021 improve the quality and information in care plans.

In order to achieve this the provider must ensure that:

- care plans are person centered and outcome focused
- all health assessments are fully completed
- guidance for staff to support stress/distress behaviors is fully documented
- COVID-19 care plans detail how to support the person's health and wellbeing through the pandemic
- COVID-19 plans detail how to support residents who will not comply with social distancing
- reviews reflect changes and are used to update care plans
- the level of detail in daily records is improved

This is to comply with: Health and Social Care Standards (HSCS) 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.'; and 'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event.' (HSCS 4.14).

It is also to comply with Regulation 4. (1) (a) make proper provision for the health, welfare and safety of service users. Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

2. In order to ensure people experiencing care are appropriately protected the provider must ensure adequate cleaning of the environment and equipment by 5 March 2021.

In order to achieve this the provider must:

- develop a detailed deep cleaning schedule and implementation of this
- all domestic staff to complete training in the correct use of cleaning products
- domestic senior to complete additional training and have time to adequately supervise domestic staff
- ensure all equipment is effectively cleaned with a focus on frequently touched surfaces using appropriate products
- ensure good standards of cleanliness are maintained by implementing regular audits linked to action plans of environmental and equipment cleanliness
- re-useable care equipment must be robustly decontaminated after each use
- declutter PPE storage areas and sluices

- the management team should have a clear overview of standards of hygiene and cleanliness within the home

This must be done in accordance with all appropriate Public Health guidance and Health Protection Scotland guidance of 31 December 2020 Version 2.1 entitled "COVID-19 Information and Guidance for Care Home Settings."

This is to comply with Regulation 4. (1) (a) make proper provision for the health, welfare and safety of service users. Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

Areas for improvement

1. The service should ensure that prescribed medication for individual's are recorded, followed as directed and updated when required. This should be replicated in all documents containing this information such as hospital passports.

This should be done in accordance with the Health and Social Care Standard (4.27) "I experience high quality care and support because people have the necessary information and resources".

2. The service should use a chlorine based cleaning solution with the appropriate measurements of dilution in line with Public Health Scotland guidelines.

This should be done in accordance with Public Health guidance and Health Protection Scotland guidance of 31 December 2020 Version 2.1 entitled "COVID-19 Information and Guidance for Care Home Settings."

3. Quality Assurance should be carried out regularly and robustly relating to staff practice. Staff observations and feedback discussions should be regular, meaningful and demonstrate clear follow up actions. This would ensure that staff are continually learning and developing best practice.

This should be done in accordance with the Health and Social Care Standard (3.14) "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."

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	3 - Adequate
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	3 - Adequate

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

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