

Parkhouse Manor Care Home Care Home Service

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Type of inspection:
Unannounced

Completed on:
9 March 2021

Service provided by:
Laurem Care Group Limited

Service provider number:
SP2014012402

Service no:
CS2014333774

About the service

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 two inspectors from the Care Inspectorate.

Parkhouse Manor Care Home is registered to provide nursing care and support for up to 48 older people. The provider is Laurem Care Group and the service registered with the Care Inspectorate in 2015. There were 47 people living in the home at the time of the inspection.

The service is based in two separate traditional dwellings. Recent refurbishment of the home has made it a bright, pleasant, and comfortable environment for the people living there. There is a car park to the front and large enclosed gardens and patio area to the rear which provides a pleasant and private space. The home is situated in a rural area just outside Barrhead and there are shops and other facilities a short journey away.

The philosophy of care for Parkhouse Manor Care Home is, "We believe that people who choose our home have an absolute right to live as they wish, but always with dignity, respect and warmth".

What people told us

We observed the quality of support people received and interactions with staff which we noted were responsive and supportive and encouraged choice.

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
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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?

3 - Adequate

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. We found some strengths that just outweighed the weaknesses in this area. We concluded that the service was performing at an 'adequate' level.

We observed positive practice of staff wearing personal protective equipment (PPE) and posters were on display to remind staff of the correct procedure for putting it on and taking it off.

Staff practiced good hand hygiene and adhered to best practice guidance of "bare below the elbows" to allow effective hand hygiene. Staff had access to hand washing facilities and alcohol-based hand rub. All wash hand basins had posters displayed to remind staff how to effectively carry out hand hygiene.

People living with dementia made social distancing difficult at times within the home. We reminded staff of the importance of trying to encourage social distancing with people in the communal areas.

Housekeeping staff adhered to best practice guidance and a cleaning regime of frequently touched areas and rooms affected by COVID-19 was in place. We saw that there was a sufficient and appropriate supply of cleaning materials.

The general environment appeared clean, but we found that the cleanliness of some care equipment was not at an acceptable standard. We found some toilet aids, chairs, and bed frames were contaminated with food debris, grime, and body fluids. This meant that the risk of infection for people was increased.

We saw evidence that quality assurance processes for infection prevention and control had been implemented and that staff practice observations had occurred. Some audits had taken place and included a check of care equipment, including mattresses, within peoples' bedrooms. However, the system must be developed to provide reliable assurance that hygiene and cleanliness is maintained. Further work is required to ensure that quality assurance systems effectively identify and mitigate the risk of the transmission of infection. We will make a requirement in this regard. See requirement 1.

Requirements

1. By 30 March 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 develop and use quality assurance processes for infection prevention and control, including regular environmental cleanliness audits, cleanliness audits for equipment used by people experiencing care and regular observations of staff practice. This is to ensure that all care equipment and the environment are clean, safe, and intact. The quality assurance process must follow the latest available Scottish Government guidance and best practice guidelines.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state, "I 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)

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

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

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