

Millburn Homes Care Home Service

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

Telephone: 01416 410 407

Type of inspection:
Unannounced

Completed on:
17 March 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 follow up inspection to review progress made in meeting requirements and areas for improvement made at our previous visits on 18 and 22 February 2021. These inspections are focused inspections 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 follow up inspection was carried out by inspectors from the Care Inspectorate and Health Improvement Scotland.

What people told us

At this inspection we spoke to staff and residents, looked at the cleanliness of the environment as well as reviewing documentation including manager quality assurance systems.

The residents we spoke to during our inspection visit told us they were happy. We observed kind, compassionate interaction between residents and staff who clearly knew them well and were attentive to their needs.

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

Requirements

Requirement 1

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).

This requirement was made on 2 March 2021.

Action taken on previous requirement

We could evidence that the service had taken action to address the areas identified in this requirement.

Daily cleaning as well as deep cleaning schedules were completed, PPE storage areas were tidy and free from contamination and additional clinical waste bins had been located in appropriate areas in the home. This helped to improve infection control practices.

Frequently touched surfaces were being cleaned twice daily. Equipment for personal use was cleaned by staff after use as well as part of the deep cleaning schedule. This was not currently being recorded and we suggested adding this to the cleaning schedules to provide evidence that this equipment had been cleaned.

The majority of staff had completed or were in the process of completing online mandatory training for infection prevention and control. Staff we spoke to confirmed this and seemed more confident in what was expected of them in relation to COVID-19 and current guidelines.

Staff were able to describe cleaning processes, auditing taking place, feedback received and had a better understanding of infection prevention and control.

Mattresses and bed linen was clean and in good condition. Residents accommodation including toilets, shower rooms and communal areas were found to be clean. This meant residents were safer due to these improvements as well as reducing the risk of spread of infection.

Environmental, as well as audits of staff practice were in place and were reviewed by the manager. Where issues had been identified there were action plans which staff signed when complete.

Staff told us these audits were beneficial and had improved the cleanliness of the service resulting in a cleaner, tidier, safer environment.

Met - within timescales

Requirement 2

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)

This requirement was made on 2 March 2021.

Action taken on previous requirement

The timescale for this requirement is 31 March 2021 therefore we did not assess this requirement at this follow up visit.

Not assessed at this inspection

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 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."

This area for improvement was made on 2 March 2021.

Action taken since then

Staff we spoke to were able to describe and demonstrate a good knowledge and understanding of the correct frequency and use of cleaning products. Staff are using chlorine based products as per manufacturer's instructions at the frequency required.

This Area for Improvement has been met.

Previous area for improvement 2

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."

This area for improvement was made on 2 March 2021.

Action taken since then

There were a range of audits being carried out and where issues were identified there were action plans which staff followed up. This was evident from the improvements we observed. The service was cleaner and staff were confident when describing infection prevention and control practice.

The audits currently in use are large and repetitive with parts of these not appropriate for this type of service. New audits and processes have been added since the previous inspection. This increase in paperwork is proving problematic when trying to source information. There now needs to be an overall review of this to reduce the quantity and improve the quality of these audits. This will ensure an accurate, clear and purposeful quality assurance system.

We acknowledge that improvement has been made however we will repeat this Area for Improvement and review at our next visit.

Previous area for improvement 3

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".

This area for improvement was made on 2 March 2021.

Action taken since then

We did not assess this Area for Improvement at this follow up inspection and will review on our next visit.

Complaints

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

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