

Craigard House Care Home Service

3 Abergeldie Road
Ballater
AB35 5PR

Telephone: 01339 755 891

Type of inspection:
Unannounced

Completed on:
5 March 2021

Service provided by:
Craigard Care Ltd

Service provider number:
SP2004006030

Service no:
CS2003000350

About the service

This service has been registered since 1 April 2002.

Craigard House care home is owned and managed by Craigard Care Ltd. and is registered to provide a care service to a maximum of 24 older people. There were 19 people resident in the home at the time of this inspection.

Craigard House care home is a traditionally-built home within a residential area of Ballater. It is close to local amenities and transport links. There are 19 bedrooms, 16 of which are single with the remaining three rooms being double. All bedrooms, except four of the single rooms, have en-suite facilities. There is a variety of communal sitting rooms and a dining room. Accommodation is provided on three levels. The home has landscaped grounds for the sole use of service users. The home has a panoramic outlook over the golf course and surrounding hills.

Craigard House's aims and objectives document states that they will provide:

"A homely, comfortable, safe environment for our elderly residents and to ensure all aspects of any medical or health needs are met."

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

We spoke to 12 of the 19 people living in the care home. On the whole they gave very positive feedback about living in Craigard House with regards to the care staff and the quality of the food:

- "The carers earned their job title. They really do care."
- "They're (carer staff) good girls. They're good to me."

One person described how the care staff get the balance just right. That they offer support when it's needed but also enable people to be independent.

Four people described the quality of the food as "excellent". They stated it was "healthy, plenty of fresh fruit and vegetables, tasted good and was nutritionally balanced."

Three of the people living there described the environment as dated and in need of refurbishment. They stated that the windows were draughty, and the en-suite baths inaccessible to them.

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 told us they were very happy living in the care home. They highly praised the quality of food and felt they were offered a balanced, healthy and tasty menu. People had access to drinks and snacks in their rooms and were offered more throughout the day. We saw that staff knew people well and spoke to people warmly, kindly and with a sense of humour. People told us that the carers earned their job title, as they really did care.

There was good support for people to keep in touch with their loved ones, using a range of technology.

The service had developed close links with external health care professionals, who visited regularly. Staff were quick to notice any changes in people's health and follow these up with their medical professional. This helped to keep people healthy.

Whilst we found a number of key strengths during the inspection we became aware of a number of areas that required improvement particularly to support people to feel their best and understand and accept the encouragement and guidance needed to be safe and well.

Some people were able to meet their own personal care needs. However, we saw that sometimes they needed more encouragement and reminding to maintain their personal hygiene and change into clean clothing more regularly. The service needs to work with people to help them recognise when their support needs change and plan together how this can best be supported. This will help them make informed lifestyle choices which will have a positive impact on their health and wellbeing. (see area for improvement 1).

Likewise, the service needs to work with people to help them recognise when their environment poses a risk to their health and wellbeing and plan together how this can best be supported. For example, when bedrooms are highly cluttered it makes it difficult to clean properly, thereby posing a risk to people's health and wellbeing. This will help people make informed lifestyle choices which will have a positive impact on their health and wellbeing. (see area for improvement 1).

Indoor visiting is not currently taking place at the home. The service is working through the necessary arrangements, including improving their infection control practices, to make this possible and we will monitor their progress.

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, in relation to COVID-19.

The service had not yet fully established effective infection control practices within the home.

We identified strengths. Personal protective equipment (PPE) was readily available throughout the home, correctly stored in cleanable boxes and staff were confident in its use. Communal areas had been decluttered to allow for effective cleaning. Furniture had been moved to encourage social distancing. Staff were diligently following hand washing guidelines and social distancing, which helped to keep people safe. Equipment and furniture that could not be effectively cleaned, for example, stained/soiled fabric chairs, were being replaced. The communal areas looked visibly clean, and high-touch areas were cleaned more frequently. The service told us they were looking at purchasing wall mounted storage units for people's private bathrooms to help de-clutter them. This will make it easier to keep the environment clean.

Staff had knowledge of COVID-19 and the basic measures they needed to follow to keep both themselves and those they cared for safe.

However, even with these strengths, we had concerns about the infection control practice within the service. People's bedrooms and private bathrooms remained highly cluttered, visibly dusty and occasionally dirty in places. Due to the amount of clutter it was not possible to clean the rooms effectively. Some of the equipment was damaged and therefore could not be cleaned properly. There was a lack of bins for staff to dispose of their used PPE safely. The service confirmed that bins had been ordered. (see requirement 1).

The age and maintenance of the building made it difficult for some areas to be cleaned effectively. For example, in some of the private bathrooms we saw torn flooring, cracked and worn bathroom furniture, exposed pipework, missing taps and peeling wallpaper. This made it difficult to keep the environment clean. (see requirement 1).

Although staff had received training in COVID-19 and infection, prevention and control, it was clear there were gaps in their knowledge and understanding. For example, making a bed without the appropriate mattress cover and emptying a commode but not effectively cleaning and drying it, before placing it back. Although singularly these are small issues, when combined with the overall cleanliness and maintenance of the home, together they pose a significant challenge to ensuring a safe environment for people. (see area for improvement 2).

The service was quick to respond to our concerns and agreed to address the issues immediately.

7.3 Staffing arrangements are responsive to the changing needs of people experiencing 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 Personal Protective Equipment (PPE) to keep themselves and others safe. Spot checks to assess staff practice and identify areas for improvement had been undertaken. However, these needed to be further developed to include the areas of concern identified in 7.2. (see area for improvement 3).

We were confident that there was enough staff on duty 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. Staff observed social distancing when passing in the corridors and taking breaks. We saw people being helped to stay socially distanced by thoughtful use of communal rooms and corridor areas. These measures helped minimise the possibility of cross infection.

Requirements

1.

By 26 March 2021, in order to ensure the health, wellbeing and safety of service users, the provider must improve infection prevention and control measures to ensure people are safe. This must include, but is not limited to:

- a) carry out a deep clean of all bedrooms and en-suite bathrooms;
- b) the environment must be clutter-free, intact, clean and safe including but not limited to flooring, bathroom sanitary ware and fixtures and fittings;
- c) all care equipment, including but not limited to, commodes and mattresses must be clean, intact and safe for resident use;
- d) the disposal and management of internal and external clinical waste must be in accordance with standard infection control precautions (SICPs).

This is in order to ensure that care and support is consistent with the Health and Social Care Standards 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);

"I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes." (HSCS 4.19); and

In order to comply with Regulation 10 (1) Fitness of premises Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) and Regulations 4(1)(a) and (d) welfare of users and procedures for the prevention and control of infection.

Areas for improvement

1.

The service needs to work with people to help them recognise when issues relating to their personal care and environment pose a risk to their health and wellbeing and plan together how this can best be supported, so that people are enabled to make informed lifestyle choices.

This is in order to ensure care and support is consistent with the Health and Social Care Standards which state that:

"I am supported to make informed lifestyle choices affecting my health and wellbeing, and I am helped to use relevant screening and healthcare services." (HSCS 1.28).

2. The provider should identify where there are gaps in staff knowledge, provide the relevant training and assess staff competency. This includes, but is not limited to, the care and management of mattresses and bedding and the cleaning and management of care equipment, including commodes.

This is in order to ensure care and support is consistent with the Health and Social Care Standards which state that:

"I experience high quality care and support because people have the necessary information and resources." (HSCS 4.27).

3.
The provider should review their quality auditing system and ensure there is continuous improvement made to, but not limited by:

a) furniture, fixtures and fittings, mattresses, bedding, care equipment, bathroom sanitary ware and flooring.

This is in order to ensure care and support is consistent with the Health and Social Care Standards which state that:

"I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes." (HSCS 4.19); and

"I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment." (HSCS 5.22).

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 provider should ensure that the environment enhances residents' quality of life and is a pleasant place to live. In order to achieve this:

- Disabled access should be reviewed to ensure that residents are able to move easily around the house and outdoors.
- Lighting levels should be reviewed to ensure that these support people who may have impaired vision to move about as independently and safely as possible.
- The programme of redecoration should continue to ensure that all rooms and corridors are kept in good decorative order.
- Work is continued to identify and cover all hot surfaces (hot pipes and radiators).

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

"I can use an appropriate mix of private and communal areas, including accessible outdoor space, because the premises have been designed or adapted for high quality care and support" (HSCS 5.1); and
 "I can independently access the parts of the premises I use and the environment has been designed to promote this." (HSCS 5.11).

This area for improvement was made on 15 August 2019.

Action taken since then

This was not considered during this COVID-19 focused inspection, although aspects of the environment that related to infection, prevention and control did require improvement. Please see the requirements section of this report.

Previous area for improvement 2

The provider should review the current provision of activities as part of their service development plan. This should include, but not be limited to:

- Staff resources, allocation, and skills mix.
- Better formulation of individual personal outcomes for meaningful activities and more detailed evaluations of activity care plans.

- Access to a safe and secure, easily accessible outside space.
- Support with opportunities to connect with family, friends, and the local community.
- Opportunities to be physically active every day.

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

"I can choose to have an active life and participate in a range of recreational, social, creative, physical, and learning activities every day, both indoors and outdoors." (HSCS 1.25).

This area for improvement was made on 15 August 2019.

Action taken since then

This was not considered during this COVID-19 focused inspection, although aspects of opportunities to connect with relatives and loved ones did form part of the inspection, in relation to COVID-19. Please see the main body of this report for more information.

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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