

Peebles Nursing Home Care Home Service

Tweed Green
Peebles
EH45 8AR

Telephone: 01721 728 180

Type of inspection:
Unannounced

Completed on:
11 March 2021

Service provided by:
Mansfield Care Limited

Service provider number:
SP2005007720

Service no:
CS2010271379

About the service

Peebles Nursing Home provides a care home service to 31 older adults. The service is provided by Mansfield Care Limited.

The service is situated in Peebles in the Scottish Borders. The home provides nursing care with, at times, senior carers on night duty who have access to a nurse on call.

The aims and objectives of the service include: "All our staff strive to create a warm, friendly atmosphere where comfort, safety and security are paramount, and where each resident can be the person he or she has always been."

This inspection was carried out by inspectors from the Care Inspectorate and an advisor from NHS Borders.

This was a focused follow up inspection to evaluate two outstanding requirements.

What people told us

We spoke with 11 of the 24 people living in the home at the time of the inspection. Their comments included:

"The girls are all lovely, very happy here".

"I am still happy here, it's going well".

"I am doing well, I am happy".

How good is our care and support during the COVID-19 pandemic?

We carried out an inspection on 11 March to follow up on requirements made from the inspection of 5 October 2020 relating to

- Staffing
- Medication

We visited the service on 10 August, 17 & 29 September 2020 regarding infection prevention and control, staffing and medication. We made requirements that needed to be acted upon immediately. We visited the service again on 5 October 2020 to follow up on these actions. We were satisfied that infection prevention and control had sufficiently improved to meet the requirement. Improvements were observed to staffing and medication, but we needed more reassurance from the service that this could be maintained. The timescale to meet the requirement was extended.

We revisited on 11 March 2021 and identified that the provider had achieved improvements in both staffing and medication to meet the requirements made. However, sustainability is key to ensuring that adequate staffing continues. We have replaced this requirement with an area for improvement to enable the service to continue to build on the achievements they have already made.

On this visit we identified issues with the laundry and the management of this. We have made an area for improvement regarding this.

Areas for improvement

1. To ensure people have their clothing laundered safely, careful handling and management of all items is important to reduce risks from cross infection. The laundry staff should ensure:

- (i) There is appropriate oversight and quality assurance to identify when the laundry has reached capacity, resulting in large amounts of washing still to be laundered.
- (ii) Contingency is in place to support the laundry should large amounts of washing still be an issue.
- (iii) There are clear guidelines in place to ensure that all washing is washed at the appropriate temperatures to maintain infection prevention and control; and there is appropriate oversight and quality assurance to ensure this is being maintained.

This is consistent with 5.17 "I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment" (Health and Social Care Standards), and 5.17 "My environment is secure and safe" (Health and social Care Standards)

2. People experiencing care should have responsive care from the right number of staff with the correct skills and qualifications. The provider should continue to build on the improvements made and continue to:

- review staffing skills and qualifications and provide a document detailing the staffing establishment for the care home for all staff employed, including the whole-time equivalents and contingency for absences
- detail within the staffing establishment how registered nurses will cover the care home for those people (service users) who receive nursing care. This should include any on-call rotations for nurses over a 24-hour, seven-day week cycle.
- outline how people's care and support needs are assessed and contingency of the staffing establishment for fluctuations in people's needs; and
- use the March 2021 Guidance for Providers on the Assessment of Staffing Levels available on the Care Inspectorates website.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: "I am assessed by a qualified person, who involves other people and professionals as required." (HSCS 1.13); "My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected." (HSCS 1.23);

"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." (HSCS 3.14);

"My needs are met by the right number of people." (HSCS 3.15);

"People have time to support and care for me and to speak with me." (HSCS 3.16);

"I am confident that people respond promptly, including when I ask for help." (HSCS 3.17); and

"I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability or frailty." (HSCS 3.18)

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

Requirements

Requirement 1

People experiencing care should have responsive care from the right number of staff with the correct skills and qualifications. In order to ensure there is a process to establish the correct staffing complement the provider must, by 14 October 2020:

- i) review staffing skills and qualifications and provide a document detailing the staffing establishment for the care home for all staff employed, including the whole-time equivalents and contingency for absences
- ii) detail within the staffing establishment how registered nurses will cover the care home for those people (service users) who receive nursing care. This should include any on-call rotations for nurses over a 24-hour, seven-day week cycle
- iii) provide a copy of one of your on-call rotations of nurses over a 24-hour, seven-day week cycle identifying the nurses who will cover the cycle
- iv) outline how people's (service users) care and support needs are assessed and contingency of the staffing establishment for fluctuations in people's needs; and
- v) outline all vacancies and provide a plan with dates for recruitment to vacant posts. This plan should include any anticipated vacancies and details about how vacant posts will be covered during the plan to recruit.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: 'I am assessed by a qualified person, who involves other people and professionals as required.' (HSCS 1.13); 'My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected.' (HSCS 1.23); '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.' (HSCS 3.14); 'My needs are met by the right number of people.' (HSCS 3.15); 'People have time to support and care for me and to speak with me.' (HSCS 3.16); 'I am confident that people respond promptly, including when I ask for help.' (HSCS 3.17); and 'I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability or frailty.' (HSCS 3.18).

This is also in order to comply with: Regulation 15(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This requirement was made on 5 October 2020.

Action taken on previous requirement

Care and support for people had improved. There was a better ratio of skill mix to support the needs of the people they support. Nursing cover continued to be challenging; however, the manager now ensured that there was nursing cover from 08.00 till 20.00.

Nurse on-call systems continued to be provided by the manager and operational management for night cover and weekends. This meant nursing advice could be easily accessed if people became unwell.

The provider continued to recruit to vacant posts. However, the manager had a better overview of these and how they were managed to ensure that vacancies did not impact on responsive care for people.

The management structure continued to fluctuate, but the operational management team, although new, had a good oversight of the home. We were reassured that operational management were able to step in when needed.

There was ongoing audit and assessment. This ensured that when people's needs changed staff had enough knowledge and skills to ensure people could be supported responsively and with kindness.

Met - outwith timescales

Requirement 2

By 3 February 2020, the provider must improve the management of medication within the service. In order to achieve this, the provider must ensure that medication is administered at the right time, with the right amount time between doses. To be completed by 3 February 2020.

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

'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'. (HSCS 3.14)

This is in order 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).

This requirement was made on 5 October 2020.

Action taken on previous requirement

The morning medication round was the largest and took the longest time to complete. We saw improvements in how this was being managed with both the nurse on duty and team leader involved in the dispensing of medication. We discussed this with the manager, who was hoping to engage with the GP surgery to have people's medications reviewed.

To ensure people's mealtimes were protected and in consultation with the people lunch service had moved to 12.30 and the evening meal to 17.00. That in turn meant that medication was not being started till 13.30 and 17.30 respectfully. This enabled people to eat their meal whilst not being bothered with medication administration.

Met - outwith 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

To ensure people are kept safe, the provider should implement appropriate procedures for the control and prevention of infection. How staff manage waste, particularly if there should be an outbreak of infection in the home, should be improved. To achieve this, the provider should make sure: - staff have relevant training in the management of waste; and - review and evaluate waste management practices, adjusting and making improvements, as necessary.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: 'My environment is secure and safe.' (HSCS 5.17); and 'I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings, and equipment.' (HSCS 5.22).

This area for improvement was made on 5 October 2020.

Action taken since then

Infection prevention and control regarding the management of waste had improved. However, we will leave this area for improvement to ensure it is followed up at the next inspection

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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