

Roselea House Care Home Service

175 Stenhouse Street
Cowdenbeath
KY4 9DD

Telephone: 01383 514 744

Type of inspection:
Unannounced

Completed on:
18 March 2021

Service provided by:
Kingdom Homes Ltd

Service provider number:
SP2003001615

Service no:
CS2009236885

About the service

Roselea House is registered to provide care to a "maximum of 20 older people with dementia and requiring nursing care". The care service is based in a modern, purpose-built, single-storey building, which is owned by Kingdom Homes Ltd. The service provides accommodation in 20 single ensuite rooms, along with pleasant lounge and dining areas. A well kept garden area is located to the rear of the property.

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 an inspector from the Care Inspectorate. There were 15 people living in Roselea House at the time of our visit.

What people told us

Residents were unable to tell us verbally about their experience of living at Roselea House. To help us understand their experiences, we spent some time observing how they interacted with each other and staff. We saw lots of positive, friendly, and respectful interactions, and people appeared to be happy and relaxed in their environment.

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

At our last inspection our initial findings were of a need for improvements regarding the management of medication. Our focus in this inspection area was to follow up the requirement made at our last inspection and verify people's health and wellbeing benefitted from their care and support in relation to COVID-19.

Our findings can be found here and in the 'what the service has done to meet any requirements made at or since the last inspection' and 'what the service has done to meet any areas for improvement we made at or since the last inspection'.

7.1 People's health and wellbeing are supported and safeguarded during the COVID-19 pandemic.

We found the performance of the service in relation to wellbeing had been maintained. Failures in relation to recording the administration of medication had been addressed and people were getting their medication as required.

The way people spend their day should promote feelings of purposefulness and wellbeing. For those who spent time in communal areas there were activities on offer which improved people's experience and outcomes. People were supported, where appropriate, to move freely throughout the open spaces within the home to help reduce any stress or distress. People were supported to have access to food and drink while in their own rooms and, if they needed help, this was carried out in a dignified way with their personal preferences respected. Staff spoke with respect and compassion.

We found that the service had been responsive to both local and national guidelines for restricting non-essential visitors to the home during the pandemic and that visiting on compassionate grounds was supported safely. Preparations were in place for the recommencement of indoor visiting.

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

During a pandemic, the application of strict infection control procedures is paramount to make sure people are safe. Health Protection Scotland has issued practice guidance that all social care providers must follow to protect the safety and wellbeing of all people experiencing care and the workforce.

We found levels of cleanliness in the home to be adequate. The bedrooms, ensuite showers and communal areas were found to be tidy and well maintained. Bath hoists were clean and bathroom surfaces were well maintained and free from contamination. This meant that people experiencing care felt safe and secure and the risk of infection was reduced.

We found the service had good supplies of Personal Protective Equipment (PPE) and staff knew how to access it. The PPE was situated at the entrance of the home and at many PPE stations.

We saw staff performing hand hygiene when entering the different areas of the home and when providing care for individuals. This is required to break the transmission path between individuals.

We saw that laundry and waste, including clinical waste, was managed appropriately.

Government guidelines and processes provide regular testing for staff. The availability of this testing was communicated to staff and there were two opportunities each week for staff to be tested. Staff were able to be tested during their days at work, resulting in a high rate of compliance.

7.3 Staffing arrangements are responsive to the changing needs of people experiencing care. People should have confidence in staff because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes.

We found the performance of the service in relation to staffing arrangements to be good.

Staff were visible and available for people. Support was provided promptly when requested or required. We observed a friendly approach, enabling conversations and reducing distress.

Some people chose to spend most of their time in their rooms. Those who had difficulty complying with safe distancing due to cognitive impairment or who chose to be in the communal areas were supported to either move around the unit safely or physically distance from other residents in the lounge areas. We saw staff physically distancing from each other whilst moving around the home. This helped reduce the risk of the spread of infection.

Staff told us of training they received about infection control practice, including, donning and doffing Personal Protective Equipment (PPE) and handwashing. We saw that there was good attention from staff making sure that the environment and shared equipment was clean, which reduced the risk of cross infection to residents and staff.

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

Requirements

Requirement 1

By 31 December 2020 you must ensure medication is managed in a manner that protects the health and wellbeing of service users.

In order to achieve this, the provider must:

- ensure that all medication is administered as per the instructions of the person authorised to prescribe or discontinue a medicine
- ensure that all handwritten entries are signed and dated by two members of staff and reference is made to the prescriber.

This is in order to comply with SSI 2011/28 Regulation 4 - requirement for records all services must keep, and SCSWIS (Requirements for Care Services) Regulations SSI 2011/201 Regulation 4(1)(a) - requirement for the health and welfare of service users.

This requirement was made on 15 December 2020.

Action taken on previous requirement

We found effective action had been taken to meet the requirement in terms of audit, contingency planning and staff training regarding electronic systems and their back up. As a result, people received their medication and systems had been developed to sustain improvements.

Met - within 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

The service needs to complete the end of life care plans for all people in the service, to ensure their needs and wishes are respected, should they become unwell.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that: 'I am fully involved in developing and reviewing my personal plan, which is always available to me'. (HSCS 2.17)

This area for improvement was made on 15 December 2020.

Action taken since then

The service had anticipatory care plans in place that included details of individuals' personal preferences. As a result, their needs and wishes could be respected should they become unwell. Discussions with staff verified they felt supported to deliver care when people became unwell, and provide end of life care as people would want.

Previous area for improvement 2

The service should ensure that planned repairs and replacements are completed in a timely manner.

This is 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 5.21)

This area for improvement was made on 15 December 2020.

Action taken since then

We found the home and care equipment were clean, tidy, and well maintained. Examination of records verified planned repairs and replacements are completed in a timely manner. Discussions with staff confirmed their knowledge of systems in place to request repairs and replacements.

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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