

Lower Johnshill Care Home Service

New Trows Road
Lesmahagow
Lanark
ML11 0JS

Telephone: 01555 890 993

Type of inspection:
Unannounced

Completed on:
18 March 2021

Service provided by:
MHA Auchlochan

Service provider number:
SP2008010194

Service no:
CS2013322705

About the service

Lower Johnshill care home has been operated by Methodist Housing Association (MHA) since 2008. It is set in extensive grounds, containing a range of other services operated by MHA including housing. It is close to the village of Lesmahagow.

Lower Johnshill is registered to accommodate up to a maximum of 78 older people with physical/sensory needs and/or memory impairment, inclusive in these places are:

- Five places for older adults aged 50-64 years.
- Eighteen nurse led places in the dementia unit on the top floor.
- Eighteen places in the residential unit for those with memory impairment/dementia on the middle floor.
- Fourteen nurse led places in the unit for those with physical/sensory impairment on the ground floor.
- To provide a maximum of two places for respite/short breaks to the same clients groups.

At the time of inspection there were 63 residents.

The accommodation was purpose-built and is over three floors. The accommodation provides people with bedsit style rooms, with full bathrooms and small kitchen areas, where people can make snacks and drinks if able.

Each unit has its own living and dining space. The home has an enclosed garden for people using the service.

MHA's mission statement is 'to improve the quality of life for older people, inspired by Christian concern - this is based on the provision of high quality person centred care and support; founded on respect for individuality, personal choice and dignity and focused on nurturing a person's spiritual and physical wellbeing'.

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 and Healthcare Improvement Scotland.

What people told us

We spoke to a few residents during the inspection who told us that the food was usually good, with choices available. They told us that staff were friendly and polite and that if they needed help, then staff would assist them.

Due to COVID-19 restrictions there were no relatives visiting that we could speak with during the inspection.

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.

We evaluated how well people's health and wellbeing was supported. We concluded that this was adequate with some important strengths.

We found that people who used the service were being cared for in a homely environment. Residents looked relaxed and we saw caring interactions between them and staff.

Aspects of the home's usual activity programme that could continue were taking place with the introduction of some new ways for supporting people through the pandemic. These included more individual time with people.

People were supported to maintain contact with their family and friends using technology and the home was adhering to local guidance for visiting.

We found that support with nutrition needed improved to ensure that people are offered drinks and snacks throughout the day, especially out with set mealtimes. We were unable to evidence that those people who had been identified in their care plan as needing extra support due to risk of malnutrition were always supported to achieve this. Please see requirement 1.

We found that supporting daily charts were being completed inconsistently, including for food, fluid, the application of topical medications and skin integrity. Please see requirement 1.

People could be confident that Covid-19 symptoms would be identified. Appropriate escalation of any concerns to health professionals were made so that they received the right treatment at the right time.

Overall, people could be confident that their personal plan was being continually evaluated to ensure that it was kept up-to-date. A few aspects needed to be reviewed, but the service were aware of these and had a plan to address them. Residents and/or their families were involved in reviewing their care plans to ensure that they continued to meet their needs.

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

We found some strengths, however, although these strengths had a positive impact on people's experience and outcomes there was a need to address concerns during the inspection. We concluded that the service was performing at a weak level.

We found that personal protective equipment (PPE) was readily available for staff to use to support keeping people safe, however, staff did not always use PPE correctly. Handwashing facilities and hand sanitiser were available throughout the home,

People benefited from a range of ways to promote social distancing which ensured that the service was managing social distancing effectively for both residents and staff.

We had concerns in relation to standards of cleanliness throughout the home. Some mattresses and covers were contaminated and needed to be replaced. The service had recently completed a full audit of these and were awaiting a delivery, however, we asked them to replace the contaminated ones immediately with mattresses from empty rooms. We noted that the undersides of tables, chairs and care equipment required additional cleaning to minimise the risk of infection. Please see requirement 2.

Although staff had received training in infection prevention control and COVID-19, knowledge was inconsistent across the staff we spoke to. This meant that practice was also inconsistent, including the application of the two-step cleaning process was not always adhered to.

Staff had access to the most up to date version (version 2.1) of the Health Protection Scotland Guidance for Care Home settings. Staff should also have access to the National Infection Prevention and Control Manual (NIPCM). Senior staff were not aware of either of these publications. Please see requirement 3.

7.3 Staffing arrangements are responsive to the changing needs of people experiencing care.

We evaluated if the staff team had the right competence, knowledge, and skills to support people in relation to COVID-19. We found that this was adequate with some important strengths.

A dependency tool was being used to determine how many staff were needed to care for people and that they had the right skills. This meant that there were sufficient staff working in the home to support people. However, we did ask the service to monitor staffing in the nursing unit for people living with dementia and to review how staff were deployed to ensure that someone was available to monitor communal areas.

Staff demonstrated a commitment to the care home and engaged warmly with residents who responded positively, appearing relaxed and contented.

Residents we spoke with told us that staff were kind, helpful and respectful and that they got on well with them.

Staff had received training on infection prevention and control, COVID-19, PPE and handwashing. Management had recently introduced observations of staff practice in these areas to monitor that staff were putting their training into practice. However, areas identified through the inspection indicated that staff knowledge and practice needed to be improved in relation to infection prevention and control and the use of PPE to keep people safe. Please see requirement 3.

Requirements

1. To ensure that people are fully supported with their nutritional and other health care needs, the provider must ensure that by 9 April 2021 that:

- Healthy meals, snack and drinks are offered throughout the day. This must include any special dietary needs individually identified for those at risk of malnutrition.
- Maintain daily health records including those for food/fluid intake, topical application of medications and skin care. These records must be monitored by senior staff to ensure that they are meaningful.

This ensures that care and support is consistent with 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) 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 necessary to comply with Regulation 4 (1) (a) "A provider must make proper provision for the health, welfare and safety of service users" of The Social Care and Social Work Improvement Scotland (Requirement of Care Services) Regulations 2011 (SSI 2011/210).

2. To ensure that people experience care and support in an environment that is safe and meets necessary infection prevention and control standards, by 9 April 2021, the provider must ensure that:

- All care equipment is clean and safe for use. This includes but is not limited to all mattresses, chairs, cushions and tables, inner surface of mattress and chairs, and undersides of equipment and tables.
- There is a reliable system in place to provide assurance that all resident care equipment and the environment is clean and intact.

This ensures that care and support is consistent with Health and Social Care Standards which state: "I experience an environment that is well looked after with clean, tidy and well maintained premises, and furnishings and equipment." (HSCS 5.22). It is also necessary to comply with Regulation 4 (1) (d) "A provider must have appropriate procedures for the prevention and control of infection" of The Social Care and Social Work Improvement Scotland (Requirement of Care Services) Regulations 2011 (SSI 2011/210).

3. To ensure that people experience safe care and support from staff who adhere to the necessary infection prevention and control standards, by 9 April 2021, the provider must ensure that:

- The most up to date and relevant guidance, particularly around infection prevention and control is accessible to all staff.
- Staff receive training, development and practice observations to maintain safe care.

This ensures that care and support is consistent with Health and Social Care Standards which state: "I experience high quality care and support based on relevant evidence, guidance and best practice." (HSCS 4.11). It is also necessary to comply with Regulation 4 (1) (d) "A provider must have appropriate procedures for the prevention and control of infection" of The Social Care and Social Work Improvement Scotland (Requirement of Care Services) Regulations 2011 (SSI 2011/210).

Areas for improvement

1. The service should develop a Safe System of Work for the cleaning and decontaminating of commodes, commode basins and urinals.

This ensures 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) .

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

Requirements

Requirement 1

To ensure that people are confident that at all times suitably qualified and competent persons are working in the care service in such numbers as are appropriate for the health, welfare and safety of service users; by 31 July 2019, the provider must have a system in place that:

- i. Calculates the dependencies of current service users at least every 4 weeks or when there is a significant change in total numbers of service users and/or their conditions.
- ii. Considers not only the hours of the dependency tool, but also their own observations of outcomes for people and feedback from staff, residents and relatives.
- iii. Sets out the required staffing levels to be able to meet or exceed the required dependency hours.
- iv. Have records of these available for inspection.

This ensures care and support is consistent with the Health and Social Care Standards, which state: "My needs are met by the correct number of people." (HSCS 3.15) It also complies with Regulation 15(a) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI2011/210).

This requirement was made on 9 May 2019.

Action taken on previous requirement

We reviewed this and found that dependency levels were being carried out monthly with staff rotas being kept. We observed that where needed, agency staff were used to ensure staffing levels were safe.

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

The service should ensure that structured activities are carried out in a meaningful way. They should ensure that providing stimulation for residents is seen to be as important as supporting them with their physical care needs and that care staff have the time to facilitate this.

This ensures that care and support is consistent with the Health and Social Care Standards, which state: "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 9 May 2019.

Action taken since then

Please see information under Key Question 7.1

This area for improvement had been met.

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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