

Lower Johnshill Care Home Service

New Trows Road
Lesmahagow
Lanark
ML11 0JS

Telephone: 01555 890 993

Type of inspection:
Unannounced

Completed on:
28 April 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.

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 follow-up inspection to monitor the progress made in addressing the requirements since the inspection on 18 March 2021.

What people told us

During the inspection we observed and spoke with a number of residents who told us that the food was good, and the staff were caring.

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

This was a follow-up inspection to monitor the progress made in addressing the requirements since the inspection on 18 March 2021. Please see requirements and areas for improvement for further details.

We recognise the progress that has been made to improve and support people who live in the service. However, from our observations on the day of our visit we have concerns relating to staffing levels and staff's availability to provide appropriate care and support. Staff appeared committed and displayed kind, positive interaction with residents. However, they were very busy and there were times when there were no staff visible in communal lounge/dining areas. Therefore, in order that the staff are able to offer responsive care to the needs of the residents, we have introduced an additional requirement (See requirement 1).

Requirements

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 17 May 2021 the provider must have a system in place that:

- i. 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.
- ii. Sets out the required staffing levels to be responsive to the changing needs of people experiencing care.

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).

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 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).

This requirement was made on 18 March 2021.

Action taken on previous requirement

The service has reviewed and improved the documentation used to record daily food and fluid intake. This has resulted in clearer information for staff on how to support individuals with the appropriate diet and required fluid intake relevant to their healthcare needs. Staff are aware of the importance of completing the daily healthcare charts accurately, namely food/fluid intake, topical application of medications and skin care, and this was evident in the improvement we saw at this inspection visit.

These charts are now being audited by senior staff during the day to ensure they are up to date and accurate. In addition to this, the manager also reviews each chart at the end of each day to ensure people's healthcare needs are being met. Where discrepancies are identified these are discussed with staff the following day in order to identify the individuals who are at risk of dehydration or malnutrition. We discussed ways of making this process clearer in order to support the manager with an audit trail demonstrating any gaps or concerns identified with actions taken to support further improvement.

We recognise the hard work and improvement staff have made to improve and support people's nutritional and healthcare needs. However, we found gaps in these records and from our observations on the day of our visit we have concerns relating to staff's availability to provide responsive care in relation to dietary needs therefore this requirement will be repeated.

The timescale for this requirement has been extended to 17 May 2021.

Not met

Requirement 2

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

This requirement was made on 18 March 2021.

Action taken on previous requirement

The home environment appeared clean, odour free and well maintained. However, on closer inspection we identified a number of items of equipment and furniture to be contaminated, not cleaned to an appropriate standard or not fit for purpose. This increases the risk of infection or injury for residents in the service. Overall, compliance with required infection prevention and control measures had improved but aspects of cleaning in relation to equipment and furnishings still need to be more closely checked and monitored.

Previous scrutiny activities and internal audits have identified a range of equipment and furnishings that need to be replaced. We recognise that this is a phased approach with replacements being obtained on a priority basis. The provider has agreed to compile an audit of all items needing replaced with an action plan that will reflect the phased timescales for this to be resolved. This can then be considered when future inspections are undertaken by the Care Inspectorate, the Health and Care Partnership and or other relevant professionals.

Staff had received training and were knowledgeable about COVID-19 and infection prevention and control measures, however there needs to be clarity on the cleaning expectations between care staff and domestic staff. In the absence of clear responsibilities for cleaning aligned to roles, there is a risk that those who live in the home will not benefit from an environment which protects them from the risk of cross-infection. The service had introduced a number of measures to audit the environment and monitor staff practices. These had identified a number of areas for improvement and outlined the action taken. However, our findings above indicate further improvements are required to ensure that standards are understood, achieved and maintained to prevent the risk of infection,

The timescale for this requirement has been extended to 17 May 2021.

Not met

Requirement 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).

This requirement was made on 18 March 2021.

Action taken on previous requirement

The service has obtained the relevant guidance, particularly around infection prevention and control and staff were aware of its existence and location. We also found that staff had received some good training on infection prevention and control and the manager had introduced spot checks to monitor staff competency as a means to identify and rectify poor practices in relation to infection prevention and control. This allowed the service to act responsively to address any practice issues, which helped ensure people were protected from the risk of cross-infection. We recognise that this has been a significant piece of improvement work aimed at improving staff knowledge and practices in line with the requirement therefore this requirement has been met.

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 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).

This area for improvement was made on 18 March 2021.

Action taken since then

The service has introduced a number of audits to monitor the cleanliness and infection prevention and control practices of the environment and equipment. Staff did confirm compliance when describing the method that they adopt to clean these items. We saw that these did identify areas that needed further attention and that action was taken. However, during the inspection we found a number of items that were not cleaned to the appropriate standard to prevent the risk of infection. We will continue to monitor this area for improvement.

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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