

Benholm Nursing Home Care Home Service

76 Glamis Road
Forfar
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Telephone: 01307 464 281

Type of inspection:
Unannounced

Completed on:
10 May 2021

Service provided by:
Tamaris (RAM) Limited, a member of
the Four Seasons Health Care Group

Service provider number:
SP2007009152

Service no:
CS2003010713

About the service

This service has been registered since 2002.

Benholm Nursing Home is situated on the outskirts of Forfar. The home is a converted traditional mansion house and retains many original features, including well established grounds. A small area of the garden is secured, with a patio area accessed via the dining room.

The building has two floors accessible by a lift. Bedrooms have en-suite toilets and wash hand basins. Adapted bathing and showering facilities are available on each floor. The ground floor has a lounge and separate dining room, as well as a conservatory and hairdressing salon. Upstairs the communal area comprises of a homely lounge/dining area.

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 with a number of people during our visit but did not gather formal feedback from those living in the home at this time. Those we spoke to appeared settled and were well cared for in their dress and personal presentation.

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?	3 - Adequate
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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?

3 - Adequate

At our last inspection our initial findings were that the service needed thorough cleaning and effective oversight of staff practice. COVID and infection control audit was not effective and there were issues with the cleanliness and use of pressure relieving mattresses and with laundry processes. We returned to the service within 48 hours to monitor progress on the requirements made.

On conclusion of our last inspection some improvements had been made which would help to ensure that people living in the home were safer. Infection prevention and control measures had been put in place to help reduce the risk of cross contamination. We needed to be sure that these improvements had been sustained.

Our focus in this inspection was to follow up requirements made at our last inspection and verify people's health and wellbeing benefitted from their care and support in relation to COVID-19.

Our main findings can be seen in the 'What the service has done to meet any requirements made' sections of this report.

We found that strengths outweighed weaknesses, resulting in an evaluation of 'adequate'. These strengths had a positive impact on people's experience and outcomes. We have re-graded the service as a result.

We wrote this report following an unannounced inspection. The inspection took place on 10 May 2021. During the inspection, we spoke with people who use the service, the manager, staff and observed care practice. We looked at progress recorded in relation to the requirements made at the last inspection, audit and cleaning records, the environment and equipment used by people and management oversight documents.

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

Requirements

Requirement 1

In order to ensure that people experience a safe, clean, and well maintained environment which minimises the risk of infection, the provider must address identified issues by 30 April 2021. In particular, you must ensure:

- a) All equipment is clean and safe to use.
- b) There is an effective and comprehensive quality assurance system in place to ensure that the environment is consistently safe and well maintained. Effective systems and processes must be put in place to ensure that equipment cleanliness and state of repair are accurately recorded so that assurance can be taken from these processes.
- c) Waste is segregated correctly and waste containers are locked at all times.
- d) All policies relating to the cleaning of the care service, and infection prevention and control, are up to date and in line with Public Health and Health Protection Scotland guidelines.

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(a) and (d) - Welfare of users and procedures for the prevention and control of infection; and Regulation 10(1) - Fitness of premises.

This requirement was made on 26 March 2021.

Action taken on previous requirement

PPE was available in multiple locations throughout the home and was stored in a safe and orderly way, which promoted good practice. Bins were accessible throughout the home and waste was being separated correctly. We could see that practice and provision regarding PPE and it's disposal had significantly improved.

We examined a number of items of care equipment and found them to be clean and in a good state of repair. Both communal and individual rooms were clean and uncluttered and we could see a good level of improvement since the last inspection.

Thorough quality assurance systems were identifying errors and steps were being taken to rectify issues promptly and effectively. Staff from all departments were involved in ensuring that standards were maintained and that systems of feedback and overview were implemented to effect improvement.

Met - within timescales

Requirement 2

In order to ensure that people are protected from skin damage and infection the provider must, by 30 April 2021:

- a) Ensure that all mattresses and bed equipment are suitable, correctly used, and clean (this includes but is not limited to bed rails, bumpers, and bed heads).
- b) Ensure that when the integrity of a mattress is compromised it is replaced.
- c) Ensure that all staff are competent in mattress placement and use when pressure relieving mattresses are used.

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

It is also necessary to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(d) - Welfare of users; and Regulation 10(2)(b) - Fitness of premises. 3. In order to ensure that linen is managed in a safe way.

This requirement was made on 26 March 2021.

Action taken on previous requirement

We examined a number of mattresses and bed equipment and found all to be clean, suitable and correctly used. Some mattresses had clearly been recently replaced and were of a good standard. Mattress checks were being regularly undertaken as part of a 'resident of the day' cleaning and audit system. When rooms were deep cleaned we could see that this process was quality checked to ensure that a good standard of hygiene had been achieved. The management team had oversight of the checks and audits being undertaken within the home which ensured a good standard of practice could be maintained.

Met - within timescales

Requirement 3

In order to ensure that linen is managed in a safe way and in order to prevent infection the provider must, by 30 April 2021:

- a) Ensure that the processes and equipment used in the laundry are correct according to the National Infection Prevention and Control Manual (NIPCM).
- b) Ensure that all laundry items are appropriately segregated, stored, and laundered in accordance with current guidance.

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

"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 The Social Care and Social Work Improvement Scotland (Requirements for

Care Services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(a) and (d) - Welfare of users and procedures for the prevention and control of infection. 4.

This requirement was made on 26 March 2021.

Action taken on previous requirement

A number of steps had been taken to improve the infection prevention control processes within the laundry area. Clean and dirty laundry were clearly separated in dedicated receptacles, in a defined area. Clean laundry was stored in an adjacent room, ensuring more space, a better flow through the laundry and reduced risk of cross contamination.

Washing machine temperatures met current guidance to reduce the spread of infection and, where errors or omissions occurred, these were picked up promptly by the audit system. Staff from laundry, domestic and care groups were aware of the systems and processes in place. The management team continue to provide overview and guidance to ensure that systems are clear and easy to use.

Met - within timescales

Requirement 4

By 30 April 2021, the provider must ensure that maintenance checks of the building and equipment are thorough.

Staff must ensure issues are reported and safety systems are fully implemented. You must develop a refurbishment plan that takes into account key priorities for action with realistic timescales to improve the environment and prioritise measures which improve infection prevention and control.

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 10(2)(a), (b), (c), and (d) - Fitness of premises.

This requirement was made on 26 March 2021.

Action taken on previous requirement

We examined both communal, private and domestic areas of the home and could see that some maintenance work had been completed since our last inspection. Repainting and repair of one corridor had been undertaken and plans to continue that work were in place.

We spent time discussing the next priorities with the manager and encouraging timescales to be set. These priorities should now be focused on maintenance and redecoration which has a direct impact on outcomes for people living in the home.

Although many bedrooms are bright and attractive, others require attention to ensure that they are well maintained, welcoming and comfortable. We will continue to monitor this requirement and have extended the timescales for it's completion.

The provider must develop a refurbishment plan which provides realistic timescales for completion. This should be available by 28 June 2021.

Not met

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 there is managerial oversight of staff practice and the delivery of care and support on a regular basis. This is to ensure the assessed needs of the person receiving care and support are delivered as directed in the support plan. To achieve this, the service must ensure appropriate strategies are introduced to monitor and evaluate the assessed care and support and it's delivered as directed in the support plan. To be completed by 30 April 2021.

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

"My care and support is delivered in a planned and safe way, including if there is an emergency or unexpected event." (HSCS 4.14).

This area for improvement was made on 26 March 2021.

Action taken since then

A number of systems had been put in place that provided oversight for the manager and communicated to the team any areas requiring attention. We could see from the daily check sheet that issues were being picked up and promptly addressed.

We could also see from team meeting minutes that emphasis and priority was being given to infection prevention and control and ensuring that practice and standards were being maintained. It was evident from our environmental walk round that the systems of monitoring were having a direct impact on ensuring a safe and clean environment for people living in the service.

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?	3 - Adequate
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	3 - Adequate
7.3 Staffing arrangements are responsive to the changing needs of people experiencing care	3 - Adequate

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