

Archview Lodge Care Home Care Home Service

Newmills Road
Dalkeith
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Telephone: 01316 630 646

Type of inspection:
Unannounced

Completed on:
1 June 2021

Service provided by:
Barchester Healthcare Ltd

Service provider number:
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Service no:
CS2007143305

About the service

Archview Lodge Care Home is registered with the Care inspectorate to provide a care service for a maximum of 78 older people. The service is provided by Barchester Healthcare Ltd.

Archview Lodge Care Home is a purpose-built care home on the south side of Dalkeith and is close to main bus routes and local amenities. The home is set within its own well-maintained grounds with private parking. Accommodation is provided over two floors with the upper levels accessed by lifts or stairs. There are three units, with one unit providing specialist support to people living with dementia. All bedrooms have en-suite facilities with toilet and wash hand basin. Each unit has sitting and dining areas and additional toilet and bathing facilities. There are separate laundry, main kitchen, offices, and staff facilities.

The aims and philosophies of Archview Lodge include: "The aim of the staff is to provide the highest possible standard of care within the home. The resident's individuality, dignity, privacy, and independence are not compromised because they are elderly, confused or disabled. Our aim is to give our residents the best possible quality of life."

This inspection was carried out by inspectors from the Care Inspectorate.

This inspection followed up on previous requirements and also reviewed key question one and five of our quality framework.

What people told us

We spoke with 20 out of the 74 people experiencing care, in communal areas and in the privacy of their rooms. People's views were positive both about the staff and the care and support they received. Some people were unable to tell us about their experience in the home, however we were able to observe respectful interactions between staff and the people they supported.

People we spoke with told us:

"Staff are very nice; I feel well cared for"

"I like the food"

"I like my room"

People were able to receive visitors and were enjoying being able to be with those important to them again.

We spoke with two relatives, who were happy and positive with the communication they had received from the manager throughout the pandemic. They told us:

"I am very happy. The home has provided specialist equipment that my wife needs. Communication is good and the staff are very nice."

"Happy, good communication from staff, happy with mum's care, nothing I would change."

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 well do we support people's wellbeing?	4 - Good
How well is our care and support planned?	4 - Good
How good is our care and support during the COVID-19 pandemic?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

4 - Good

People benefited from a comprehensive holistic health assessment, which was led by a knowledgeable nursing team, ensuring care and support benefited people's health and wellbeing.

Medication management systems adhered to best practice guidance. However, medication given in the form of lotions, creams and ointments was not always being given timeously and in line with the prescription. We have repeated this area for improvement.

Staff links with health professionals were responsive to people's changing health care needs so that they received medical attention and treatment when they needed it. However, there was an inconsistent approach to Anticipatory Care Planning (ACP). The lack of ACPs meant that people could not be assured of care that reflects their needs and wishes at the end of their life. The provider was working with the health and social care partnership to take this forward.

People were able to experience a wide range of meaningful activities and opportunities which included both in groups and one to one. As the pandemic continues and the risks become less, activities outwith the home had commenced. These included trips to the park and trips out for tea and coffee. People were encouraged to get involved in these activities but due to people having to isolate for such a lengthy period this was difficult for some. Staff were supporting them to get involved again.

People were able to choose from a variety of foods which was served in an area of their choice in an unhurried, relaxed environment.

How well is our care and support planned?

4 - Good

Personal plans had improved and contained up to date information to identify people's needs and wishes. However, due to the pandemic, involvement with families has been difficult. The management team identified this as an area to improve upon and they were taking steps forward to introduce mini care plans that could be kept in people's room where family, friends and carers could add or update information. This would help make sure that people's wishes and needs were supported where they were unable to contribute directly to their personal plan. Continuing improvements should include other ways to ensure greater involvement of people and those important to them in their personal planning.

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

4 - Good

People were supported by staff who knew them well and this promoted good health outcomes. People were provided with regular opportunities for stimulation and meaningful engagement.

Families were kept informed about their relatives' care, and feedback from families was positive. Social distancing was being managed sensitively and people were supported to move around safely. Visiting was facilitated well, with choice of time and place. People benefited from seeing those who were important to them.

Infection Prevention and Control (IPC) had improved. New equipment had been purchased and the appropriate cleaning solutions provided in line with government guidance. PPE supplies were good and were available and used appropriately.

The manager was increasing direct observation of staff practice to ensure that standards of practice were monitored and maintained.

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

Requirements

Requirement 1

By 31 May 2021 the provider must ensure that personal plans record all risk, health, welfare and safety needs, in a coherent manner, which identifies how service user needs are to be met. In order to do this, the provider must: - ensure that documentation and records are accurate, sufficiently detailed and reflect the care planned or provided.

This is to ensure care and support is consistent with the Health and Social Care Standards. 1.19: 'My care and support meets my needs and is right for me'. This is also in order to comply with: Regulation 4(1)(a) Welfare of users of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This requirement was made on 1 February 2021.

Action taken on previous requirement

Personal plans had improved and were able to reflect and sufficiently detail people's planned care.

These plans remained very large and contained information that may not be read all the time or relevant following admission to the home. The manager was looking to see how they could develop a mini care plan. This would be in people's rooms and accessible to the person's family and friends. See also key question five information.

Met - outwith timescales

Requirement 2

By 31 May 2021 the provider must ensure that personal plans record all risk, health, welfare and safety needs, in a coherent manner, which identifies how service user needs are to be met. In order to do this, the provider must:

- ensure that documentation and records are accurate, sufficiently detailed and reflect the care planned or provided.
- provide training so that staff are aware of their responsibility in maintaining accurate records and demonstrate that managers are involved in monitoring and the audit of records.

This is to ensure care and support is consistent with the Health and Social Care Standards. 1.19: 'My care and support meets my needs and is right for me'. This is also in order to comply with: Regulation 4(1)(a) Welfare of users of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This requirement was made on 1 February 2021.

Action taken on previous requirement

Personal plans had improved and were able to reflect and sufficiently detail people's planned care.

The nurses were knowledgeable about the people they supported and were able to record in people's plans using language people could understand.

Staff were reflective in their development of these plans. There was enough oversight from senior management and discussions on how these could be developed to make certain staff had the appropriate training to maintain accurate records.

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

In order to ensure good outcomes for people experiencing care, the provider should clearly evidence that people who require applications of creams and lotions are receiving this in accordance with the prescriber's instructions. In addition, all charts in use should also be clearly completed in accordance with the directions on these.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that: 1.24: 'Any treatment or intervention that I experience is safe and effective'. 4.11: 'I experience high quality care and support based on relevant evidence, guidance and best practice.'

This area for improvement was made on 1 February 2021.

Action taken since then

Medication given in the form of lotions, creams and ointments was not always being given timeously and in line with the prescription. We have repeated this area for improvement.

Previous area for improvement 2

The provider should ensure that hand hygiene is performed at every opportunity.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that: 1.24: 'Any treatment or intervention that I experience is safe and effective'. 4.11: 'I experience high quality care and support based on relevant evidence, guidance and best practice.'

This area for improvement was made on 1 February 2021.

Action taken since then

Hand hygiene by both staff and the people they support was appropriate. The manager was increasing direct observation of staff practice to ensure that standards of practice were monitored and maintained.

Previous area for improvement 3

The provider should ensure that deep cleans are carried out regularly and effectively and that chlorine releasing cleaning agents are always used in line with the National Infection Prevention and Control Manual.

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

This area for improvement was made on 1 February 2021.

Action taken since then

New equipment had been purchased and the appropriate cleaning solutions provided were now in line with government guidance. PPE supplies were good and were available for staff throughout the home. Staff used PPE appropriately.

Previous area for improvement 4

The provider should ensure that all maintenance issues including damaged surfaces are reported and repaired in a timely manner to allow effective cleaning.

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

This area for improvement was made on 1 February 2021.

Action taken since then

Staff documented any issues into the relevant unit's maintenance book. There were increased opportunities to walk around the units to ensure that any issues had been identified along with the general manager. The upstairs of the building is scheduled to be refurbished but maintenance of this area meant it was safe.

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 well do we support people's wellbeing?	4 - Good
1.3 People's health benefits from their care and support	4 - Good
How well is our care and support planned?	4 - Good
5.2 Carers, friends and family members are encouraged to be involved	4 - Good
How good is our care and support during the COVID-19 pandemic?	4 - Good
7.1 People's health and well being are supported and safeguarded during the COVID-19 pandemic	4 - Good
7.2 Infection control practices support a safe environment for people experiencing care and staff	4 - Good
7.3 Staffing arrangements are responsive to the changing needs of people experiencing care	4 - Good

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