

## Cumbrae Lodge Care Home Care Home Service

Castlepark Road  
Irvine  
KA12 8SZ

Telephone: 01294 313 311

**Type of inspection:**  
Unannounced

**Completed on:**  
11 June 2021

**Service provided by:**  
Guthrie Court Limited, a member of  
the Four Seasons Healthcare Group

**Service provider number:**  
SP2005007863

**Service no:**  
CS2012313121

## About the service

Cumbræ Lodge is registered to provide a care home service to a maximum of 78 older people who may have dementia, associated mental health needs and behaviour that may be of a challenging nature. There were 68 people resident in the service at the time of the inspection.

The provider is Guthrie Court Limited which is a subsidiary company of Four Seasons Healthcare.

This service registered with the Care Inspectorate on 2 April 2013.

The care home is located in the town of Irvine and is close to the main bus route. There are six separate units within the ground level building. Each unit provides single room accommodation for up to 13 people with shared dining, lounge, toilet and bathing facilities. The home also has a large garden.

The service has a contract with NHS Ayrshire and Arran to provide NHS continuing care for 26 people within two of the units.

The stated aim of the service is for "Residents to be treated as individuals and cared for with respect and dignity within a safe, comfortable and homely environment which provides stimulation and encourages independence where appropriate".

## What people told us

We did not speak to residents or relatives as part of this focussed follow-up 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 leadership?	4 - Good
How good is our care and support during the COVID-19 pandemic?	3 - Adequate

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

### How good is our leadership?

**4 - Good**

We re-evaluated this key question as part of this follow-up inspection. This was to acknowledge the positive impact of the new management team on the performance of the service over the past year. This included the ability to carry out realistic and effective self-assessments. In addition, we were encouraged by the ability of the leadership team to implement the required improvements resulting from our initial inspection quickly and effectively. (see 'What the service has done to meet any requirements made at or since the last inspection').

**How good is our care and support during the COVID-19 pandemic?****3 - Adequate**

We re-evaluated this key question as part of this follow-up inspection. This was to acknowledge the significant changes made to the cleanliness of the environment and equipment and the to the processes that helped to sustain this (see 'What the service has done to meet any requirements made at or since the last inspection').

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

### Requirements

#### Requirement 1

Poor practice was observed in the safe management of the care environment. In particular attention to detail when cleaning care equipment and furniture, as well as the use of communal toiletries, increased the risk of infection for residents and staff.

Starting immediately and to be completed within 7 days (by Friday 11 June 2021, 10:00am), you, the provider must:

- Ensure that all surfaces in communal areas, including equipment and furniture, are regularly and thoroughly cleaned, using the correct products as per current guidance.
- Ensure that shared care equipment is cleaned and disinfected after each use.
- Ensure that there is no use of shared toiletries.
- Ensure that all domestic and care staff are sufficiently trained to carry out their cleaning duties to the expected standard.
- Ensure that effective quality assurance processes exist to measure the correct and consistent application of good practice.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state: 'My environment is secure and safe' (HSCS 5.17) and to comply with Regulation 4(1)(a)- Welfare of users, Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Regulation 13(a) - to ensure that staff are competent. Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

**This requirement was made on 7 June 2021.**

#### Action taken on previous requirement

We checked the key areas where we had found poor practice during our initial inspection. We found that staff and managers had worked hard and effectively to achieve significant improvements. We found that all parts of the environment, as well as the equipment we checked were clean. Attention to detail was given to cleaning areas like the inside of cupboards or the underside of dining tables and chairs where people might touch. This meant that people were now safer because they were less likely to touch contaminated surfaces or equipment.

Managers had also worked with staff to increase their awareness and their sense of accountability. More training and coaching had been provided to support staff and to show them good practice.

Alongside that, managers had introduced new quality assurance checks that supported better practice and helped to sustain the attention to detail when keeping people's environment clean and safe.

### Met - within timescales

#### Requirement 2

Significant parts of the environment were in a state of poor repair or showed significant wear and tear. This meant that surfaces could not be cleaned effectively and therefore posed an increased risk of infection to residents and staff.

Starting immediately and to be completed within three weeks (by Friday 25 June, 13:00), you, the provider must:

- Put in place a comprehensive action plan for environmental improvements, based on your existing assessments, including timelines and dates for starting and completing planned work.
- Complete a full audit of furniture and equipment and put in place a comprehensive action plan for any replacements, including timelines.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state: 'My environment is secure and safe' (HSCS 5.17) and to comply with Regulation 4(1)(a)- Welfare of users, Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) and Regulation 10 – Fitness of premises, Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

**This requirement was made on 7 June 2021.**

#### Action taken on previous requirement

We found that the provider had already made good progress towards meeting this requirement. New lounge furniture was on order and action plans with timelines were being created. We will assess this fully once the completion of this requirement is due.

#### Not assessed at this inspection

#### Requirement 3

The provider must ensure that the approach to quality assurance is reviewed and improved to establish robust monitoring processes informed by evidence based good practice and a strong focus on personal outcomes, using learning effectively to improve the service for people experiencing care.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that: "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes." (HSCS 4.19)

The original timescale for completion was 31 May 2019. This was extended to 11/06/21.

This is also in order to comply with the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/2010) Regulation 3 - Principles; Regulation 4(1)(a) - Welfare of users.

This requirement was made on 25 March 2019.

## Action taken on previous requirement

We assessed that the management team was working hard on improvements and had increased quality assurance in the service in several key areas. We saw that clear and detailed improvement plans existed. These plans were based on detailed and realistic self-assessment. Our assessment of various service areas showed that there was a clear trend towards ongoing improvement and development of the service. This was supported by improved quality assurance and increased resources for quality assurance.

Where we found weaknesses during our initial inspection, managers acted quickly and decisively to put things right.

**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 include personal outcomes in personal plans and ensure that these are meaningfully evaluated.

This would further improve how person-centred and effective care plans are, further promote a holistic and ability focussed approach, as well as promote involvement and participation.

- the personal outcomes should acknowledge things that are important to people in their lives in relation to the subject of the personal plan
- the personal outcomes should acknowledge individual strengths and should demonstrate a shared sense of purpose to which the person, their family, staff and relevant others contributed
- evaluations and reviews of the personal plans should meaningfully measure if and how the personal outcome is achieved.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that my personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices (HSCS 1.15).

This area for improvement was made on 11 June 2021.

## Action taken since then

not assessed at this inspection

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## Detailed evaluations

How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good

  

How good is our care and support during the COVID-19 pandemic?	3 - Adequate
7.2 Infection control practices support a safe environment for people experiencing care and staff	3 - Adequate



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