

## Cardonald Care Home Care Home Service

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Cardonald  
Glasgow  
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**Type of inspection:**  
Unannounced

**Completed on:**  
9 June 2021

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

**Service provider number:**  
SP2007009152

**Service no:**  
CS2003010428

## About the service

Cardonald Care Home is a purpose built two storey building in the residential area of Mosspark in Glasgow. The service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011. The service is provided by Tamaris (RAM) Limited, a member of the Four Seasons Health Care Group.

Cardonald Care Home provides residential care for 35 people, within two named units. The building provides single occupancy accommodation with partial en suite facilities. There are public lounges and dining room as well as shared toilets and specialised bathing or shower facilities. Residents have access to a private, secured garden area accessible from the ground floor rooms.

Local shops and community amenities are within walking distance of the home. The care home is easily accessible by public transport, bus or train routes, and the motorway.

At the time of the inspection, there were 30 people living in the care home.

This was a focused follow up inspection, to evaluate how the service had responded to requirements made at the previous inspection during the COVID-19 pandemic.

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

We wrote this report following an unannounced inspection. This took place on 9 June 2021 and was a follow-up to our initial inspection of the service on 13 May 2021. Feedback was given to the manager and deputy manager at the end of the inspection.

During the inspection, we spoke with the registered manager, deputy manager, housekeeping and care staff.

We observed staff interactions with people receiving care and colleagues. Staff's use of personal protective equipment (PPE) and the support care staff offered to people.

We looked at:

- The cleanliness of the environment and care equipment used.
- The accessibility of PPE and disposal of this.
- Records regarding audits of mattress and cleaning schedules.
- Infection prevention and control folder and contents.
- Recent records of staff training in infection prevention control.
- Individual staff observations of infection prevention control practices.
- Management of audit records completed.
- Service's COVID-19 staff contingency plan.

## What people told us

We spoke to several people experiencing care and they were complimentary about the care provided. We found people were overall happy with the support they received. We observed people to be relaxed and comfortable with the standard of care and support provided.

We did not meet any relatives during this inspection.

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

### Requirements

#### Requirement 1

By 3 June 2021, the provider must ensure that the cleanliness and hygiene standards throughout the home are improved and maintained. In order to do this, the provider must ensure:

(a) The environment is clean and hygienic and items that cannot be maintained to an appropriate standard are replaced.

(b) There are effective and safe systems of working in this area.

(c) Staff are knowledgeable in the use of the cleaning solutions available and that their dilution is clearly understood.

(d) Regular management audits of practice and environmental cleanliness and hygiene standards are completed with action plans followed through to completion.

This is to ensure that people experience a high quality environment in line with the Health and Social Care Standards (HSCS) which state:

"I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment." (HSCS 5.22)

"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)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011.

**This requirement was made on 25 May 2021.**

#### Action taken on previous requirement

The implementation of the infection prevention and control guidance had significantly improved. The home was cleaner and provided a safer environment to minimise the infection risks to people receiving care and the staff.

Equipment used was being cleaned in line with best practice and the manager had reviewed the cleaning schedules and we noted these were being completed appropriately throughout the day. The manager had implemented daily heads of department meetings to help identify any environmental concerns and actions required.

The service had invested in replacing various pieces of equipment around the care home including toilet frames, pedal bins and bedding.

We observed that staff's knowledge and practice had improved around infection prevention and control. Staff demonstrated the correct procedures for the use and disposal of personal protective equipment (PPE). Correct hand-washing techniques were being employed. A programme of observations of staff competency around infection prevention control practices and safe PPE use were being regularly carried out.

An audit system was also being used for monitoring the effectiveness of infection control practices and procedures in place. These included infection prevention and control checks of the environment and equipment, staff compliance with safe PPE use and disposal.

## Met - within timescales

### Requirement 2

By 3 June 2021, the provider must ensure that all staff fully understand and are compliant with Health Protection Scotland COVID-19 Information and Guidance for Care Home Settings in a manner appropriate to their role. To do this, the provider must ensure:

- (a) Training appropriate to each role is completed.
- (b) Their infection prevention and control policies, procedures and practices are understood and applied in practice by all staff.
- (c) They establish an observation and supervision programme to ensure staff are knowledgeable and competent in this area.

This is to ensure that people experience high quality care in line with the Health and Social Care Standards (HSCS) which state:

"I experience high quality care and support based on relevant evidence, guidance, and best practice." (HSCS 4.11)

"I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes." (HSCS 3.14)

It is also necessary to comply with Regulation 4(1)(a) and 15 (b)(i) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011.

**This requirement was made on 25 May 2021.**

### Action taken on previous requirement

We could see that the provider had made significant progress to address the issues identified around safeguarding people living in the home from infection. This included ensuring that all staff had appropriate training in line with the provider's policies and procedures and Health Protection Scotland COVID-19 guidance.

Staff had received further training in infection prevention and control, COVID-19 and environmental cleaning and we saw staff implementing what they had learned.

The service had implemented a schedule of regular staff supervision. This helped to promote good practice and improve outcomes for people living in the home. To promote a culture of ongoing learning and development, staff were being directly observed to assess the impact that training had on their practice and the outcomes for people they care and support.

Staff commented that they found the formal supervision sessions and the assessments of competency supported their learning and development.

**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 further develop its COVID-19 contingency plan. This should be shared with all staff to ensure they are prepared in the event of a COVID-19 outbreak within the home.

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

"My care and support is provided 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 25 May 2021.**

#### Action taken since then

Since our last visit, the management team had developed their COVID-19 contingency plan. This meant the service was better prepared if an outbreak occurred. It reflected which agencies should be involved to help mitigate risks and ensure people receiving care, continue to be supported.

#### Previous area for improvement 2

The provider should ensure that care plans clearly reflect how staff support an individual who exhibits stress and distress behaviour.

This ensures care and support is consistent with Health and Social Standards (HSCS) which state that:

"I experience high quality care and support because people have the necessary information and resources." (HSCS 4.27)

The service should ensure that the appropriate protocols, strategies, and guidance is used in full prior to administering medication. The written records should reflect the effectiveness of administering medication for the management of stressed and distressed behaviour.

This ensures care and support is consistent with Health and Social Standards (HSCS) which state that:

"I am supported to make informed lifestyle choices affecting my health and wellbeing, and I am helped to use relevant screening and healthcare services." (HSCS 1.28)

**This area for improvement was made on 17 June 2019.**

## Action taken since then

This area for improvement was not fully assessed on this inspection and will be followed up at future inspections.

## Previous area for improvement 3

The provider should review the use of the data collected from the completion of their quality assurance and audit processes. For example, the outcome from using a recognised dependency tool, and its impact on the roles and responsibilities, staffing levels and their deployment to ensure positive outcomes for people who use the service.

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

"I use a service and organisation that are well led and managed." (HSCS 4.23)

"I am confident that people are encouraged to be innovative in the way they support and care for me." (HSCS 4.25)

**This area for improvement was made on 17 June 2019.**

## Action taken since then

Focussed COVID-19 inspection. This area was 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).

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