

Thornwood Hall Care Home Service

155 Camphill Road
Langside
Glasgow
G41 3DR

Telephone: 01416 321 234

Type of inspection:
Unannounced

Completed on:
30 June 2021

Service provided by:
Burnside Care Homes Ltd.

Service provider number:
SP2006008288

Service no:
CS2006130634

About the service

Thornwood Hall is a small care home owned by Burnside Care Homes Ltd. The service is situated in the Langside area of Glasgow. The home is a large villa with a ground floor extension. It is surrounded by mature gardens with access to an attractive enclosed patio area. The accommodation is over two floors with the upstairs being accessed by a stairlift.

Bedrooms are located on both levels. To the front of the house, there is a formal dining room and lounge with another dining area and a communal lounge to the rear of the house.

Although the service is registered to provide care for 23 older people, some of whom may be living with dementia, there are currently 18 single occupancy bedrooms in the home. At the time of the inspection, there were 10 people using the service.

The service aims to promote positive relationships between residents, relatives, staff, management, and other key stakeholders.

This was a focused follow-up unannounced inspection to evaluate how well people were being supported during the Covid-19 pandemic, and to check progress with the findings of the previous inspections carried out on 5 May and 2 June 2021 .

It was carried out by two inspectors from the Care Inspectorate. We evaluated the service based on key areas that are vital to the support and wellbeing of people experiencing care during the pandemic.

What people told us

People using the service appeared relaxed and were supported by staff who were kind and had developed warm, nurturing relationships.

A relative shared that staff within the home had helped keep them up to date with any changes and how this helped her feel connected with her mother throughout the pandemic.

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**

The service had recruited an additional senior carer since the last inspection and worked on measures to increase availability of senior care staff and manager whilst they continue to recruit additional senior carers, carers and domestic staff. We concluded that the requirement in connection with having the correct skills mix of staff on each shift needs further work.

Progress had been made to improve infection control practices through refurbishment of the laundry and outstanding requirement three, made by us in relation to this, has been met.

See the following section - What the service has done to meet any requirements we made at or since the last inspection.

Requirements

1. By 31 July 21, the provider must ensure that there are sufficient staff consistently rostered to keep people safe and meet their health and care needs. To achieve this, the provider must ensure: that there are sufficient qualified staff on each shift to fully meet people's health and care needs. This is to comply with Regulation 15(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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

Requirements

Requirement 1

By 25 May 2021, the provider must ensure that there are sufficient staff consistently rostered to keep people safe and meet their health and care needs. To achieve this, the provider must ensure:

- a. That there are sufficient qualified staff on each shift to fully meet people's health and care needs.
- b. That there is domestic staff rostered each day to maintain a high standard of cleanliness.
- c. That staffing is regularly evaluated to demonstrate that it is responsive to people's changing needs.

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

"My needs are met by the right number of people." (HSCS 3.15)

"My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected." (HSCS 1.23)

This is to comply with Regulation 15(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This requirement was made on 19 May 2021.

Action taken on previous requirement

People experiencing care should have their needs met by the right number of people.

During our visit, we noted that there were sufficient staff on duty to meet the needs of people experiencing care. The service provider had put in a number of measures to ensure appropriate staffing cover which included extending shift patterns of senior carers, specific care assistants had received additional medication administration training and increased availability of registered manager and identified senior carer.

The service had also attempted to recruit additional senior care staff and had appointed a new senior staff member. There were ongoing plans to recruit others with interviews planned in the next few days. We concluded that the part of the requirement in relation to having the correct skill mix of staff on each shift is not met and will extend the timescale until 31st July for completion. We shall reflect this in an amended requirement.

The registered manager had agreed to provide Care Inspectorate with weekly updates with the progress of recruitment of senior staff.

Domestic staff had been rostered for each day of the week. The manager had developed plans to increase the availability through further recruitment of domestic staff. We found improved standards of cleanliness throughout the home. This part of the requirement had been met.

The service provider continued to use a recognised dependency tool which identifies staffing levels needed. This information was used when planning staff cover. This part of the requirement had been met.

Not met

Requirement 2

By 25 May 2021, the provider must ensure that acceptable standards of infection prevention and control are in place for the safe management of linen. To do this, the provider must:

- a. Ensure that the laundry room is in a good state of repair and fit for purpose.
 - b. Review the arrangements for accessing the laundry to reduce the risk of infection and cross infection.
 - c. Implement and use quality assurance processes for infection prevention and control and the safe management of linen. The quality assurance process must follow the latest available Scottish Government guidance and best practice guidelines.
- This is to ensure that care and support is consistent 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)

This is to comply with Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This requirement was made on 19 May 2021.

Action taken on previous requirement

People should live in an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment.

We carried out an environmental inspection and focused on the laundry area.

Construction work had been carried out which created a separate corridor for staff to access the laundry. There had been further reconfiguration of the laundry to allow the separation of clean and dirty laundry. A room had been utilised for the storage of clean linen such as bedding and towels. This meant the risk of infection and cross infection had been greatly reduced.

Cleaning schedules were in place for domestic and night shift care staff to follow. The manager regularly checked standards of cleanliness were being maintained. The environmental audits will also include the laundry when redecoration is completed.

Based upon our findings we were satisfied that the requirement had been met.

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

Whenever staff share information about residents, they should ensure that they observe the individual's privacy and confidentiality. This can be done by making sure that any handover meetings are only shared and heard by the relevant staff for whom they are meant.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: "I benefit from organisations working together and sharing information about me promptly where appropriate, and I understand how my privacy and confidentiality are respected." (HSCS 4.18)
This area for improvement was made on 20 December 2019.

This area for improvement was made on 20 December 2019.

Action taken since then

This was a focused COVID-19 follow up inspection. This area was not assessed at this inspection.

Previous area for improvement 2

Where the service stocks and administers homely remedies, this should be done in line with good practice to ensure safety for the residents who receive this medication.

This is to ensure that care and support is consistent 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)

This area for improvement was made on 20 December 2019.

This area for improvement was made on 20 December 2019.

Action taken since then

This was a focused COVID-19 follow up inspection. This area was not assessed at this inspection.

Previous area for improvement 3

Where medication is prescribed as part of the planned care, this should always be made available to the person it is prescribed for in order that they stay well.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: "If I need help with medication, I am able to have as much control as possible." (HSCS 2.23)

This area for improvement was made on 20 December 2019.

This area for improvement was made on 20 December 2019.

Action taken since then

This was a focused COVID-19 follow up 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.

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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