

Forth View Care Centre Care Home Service

6 Sea Road
Methil
Leven
KY8 3DE

Telephone: 01592 716 500

Type of inspection:
Unannounced

Completed on:
2 July 2021

Service provided by:
Balhousie Care Limited

Service provider number:
SP2010011109

Service no:
CS2011302958

About the service

Forth View Care Centre is a purpose-built care home registered to care for up to 45 older people, of which five may be for short breaks and respite and a maximum of ten adults with physical and sensory impairment in Loch Head Unit.

The home is part of the Balhousie Care Group. The service is located in Methil and can be easily reached using local transport networks from nearby Leven and Kirkcaldy.

Accommodation is provided over two floors. The rooms consist of single en-suite bedrooms with wet room showers. Each floor has a number of seating areas and dining areas to allow residents to make choices about where to spend their time. Small kitchen areas in the lounges are accessible to residents, relatives and visitors to the service. The garden to the rear of the building is secure and accessible from the dining room on the ground floor. The garden is equipped with a play area for the use of visiting children.

This inspection was carried out to follow up on requirements made as part of an Improvement Notice issued to the service on 28 May 2021. This inspection was carried out on 30 June 2021.

What people told us

We spoke with six service users during this inspection. Most expressed satisfaction with the service and commented favourably about the care and support they received.

Their comments included:

- "It's fine here."
- "Yes happy enough, no issues, staff ok."
- "I like the staff. Food is ok. Wish I could see more people."
- "I get bored, nothing much to do."
- "I wish I was home, but it's fine here."

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?	2 - Weak
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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?

2 - Weak

We have carried out three inspections since January 2021. An Improvement Notice was issued on 19 January 2021. This identified three key areas for improvement:

- Staffing levels and competency.
- Ensuring adequate hydration and nutrition for residents.
- Assessment of people's needs and governance to manage quality of care.

This was met satisfactorily met by 11 March.

We further inspected the service on 19 and 21 May to follow up on outstanding requirements made at the inspection on 19 January.

As a result of the findings at this inspection a new Improvement Notice was issued on 28 May. Four requirements were made, one to be complied with by 7 June and the remaining three by 28 June.

This identified four key areas for improvement:

- Ensuring a safe, clean and well maintained environment.
- Staffing levels and competency.
- Ensuring service users health, safety and social care needs are assessed, documented and met.
- Ensuring the service is well led and managed.

One requirement was followed up on 9 June and found to remain unmet. We agreed an extension of timescale to 28 June.

A follow up inspection took place on 30 June. One requirement was met and three remained outstanding.

Due to the specific impact of Covid on the care service, at this time we agreed to an extension of timescales for completion of the three outstanding requirements.

Our main findings can be found in the 'What the service has done to meet any requirements made at or since the last inspection' sections of this report.

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

Requirements

Requirement 1

This requirement was made on 28 May 2021 and issued to the provider as part of an Improvement Notice.

By 28 June 2021, extended from 7 June 2021, you must ensure that service users experience a safe, clean, and well-maintained environment. In particular, the service must be staffed, resourced, and led in a manner that will ensure that:

- a) The premises, furnishings and equipment are clean, tidy, and well maintained,
- b) Effective arrangements are in place to prevent and control the spread of infection, and
- c) Processes are in place to ensure that the environment is consistently safe and well maintained; and any concerns are promptly identified, with effective action taken to make the necessary improvements.

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

This requirement was made on 28 May 2021.

Action taken on previous requirement

People should expect that the environment they live in is well looked after with clean, tidy and well maintained premises, furnishings and equipment. Steps taken by the provider had helped ensure this.

The home was clean. Domestic staffing levels had been increased. The home was visibly cleaner and residents commented positively about this. Further recruitment was underway to provide cover late afternoon and early evenings.

PPE was easily accessible in portable units throughout the home. Stock within the units was appropriate. Clinical waste bins were appropriately available.

Staff demonstrated good practice in the safe use and management of PPE. This helped minimise risk of infection. Additional training sessions were in progress supported by NHS Fife.

A range of audit systems were in place to ensure that any deficits were identified, and appropriate action taken. We discussed that these needed to be fully embedded and used to follow up and ensure appropriate action was taken.

Furnishings and equipment had been checked to ensure they were safe and well maintained. Where deficits had been found these items had been identified and replaced.

This improvement has been complied with.

Met - within timescales

Requirement 2

This requirement was made on 28 May 2021 and issued to the provider as part of an Improvement Notice.

By 28 June 2021 you must, having regard to the size and nature of the care service, the statement of aims and objectives and the number and needs of service users, ensure that at all times, suitably qualified and competent persons are working in the care service in such numbers as are appropriate for the health, welfare, and safety of service users.

This is in order to comply with regulations 4(1)(a) and 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 28 May 2021.

Action taken on previous requirement

There had been some improvement to staffing levels in the home. The service was using agency nursing and senior carers to help cover shifts. Staff were more visible in the some areas of the home. However, in the younger people's unit there were times that staff were not available to support people. This was particularly evident when people were being supported with personal care in their rooms and often left no-one in communal areas to support others. Numbers and deployment of staff did not evidence improved outcomes for people. There continued to be limited opportunities for social engagement and promoting people's independence.

The service was continuing to progress staff training and a training needs analysis had been commenced. This included ensuring staff had completed on-line training. The leadership team acknowledged the importance of a blended learning approach to ensure staff had opportunities for face to face learning.

At the time of inspection, training needed to be progressed further. This was in particular (but not limited to) dementia awareness, supporting people when stressed or distressed and care planning. This was to help people experience the care they needed.

We have agreed an extension of timescale for completion of this requirement to 2 August 2021.

Not met

Requirement 3

This requirement was made on 28 May 2021 and issued to the provider as part of an Improvement Notice.

By 28 June 2021, you must ensure service users' health, safety and social care needs are being appropriately documented, assessed, met, and effectively communicated between all relevant staff. This means putting the person at the centre, identifying what is important in their life, ensuring that everyone is working together to achieve the same purpose of maximizing their independence and quality of life. This must

include but is not limited to:

- a) Making needs assessments with reference to the choices and preferences of service users;
- b) Ensuring risks to service users are identified and managed as part of the care planning process and that service users are supported to take positive, life enhancing risks;
- c) Measuring the effectiveness of all required interventions through evaluation and review processes; and
- d) Ensuring that staff are appropriately trained, competent, and skilled and have their competencies assessed regularly.

This is in order to comply with regulations 3, 4(1)(a), 9(2)(b) and 15(b)(i) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, SSI 2011/210

This requirement was made on 28 May 2021.

Action taken on previous requirement

The leadership team had started audits of assessments and care plans. There was no evidence that this process had yet led to improvements to the care planning or to positive outcomes for people.

Not all care plans referenced that risks showed that risks identified or relevant guidance was in place about how to care for and support people. This meant that people were not yet being supported as well as possible.

Staff were responsible for reviewing individual care plans monthly. These reviews didn't reflect peoples changing needs. There was no evidence of how the care people experienced met their needs.

Some staff were confident in the use of the hand held care plan system in place and knew how to read and add records to the care plans using these devices. Others needed further guidance in how to access care plans and use the system.

Training had started for nurses and senior carers in the care planning system. We raised the need for this for all carers as every member of staff needs to understand how to access care plans to be able to meet residents care needs.

We have agreed an extension of timescale for completion of this requirement to 2 August 2021.

Not met

Requirement 4

This requirement was made on 28 May 2021 and issued to the provider as part of an Improvement Notice.

By 28 June 2021, you must ensure that service users experience a service which is well led and managed and which results in better outcomes for service users through a culture of continuous improvement, underpinned by robust and transparent quality assurance processes. This must include but is not limited to:

- (a) Ensuring appropriate and effective leadership of the service;
- (b) Ensuring that service users' assessed care and support needs are monitored; managed, and met; and

c) Implementing effective action planning to address areas of required improvement to include appropriate timescales for completion and review of action to be undertaken, and ensuring staff are accountable for and carry out required remedial actions.

This is in order to comply with regulations 4(1)(a) and 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 28 May 2021.

Action taken on previous requirement

An Improvement Notice was issued on 28 May 2021. Of the four requirements in this notice only one had been met satisfactorily when an extended timescale was agreed from 7 June to 28 June. This related to the cleanliness, maintenance of the environment and safe infection control procedures.

At the time of this inspection a number of audits had been carried out by the provider. However, action to address the required improvements had been limited. Action plans that we saw were not clear that timescales for completion had been actioned or achieved.

Where deficits had been identified by another agency there was no evidence that these had been taken account of or actioned. It was concerning because those one of the areas was about pain management and referral to other health care services for a resident.

The provider had agreed further support by their senior management team to the manager and leadership team in the home. This was in order to allow prioritising of areas for improvement identified by both the service, other health professionals and the Care Inspectorate to be taken forward.

We have agreed an extension of timescale for completion of this requirement to 2 August 2021.

Not met

Requirement 5

This requirement was made as result of an inspection completed on 26 May 2021

In order that people are appropriately stimulated and engaged, and to improve and maintain their quality of life, the provider must, by 26 July 2021, ensure people have access to activities and pastimes that are meaningful and purposeful to them. To achieve this, the service must ensure:

- a) Care plans include information about activities that are meaningful, purposeful and appropriate for people;
- b) Support plans regarding people's social and emotional needs are developed; and
- c) Records are kept of one-to-one support with meaningful activities for people who require this level of support.

This is in order to ensure care and support is consistent with the Health and Social Care Standards which state:

'I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors' (HSCS1.25); and Complies with Regulation 4 (a) of

the the Social Care and Social Work Improvement Scotland (Regulations for Care Services Requirements) SS1 2011/210.

This requirement was made on 26 May 2021.

Action taken on previous requirement

This requirement has not been assessed. The timescale for completion is 26 July 2021.

Not assessed at this inspection

Requirement 6

This requirement was made as result of an inspection completed on 26 May 2021

In order to safeguard the health, safety and welfare of residents, the provider must, by 26 July 2021, ensure:

- a) Medication recording sheets are signed when medication has been given;
- b) Regular audits of medications and administration and recording systems are carried out and areas for improvement followed-up in a timely manner; and
- c) Protocols for the use of "as required" medication are reviewed on a regular basis and provide sufficient detail to guide staff's practice.

This is in order to ensure care and support is consistent with the Health and Social Care Standards which state:

'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24); and
Complies with Regulation 4 (a) of the the Social Care and Social Work Improvement Scotland (Regulations for Care Services Requirements) SS1 2011/210.

This requirement was made on 26 May 2021.

Action taken on previous requirement

This requirement has not been assessed. The timescale for completion is 26 July 2021.

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?	2 - Weak
7.1 People's health and well being are supported and safeguarded during the COVID-19 pandemic	2 - Weak
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	2 - Weak

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