

Rowandale Nursing Home Care Home Service

620 Shields Road
Glasgow
G41 2RD

Telephone: 01414 239 145

Type of inspection:
Unannounced

Completed on:
9 July 2021

Service provided by:
Forth Care Limited

Service provider number:
SP2014012365

Service no:
CS2014333132

About the service

Rowandale Nursing Home is a care home registered to provide a service to a maximum of 28 older people. Within this maximum, the service will be offered to individuals specified in the granted variation of 8 February 2021. The provider is Forth Care Limited.

The home is located in the south side of Glasgow in a residential area close to local amenities. There is a small car park in the grounds of the home. The accommodation is a converted church which consists of four floors. There are three designated units of Arran, Skye and Tiree.

People have access to a small garden to the front of the building with a ramp and raised decking area. The aims of the service include the "commitment to providing the best of care for older people in a safe and secure environment."

At the time of the inspection, the care home was caring for 25 people.

What people told us

We observed some warm but limited interactions between staff and people who used the service.

We spoke with five relatives by telephone who were of the opinion that staff genuinely cared about their loved ones and knew them well. Comments included:

"When staff walk into Mum's room she is all smiles - really likes them."

"It tends to be same staff who know my sister well. On the whole Rowandale has done well keeping their staff. I feel my sister is getting good care."

We heard a number of comments where relatives thought there could be improvements made within the service.

"I have not witnessed any activities or aware of what has been offered to dad."

"Activities? Not much. There used to be a girl who would do her [relative's] hair, there used to also be a petting zoo who visited which she liked."

"The new management team are not good at keeping us up to date with changes (relating to visiting and following guidance regarding physical contact with loved one)."

"The use of CCTV- not had a formal consultation with me - wondered if it has formed part of the contract?"

"CCTV - was not consulted over this."

"CCTV - no consultation was not aware of this."

"Care reviews - not had any since Covid pandemic. Usually, I am invited and have this with XXXXX [staff member]."

"There has been no care review since Covid pandemic."

"Care review - yes after initial admission nothing since."

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

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| How well do we support people's wellbeing? | 2 - Weak |
| How good is our care and support during the COVID-19 pandemic? | 2 - Weak |

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

How well do we support people's wellbeing?

2 - Weak

Our focus of this inspection was to establish if people's health and wellbeing was supported in line with their wishes and assessed needs. We saw some strengths and areas of good practice, however these were outweighed with significant areas of weakness which affected people's experiences and outcomes.

People experiencing care should experience compassionate care and support that meets their physical and mental health needs in a way that promotes dignity and respect for their rights as an individual.

Staff knew people well and worked hard to try and meet their care needs, however we found that there were very limited opportunities to meaningfully engage with people. The activities organiser post had been vacant for months and opportunities to participate in any planned or spontaneous activities were very limited. There was no activities planner in place which took account of the wishes, preferences and needs of residents.

The service provider needs to ensure that there are regular opportunities to meet residents' social and recreational needs within and outwith the home. This would promote a sense of wellbeing. (See requirement 1.)

There was CCTV within the main communal areas including corridors, lounges and dining areas. There had not been a process of consultation with residents or their relatives/representatives prior to installation. We directed the service provider to Guidance for care providers in Scotland using CCTV (closed circuit television) in their services, produced by the Care Inspectorate. (See requirement 2.)

Maintaining contact during the pandemic is important for helping people and their relatives to stay connected and be kept up to date with any changes. Staff had primarily achieved this through regular telephone contact prior to the re-opening of the service to visitors. We believe there could have been a more creative approach through the use of technology particularly for relatives who do not live locally. (See area for improvement 1.)

Indoor visits were occurring and checks had been carried out to reduce possible transmission of Covid-19. However, the service was not fully following the most up to date guidance as reflected in Open with Care. The service should inform relatives of the level of permitted contact and frequency of visiting. This would further enhance the visiting experience for residents and their relatives. (See area for improvement 1.)

The care and support provided by staff should be beneficial to people's health and any treatment and intervention should be informed by evidence based good practice. Feedback from a visiting professional supported that staff appropriately referred when they identified deterioration with people's health, meaning that people were helped to keep well with early intervention.

The service used a mixture of electronic care planning and assessments as well as keeping hard copies which provided limited information to direct staff. Assessments included recognised tools to identify risks against key areas including nutrition, skin integrity, medication administration and falls management. However, the quality and accuracy of the content was variable which meant we could not be confident they reflected the current needs of people. (See requirement 3.)

Quality assurance systems should help the management team identify if interventions lead to positive outcomes for people using the service. Improvements were needed to provide a clear overview of people's current needs including systems which effectively monitor individuals with unintentional weight loss and the effectiveness of wound management. (See requirement 3.)

Having an up to date care plan is important to reflect each person's current needs and to direct staff how these are best met. Care reviews had not been carried out as frequently as they should be. They had not been carried out in partnership with residents and their relatives. This meant that we could not be confident they accurately reflected each person's needs or had been informed by their wishes and preferences. (See requirement 3.)

People were offered snacks and drinks outwith meal times which helped keep them well. However, menus on display did not match the food options available to residents. We heard that the food offered lacked variety. Food choices should match the wishes and preferences of people using the service. (See area for improvement 2.)

Requirements

1. To ensure people experience care and support that is safe and right for them, the provider must, by 30 July 2021, ensure:

- (a) An assessment is carried out with each person using the service which takes account of previous and current interests, wishes and preferences.
- (b) A programme of activities is developed which offers each person the opportunity to participate individually and within a group setting shaped by each person's wishes and abilities. Activities should be offered within or external to the home with appropriate of staffing to support this.
- (c) Records are developed and maintained to reflect outcomes achieved as a result of the activities offered.

This is to ensure people get the most out of life and takes account of the Health and Social Care Standards (HSCS) which state:

"I am fully involved in assessing my emotional, psychological, social and physical needs at an early stage, regularly and when my needs change." (HSCS 1.12)

"I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities each day, both indoors and outdoors." (HSCS 1.25)

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.

2. To ensure the rights of people using the service are promoted, the provider must, by 30 July 2021, review the use of CCTV. This should include consultation with people who use the service and their representatives to seek approval, take account of reasons for use and review continued use.

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

"My rights are protected by ensuring that any surveillance or monitoring device that I or the organisation use is necessary and proportionate, and I am involved in deciding how it is used." (HSCS 2.7)

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.

3. To ensure people experience care and support that is safe and right for them, the provider must, by 30 July 2021, ensure that:

(a) Health assessments are reviewed to check for accuracy.

(b) Staff use the information from health assessments to check the accuracy of care plans and check that these are achieving positive outcomes for each person.

(c) The quality assurance systems are robustly implemented and reflect actions/interventions taken to help keep people safe.

(d) They develop a programme of care reviews involving each person and or their representative.

This is to ensure that people's health benefits from their care and support and takes account of the Health and Social Care Standards (HSCS) which state:

"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)

"My care and support meets my needs and is right for me." (HSCS 1.19)

It is also necessary to comply with Regulation 4(1)(a) and Regulation 5(b)(i)(ii) and (iii) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011.

Areas for improvement

1. To ensure that people who experience care are supported to maintain contact with their family and friends, the service provider should ensure that they consistently follow the Scottish Government guidance, Open with Care, when supporting visits from relatives and representatives.

The service provider should use a range of methods to help people keep connected to their loved ones including better use of technology.

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

"I am supported to manage my relationships with my family, friends or partner in a way that suits my wellbeing." (HSCS 2.18)

2. To ensure meals and snacks meet the needs and preferences of people who experience care, the service provider should improve the food choices available. Menus should take account of the wishes and preferences of people using the service.

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

"My meals and snacks meet my cultural and dietary needs, beliefs and preferences." (HSCS 1.37)

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

2 - Weak

7.2 Infection control practices support a safe environment for people experiencing care and staff.

There had been no Covid-19 outbreaks since the change of ownership in September 2020. However, the Covid-19 contingency plan had not been updated to reflect the change in ownership and provide details of what measures would be put in place to mitigate harm. This should be shaped by most up to date guidance.

People should expect to live in a clean well-maintained environment to reduce the risk of infection.

Cleaning schedules were in place, however, these were not being used to good effect. Communal areas of the home appeared clean. However, the cleanliness of some equipment and furnishings needed to improve. This included bedding, bedrails and en suite shower rooms. (See requirement 1.)

There were plentiful supplies of personal protective equipment (PPE) which if used properly can help reduce the risk of transmission of infection for staff and people who experience care. We observed staff appropriately disposing PPE after use.

It was evident that the manager had carried out regular audits to monitor effective hand hygiene. This helped to check staff understanding and adherence to good practices. However, there was inconsistent use of PPE. For example, not wearing face masks appropriately and using the same gloves between various tasks. This does not adhere to good infection protection and control guidance to minimise the transmission of infection. (See requirement 1.)

A number of hand sanitising dispensers needed to be re-filled to promote effective hand hygiene. (See requirement 1.) We suggested that the service provider identified an infection prevention and control champion to promote adherence to good infection prevention and control standards following the most up to date guidance.

There had been no handyperson within the service to carry out routine maintenance and repairs. We were not confident that there were good systems in place for ensuring the environment was maintained to keep people safe. We identified repairs needing to be carried out, this included the dishwasher. This is important to ensure crockery and cutlery are effectively cleaned. (See requirement 1.)

Food stored within fridges and freezers was not labelled as expected. These should be dated in order that kitchen staff ensure that people using the service are kept safe by following good food handling and storage practices.

To ensure that infection prevention and control practice is in accordance with good practice guidance improved management oversight and auditing is required. (See requirement 1.)

7.3 Staffing arrangements are responsive to the changing needs of people experiencing care.

People experiencing care should have their needs met by the right number of and appropriately skilled staff. Staff were knowledgeable about the needs of people they supported. Staff worked hard to meet people's basic care needs but had little opportunity to engage meaningfully or provide levels of support that people should expect. The dependency tool did not accurately inform the management team of actual care hours, skill mix needed and did not take account of the unique layout of the environment. Staffing levels require to be reviewed to take account of people's physical and emotional support needs. (See requirement 2.)

The service provider recognised and was committed to filling additional posts including deputy manager, maintenance person, activities organiser and reception/administration staff.

We looked at how the service had recruited and inducted staff in the preceding months. There was no documented evidence that the required pre-employment checks had been undertaken. A robust recruitment and induction procedure is important for ensuring people using the service are protected. Following commencement of employment there did not appear to be a structured induction programme being followed. (See requirement 3.)

Having well trained and competent staff is important for keeping people safe. Online training on infection prevention and control as well as a range of other mandatory training had been provided. This required to be updated in view of the rapidly changing guidance and advice to be followed when caring for people during the pandemic. (See requirement 3.)

Requirements

1. To ensure that infection control practices support a safe environment for people experiencing care and staff, the provider must by 30 July 2021:

(a) Develop robust auditing processes to ensure that the standard of cleanliness throughout the home improves and staff consistently follow good infection prevention control practices aligned to the National

Infection Prevention and Control Manual and Addendum COVID-19 - information and guidance for care home settings (adults and older people), Health Protection Scotland, version 2.2.

(b) Develop robust systems for ensuring that the environment is safe, well-maintained and equipment is in a good state of repair or replaced.

(c) Ensure staff within the kitchen follow good practice in the safe handling and storage of food.

This is to ensure that the environment keeps people safe and protected and takes account of the Health and Social Care Standards (HSCS) which state:

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

"I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes." (HSCS 4.19)

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

It is also necessary to comply with Regulation 4(1)(a)(d) and 10(2)(b) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011.

2. To ensure people experience care and support that is safe and right for them, the provider must, by 30 July 2021, ensure:

(a) That there are sufficient qualified staff on each shift to fully meet people's health and care needs.

(b) That staffing is regularly evaluated using a robust dependency assessment which demonstrates staffing levels are 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)

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

3. The provider must, by 30 July 2021, ensure that staff have been appropriately and safely recruited. The provider must ensure that:

(a) Staff recruitment follows Safer Recruitment Through Better Recruitment guidance including application form, checking qualifications/competencies, having interview records, uptake of written references and having enhanced Disclosure Scotland checks in place prior to commencement of employment.

(b) They develop a structured induction programme aligned to the role and needs of each staff member employed.

(c) They develop a training and staff development programme which helps staff keep up to date and follow good practice guidance.

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

"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 9(1) and (2)(b) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011.

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

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| How well do we support people's wellbeing? | 2 - Weak |
| 1.1 People experience compassion, dignity and respect | 3 - Adequate |
| 1.2 People get the most out of life | 2 - Weak |
| 1.3 People's health benefits from their care and support | 2 - Weak |

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|---|----------|
| How good is our care and support during the COVID-19 pandemic? | 2 - Weak |
| 7.2 Infection control practices support a safe environment for people experiencing care and staff | 2 - Weak |
| 7.3 Staffing arrangements are responsive to the changing needs of people experiencing care | 2 - Weak |

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