

## Tor - Na - Dee Care Home Care Home Service

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Milltimber  
Aberdeen  
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Telephone: 01224 863 736

**Type of inspection:**  
Unannounced

**Completed on:**  
20 July 2021

**Service provided by:**  
Care UK Limited

**Service provider number:**  
SP2003002341

**Service no:**  
CS2011300793

## About the service

Tor-Na-Dee Care Home is a purpose-built two storey care home. The provider is Care UK and the service has been registered since 31 October 2011.

Tor-Na-Dee is registered to provide nursing care to a maximum of 74 older people, of whom one may be a person under 65 years of age. It is set in landscaped gardens and is located on the outskirts of Aberdeen City. People have access to the town bus service, local shops, churches, and cafes. People have a choice of well furnished sitting and dining rooms and bedrooms are furnished to a high standard. All bedrooms have en-suite shower facilities.

The service aims to "provide the level of care and support you need to ensure that, as far as possible, you maintain your independence and individuality".

This was a focused inspection to evaluate how well people were being supported during the COVID-19 pandemic. We evaluated the service based on key areas that are vital to the support and wellbeing of people experiencing care during the pandemic.

This was a follow up inspection, following up on requirements made at a previous inspection.

This inspection was carried out by an inspector from the Care Inspectorate.

## What people told us

We did not speak in depth to individual people. Those that we saw, and said 'Good Morning' to appeared to be happy.

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

### Requirements

#### Requirement 1

The provider must ensure that robust and compassionate end of life care, in line with people's wishes is implemented.

By 30 April 2021 the provider must hold, and record, detailed discussions of people's wishes for their end of life care, and ensure that these are carried out as required.

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

"I am supported to discuss significant changes in my life, including death or dying, and this is handled sensitively." (HSCS 1.7).

This is to comply with Regulation 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 24 February 2021.**

#### Action taken on previous requirement

All people's care plans had been updated, and staff had completed a combination of face-to-face and online training in palliative and oral care. Following a complaint about a person's end of life care, the management team had a 'lessons learned' session to promote conversation and understanding about what they should improve. The NHS Grampian Palliative & Supportive Care Plan 2017 was used as an example of best practice.

The anticipatory care plans were good. They were clinically sound and written with compassion and clear evidence of family involvement. Once a person is receiving end of life care, their existing care plan will be archived and the palliative one used to ensure that their wishes and choices are respected.

**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 provider should carry out regular infection prevention and control audits and ensure required improvement and replacements are made, to include (not exclusively):

- mattresses, quilts, wheelchair cushions;
- cleaning of all high touch areas, for example down the side of chairs, top and underside of tables, cloth parts of armchairs, end and heads of bed frames;
- declutter, for example paper posters, shared paper quizzes and wordsearches, unused items in corridors;
- clinical waste bins beside each PPE station and regularly spaced along the corridors.

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

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

**This area for improvement was made on 24 February 2021.**

#### Action taken since then

As we walked round the building we saw it was clean and well cared for.

A comprehensive quality assurance system was in place with audits for all aspects of care and equipment, including mattresses, furniture, slings and slide sheets.

It was clear that the quality assurance system was improvement-led, looking at lessons to be learned from all incidents, ranging from the environment to resident safety. There were monthly audits for housekeeping and kitchen which included, for example, main entrance, lift, care standards, offices, communal areas, sluices. Records for the quality assurance and health & safety meetings were comprehensive, identifying issues, corresponding actions and an owner for each action to ensure that improvements were made.

Comprehensive clinical review meetings were held fortnightly, covering areas such as; nutritional risk, diabetes management, distressed behaviour. This indicated that the service was responsive to changes in people's health needs.

## Previous area for improvement 2

The provider should encourage an ethos of openness to suggestions and discussions aimed to improve practice.

This is in order to ensure that 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).

**This area for improvement was made on 24 February 2021.**

### Action taken since then

When we spoke to staff we found them to be engaging and happy to chat with us. There was a regular system of one to one discussions, of 'lessons learned' meetings, and of training sessions. These encouraged an ethos of not blaming, but analysing so that improvements can be made.

## 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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