

Dounemount Care Home Care Home Service

Gellymill Street
Macduff
AB45 3QL

Telephone: 01261 832 262

Type of inspection:
Unannounced

Completed on:
17 June 2021

Service provided by:
Dounemount Care Limited

Service provider number:
SP2020013471

Service no:
CS2020378967

About the service

Dounemount Care Home is a care home that provides care and support for up to 34 older people. The provider is the Dounemount Care Limited. There were 28 people living in the service at the time of our inspection.

This service registered with the Care Inspectorate on 27 August 2020.

The home is a converted traditionally built house that has been extended to provide accommodation on three levels. The care home is located in the outskirts of Macduff, Aberdeenshire and is set on a hill with views of the area and surrounding countryside.

We aim to work with you in achieving the principles set out in the Health and Social Care Standards My Support, my life these principles are:

- That you are treated with dignity and respect at all times;
- That you experience warm and compassionate care and support;
- That you are supported to be included to make informed choices and decisions;
- That we are responsive to your changing needs, choices and decisions;
- That you are encouraged and supported to make informed choices to achieve your full potential even if this means taking personal risks.

This was a follow up inspection to assess the progress the service was making in meeting the requirements made at our inspection on 25 May 2021. We evaluated the service based on key areas that are vital to the support and wellbeing of people experiencing care during the pandemic.

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

What people told us

We spoke with a number of people informally during our inspection. Their comments were used to inform our inspection, for example:

"I really enjoyed my breakfast, I got grapefruit, that's something I find tasty".

"I am in my bed, I don't know why. I don't usually go to bed at this time".

"I am happy with my own company. I like to stay in my room and enjoy the peace and quiet".

"The girls (carers) are kindly folk".

We spoke with 12 relatives during our inspection. Their comments were used to inform our inspection, for example:

"We had essential visit when (name of person) was very poorly, however, visiting has been a mess with certain days not allowed. We have found (name of person) to look unkempt with no specs on or hearing aids in".

"I am very happy with the care and support all the staff have and continue to provide for my mum".

"Recent issues with visiting - however, home is addressing and aiming to improve".

"Concern with the length of time (name of person) is in a wheelchair - has raised this previously, however, continues to find her in one when visiting".

"Family feel the service is short staffed and their mum says staff are always busy. Very little time to sit and chat. Her appearance has improved and she has finally had a perm. This made a big difference to how she looked and gave her a boost".

"By and large we as a family are happy with the care being provided to our dad at Dounemount as he seems well and happy there. There have been one or two issues around communication and being kept up-to-date".

"We can not really fault the care she has received from the staff".

"Felt the visiting opening was a lot slower than other homes. Told 'we need to get the protocols sorted'. Only heard about the ability to take out in the car through word of mouth".

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

The service had implemented an action plan following our previous inspection. This meant there was a focus on making the improvements that were necessary to improving outcomes for people. We found there was some progress made in meeting the requirement from our previous inspection.

7.1 People's health and wellbeing are supported and safeguarded during the COVID-19 pandemic.

Improvements had been made to supporting people with their nutrition and fluids. There were systems in place to keep people safe from falls and skin breakdown, however, there was inconsistency in how staff completed these.

People now appeared better with more time spent helping people look their best. The observation and supervision of staff should be further developed to further improve the standards of care and support.

We have re-evaluated the service to be performing at a weak level. (See 'What the service has done to meet any requirements' and requirements 1, 2, 3, 4 and 5)

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

Infection control practices were safe and as per guidance. The provider had undertaken an audit of the environment in the home and a planned programme of works was being discussed. The monitoring of water temperatures needs to continue to ensure that people have access to hot water for their bathing and washing needs.

We have re-evaluated the service to be performing at an adequate level. (See 'What the service has done to meet any requirements and area for improvement 1.')

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

The provider had increased the number of domestic staff on duty. This contributed to the good standards of cleanliness seen in the home. There were improvements noted in some areas of people's care and support, however, staff remained task focused. Staff failed to take the opportunity to sit and engage with people despite appearing to have the time to do this.

We have re-evaluated the service to be performing at a weak level. (See 'What the service has done to meet any requirements' and requirement 6.)

Requirements

1. By 30 July 2021 the provider must ensure that all accidents and incidents are dealt with appropriately.

In particular you must:

- a) Ensure that all staff are aware of the appropriate actions to take in the event of an accident or incident.
- b) Ensure that medical assistance is sought in the event of an incident that puts the health and safety of a person at risk.
- c) Ensure that people's risk assessments are up-to-date and that staff are aware of how to reduce the risks to people.
- d) Ensure that all relevant allied professionals have been informed in the event of an accident or incident that puts the health and safety of a person at risk.
- e) Ensure that robust analysis of accidents and incidents occurs and is used to inform changes that can reduce the risks.

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

'I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability or frailty.' (HSCS 3.18);

'I am protected from harm because people are alert and respond to signs of significant deterioration in my health and wellbeing, that I may be unhappy or may be at risk of harm.' (HSCS 3.21);

'My care and support is provided in a planned and safe way, including if there is an emergency or

unexpected event.' (HSCS 4.14); and

In order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(a) - Welfare of Users.

2. By the 30 July 2021 the provider must ensure that people who experience distress or changes to their emotional wellbeing, have the necessary care and support in place to minimise the impact on their health.

In particular you must:

- a) All relevant care plans must state how people may present if distressed and what measures can be taken to reduce any distress.
- b) Monitoring forms must be completed accurately and in detail to ensure that they can be used to inform changes to care and support.
- c) Ensure that care plans and monitoring forms are organised and easy to access.
- d) There are sufficient staff available to offer emotional comfort and support to people who are distressed or anxious.
- e) Staff must have completed the relevant training and have the skills and knowledge in order for them to deliver the expected levels of care and support.

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

'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);

'I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability or frailty.' (HSCS 3.18); and

In order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(a) - Welfare of Users.

3. By the 30 July 2021, the provider must ensure that people's nutritional needs are met.

In particular you must:

- a) Ensure that food and fluid monitoring charts are completed accurately and reflect the actual amounts that people have eaten and drank.
- b) Ensure that when people have expressed their food and drink preferences that this is respected.
- c) Ensure that people are offered and supported to have a hot drink when they want.
- d) People who have lost weight are provided with meals that are suitable to stabilise and then increase weight.
- e) People who require assistance with their food and fluids should have timely assistance, to prevent them having to wait and their meal getting cold.

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

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

'If I need help with eating and drinking, this is carried out in a dignified was and my personal preferences are respected.' (HSCS 1.34);

'My needs are met by the right number of people.' (HSCS 3.15); and

In order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(a) - Welfare of Users.

4. By 30 July 2021, the provider must ensure that people's skin care needs are met.

In particular you must:

- a) Ensure that all skin integrity risk assessments are accurate and updated regularly.
- b) When the needs of people change and the risk of skin breakdown rises, the necessary changes are made to their care and support.
- c) Ensure that staff deliver the care and support that is documented to prevent skin breakdown.
- d) Ensure that all wound care documents are completed accurately.
- e) Staff must have completed the relevant training and have the skills and knowledge in order for them to deliver the expected levels of care and support.

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

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

'I experience high quality care and support based on relevant evidence, guidance and best practices.' (HSCS 4.11); and

In order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(a) - Welfare of Users.

5. By 30 July 2021, the provider must ensure people are treated with respect, compassion and kindness.

In particular you must:

- a) Demonstrate that all people have been included in home life, including mealtimes and activities, irrespective of their abilities.
- b) Use the preferred name of people in documentation and stop the use of labels for people and negative terminology in care documents.
- c) Help and support people to look their best.
- d) Respect the rights of people to choose and respect their choices and preferences.
- e) Be aware of the latest guidance on COVID-19 to stop unnecessary restrictions being placed on people's lives.

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

'I experience warmth, kindness and compassion in how i am supported and cared for, including physical

comfort when appropriate for me and the persons supporting and caring for me.' (HSCS 3.9);

'I experience care and support where all people are respected and valued.' (HSCS 4.3); and

In order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(a) - Welfare of Users.

6. By 30 July 2021, the provider must ensure that there are the right number of staff on duty to ensure people's care needs are met. The number of staff should be determined by a robust assessment of people's needs taking into account the complexity of people's needs, outcomes and experiences for residents and the layout of the building.

This is in order to ensure that staffing is consistent with the Health and Social Care Standards (HSCS) which state that:

'My needs are met by the right number of people.' (HSCS 3.15); and

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

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

'People have time to support and care for me and to speak with me.' (HSCS 3.16); and

In order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 210/2011), Regulation 4(1)(a) - Welfare of Users.

Areas for improvement

1. The service should continue to monitor and record the temperature of water in shared bathrooms and showers. When low temperatures of water are noted, this should be acted upon, this will help people experience pleasant washing and bathing experiences.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) 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)

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

Requirements

Requirement 1

By 14 June 2021 the provider must ensure that all accidents and incidents are dealt with appropriately.

In particular you must:

- a) Ensure that all staff are aware of the appropriate actions to take in the event of an accident or incident.
- b) Ensure that medical assistance is sought in the event of an incident that puts the health and safety of a person at risk.
- c) Ensure that people's risk assessments are up-to-date and that staff are aware of how to reduce the risks to people.
- d) Ensure that all relevant allied professionals have been informed in the event of an accident or incident that puts the health and safety of a person at risk.
- e) Ensure that robust analysis of accidents and incidents occurs and is used to inform changes that can reduce the risks.

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

'I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability or frailty.' (HSCS 3.18);

'I am protected from harm because people are alert and respond to signs of significant deterioration in my health and wellbeing, that I may be unhappy or may be at risk of harm.' (HSCS 3.21);

'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event.' (HSCS 4.14); and

In order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(a) - Welfare of Users.

This requirement was made on 2 June 2021.

Action taken on previous requirement

Care plans and falls risk assessments were in the process of being re-written and updated. Although the plans we read were more detailed and identified specific risks to the individual, there was still some way to go for all people to have up-to-date plans and assessments in place.

Appropriate referral to an out of hours doctor had occurred following one fall and staff implemented the necessary care and support as directed by the doctor. However, there was a failure then to pass on the

information regards this fall to nurse in charge 48 hours later. It is important that when a person has an accident that staff are informed, thus they are able to monitor and assess for any ongoing changes to the persons health and wellbeing.

Staff completed computerised accident and incident records and there was a note made on the handover record. However, for an analysis of falls to occur, for example a pattern to times or locations of falls, the service should look to implement the falls safety cross.

The service had made some progress in meeting this requirement, however, this was at an early stage. We have re-instated this requirement.

Not met

Requirement 2

By the 14 June 2021 the provider must ensure that people who experience distress or changes to their emotional wellbeing, have the necessary care and support in place to minimise the impact on their health.

In particular you must:

- a) All relevant care plans must state how people may present if distressed and what measures can be taken to reduce any distress.
- b) Monitoring forms must be completed accurately and in detail to ensure that they can be used to inform changes to care and support.
- c) Ensure that care plans and monitoring forms are organised and easy to access.
- d) There are sufficient staff available to offer emotional comfort and support to people who are distressed or anxious.
- e) Staff must have completed the relevant training and have the skills and knowledge in order for them to deliver the expected levels of care and support.

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

'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);

'I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability or frailty.' (HSCS 3.18); and

In order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(a) - Welfare of Users.

This requirement was made on 2 June 2021.

Action taken on previous requirement

The plans and assessments of people at greater risk of distress or emotional upset had began to be re-written. These were more person-centred and highlighted potential triggers for the person distressed and

how best to support the person to prevent any distress. When all the plans are accurate and in place, this should help inform staff practices and help staff support people in a way that is right for them.

There continued to be incidents when people experienced emotional upset or distress without the appropriate measures being taken. For example; an incident between two people was not recorded and followed up. In a lounge there was no staff presence, meaning that the friction between two residents escalated. And when one person left their lunch half way through due to upset, staff took no action to support this person finish their meal.

The service needs to oversee staff practices and staff awareness of their role in intervening and supporting people to be emotionally well.

The service had made some progress in meeting this requirement, however, this was at an early stage. We have re-instated this requirement.

Not met

Requirement 3

By the 14 June 2021, the provider must ensure that people's nutritional needs are met.

In particular you must:

- a) Ensure that food and fluid monitoring charts are completed accurately and reflect the actual amounts that people have eaten and drank.
- b) Ensure that when people have expressed their food and drink preferences that this is respected.
- c) Ensure that people are offered and supported to have a hot drink when they want.
- d) People who have lost weight are provided with meals that are suitable to stabilise and then increase weight.
- e) People who require assistance with their food and fluids should have timely assistance, to prevent them having to wait and their meal getting cold.

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

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

'If I need help with eating and drinking, this is carried out in a dignified was and my personal preferences are respected.' (HSCS 1.34);

'My needs are met by the right number of people.' (HSCS 3.15); and

In order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(a) - Welfare of Users.

This requirement was made on 2 June 2021.

Action taken on previous requirement

The lunchtime service appeared well organised. The nurse directed the meal service. This meant that people received the right diet and textured meal for them. Time was taken to offer a choice and when one

person remained undecided, they were provided with a sample to taste of both choices. This resulted in this person drinking all of their soup. It was disappointing that a second helping was not then offered to this person – they had lost weight. Staff had missed the opportunity to increase this person's caloric intake.

Charts used to document the fluid and nutritional intake of people were accurately completed and generally people appeared to drink enough. However, when an individual has had a poor intake, staff did not appear to act on this to provide the additional support to increase the person's intake. For example; one person refused breakfast and was asleep at the lunch table, with their soup going cold and untouched. The manager intervened to ensure that the soup was replaced and the additional support and encouragement was given.

There continued to be a task approach to supporting people with nutrition and fluids. As a result the breakfast service appeared to take a long time and people, who required assistance with fluids, appeared only to get this assistance during a mealtime or when the tea trolley was going round. It is important for people to have access to fluids when they want them.

The service had made some progress in meeting this requirement, however, this was at an early stage. We have re-instated this requirement.

Not met

Requirement 4

By 14 June 2021, the provider must ensure that people's skin care needs are met.

In particular you must:

- a) Ensure that all skin integrity risk assessments are accurate and updated regularly.
- b) When the needs of people change and the risk of skin breakdown rises, the necessary changes are made to their care and support.
- c) Ensure that staff deliver the care and support that is documented to prevent skin breakdown.
- d) Ensure that all wound care documents are completed accurately.
- e) Staff must have completed the relevant training and have the skills and knowledge in order for them to deliver the expected levels of care and support.

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

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

'I experience high quality care and support based on relevant evidence, guidance and best practices.' (HSCS 4.11); and

In order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(a) – Welfare of Users.

This requirement was made on 2 June 2021.

Action taken on previous requirement

Appropriate assessments had been completed. This helped identify people at high risk of skin breakdown. People were supported by staff to change their position regularly, this reduced the risk of skin breakdown. However, there was inconsistency in the frequency one person was supported. Staff need to ensure that the instructions for staff are clear and reflective of need.

Some people remained in transit wheelchairs for long periods of time. These wheelchairs are for helping people transfer from one area to another and not for an alternative to an armchair. The prolonged periods sat in wheelchairs, may increase the risk of skin deterioration to some people.

Wound care documentation was in place and updated when a dressing change had occurred. Referral to supporting professionals for additional guidance had taken place and their recommendations were subsequently acted on. Staff ensured that people remained comfortable during dressing changes, by administering pain medication before their wound was redressed.

Improvements need to be made to how photographs of wounds are taken and then filed. Staff need to be mindful of GDPR guidance.

The service had made some progress in meeting this requirement, however, this was at an early stage. We have re-instated this requirement.

Not met

Requirement 5

By 14 June 2021, the provider must ensure people are treated with respect, compassion and kindness.

In particular you must:

- a) Demonstrate that all people have been included in home life, including mealtimes and activities, irrespective of their abilities.
- b) Use the preferred name of people in documentation and stop the use of labels for people and negative terminology in care documents.
- c) Help and support people to look their best.
- d) Respect the rights of people to choose and respect their choices and preferences.
- e) Be aware of the latest guidance on COVID-19 to stop unnecessary restrictions being placed on people's lives.

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

'I experience warmth, kindness and compassion in how i am supported and cared for, including physical comfort when appropriate for me and the persons supporting and caring for me.' (HSCS 3.9);

'I experience care and support where all people are respected and valued.' (HSCS 4.3); and

In order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(a) - Welfare of Users.

This requirement was made on 2 June 2021.

Action taken on previous requirement

People appeared more presentable. Some people had visited the hairdresser and it was clear the positive impact this had on their wellbeing.

Reviews of everyone's care and support was taking place. We are hopeful that the service seizes this opportunity to obtain feedback from relatives and residents.

The service had a 'resident of the day' system in place. The aim was for a review of their plans and quality of their lives over the past month. It was disrespectful that on the top of this form the person's room number was used as a means of identifying them - not their name. There was a missed opportunity during the completion of this assessment to include all key departments in the home. For example; the activities and maintenance sections were blank.

In the early evening, a number of people were in bed with curtains closed and lights off. Staff indicated this was the choice of the person, however, most of the people who were in bed, we felt, did not have the ability to indicate their choice.

In the evening the staff sat in a group in the lounge and completed their records. We felt that if one staff member completed their records at a time, the other staff could be sitting chatting with people.

Improvements had been made to how visits from families and friends were being managed and supported. The worries regards visiting should reduce due to the service implementing the 'Open with Care' guidance.

Some care plans had been re-written and these were person-centred and reflective of preferences. Terminology in the plans was appropriate. Staff were observed to call people by their preferred name.

The service had made some progress in meeting this requirement, however, this was at an early stage. We have re-instated this requirement.

Not met**Requirement 6**

By 14 June 2020, the provider must ensure that people live in an environment that is clean and in a good state of repair.

In particular you must:

- a) Ensure that all areas of the home are cleaned to the standards expected during the COVID-19 pandemic.
- b) Complete regular audits of the cleanliness of the home and address any deficits in standards.
- c) Ensure that cleaning schedules are accurate and available for staff to use to inform their practice
- d) Complete an audit of all windows in the home to ensure they are water and draft tight and put an action plan in place for the upgrade of these windows.
- e) Complete regular water temperature checks, in particular during periods of high use, to ensure that people have access to hot water.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) 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); and

In order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Regulation 4(1)(a) and (d) and Regulation 10(2)(b).

This requirement was made on 2 June 2021.

Action taken on previous requirement

Staff infection control practices were good and as per guidance. This helped keep people safe from COVID-19. Personal protective equipment (PPE) was plentiful and stored appropriately. This made it easier for staff to access PPE.

The appeared clean and odour free. Cleaning schedules that helped support enhanced cleaning were in place.

The provider had completed an audit of the home and a planned programme of works was being discussed. This would be a phased improvement of the environment. This should not disrupt the day to day lives of people.

This requirement has been met, however, we have made an area for improvement in relation to water temperatures.

Met - within timescales

Requirement 7

By 14 June 2021, the provider must ensure that there are the right number of staff on duty to ensure people's care needs are met. The number of staff should be determined by a robust assessment of people's needs taking into account the complexity of people's needs, outcomes and experiences for residents and the layout of the building.

This is in order to ensure that staffing is consistent with the Health and Social Care Standards (HSCS) which state that:

'My needs are met by the right number of people.' (HSCS 3.15); and

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

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

'People have time to support and care for me and to speak with me.' (HSCS 3.16); and

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

This requirement was made on 2 June 2021.

Action taken on previous requirement

Doune unit had a period of time when there were not staff present in the lounge. We felt this increased the risks to the wellbeing of the three people left unattended.

Alvah lounge was busier and for over 20 minutes there was no staff presence during late morning. We felt this increased the risks to the wellbeing of the seven people left unattended.

The service had made some progress in meeting this requirement, however, this was at an early stage. We have re-instated this requirement. The timescale for completion is 30 July 2021.

The recruitment of staff is ongoing and the service is looking to develop the senior carer role. This should help with the imbedding and sustaining of any improvements and change.

The management team were visible in the service. This enabled observation of staff practice to take place.

The service had made some progress in meeting this requirement, however, this was at an early stage. We have re-instated this requirement. The timescale for completion is 30 July 2021.

Not met

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

In order to improve the wellbeing of residents, the management team should further develop the range of meaningful activities specific to people's individual needs, likes and interests.

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

'I can choose to have an active life and participate in a range of activities every day.' (HSCS 1.25); and

'I can maintain my interests, activities in the way that I like.' (HSCS 2.22)

This area for improvement was made on 9 October 2020.

Action taken since then

The social engagement and activities that people experienced remained the responsibility of the activities person. Staff did not take time to sit and talk with people. The care remained task focused.

Staff had spent time considering positioning of people who remained in their bedrooms. For example; clear view of the television, one person's chair was positioning to enable them a view out the window.

Outside space was not used during our inspection. There are plans to improve the garden space to enable better access and use of the garden space.

We will follow this area for improvement up during our next 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

To find out more

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Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

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