

North Inch House Care Home Service

99 Hay Street Perth PH1 5HS

Telephone: 01738 632 233

Type of inspection:

Unannounced

Completed on:

15 September 2021

Service provided by:

Balhousie Care Limited

Service no:

CS2003009765

Service provider number:

SP2010011109



Inspection report

About the service

North Inch House is located in Perth, within easy access of the town centre and its amenities. The care home is registered for 78 older people. The original building, North Inch House, is registered for 40 older people. The newer building, separate but within the same grounds, is called North Grove and is registered for 38 people with a specific diagnosis of dementia.

What people told us

We spoke with people informally during the inspection; they told us they were being well looked after and that the staff were nice to them. We saw friendly and supportive interactions between staff and the people they were looking after.

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

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

How good is our care and support during the

3 - Adequate

COVID-19 pandemic?

Our focus in this inspection was to establish if people's health and wellbeing benefited from their care and support in relation to the Covid-19 pandemic.

Our main findings can be found in the 'what the service has done to meet any requirements made at or since the last inspection' section of this report. The service had met the requirement imposed during the inspection process. Improvements were noted and outcomes for people living in the service were better. We have increased the grade of the service as a result.

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

Requirements

Requirement 1

By 10 September 2021, you must ensure that service users experience care in an environment that is safe and minimises the risk of infection. In particular you must:

a. ensure all harmful chemicals are stored securely

b. ensure that there is a plan in place for the refurbishment/repair of the satellite kitchen within a reasonable timeframe.

This is in order to comply with Regulation 4(1)(a) and (d) and Regulation 10(2)(b) 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 31 August 2021.

Action taken on previous requirement

This requirement was made as a result of the previous inspection. It was made because we found harmful chemicals not stored securely and one satellite kitchen needed upgrading to ensure it could be cleaned effectively to reduce the spread of infection.

We found all harmful chemicals had been removed from satellite kitchen areas and were now being stored securely. Staff had been reminded of the importance that these chemicals are not left in communal spaces. The satellite kitchen that needed refurbished/repaired is now planned to be fully replaced by 30 September 2021.

We will continue to monitor the standard of staff practice and equipment in use at future inspections.

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

This Area For Improvement arose as a result of an upheld complaint:

The service should make sure communication systems are improved to ensure that important, meaningful, and required information is shared with relatives, as appropriate to individual needs, preferences, and legal status.

This is to ensure care and support is consistent with Health and Social Care Standard 4.18: 'I benefit from different organisations working together and sharing information about me promptly where appropriate, and I understand how my privacy and confidentiality are respected'.

This area for improvement was made on 29 June 2021.

Action taken since then

We did not assess this area for improvement during this inspection.

Previous area for improvement 2

This Area For Improvement arose as a result of an upheld complaint:

The manager should ensure that an accurate inventory is taken on admission and updated to reflect any items brought in to or removed from the service. People experiencing care should have access to a secure place to keep their belongings safe.

This is to ensure care and support is consistent with Health and Social Care Standard 5.3: 'I have an accessible, secure place to keep my belongings'.

This area for improvement was made on 29 June 2021.

Action taken since then

We did not assess this area for improvement during this inspection.

Previous area for improvement 3

This Area For Improvement arose as a result of an upheld complaint:

The provider should ensure that where someone has been identified as losing weight, assessment tools are used to support them to eat and drink. This should be reflected in an up-to-date care plan that offers staff guidance.

This is to ensure care and support is consistent with Health and Social Care Standard 1.23: 'My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected'.

This area for improvement was made on 29 June 2021.

Action taken since then

We did not assess this area for improvement during this inspection.

Previous area for improvement 4

This Area For Improvement arose as a result of an upheld complaint:

The manager should ensure that all care staff are trained in foot care and are knowledgeable in how to report any concerns they may have. They should also develop a way to ensure that these concerns are followed up and actioned, including referrals to other health professionals.

This is to ensure care and support is consistent with Health and Social Care Standard 3.14: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes'.

This area for improvement was made on 29 June 2021.

Action taken since then

We did not assess this area for improvement during this inspection.

Previous area for improvement 5

This Area For Improvement arose as a result of an upheld complaint:

The manager should ensure that all staff are trained and aware of the company complaints procedures and how to assist people experiencing care and their families in raising a complaint or concern.

This is to ensure care and support is consistent with Health and Social Care Standard 4.20: 'I know how, and can be helped, to make a complaint or raise a concern about my care and support'.

This area for improvement was made on 29 June 2021.

Action taken since then

We did not assess this area for improvement during 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
7.2 Infection control practices support a safe environment for people experiencing care and staff	3 - Adequate

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