

## Belhaven House Care Home Service

3 Craigend Road  
Troon  
KA10 6ER

Telephone: 01292 314 410

**Type of inspection:**  
Unannounced

**Completed on:**  
10 September 2021

**Service provided by:**  
Mansfield Care Limited

**Service provider number:**  
SP2005007720

**Service no:**  
CS2011303194

## About the service

Belhaven House is registered to provide a care home service to 32 older people, some of whom may have dementia and two named adults under the age of 65. Respite care can also be provided within the service.

The service was registered with the Care Inspectorate on 1 December 2011.

The service provider is Mansfield Care Limited.

Belhaven House is situated in Troon, South Ayrshire. The service is close to the town centre, local amenities, beach and golf course.

The home is a converted villa with extension. Accommodation is over two floors, most bedrooms are on the ground floor to the rear of the building. All bedrooms have either en-suite toilet, or en-suite toilet and shower facilities.

There are communal lounges and dining room at the front of the house on the ground floor.

The first floor lounge was not in use.

A large unsecured garden to the front of the property, and enclosed garden to the side are available for people to sit outside. Improvements are planned to refurbish the home, improve communal facilities and allow easier access to outdoor space.

At the time of the inspection there were 25 people living at the service.

The service does not employ nurses and uses district nurses and other visiting healthcare professionals to assist in meeting people's healthcare needs.

The service states its aims as:

'To treat all our residents with respect, helping them to present a positive image and be welcomed as valued individuals.'

An Improvement Notice was issued on 30 August 2021 with timescales set for the provider to ensure people's health, safety and well-being needs are met in a well maintained environment which is staffed safely.

## What people told us

This was a follow up inspection evaluating a specific requirement around care planning, and so we did not formally contact people or relatives on this occasion.

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

### Requirements

#### Requirement 1

By 24 September 2021, people's health, safety and well-being needs must be accurately assessed, documented, met, and effectively communicated between all relevant staff. This means putting people using the service at the center, identifying what is important to them, and ensuring that everyone is working together to maximise their health, safety, and well-being. In particular you must:

- (a) Assess and record people's health, safety, and well-being needs within their care plan taking account of their choices and preferences.
- (b) Ensure that any risks to people's health, safety or well-being are identified, managed, and clearly recorded as part of the care planning process and that they are protected from harm.
- (c) Ensure that people's health and well-being is consistently monitored and evaluated to inform the level of care required.
- (d) Measure the effectiveness of the care provided to people through observation of their care experiences, and other relevant evaluation and review processes, such as, but not limited to, quality audits, external feedback, and clinical governance reviews. All observations must be documented.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state: "My care and support meets my needs and is right for me." (HSCS 1.19)

This is in order to comply with regulations 3, 4(1)(a), and 5(1) & (2) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

**This requirement is contained within the Improvement Notice served to the provider on 30 August 2021.**

**This requirement was made on 23 August 2021.**

#### Action taken on previous requirement

This requirement was not assessed at this inspection.

#### Not assessed at this inspection

#### Requirement 2

By 10th September the provider must ensure a plan is in place to address the maintenance of the premises and improvements needed. This must include:

- an environmental audit to assess all areas of the care home, and ensure a good state of repair, decorated and maintained to an appropriate standard
- plan and address within an agreed timescale needs of dirty utility and house keepers cupboard facilities

- ensure sufficient hot water in people's bedrooms and communal bathrooms, if this is not possible set out a plan and agreed timescale by which this can be achieved
- review maintenance systems to ensure essential health and safety checks are carried out within set timescales and remedial actions are taken where deficits are identified
- ensure windows can open to provide ventilation
- ensure heating is adequate and adjusted as the weather changes
- lighting improvement in areas which are too dull.

This is to comply with Regulations 4(1)(a)(d) and Regulation 10(a)(b)(c)(d) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

**This requirement was made on 23 August 2021.**

## Action taken on previous requirement

We found the provider and the management team had completed an environmental audit. This was used to create an action plan of work to be completed within the home and gardens.

Significant work was in progress to upgrade and refurbish the home, including replacement of carpets, flooring and furniture that could not be cleaned. One of each of the dirty utility's and house keepers cupboards had been completely refurbished. The two others were under going the same process at the time of the inspection.

A system had been implemented to report repairs and maintenance which meant these were now being carried out in a timely manner. The maintenance team had also ensured there was sufficient ventilation for people living in the home and lighting had been added to brighten areas that had been previously dark.

At the time of the inspection the provider and management team had sourced a company to check, monitor and fix any issues with the heating and hot water. The timescale for this company to fix all outstanding issues for the heating and hot water was by the 24th of September.

Lighting had been added to brighten areas which were not suitable within the home.

These improvements meant that people experienced a more comfortable and safer living environment.

There was sufficient evidence to demonstrate the provider has met the requirement of 10 September detailed in the inspection report dated 23 August.

## Met - within timescales

### Requirement 3

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

- (a) Ensure effective communication is in place to alert staff to areas that present a risk of transmission of infection.
- (b) Ensure that the environment is cleaned thoroughly, including all equipment, and furnishings.
- (c) Ensure that damaged surfaces on flooring and furniture is replaced or repaired to ensure that they can

be cleaned effectively.

d) Develop, implement and monitor an enhanced cleaning schedule that reflects the guidance from Health Protection Scotland entitled, 'COVID 19 Information and Guidance for Care Homes Settings'.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state: "I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment". (HSCS 5.22)

This is 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 is contained within the Improvement Notice served to the provider on 30 August 2021.**

**This requirement was made on 23 August 2021.**

#### Action taken on previous requirement

The management team had implemented cleaning schedules that were based on good infection prevention and control practices from the "Covid-19 Information and Guidance for Care Home Settings". We found immediate improvements in the cleanliness of the environment which had been maintained since our last inspection.

The provider and management team had audited and created an action plan of the home environment. Work was underway to replace or repair damaged items to ensure that all areas within the home could be cleaned effectively.

An environmental audit had been undertaken and an action plan implemented which had addressed some of the issues identified within the home environment. This included, but was not limited to, furniture, carpets, kitchen equipment and housekeeping facilities.

The management team had implemented flash meetings. This facilitated effective communication for all of the staff team.

These improvements meant that people experienced a more comfortable and safer living environment.

There was sufficient evidence to demonstrate the provider has met the requirement of 10 September detailed in the Improvement Notice.

#### Met - within timescales

#### Requirement 4

By 24 September 2021, people must receive care that meets their health, safety and well-being needs and enables them to experience respectful, personalised, and compassionate care. In particular you must ensure that:

- (a) There are enough staff on each shift who are appropriately trained, skilled and competent in the role they are to perform.
- (b) There is an evaluation of staff learning and development needs and training implemented which meets

the needs of the current resident group and staff professional codes of practice.

(c) The numbers and skill mix of staff employed are based on an accurate assessment of each service user's needs and identified areas for potential harm.

(d) There are sufficient numbers of staff to ensure that service users experience meaningful engagement and occupation. This should include, but need not be limited to including, regular opportunities to be outdoors and away from the care home.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state: "My needs are met by the right number of people". (HSCS 3.15)

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

**This requirement is contained within the Improvement Notice served to the provider on 30 August 2021.**

**This requirement was made on 23 August 2021.**

#### Action taken on previous requirement

This requirement was not assessed at this inspection.

#### Not assessed at this inspection

### Requirement 5

By 14th September people must be assured the service operates to promote quality and safety of. In particular:

If people raise a concern this will be recorded and responded to.

People's views will form an integral part of quality assurance and, quality health, safety and well-being.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state: "I am listened to and taken seriously if I have a concern about the protection and safety of myself or others, with appropriate assessments and referrals made". (HSCS 3.22)

This is in order to comply with Regulation 3 Principles. A provider of a care service shall provide the service in a manner which promotes quality and safety and respects the independence of service users, and affords them choice in the way in which the service is provided to them.

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

**This requirement was made on 23 August 2021.**

#### Action taken on previous requirement

This requirement was not assessed at this inspection.

#### Not assessed at this inspection

## 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

To support better outcomes for service users linked to choices and preferences, the service provider should enhance the opportunities for people to engage in meaningful activity. This should include, but is not limited to:

- Individual assessment, including financial risk assessment to support people to spend their money in their best interest and enhance their lives in ways which are meaningful to them.
- Support to carry out every day activities such as making a cup of tea/ washing dishes.
- Support to move, exercise and change position, with appropriate equipment supplied if needed.

This is 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' (HSCS 1.25)

**This area for improvement was made on 23 August 2021.**

#### Action taken since then

This area for improvement was not assessed at this inspection.

#### Previous area for improvement 2

To ensure people's mealtime experience is improved and nutritional needs are met the service provider should:

- provide visual choices at the time of the meal
- provide high calorie snacks and extras to meet individual preferences for those at risk or losing weight.
- ensure staff are close to hand at mealtimes and consider ways of serving food in smaller groups.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: 'My meals and snacks meet my cultural and dietary needs, beliefs and preferences'.

**This area for improvement was made on 23 August 2021.**

#### Action taken since then

This area for improvement was not assessed at this inspection.

#### Previous area for improvement 3

To ensure people's skincare needs are met, the service provider should:

- assess, document and monitor pressure ulcer risks in keeping with best practice guidance.
- monitor the effectiveness of equipment such as pressure relief cushions and mattresses.
- specify the support to move and change position.

- ensure skin care products such as barrier creams are used effectively.
- promote continence using equipment if needed such as wheeled commodes.

This is to ensure that 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).

**This area for improvement was made on 23 August 2021.**

## Action taken since then

This area for improvement was not assessed at this inspection.

## Previous area for improvement 4

The service provider should review the layout and use of spaces in order to develop more person centred care practices within smaller group living areas. This is with particular reference to:

- support to carry out every day activities such as making a cup of tea/ washing dishes
- ensure staff are available to provide support for more meaningful activities by reducing time away from a "household" area for example by provision of kitchenette and dishwasher
- consider how communal spaces are used to create smaller more homely living.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state: 'If I live in a care home the premises are designed and organised so that I can experience small group living, including access to a kitchen, where possible.' (HSCS 5.7)

**This area for improvement was made on 23 August 2021.**

## Action taken since then

This area for improvement was not assessed at this inspection.

## Previous area for improvement 5

The service provider should review staff practice in relation to laundry transportation and washing temperatures to ensure this is in keeping with national guidance.

This is to ensure that 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)

**This area for improvement was made on 23 August 2021.**

## Action taken since then

The provider had purchased four transportation trolleys. The management team implemented a safe and effective protocol for the transportation of laundry.

We spoke with care and laundry staff who advised the new protocol was working well.

We noted during the inspection staff using the transportation trolleys and managing laundry in a safe and effective manner.

This area for improvement has been met.



**Previous area for improvement 6**

The service provider should ensure a review of leadership, accountability and audit is undertaken to people can be confident in the organisation.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state: "I use a service and organisation that are well led and managed". (HSCS 4.23)

**This area for improvement was made on 23 August 2021.**

**Action taken since then**

This area for improvement was not assessed at this inspection.

**Previous area for improvement 7**

The service should re-assess equipment needs for people as their needs change. This includes equipment to support sitting out of bed (chairs/pressure relief cushions), transferring to shower or bath and support to get to the toilet more easily such as wheeled commodes.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state: "The premises have been adapted, equipped and furnished to meet my needs and wishes". (HSCS 5.16)

**This area for improvement was made on 23 August 2021.**

**Action taken since then**

This area for improvement was 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](http://www.careinspectorate.com).

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