

Leys Park Care Home Care Home Service

Leys Park Road Dunfermline KY12 OAB

Telephone: 01383 723 790

Type of inspection:

Unannounced

Completed on: 24 September 2021

Service provided by:St Philips Care Limited

Service no: CS2004085047

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Inspection report

About the service

Leys Park is a large two storey building set in private grounds and is centrally located in Dunfermline. The Care Home is registered to provide care for up to 66 people. An extensive refurbishment programme is currently being carried out within the home and this has resulted in a number of bedrooms being unoccupied at present. At the time of the inspection there were 58 people resident within the home.

The home is an old Victorian building and extensive work had been carried out to upgrade the heating system and to replace windows throughout the home. Communal areas had recently benefitted from redecoration and new carpets and communal bathrooms and toilets throughout the home had been renovated over the past year. An environment improvement plan was in place at the time of the inspection to renovate bedrooms. Due to the current pandemic, this work had not progressed to the intended timescales.

What people told us

We spoke with people living in the home and their families with a sample of comments below. We discussed these comments with the manager and she agreed to talk with staff to see how to enhance outcomes for people.

'I would like to go out for a pub lunch or an odd pint.'

'I like the peace and quiet here.'

'I used to go to church once or twice a week when at home but not here.'

'I would like to go home but am happy here.'

'Staff are nice, they help me when I need it.'

'The meals are alright; I take what I get.'

'There's not much to do, I just watch TV.'

'The food is alright; I mainly eat everything.'

'Staff are busy but they help me.'

'I don't like staying in my room, waiting.'

'I have been waiting for ages (expecting the tea trolley).'

'Everything is fine, just out for a stroll.'

'(Relative) always wore proper trousers but is now in joggers, which our family did not provide.'

'I'm happy because she's happy. I haven't found a fault with them.'

'Staff always turn up with a smile.'

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 well do we support people's wellbeing?	3 - Adequate
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 well do we support people's wellbeing?

3 - Adequate

We considered how well the service supports people's wellbeing and evaluated this as adequate. There were some strengths but these just outweighed weaknesses.

We used a short observational framework for inspection to help us understand people's experiences of living in the home. This observation showed that while staff were kind, there were lots of missed opportunities for enhancing the person's experience. One woman, who was being assisted with her lunch, was not able to communicate verbally but may have had a more enjoyable time if the staff member had told her about her day or discussed a topic she had an interest in. People were given choice showing that they were valued and respected.

There were varied indoor and outdoor activities to suit a range of tastes and abilities which meant people could choose to have an active life, if this is what they wanted. One man mentioned that he wanted to go for a pub lunch and staff were enthusiastic about making this happen indicating that people are supported to be included in their local community. There was a weekly activities planner on the wall of each unit. Some people said they did not really join in with activities and did not seem to know what was on offer. The service should consider individual activity planners so that people can choose where and how to spend their time.

People's health should benefit from their care and support and they should expect the right healthcare from the right person at the right time. A variety of health professionals were contacted without delay, including emergency medical attention where necessary. We identified a need for staff training on the understanding of medical emergencies and knowing when to ask for assistance from nursing staff. (See requirement 1).

Care plan evaluations were varied with some having good information and others in need of more detail, for instance, one evaluation stated, 'some difficulties due to cva'. Evaluations should include information about what helps or hinders so that people can expect staff to be aware of and plan for any known vulnerability. Anticipatory care plans were not in place for everyone and there was little information regarding end-of-life care which meant that people's wishes regarding end-of-life care may not be met. The manager said the anticipatory care plans were a work in progress.

We noted a need for staff training on dementia, de-escalation techniques and managing aggression. Some practices we read about during incidents that had taken place did not treat people with respect and did not comply with relevant legislation, for example one woman had medicine placed in her mouth against her will. (See requirement 1).

Relatives spoke warmly of staff but were concerned about the décor of the home. The manager told us about the ongoing refurbishment which will be done in sections to minimise disruption. We were told that people can be wearing clothing that does not belong to them so there is a need to consider the laundry process so that people feel respected and are wearing their own clothes. Visiting was in line with current Scottish Government guidance.

Requirements

- 1. By 30 November 2021, staff training must be carried out to ensure the following:
- 1) All staff are trained in dementia care, de-escalation techniques and managing aggression.
- 2) Staff have the expected knowledge for their role with regards to identifying early indicators of serious health complaints.
- 3) Non nursing staff know when to alert the registered nurse on duty when someone is ill, regardless of which unit the nurse is working in that day.
- 4) Staff knowledge of the training mentioned above is evaluated to ensure competency.

This is to comply with Regulation 4(1)(a) and (c) (Welfare of users and procedures for the Requirements for Care Services) Regulations 2011 and This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that: '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.' (HSCS 3.14) and 'If my independence, control and choice are restricted, this complies with relevant legislation and any restrictions are justified, kept to a minimum and carried out sensitively.' (HSCS 1.3).

This requirement was made on 21 September 2021.

How good is our care and support during the 3 - Adequate COVID-19 pandemic?

During an outbreak of Covid-19 the application of strict infection control procedures is paramount to make sure the risk to peoples' safety is minimised. Health Protection Scotland had issued practice guidance that all social care providers must follow to protect the safety and wellbeing of all people experiencing care and care staff. Until recently there had not been a Covid-19 outbreak within the home. At the time of our inspection there was one person self-isolating following a recent positive Covid-19 test result. The home was closed to admissions and visitors.

The performance of the service in relation to infection prevention and control practices to support a safe and clean environment was adequate. The service had Personal Protective Equipment (PPE) stations available throughout the home and staff knew where these were located.

Quality Indicator 7.2

People should experience an environment which is well looked after with clean, tidy and wellmaintained premises, furnishings and equipment. The level of cleanliness in the home was adequate. Throughout the home, there was evidence of ongoing upgrading and refurbishment work of the environment which had led to recent improvements in communal facilities available to people living in the home.

Laundry facilities were well organised and compliant with quidance. There was a good supply of cleaning equipment, products and solutions which were suitable for a range of cleaning purposes.

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Communal areas and bedrooms were found to be generally clean, and frequently touched areas such as handrails were wiped throughout the day. Interior building fabric and décor needs to be in a good state of repair to allow for easy and effective cleaning. We saw areas of damage that were awaiting repair or refurbishment throughout the home. **See Requirement 1**.

Quality Indicator 7.3

Staff were aware of Health Protection Scotland and any guidance which has been made available to care homes since the start of the pandemic.

Staff described safe working practices, such as PPE removal or safe laundering of work clothing. These are practices which are vital in preventing potential spread of infection.

We were satisfied that staff training in infection control and prevention had been available but there was inconsistent practice in relation to PPE such as frequent touching to the front of masks and the disposal of waste. **See Requirement 1**.

Staff expressed commitment to their role. It was clear from their comments that they wished to provide high quality care and support. It was a source of frustration that the quality was compromised by the limited number of staff on duty each day.

We were not satisfied that the impact of Covid-19 was fully considered when deciding staffing levels for the care home. The dependency tool was not regularly completed or informed staffing levels for the home. It did not consider impacts of Covid-19, such as residents who were isolating, additional cleaning tasks or supporting social distancing. To ensure that staffing levels are sufficient to meet the health and wellbeing needs of residents a requirement has been made. **See Requirement 2**.

We were fully satisfied that the home had an established process for the weekly testing of care staff which included bank staff. Testing in this way supports the protection of residents from the spread of infection and is in line with government guidance.

Staff were able to speak with their line manager with any concerns or ideas they had. This was important in maintaining a motivated and resilient workforce.

Requirements

- 1. In order to ensure people using the service are safeguarded, the provider must ensure by 30 November 2021, that the care home environment is clean and infection prevention and control measures are improved. In order to achieve this, the provider must ensure:
- The home environment, including painted surfaces and floors are repaired.
- Staff must, at all times, demonstrate appropriate use and disposal of PPE.

This is to comply with Regulation 4(1)(a) and (d) (Welfare of users and procedures for the prevention and control of infection) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 and This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that: 'As a supported person, I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment.' (HSCS 5.22).

- 2. In order to ensure people using the service are safeguarded, the provider must ensure that by 30 November 2021, that having regard to the size and nature of the care service, the statement of aims and objectives and the number and needs of service users the provider must ensure:
- That, at all times, suitably qualified and competent persons are working in the care service in such numbers as are appropriate for the health, welfare and safety of service users.
- Staffing decisions must be supported by a clear dependency assessment which includes any additional care and support needs during the Covid-19 pandemic and feedback from staff and service users.

This is in order to comply with the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, SSI 2011/210 Regulation 15(b)(i) and takes account of the Health and Social Care Standards (HSCS), which state that: 'My needs are met by the right number of people.' (HSCS 3.15).

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 improve personal care plans, the service should fully involve individuals and where appropriate their representative, in their assessment of need, development and review of their personal plan and make personal plans accessible and available to the individuals at all times.

This is to ensure that care and support is consistent with the Health and Social Care Standards, which state that: 'I am fully involved in developing and reviewing my personal plan which is always available to me.' (HSCS 2.17).

This area for improvement was made on 04 July 2019.

This area for improvement was made on 4 July 2019.

Action taken since then

Action taken since 04 July 2019:

- Person centred software, electronic personal planning fully implemented.
- Six-monthly reviews held and involved residents and where appropriate, their families.
- Residents had some opportunities to be involved in developing their care plans through meetings with their key worker.

Further consultation was required to ensure that all residents were aware of their care plan and could have a copy of this in an accessible format. We will review progress at future inspection.

This area for improvement was not considered at the inspection on 10 November 2020.

We considered this area for improvement but did not see new progress. Staff were not able to say how people were involved in their care plan. We will review progress at a future 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 well do we support people's wellbeing?	3 - Adequate
1.1 People experience compassion, dignity and respect	3 - Adequate
1.2 People get the most out of life	3 - Adequate
1.3 People's health benefits from their care and support	3 - Adequate

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
7.3 Staffing arrangements are responsive to the changing needs of people experiencing care	3 - Adequate

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