

Lisden Care Home Service

63 Brechin Road
Kirriemuir
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Telephone: 01575 574 499

Type of inspection:
Unannounced

Completed on:
28 September 2021

Service provided by:
Balhousie Care Limited

Service provider number:
SP2010011109

Service no:
CS2003010719

About the service

Lisden Care Home is part of the Balhousie Care Group and is situated in the Angus town of Kirriemuir. It is registered to provide a care service for 42 older people. It offers accommodation in two defined units. Kinnordy provides care and support to a maximum of 16 service users with advanced dementia or other cognitive impairment related issues.

The main part of the home is on two floors (Airlie and Glamis) and offers 26 beds caring for elderly residents with nursing needs.

All rooms are single with en-suite facilities and the home has access to a range of local amenities. The home provides a warm and friendly environment for residents and visitors. The gardens are well maintained and offer a safe and enclosed area. There are summer cabins in the grounds, which are often used by people.

The service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 01 April 2011.

The organisation states: 'We truly strive to capture the true essence of person-centred care by recognising that people come first - by looking after the care of people, the rest will follow.'

This was a follow up inspection following our previous inspection on 12 August 2021.

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

What people told us

During this inspection, we observed people being supported by staff. We saw warm, caring interactions. People appeared comfortable and happy.

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

Requirements

Requirement 1

By 03 September 2021, the Provider must ensure that people experience care in an environment that is safe, well maintained and minimises the risk of infection. In order to achieve this the provider must:

- Implement a system to ensure all reusable equipment used in supporting and caring for residents is properly cleaned and sanitised after each use. The system is to include clear records of cleaning.
- Establish detailed infection control competency audits to inform good practice. Such audits should clearly record findings, any actions required and progress on implementing actions.
- Implement a system to ensure that staff have read and understood updates to infection and prevention control guidance.
- Complete an environmental audit with reasonable timescales for all areas of the service that require upgrading and or repair.

This is to ensure care and support is consistent with 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 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organizational codes.' (HSCS 3.14).

Regulation 3 -Principles; Regulation 4(1)(a)(d) - Welfare of Users and Regulation 15(a)(b)(1) Staffing, of the Social Care and Social Work Improvement Scotland (Requirements for Care Services).

This requirement was made on 12 September 2021.

Action taken on previous requirement

Enhanced cleaning schedules were in place. The monthly environmental audit had been reviewed and updated to cover all areas of the home. This had been discussed with staff who were involved in completing the audit tool. The team approach had helped to identify areas for improvement which were then included in an action plan to show how these actions were progressing.

Additional bins had been purchased. The manager should ensure that staff are clear which are for clinical waste and which are for general waste to ensure waste is disposed of correctly.

At this visit, we saw that the environment and equipment was clean. New flooring had been laid which was easier to clean and further areas had been identified for upgrading which were included in the audit action plan.

Staff were provided with up-to-date information about current guidance for care homes and for visiting. The manager should continue to highlight and discuss guidance through team meetings and supervision.

The manager described observations of practice with staff - we advised the manager to keep a formal record of these observations to discuss with staff. This would help to identify any ongoing training needs.

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

Daily recordings of care provided should be further developed to be more person-centred, detailed and evaluative.

This is in order to comply with Health and Social Care Standard (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), and 'My care and support is consistent and stable because people work together well.' (HSCS 3.19).

This area for improvement was made on 12 August 2021.

Action taken since then

We will evaluate this area for improvement at future inspections.

Previous area for improvement 2

In order to improve people's physical and mental wellbeing, the provider should review the opportunities for people to engage in regular, meaningful, person-centred activities.

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 recreational, social, creative, physical and learning activities every day, both indoors and outdoors.' (HSCS 1.25).

This area for improvement was made on 12 August 2021.

Action taken since then

We will evaluate this area for improvement at future inspections. We did however hear about a wide range of activities that people had enjoyed. Entertainers had been booked to visit the home and this helped to support themed events.

Staff were now allocated to be present in the lounge areas to encourage discussion or facilitate activities.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

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