

Broxburn Nursing Home Care Home Service

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Broxburn
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Type of inspection:
Unannounced

Completed on:
5 October 2021

Service provided by:
Broxburn Nursing Home Ltd

Service provider number:
SP2003002444

Service no:
CS2003010618

About the service

Broxburn Nursing Home (referred to in the report as "the service") is registered with the Care Inspectorate to provide care to a maximum of 43 older people.

The home is located in a residential area of Broxburn, West Lothian, and is close to local shops, services and public transport.

Accommodation is over two floors and the upper floor is accessed by a lift and stairs. Both floors have a dining room with a separate lounge. All bedrooms are single with en-suite toilet and hand basins. Bathing amenities and additional toilets are available throughout the home. There are separate kitchen and laundry facilities and an enclosed garden to the rear. A small car park is at the front of the building.

The service's philosophy is described as "to maintain a high standard of care to meet the needs of the individual resident."

What people told us

At the time of our visit there were 40 people living in Broxburn Nursing Home. We spoke with people during our visit and gathered feedback from eight families by speaking to them by telephone.

Families were very positive about the care and support their loved ones received. They told us staff were kind and caring and went 'above and beyond'. Communication from care staff was very good and staff knew their loved ones very well.

Comments included;

"staff very good, 10 out of 10"

"Staff know about her and aware of who she is"

"Food is amazing, (relative) enjoys the food. Very well cared for"

"Can't attend relatives meetings as during the day and working but I get updates via Facebook"

"My (relative) feels she's at home and staff care about her"

" Staff nice and helpful, this gives us comfort"

"Staff are absolutely wonderful they are attentive and like an extended family I feel (relative) is in the right place".

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
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How good is our care and support during the COVID-19 pandemic?	3 - Adequate
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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 evaluated how people's health and wellbeing was supported. We concluded that this was adequate, with some important strengths.

We observed kind, caring interactions between staff and people living in Broxburn Nursing Home. Staff knew people well, their likes, dislikes and healthcare needs.

Although staff were aware of people's individual needs, this was not well documented within the care plan. The approach to recording information within care plans was not consistent and the layout did not enable easy access to essential information.

Where people experienced stress and distress situations, there was a lack of information to enable staff to support people in these situations to achieve good outcomes for them. (requirement 1)

People were supported to maintain contact with their family and friends using mobile phones, social media, electronic tablets. The service was following Open with Care guidance. However, some relatives were unclear about the current visiting criteria during the recent Covid-19 outbreak. The manager assured us this would be addressed.

The way people spend their day should promote feelings of purposefulness and wellbeing. During our visit there was a Covid-19 outbreak and people were isolating in their rooms. Relatives told us that prior to the current outbreak, their loved ones regularly took part in group activities and they could see participation through social media pictures and comments.

We did not see information in care plans that identified past life information, interests, or hobbies that would enable staff to support people with individual meaningful activities. (area for improvement 1)

Appropriate referrals for external professional support were made when required. Information was well recorded about visits, assessments and outcomes for people.

Requirements

1. People experiencing care should be confident that their personal plans are right for them and set out how all aspects of their care and support needs will be met

By 03 December 2021, the provider must ensure that;

- personal plans reflect all aspects of people's care, including how those who experience stress and distress reactions are supported
- personal plans are updated when people's health or care needs change or following care reviews
- an audit system is in place to monitor the accuracy of plans to make sure people's care is right for them.

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

- 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)

This is also to comply with Regulation 4(1)(a) (welfare of service users) of the The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI2011/210)

Areas for improvement

1. To make sure people can take part in activities meaningful to them, the provider should;

- ensure activities are based on people's preferences, wishes and choices and personal plans reflect involvement in meaningful activities and outcomes.
- ensure people benefit from a range of activities that takes account of the current restrictions resulting from Covid-19
- ensure staff are available to lead activities and encourage people to remain active on a regular basis

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

"I can maintain and develop my interests, activities and what matters to me in the way I like" (2.22)

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

3 - Adequate

We evaluated how well infection control practices support a safe environment for people experiencing care. On our first day we concluded that there were strengths, but that these were compromised by the weaknesses we found. We returned a few days later and the manager had taken immediate action to address most of the areas highlighted for improvement

The care home was being cleaned but not always in line with good practice guidance. We found corridors and some bedroom flooring badly stained and dirty, some vinyl flooring was not sealed and damage to other areas. Some improvements had been made in this area. Further work was required to ensure all areas can be sufficiently cleaned to prevent cross contamination.

There was a good supply of cleaning equipment, products, and solutions (including chlorine releasing agents) which were suitable for a range of cleaning purposes. The housekeeping staff were knowledgeable about the use of cleaning agents.

Cleaning schedules were in use for the environment and equipment however, these were not robust enough or following the National Infection Prevention and Control Manual (NIPCM) with regard to records of times and frequency of cleaning.

Although the care home had good supplies of personal protective equipment (PPE), we found that there was limited access to PPE and disposal bins around the home. We recommended that PPE stations and disposal bins be increased. We found at a further visit that there were enough PPE stations and the service was in the process of installing wall mounted antibacterial hand rub dispensers (ABHR).

The laundry was initially found to be small and restrictive in space which made it difficult for staff to follow good practice guidance. Improvements were made in the laundry area which then enabled the separation of clean and dirty laundry and an improved space for laundry staff to carry out their duties.

The service uses a dependency tool to assess the staffing levels required to ensure people's needs were being met by the right number of people. There was not enough information in the assessments to assess whether or not the right number of staff were available at all times. Staff were working in cohorts to reduce the risk of transmission of infection within the environment, however the rota was static and there was no evidence to show that staffing numbers had been increased to meet the additional duties for care staff during the outbreak. (requirement 1)

Staff were aware of guidance on infection prevention and control and had completed a range of relevant training. Recorded observed competencies of infection prevention and control practices were being increased to ensure staff were adhering to guidance and best practice.

Requirements

1.

People experiencing care should be confident that their care and support needs are met by the right number of staff, at the right time both day and night.

By 3 December 2021 in order to improve outcomes for people experiencing care, the provider must ensure that;

- dependency assessments of people are based on an accurate assessment of care needs and care plan information
- the dependency assessment is updated when there are changes in the needs of people experiencing care
- observations and audits are undertaken to ensure changes in dependency and the adjustment of staffing levels is appropriate to ensure responsive care for people

The Health and Social Care Standards (HSCS) have been taken account of in making this requirement. In particular, HSCS 3.15 which states that: "My needs are met by the right number of people."

This is in order to comply with: Regulation 15 of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI2011/210)

Areas for improvement

1.

People should feel confident they are living in a clean, safe and well maintained environment. In order to achieve this the provider should;

- ensure that there is a refurbishment plan in place with actions, responsibilities, timescales and completion dates.
- ensure cleaning schedules are in place and following the National Infection Prevention and Control Manual guidance with regard to Cleaning Specification Schedule

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state that: 'My environment is safe and secure' (HSCS 5.17); and '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 28 February 2020, the provider must ensure that service users receive high quality care and support which meets their health, wellbeing and safety needs. In particular, that service users' care needs are met by the right number of staff.

When calculating that the number of persons working in the care service is appropriate for the health and welfare of service users, the provider must:

- ensure that service users' dependency assessments contain accurate and up-to-date information
- ensure the dependency assessment calculations include the time taken for other duties staff undertake is considered.

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

This is also to ensure that care and support is consistent with the Health and Social Care Standards which state that as a service user:

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

This requirement was made on 12 November 2019.

Action taken on previous requirement

We sampled staff rotas and dependency assessments. We did not find evidence that staffing levels are informed by dependency assessments. The service was in the midst of a Covid-19 outbreak with people isolating in their rooms. We did not see evidence that demonstrated how staffing levels are adapted to meet the changing needs of people living in the care home. We have made a new requirement about staffing levels under Quality Indicator 7.3

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

1. The provider should ensure that service users' care and support meets their needs. To do so, the systems used to guarantee that service users' topical creams are applied, as prescribed, should be consistency implemented.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that as a service user:

- Any treatment or intervention that I experience is safe and effective. (HSCS 1.24)
- My care and support meets my needs and is right for me. (HSCS 1.19)

This area for improvement was made on 12 September 2019.

Action taken since then

This was a focused inspection and we did not review this area for improvement.

Previous area for improvement 2

The provider should ensure that service users' personal plans are right for them and set out how all their needs will be met, as well as their wishes and choices. Particular focus should be on:

- ensuring all information is accurate
- reflecting all aspects of care and support
- care plans and risk assessments being reviewed and updated following accidents, incidents, changes to care needs, new information or following care reviews
- individual consent for each method of care which could be considered restraint.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that as a service user:

- 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)
- Any treatment or intervention that I experience is safe and effective. (HSCS 1.24)
- 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 area for improvement was made on 12 November 2019.

Action taken since then

We sampled care plans and found them inconsistent in the layout, information and how information was recorded. In particular there was a lack of information about stress and distress situations people experienced. Essential information was difficult to find and in some cases at the very back of the care plan. Care plans did not have up to date photographs of people. One page profiles had not been completed. There was a lack of information about peoples likes, dislikes wishes and choices.

This area of improvement has not been achieved and as there are additional improvements to be made, we have made a requirement for care planning in particular, stress and distress care plans.

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	4 - Good
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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