

Willow House Care Home Service

77 Toll Road
Anstruther
KY10 3HZ

Telephone: 01333 314 300

Type of inspection:
Unannounced

Completed on:
12 October 2021

Service provided by:
Kingdom Homes Ltd

Service provider number:
SP2003001615

Service no:
CS2017356161

About the service

Willow House is a purpose-built, two-storey nursing home, situated just outside Anstruther, a small village on the East Neuk of Fife. The home is owned by Kingdom Homes Ltd and is registered to provide care to a maximum of 40 people.

All bedrooms are single occupancy, with ensuite toilet facilities. There are communal lounges, bathrooms and dining facilities on both floors. An internal passenger lift is available for use. Landscaped gardens with outdoor seating areas are available for use.

This was a focused follow up inspection to evaluate how well people were being supported during the Covid-19 pandemic. We evaluated the service based on key areas that are vital to the support and wellbeing of people experiencing care during the pandemic.

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

The organisation's missions statement is:

"We are committed to achieving our stated aims and objectives and we welcome the scrutiny of our residents and their representatives. We aim to provide a total range of care, in collaboration with all appropriate agencies, to meet the overall personal and health care needs and preferences of our residents. The care we provide is based on the thorough assessment of needs and the systematic and continuous planning of care for each resident. We aim for a progressive improvement in all aspects of care delivery and ongoing training at all levels of our staff and management. We place the rights of residents at the forefront of our philosophy of care. We seek to advance these rights in all aspects of the environment and the services we provide and to encourage our residents to exercise their rights to the full."

What people told us

People's views were not formally gathered during our visits to Willow House care home. Over the course of our visits we spent time observing people's experiences of care and support.

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

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

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 requirements 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. However, the activities coordinator was not available at the time of our inspection and it was clear that support staff did not always have the time to offer people meaningful social interaction in her absence. This was raised at the previous inspection and the area for improvement (1) made remains outstanding.

Areas for improvement

1. In order to improve people's physical and mental wellbeing, the service provider should ensure people have the opportunity to participate in regular meaningful activities.

This to ensure that care and support is consistent with the Health and Social Care Standards, 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).

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

Requirements

Requirement 1

By 8 October 2021 the provider must ensure medication is managed in a manner that protects the health and wellbeing of service users. In order to achieve this, the provider must:

- ensure that all medication is administered as per the instructions of the person authorised to prescribe or discontinue a medicine.

This is in order to comply with SSI 2011/28 Regulation 4 - requirement for records all services must keep, and SCSWIS (Requirements for Care Services) Regulations SSI 2011/201 Regulation 4(1)(a) - requirement for the health and welfare of service users.

This requirement was made on 10 September 2021.

Action taken on previous requirement

This requirement was made as a result of the previous inspection where we found a number of missing entries on the MARs. Training has been carried out and staff have completed reflective accounts regarding medication management. We examined the MARs and found the standard of record keeping had significantly improved.

We will continue to monitor this at future inspections.

Met - within timescales

Requirement 2

By 17 September 2021 the provider must ensure that people experience care in an environment that is safe and minimises the risk of infection. In particular you must:

- a. ensure that clinical waste is disposed of in a manner which takes account of the most up-to-date guidance from Health Protection Scotland.

This is to comply with Regulations 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 (SSI 2011/210).

This requirement was made on 10 September 2021.

Action taken on previous requirement

This requirement was made as a result of the previous where we found the service had inadequate supplies of clinical waste disposal bins for staff use, resulting in staff inappropriately using general waste bins.

The service purchased new supplies of clinical waste bins which are now situated at key points throughout the home. Updated Infection Prevention and Control sessions have been delivered to staff that cover the safe disposal of clinical waste. At this inspection we observed staff disposing of their used PPE and clinical waste appropriately.

Met - within timescales

Requirement 3

By 17 September 2021 the provider 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 that the internal premises, furnishings, and equipment are safe, clean, and tidy
- b. ensure that processes such as enhanced cleaning schedules and regular quality assurance checks of the cleaning undertaken are in place.

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 10 September 2021.

Action taken on previous requirement

This requirement was made as a result of the previous inspection. It was made because the standards of cleanliness of environment, equipment and processes for monitoring these were insufficient to prevent the spread of infection.

We found the home and equipment used were much cleaner. Areas such as sitting rooms and communal bathrooms had been thoroughly cleaned. The manager had introduced enhanced checks of the environment and equipment to see these were cleaned to a high standard. Daily audits of the environment were being carried out by the manager to ensure standards were being maintained.

We will continue to monitor this at future inspections.

Met - within timescales

Requirement 4

By 17 September 2021 the provider 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.

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 10 September 2021.

Action taken on previous requirement

This requirement was made as a result of the previous inspection where we found a number of potentially harmful chemicals were not being stored securely. We also found the storage room containing harmful chemicals was not locked.

Staff said the manager had spoken with them about the importance of ensuring they lock harmful chemicals away after use and that the storage room containing these is always locked. The manager checks this on a daily basis. At this inspection we found all harmful chemicals were being stored safely and the storage room containing chemicals was locked.

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

In order to improve people's physical and mental wellbeing, the service provider should ensure people have the opportunity to participate in regular meaningful activities.

This to ensure that care and support is consistent with the Health and Social Care Standards, 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 10 September 2021.

Action taken since then

The service had recruited an activities coordinator, however, they were not available at the time of our inspection and it was clear that support staff did not always have the time to offer people meaningful social interaction in their absence.

This area for improvement will be carried forward to the next inspection.

Previous area for improvement 2

In order to ensure people's finances are safeguarded, robust audit systems should be in place.

This to ensure that care and support is consistent with the Health and Social Care Standards, which state that: 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities'. (HSCS 3.20).

This area for improvement was made on 10 September 2021.

Action taken since then

A full audit of all people's finances has been carried out by the service provider's accounting team. The manager also audits finances on a weekly basis as well as spot checks in-between. The service have also introduced two people signing for all transactions, to further enhance the safety of people's finances.

Previous area for improvement 3

The provider should ensure that staff receive training relevant to their role. Any training should be formally evaluated to ensure it is effective in delivering the desired outcomes.

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).

This area for improvement was made on 10 September 2021.

Action taken since then

All staff have been reminded that they must ensure they keep their online training up to date. Infection Prevention and Control training is planned to be rolled out this week by specialist nurses from the NHS as well as Covid specific training that will be delivered by the provider's training department. The manager has put in place post training monitoring to ensure staff are putting into practice what they have been taught.

We will continue to monitor this at future inspections.

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
7.1 People's health and well being are supported and safeguarded 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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