

Thorn tree Mews Care Home Service

17 Arnothill Mews
Falkirk
FK1 5RZ

Telephone: 01324 626 090

Type of inspection:
Unannounced

Completed on:
4 October 2021

Service provided by:
Countrywide Care Homes (3) Limited

Service provider number:
SP2013012124

Service no:
CS2013319184

About the service

This service registered with the Care Inspectorate on 30 January 2014.

Thorntree Mews is a care home that is registered for 40 older people, some of whom may be living with dementia and/or a physical disability. The Provider is Country Care Homes (three) Limited.

The care home is in a residential area close to Falkirk town centre and is near to local amenities including shops and train and bus routes.

The care home is a spacious converted period type house with accommodation on two levels. It is divided into two self-contained units; each with a lounge, dining area, other quiet areas and bedrooms. The care home has an enclosed garden at the rear and a seated area at the front.

The values of the Provider are: "We treat every resident with the dignity and respect they deserve and always provide quality care at affordable prices. We treat people as individuals, tailoring the care they receive to meet individual needs, and we place a focus on creating an environment which is warm, friendly and secure. We're confident our dedication to service sets us apart from other care home providers."

During the inspection there were 40 people living in the home.

What people told us

We observed kind, caring interactions between staff and people living in Thorntree Mews.

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

7.2 Infection control practices support a safe environment for both people experiencing care and staff

Our focus in this inspection was to establish if the setting was safe and well maintained during the Covid-19 pandemic. We concluded that there were strengths, but that these were compromised by weaknesses. We concluded the performance of the service in relation to infection prevention and control was adequate.

People were being supported to maintain contact with relatives and friends. Visiting was well organised and encouraged by the care home in line with the Open with Care guidance. Visits were happening regularly.

People could be confident that appropriate measures were in place to protect them from the risk of infection. The service was visibly clean and fresh. Enhanced cleaning schedules were in place which exceed current guidance. There was a good supply of cleaning equipment, products, and solutions and housekeeping staff were knowledgeable in their use.

Regular mattress audits were in place. However, we were concerned over the cleanliness and condition of some of the mattresses, mattress covers and pressure relief cushions. These should all be checked thoroughly and damaged items replaced (see Requirement 1). More robust quality assurance audits should be undertaken by management to ensure standards are improved and maintained. This includes the management and cleaning of shared care equipment (see areas for improvement 1).

Staff were trained and knowledgeable in infection prevention and control. We found the service had an adequate supply of Personal Protective Equipment (PPE). However, the distribution of PPE was inconsistent throughout the service. Further PPE disposal bins were required throughout the service and some were on order (see area for improvement 2).

Alcohol-based hand rub dispensers were available throughout the care home and there were hand washing facilities available throughout the service. Some further attention should be taken to support people to undertake hand hygiene prior to mealtimes.

The laundry service promoted the safe management of linen and clothing. Staff uniforms were being laundered at home.

Staff testing for Covid-19 was being carried out in line with current guidance which assisted with the continued protection of people and staff.

Requirements

1. The provider must ensure that people are protected from the risk of infection.

The provider must improve the standards of cleanliness within the service and replace any items which cannot be effectively cleaned. In order to achieve this the provider must adhere to the following:

- a. Undertake a full infection prevention and control audit of mattresses (including protective covers), pressure relieving cushions, seating, and soft furnishings.
- b. Develop and implement an action plan, detailing the actions required and timescales for completion.
- c. Purchase replacement furnishings and equipment and carry out deep cleaned as needed.

This is in order to comply with:

Health and Social Care Standard 5.22: I experience and environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment.

Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

Timescale for completion: 4 November 2021

Areas for improvement

1. To ensure safe outcomes for people, the manager should improve infection prevention and control quality assurance audits to ensure they effectively identify areas for service improvement. This should include, but is not limited to, observations of staff infection prevention and control practice, spot checks of equipment and the environment. An action plan should be developed to address any areas for improvement found.

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

'I experience high quality care and support based on relevant evidence, guidance and best practice.' (HSCS 4.11)

2. To ensure safe outcomes for people, the provider should ensure that Personal Protective Equipment (PPE) can be easily accessed and disposed of close to the point of use.

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

'I experience high quality care and support based on relevant evidence, guidance and best practice.' (HSCS 4.11)

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

As part of the quality assurance process, the service should consider a wider agenda when meeting with relatives and residents that takes into account their experiences of care and any suggestions for improvements to the service that could be made. A variety of methods should be used to gather the views of people, in particular, those who are unable to attend meetings. The Health and Social Care Standards should also be included in any planning and development of the service.

This area for improvement was made on 25 November 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 service should continue to assess that there is enough staff to support people, in particular, when the needs of people change due to frailty. This can be enhanced by gathering the views of staff, residents and relatives on regular basis alongside undertaking observations of staff supporting people throughout the home. The health and social care standards should also be considered during these assessments.

This area for improvement was made on 25 November 2019.

Action taken since then

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

Previous area for improvement 3

In order to ensure meals are provided in a dignified way and in a relaxed and calm atmosphere the service manager should carry out a review of the dining experience for all residents paying particular attention to the upstairs dining room.

This area for improvement was made on 25 November 2019.

Action taken since then

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

Previous area for improvement 4

In order to ensure that residents are protected from harm because people are alert to signs of any deterioration in their mental health condition and can respond, the service manager should ensure that all staff have the necessary skills and abilities to work in both units of the home where they are expected to

work. This should include routine training and updated for people living with dementia and various mental health difficulties.

This area for improvement was made on 25 November 2019.

Action taken since then

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

Previous area for improvement 5

In order to ensure residents continue to experience a high quality environment which is well looked after and well maintained, the service manager should follow a detailed and time scaled refurbishment plan recording all areas of the home and when they will be updated. Environmental risk assessments should be reviewed and updated to consider heating and use of free standing radiators in individual rooms.

This area for improvement was made on 25 November 2019.

Action taken since then

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

Previous area for improvement 6

In order to ensure that residents experience high quality care and support that is right for them, the service manager should ensure that all risk assessments contain detailed and up date information about all risks identified and how these will be met.

This area for improvement was made on 25 November 2019.

Action taken since then

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

Previous area for improvement 7

The service should consider implementing care plans for mental wellbeing as these are currently not in place. Triggers for distressed reactions should be documented, alongside associated plan of action and distraction techniques prior to any medication being given. In addition, people who have physical decline in their mobility after a fall can become more isolated and at risk of low mood and therefore it is important to monitor this.

This area for improvement was made on 25 November 2019.

Action taken since then

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

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
7.2 Infection control practices support a safe environment for people experiencing care and staff	3 - Adequate

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