

Linkfield Residential Ltd Care Home Service

19 Linkfield Road MUSSELBURGH EH21 7LQ

Type of inspection: Unannounced

Completed on: 3 December 2021

Service provided by: Linkfield Residential Ltd

Service no: CS2021000206 Service provider number: SP2021000122



About the service

Linkfield Road is a care home registered for a maximum of seven adults who have a learning disability. The provider is Linkfield Residential Ltd., this is their only care service.

The home is a large detached villa, situated in a residential area, close to local transport links and amenities. The accommodation is spacious and spread over the ground and upper floor. There are seven single bedrooms, some with en suite facilities. There is a large lounge, a large kitchen/dining room and a separate utility room. There is a well-kept and enclosed garden to the rear. Staffing is provided over twenty-four hours including staff who sleep over in the service.

This inspection evaluated how well people's health and wellbeing was being supported, the infection protection and control practices in place and quality of staffing during the Covid-19 pandemic. This inspection took place on 26 November 2021.

What people told us

At the time of the inspection there were seven people experiencing care in the service. We spoke with six people about their experience, their comments included:

"I get my independence here".

"I like living here".

"I am very happy here".

Overall, people spoke favourably about the care they experienced and their relationships with the staff team.

We spoke with family and visiting health and social care professionals who are involved in supporting people at the service. People told us:

"I think they have done a really good job during the pandemic".

My relative "... is relatively happy in the house".

My relative "... is very settled and happy at the service".

"The staff with residents have always seemed kind, pleasant, sensible and clear and I have not had concerns from any of my interactions with any of the team".

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?	2 - Weak

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 the service to be operating at an adequate level where there was a number of important strengths which outweighed areas for improvement.

1.1 People experience compassion, dignity, and respect

Staff interacted warmly and respectfully with people and knew their history, routines and preferences. Staff responded to people's needs quickly and were not rushing people. We saw staff sitting chatting to people experiencing care with humour and laughter being shared as well as going out to a café for ice-cream.

People's rooms were thoughtfully decorated and personalised and the service was currently undergoing a refurbishment with some bedrooms and communal rooms already completed. People were free to move around the home and make use of communal areas and a large well-tended back garden. This assured us that people felt comfortable and lived in a homely setting.

1.2 People get the most out of life

We looked at opportunities to take part in meaningful activities and visiting arrangements to ensure people got the most out of life.

People were attending day centres, football matches and cafes and having violin lessons. There were shopping trips with people being involved in managing their own money. We saw lots of technology being used by people, with computers, games consoles, music equipment and fitness equipment in people's rooms. This assured us that people had an active life and participated in a range of recreational, social, creative physical and learning activities.

People's hobbies and interests were recorded in personal plans to enable to maintain what is important to them. The personal plans need to be more aspirational, focussing on what outcomes people want to achieve to fully realise their potential and be as independent as they want to be.

People experiencing care had good opportunities to connect with friends and family due to an unrestrictive visiting policy. Visits to the service did not require booking beforehand allowing friends and family to visit unplanned if they wished. Visits took place in people's rooms, communal areas and outside with no limits on the length or frequency of visiting. The visitor testing system in place to support people to visit safely through the pandemic was working well. People attended outings and overnight visits with family and friends.

1.3 People's health benefits from their care and support

We looked at people's assessments, medication administration and meal time experiences to ensure people's health benefits from their care and support.

The personal plans were undertaken with sections on each area of care, for example mobility, and any actions needed. Updates were recorded in the care notes as were any changes in actions needed. The sections on people's likes and dislikes and how to communicate with me was thorough and individualised. There was regular communication with health professionals. This meant that personal plans were right for people because it sets out how needs will be met as well as people's wishes and choices.

People were involved in menu planning, though this meant the menu was limited as focussed on people's favourite meals. The service could encourage new food experiences for people, for example, themed food nights. There was a variety of drinks and snacks available to people including fruit and yoghurts.

There were some medication errors and a need for staff training in medication administration. Training on how to administer emergency epilepsy medication was also needed and this has now been completed. This is to ensure that the health and wellbeing of service users is protected and any treatment or intervention that people experience is safe and effective (see requirement one).

Requirements

1. By 21 January 2022 the provider must ensure that supported people experience safe and effective medicine administration and management in a manner that protects the health and wellbeing of service users.

In order to achieve this the provider must adhere to the following:

a). All staff involved in medication administration to undertake appropriate training.

b). The regular auditing of medication by management which needs to include actions taken when medication errors occur.

c). As required medication should have clear documentation of when and why medication should be administered and if it was effective.

d). Topical medication (to be applied on a person's skin) should have clear documentation of when, why and where the medication should be administered. This should include a map of the part(s) of the body where the medication is to be administered.

This is in order to comply with:

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

This is to ensure care and support is consistent with Health and Social Care Standard 1.24: 'Any treatment or intervention that I experience is safe and effective'.

How good is our care and support during the 2 - Weak COVID-19 pandemic?

We evaluated the service to be operating at a weak level where strengths were identified but these are outweighed by significant weaknesses in infection, prevention and control measures as well as staff training.

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

People's bedrooms, en suite rooms and the communal areas were found to be clean and tidy. Though a refurbishment is ongoing some furnishings were worn which can make effective cleaning more difficult. People's beds and mattresses were clean and fit for purpose. The small laundry room was cluttered, storing away cleaning items will make the laundry room easier to clean effectively. The floor cleaning products were suitable, however, other cleaning products were not chlorine based as advised in national guidance during the pandemic (see requirement two).

There needs to be thorough and daily cleaning of rooms with checklists explaining what needs to be cleaned with staff to sign off when completed the task. This also includes frequent cleaning of high touch areas (for example, door handles and handrails) and equipment (for example, exercise equipment). This will assure us

that people are living in a clean and safe environment during the pandemic. The service advised us it was already in the process of recruiting a cleaner (see requirement two).

The clinical waste was managed in line with guidance with a secure outside bin store for clinical waste.

Masks were not being worn by staff and their arms needed to be bare below the elbow, this is national guidance to assist protecting people from infection during the pandemic (see requirement two). The service used masks, gloves and aprons when supporting people with personal care. Mask wearing and arms being bare below the elbow started immediately after the service was informed. Better storage is needed of vinyl gloves which are only used for cleaning and nitrile gloves which are used for personal care, to reduce potential for confusion between the two.

Testing for Covid-19 was taking place for staff and visitors in line with current guidance. This followed best practice and assisted with the continued protection of people and staff from harm.

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

We evaluated that staff needed training in a number of areas to ensure people receive high quality care and support based on relevant guidance and best practice (see requirement three).

Food safety training is to be undertaken by staff to protect people from illness from their meals, snacks and drinks. Infection, prevention and control training to be undertaken by staff, key features included the importance of correctly wearing masks, gloves and aprons as well as regular hand washing. Staff need to receive manual handling training so people can be supported with moving in a safe way.

A more detailed training plan needs to be implemented to ensure staff have the knowledge and skills to meet people's specific needs, for example, autism awareness.

The staffing levels ensured that care and support was consistent and stable and people were responded to promptly. We observed that staff worked together well. Staff supervision with managers needs to happen more regularly, this would ensure staff are well led and have the necessary information and support to provide quality care based on relevant evidence, guidance and best practice.

There needs to be regular quality checks by management regarding the cleanliness of the environment and staff use of personal protective equipment (for example, gloves and masks) and hand hygiene.

Requirements

1.

By 21 January 2022 the provider must ensure that people are living in a safe and clean environment which is regularly and thoroughly cleaned. The provider must immediately ensure that staff are practicing the appropriate use of personal protective equipment.

In order to achieve this, following national guidance, the provider must adhere to the following: a). All staff immediately should wear appropriate personal protective equipment depending on the setting and task.

b). All staff to undertake infection, prevention and control training which should include putting on and taking off personal protective equipment and hand washing.

c). Thorough daily cleaning of rooms with checklists explaining what needs to be cleaned with staff to sign

off when completed the task. This also includes frequent cleaning of high touch areas (for example, door handles and handrails) and equipment (for example, exercise equipment) and deep cleaning of rooms. d). To use the correct cleaning materials as advised by national guidance in this pandemic. e). The laundry room is de-cluttered to allow for more effective cleaning.

This is in order to comply with:

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

This is to ensure care and support is consistent with Health and Social Care Standard 5.22: 'I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment'.

2. By 28 February 2022 the provider must ensure that essential staff training has been completed and regular one to one supervision sessions with staff have been undertaken. Regular audits by management are to be implemented for environmental cleanliness and direct observations of staff regarding the correct use of personal protective equipment and hand washing.

In order to achieve this the provider must adhere to the following:

a). Food safety; infection, prevention and control; manual handling training to be completed.

b). A detailed staff training plan to be organised, this should include but not be limited to adult protection; data protection and confidentiality; fire awareness and evacuation.

c). Management to undertake regular one to one supervision with staff including a written recorded and actions.

d). Management to directly observe staff putting on and taking off personal protective equipment and hand washing, including a written recorded and any actions when issues arise.

e). A regular audit of environmental cleanliness to be undertaken by management to include actions taken when issues arise.

This is in order to comply with:

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

This is to ensure care and support is consistent with Health and Social Care Standard 3.14: 'I have confidence in people because they are trained, competent and skilled, can reflect on their practice and follow the professional and organisational codes'.

and Health and Social Care Standard 4.1:

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes'.

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	4 - Good
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?	2 - Weak
7.2 Infection control practices support a safe environment for people experiencing care and staff	2 - Weak
7.3 Staffing arrangements are responsive to the changing needs of people experiencing care	3 - Adequate

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