

# Meigle Country House Care Home Service

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PH12 8SE

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**Type of inspection:**  
Unannounced

**Completed on:**  
16 June 2022

**Service provided by:**  
Priority Care Group Limited

**Service provider number:**  
SP2003000048

**Service no:**  
CS2003041947

## About the service

Meigle Country House is located on the outskirts of Meigle village and sits in its own grounds, with views of the surrounding countryside. The service is registered to provide a care service for up to 23 older people, including up to two respite/short-term care.

All residents are accommodated in single rooms and 22 of these rooms have en suite facilities.

Meigle Country House's aims are:

- Building trusting relationships and find out what's important to people in everyday life.
- To empower and support the staff team to deliver the highest quality of care.
- To provide a homely and welcoming environment where everyone feels included.
- To maintain the open and transparent culture to ensure everyone has a say.
- To base all our actions on the principles of care.

This service is provided by Priority Care Group.

This service has been registered since 22 September 2003.

## About the inspection

This was an unannounced inspection which took place on 13 and 14 June 2022 between 09:30 and 17:00. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with five people using the service and five of their relatives
- spoke with six staff and management
- observed practice and daily life, and
- reviewed documents

**Key messages**

- We observed kind and caring interactions between people living in the home and staff.
- Relatives were happy with the care their loved ones received.
- Staff felt well supported by the management team
- The range of meaningful social activities offered needed to be improved
- The environment was clean and fresh.
- There were good systems in place to reduce the risk of the spread of infection
- An improved quality assurance system was needed in order to support continuous improvement within the service.

**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?	4 - Good
How good is our leadership?	3 - Adequate

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

## How well do we support people's wellbeing?

4 - Good

We evaluated the performance of the provider in this key question as good. There were several important strengths which, taken together, clearly outweighed areas for improvement. The strengths will have a significant positive impact on people's experiences and outcomes. However, improvements were required to ensure people consistently have good experiences and positive outcomes.

People living in the service looked well cared for and there was a warm, welcoming atmosphere throughout the home. Staff were respectful and there were many good, kind interactions. It was clear that staff knew people's individual needs, wishes and choices.

There were a range of effective systems in place that monitored and evaluated people's health needs. People benefited from regular access to local health professionals to support their health and wellbeing. Staff had good working relationships with health professionals and sought advice when required. Personal plans were in place which were monitored and reviewed regularly. We saw evidence that any potential risks for people were assessed with clear strategies in place to guide staff on how best to minimise risk. This helped to keep people safe.

Medication systems were managed safely and effectively. There were well organised procedures for the supply and administration of medication. This supported good practice and health outcomes for people. Record keeping for administering topical medicines was in the process of being reviewed by the service to ensure that staff practice was consistent.

The mealtime experience was good and well managed. Staff supported people to enjoy their meals in a calm, unhurried way. People could choose to dine in the bright and airy communal dining room or in their own room. Staff had a good, clear understanding of the support people needed to eat well and the chef spoke to people afterwards to ensure they had enjoyed the food. People's weight was regularly monitored and any changes or concerns were quickly acted upon. The food looked appetising, nutritious and plentiful. People told us they enjoyed their meals and that they could request an alternative if they didn't want what was on the menu.

Families told us that they thought activities were more limited since the pandemic and that these should be reintroduced along with staff taking small opportunities to spend quality time with people throughout the day. One relative commented 'Mum enjoys her own company and sits in her room although she thoroughly enjoyed the afternoon tea for the Jubilee. However, I'd like to see staff encourage her to get out and about a bit more' **(Area for Improvement 1)**

The environment within the home was clean, fresh and free from clutter. People were encouraged to bring their own belongings and personalise their room. We found that infection prevention and control procedures were in place to help protect people from infection. Arrangements were in place to ensure that all areas were effectively cleaned. Cleaning schedules were completed by domestic and care staff to ensure that the home was thoroughly clean throughout and that frequently touched surfaces, for example handrails, were cleaned more regularly.

The provider had measures in place to promote safe infection prevention and control (IPC) practices within the home. Staff were well presented, clean, tidy and followed good, safe hand hygiene guidance. All staff were up to date with training in IPC and followed guidance when delivering direct care. They used their personal protective equipment (PPE) appropriately and there was sufficient supplies of PPE and cleaning materials available. PPE stations were located throughout the building and clinical waste was well managed. This helped to protect the people experiencing care from the risk of infection.

### Areas for improvement

1. To support people with maintaining and developing interests and activities in what matters to them, the provider should ensure staff have time, equipment and an expectation of interacting with people, as well as completing tasks.

This should include but is not limited to; individual small conversations throughout the day, organised group activities, access to the garden and points of interest throughout the home.

This is to ensure care and support is consistent with the Health and Social Care Standards which states that: 'I can maintain and develop my interests, activities and what matters to me in the way that I like.' (HSCS 2.22).

## How good is our leadership?

### 3 - Adequate

We evaluated this key question as adequate where strengths only just outweighed weaknesses.

People should expect to benefit from a culture of continuous improvement with robust processes in place to ensure good outcomes for people. Although there was a service improvement plan in place we thought it lacked detail, structure, direction and evaluation. We suggested that the manager considered the Care Inspectorate's 'A quality framework for care homes for adults and older people, for use in self-evaluation, scrutiny, and improvement support' as part of any future developments in self assessment and audit. This will help the manager to better understand the impact on outcomes for people from the service being delivered. The outcome focussed framework sets out the quality of care that people should expect, provides links to scrutiny improvement and a support toolbox for best practice.

We were not confident that quality assurance systems were effective in identifying areas for improvement. The service had some systems in place to monitor aspects of service delivery but as a result of responding to the demands encountered during the pandemic, some aspects of quality assurance had been suspended. Management audits were in place but had not been carried out or completed in a consistent way. This meant that areas for improvement were neither identified nor addressed effectively. **(Requirement 1)**

The service had maintained a record of accidents and incidents which had occurred within the home. These were generally well recorded and reported, as required, to the Care Inspectorate.

People could be confident that staff had been robustly recruited and trained. The manager had a good oversight of the training programme and made regular observations of staff practice to assess staff's competence and knowledge but didn't always record this. We discussed with the manager ways of capturing this evidence which they will put into practice.

The service had a stable team of staff. Staff told us that they felt well supported by the management team and that they were confident any suggestions or concerns would be listened to and acted upon.

## Requirements

1.

By 31 October 2022 the provider must develop and implement robust internal auditing systems to ensure effective oversight and monitoring of all aspects of the service. In order to achieve this, the provider must ensure:

- the auditing systems effectively enable areas for improvement to be promptly and accurately identified.
- the outcomes as a result of any audit are clearly recorded.
- where areas for improvement are identified, an action plan is developed detailing timescales and the person responsible.
- subsequent action plans are monitored, reviewed and updated to completion
- information from quality assurance is communicated where required to the appropriate people.

This is order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI2011/210) Regulation 4 (1) (a) provider must make proper provision for the health, welfare and safety of service users.

This also ensures that care and support is consistent with the Health and Social Care Standards which state "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes. (HSCS 4.19)

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good
1.4 People experience meaningful contact that meets their outcomes, needs and wishes	4 - Good
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	4 - Good
How good is our leadership?	3 - Adequate
2.2 Quality assurance and improvement is led well	3 - Adequate

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