

Carmichael House Care Home Service

10 Dudhope Terrace
Dundee
DD3 6HG

Telephone: 01382 223 337

Type of inspection:
Unannounced

Completed on:
6 July 2022

Service provided by:
Thomas Dailey trading as Kennedy
Care Group

Service provider number:
SP2003003646

Service no:
CS2012312152

About the service

Carmichael House is a care home for older people in a quiet residential area of Dundee, close to the city centre, with close access to a local park and various amenities.

The home is a large Victorian style detached building on two levels, with access to the upper level via a passenger lift or stairs. There is a small garden to the front of the house and a large area to the rear.

The provider states their philosophy is, 'We strive to create settings where residents' individuality is acknowledged, where privacy and dignity are respected, where residents can feel safe and secure'.

The home is registered for a maximum of 22 older people. The service transferred its registration to the Care Inspectorate on 1 April 2011.

About the inspection

This was an unannounced follow up inspection which took place on 6 July from 11am until 3pm. The purpose of the inspection was to follow up on requirements made at an inspection on 2, 3 and 5 May 2022. 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 two people using the service and two of their family/friends/representatives
- spoke with six staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

- there were significant improvements to the standards of cleanliness of the environment and equipment
- effective processes were in place to maintain a good standard of hygiene and cleanliness
- people were being supported to engage with the wider community
- more time is needed to further develop personalised, meaningful activities for people
- people now have the choice of having a bath or a shower
- six monthly reviews were back on schedule
- more time was needed to ensure that practice and audit is fully embedded in care planning

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 staff team?	4 - Good
How good is our setting?	4 - Good

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 were satisfied that the service had made improvements across all areas of this key question. We found that strengths outweighed weaknesses and re-evaluated this key question as adequate.

Domestic staff had the most up to date guidance and had received relevant training and support. Domestic hours had been increased for the service to enable daily cleaning tasks to be undertaken. A strong system of overview was ensuring high standards of cleanliness throughout. The home was clean and fresh smelling.

A number of maintenance and refurbishment tasks had been undertaken to improve the environment. A bath had been installed which meant people now had the choice of having a bath or shower. This meant that people were living in a homely environment that supported their dignity and choice.

Progress had been made to improve activities, however more should be done to ensure that planned activities reflect people's preferred activities and interests.

Please see further details in the sections, 'What the service has done to meet any requirements made at or since the last inspection' and 'What the service has done to meet any areas for improvement made at or since the last inspection'

Areas for improvement

1. To support people's wellbeing, the provider should further develop the assessment and support planning process to clearly detail people's preferred activities and interests, and the support they need to take part in these.

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

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

How good is our staff team?

4 - Good

People should expect that staffing arrangements are right and staff work well together. As a result of increased hours of domestic and house keeping staff, standards of cleanliness had improved and cleaning schedules confirmed that daily cleaning tasks were being undertaken. The manager had also returned to her full time role in the home, providing oversight of improvements. The manager advised that domestic hours were being kept under review to ensure that they can meet the service's needs.

Please see details in the section on outstanding requirements.. We were satisfied that the provider had made sufficient improvements to staffing, so we were able to regrade this key question as good. There were important strengths which, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths had a significant positive impact on people's experiences.

How good is our setting?

4 - Good

People should expect to experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment. There were significant improvements to both the environment and equipment. The environment was clean and tidy. Equipment had been replaced and was clean. A maintenance and refurbishment plan for the building was being implemented. As a result repairs had been undertaken and the lounges had been redecorated.

The provider had installed a bath to ensure that people could choose their preference of a bath or shower.

Please see further details in the section on outstanding requirements. As a result of the improvements made we were able to regrade this key question to good. There were important strengths which, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths had a significant positive impact on people's experiences.

How well is our care and support planned?

People's personal plan should be right for them as it sets out how their needs will be met, as well as their wishes and choices. Reviews were now back on a six monthly cycle.

Improvements had been made to people's personal plan, however further work was needed to ensure that all care plans were responsive to people's changing needs. It is essential that changes to someone's needs and care plan are communicated with the staff team to ensure that people's needs are met. Please see further details in the section on outstanding requirements.

We have extended the timescale to enable the provider to meet this requirement.

Requirements

1. By 30 September 2022, the provider must promote the health, welfare and safety of those who use the service by ensuring that all personal plans, risk assessments and care plans:

- a) accurately reflect the assessed current health and care needs of the person;
- b) describe in detail the need and abilities of the person and the support required to meet those needs;
- c) accurately reflect any identified risks to the person's health and includes an assessment of those risks and the steps that are to be taken to reduce or mitigate these risks;
- d) are always implemented; and
- e) are reviewed every six months.

This is in order to comply with Regulation 3, Regulation 4(1)(a) and Regulation 5 of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with health and Social Care standards (HSCS) which state that:

'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)

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

Requirements

Requirement 1

By 20 May 2022 the provider must ensure that people experience care in an environment that is clean, safe and minimises the risk of infection. In particular you must:

- a) replace damaged items of equipment;
- b) ensure that all equipment is kept clean;
- c) ensure external clinical waste containers are locked at all times;
- d) ensure that storage in ensuite bathrooms is suitable and effective at keeping items free from contamination; and
- e) implement policies relating to the cleaning of the care service and infection prevention and control that are up to date and in line with with ARHAI Scotland Guidance Safe Management of the Care Environment.

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

'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment.' (HSCS 5.22)

This requirement was made on 5 May 2022.

Action taken on previous requirement

This requirement was made at the previous inspection as we found a number of items/ equipment that were damaged and/or dirty. We also found that the service was not following the most up to date guidance in relation to infection prevention and control and the general standard of cleanliness was poor. As a result people's health and wellbeing was at risk.

The service had replaced all equipment that was damaged. Equipment was clean and checks were in place to ensure that items were cleaned after use.

The external clinical waste was secured.

People's bathrooms were clean and tidy and suitable storage was now in place to reduce the risk of toiletries becoming contaminated.

The provider had updated their policies and procedures in accordance with the most recent guidance and appropriate cleaning schedules were in daily use.

We were satisfied that people were now experiencing care in an environment that is clean, safe and minimises the risk of infection.

Met - within timescales

Requirement 2

By 30 June 2022, the provider must ensure that people experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment. To do this the provider must, at a minimum:

- a) ensure maintenance checks of the building and equipment are thorough;
- b) ensure staff are aware of their responsibility to report issues; and
- c) develop a maintenance plan that takes into account key priorities for action with realistic timescales to improve the environment, including measures which improve infection prevention and control and people having access to a bath.

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 10(2)(a), (b), (c), and (d) - Fitness of premises.

This requirement was made on 5 May 2022.

Action taken on previous requirement

This requirement was made at the previous inspection as, although maintenance was taking place, we identified a number of areas which required attention. We were concerned that staff were not reporting when areas needed attention. We also found that people were unable to choose whether to have a bath or shower as there was no bath in the service.

The provider had put in place a maintenance plan and repairs had been completed. Lounge areas had been redecorated and a plan was in place to redecorate the dining area. People now had the opportunity to bathe if they wished, as a bath had been installed.

We were satisfied people were now experiencing an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment.

Met - within timescales

Requirement 3

By 30 June 2022, the provider must promote the health, welfare and safety of those who use the service by ensuring that all personal plans, risk assessments and care plans:

- a) accurately reflect the assessed current health and care needs of the person;
- b) describe in detail the need and abilities of the person and the support required to meet those needs;
- c) accurately reflect any identified risks to the person's health and includes an assessment of those risks and the steps that are to be taken to reduce or mitigate these risks;
- d) are always implemented; and
- e) are reviewed every six months.

This is in order to comply with Regulation 3, Regulation 4(1)(a) and Regulation 5 of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with health and Social Care standards (HSCS) which state that:

'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 requirement was made on 5 May 2022.

Action taken on previous requirement

This requirement was made at the previous inspection as we found that reviews were not taking place within timescales. Some care plans were incomplete or had not been updated in response to changing needs. This put people at risk of not having their needs met appropriately.

We could see that work had been undertaken to improve the responsiveness of care plans and to implement a plan to ensure that reviews are undertaken every six months. However, we did note that changes in a person's care needs had not resulted in updating the plan of care, nor had staff members been made aware of the changes needed to this person's support. This meant that staff were not supporting this person's health and wellbeing needs appropriately. We have extended the timescale to enable the provider to complete further work to ensure that all care plans are responsive and meet people's needs.

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

It is recommended that the service further develops the assessment and support planning process to clearly detail people's preferred activities and interests, and the support they need to take part in these.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) 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); and
'My needs are met by the right amount of people.' (HSCS 3.15)

This area for improvement was made on 5 May 2022.

Action taken since then

The provider had made some progress in improving the range of opportunities on offer to people. People were now supported to go out into the community on bus trips and a favourite entertainer was returning for a party. People were also being supported to return to church services and this had supported their sense of wellbeing.

The provider was reviewing their activity plans. We encouraged the service to consider how to further develop people's personal plans to influence the weekly activity plan in order to promote more meaningful activities and encourage physical activity.

Previous area for improvement 2

The provider should ensure that audit processes are effective in identifying areas for improvement. Where areas for improvement are identified, they should contribute to a development/improvement plan for the service. To do this, the provider must at a minimum:

- a) review and update audit tools and processes; and
- b) implement a development/improvement plan that identifies who is responsible for the improvement and timescales for that work to be undertaken.

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

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19)

This area for improvement was made on 5 May 2022.

Action taken since then

The provider had reviewed and updated their audit tools and processes and there was improved oversight to ensure that people's health and wellbeing was being supported by all aspects of their care and the environment. A clear comprehensive improvement plan was being implemented and had resulted in the improvements to the service identified in this report.

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
1.3 People's health and wellbeing benefits from their care and support	3 - Adequate
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	3 - Adequate
How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good
How good is our setting?	4 - Good
4.1 People experience high quality facilities	4 - Good

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