

Darnley Court Care Home Service

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Darnley
Glasgow
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Type of inspection:
Unannounced

Completed on:
27 September 2022

Service provided by:
HC-One No. 1 Limited

Service provider number:
SP2016012770

Service no:
CS2016349791

About the service

Darnley Court is registered to provide a care service to a maximum of 120 people of whom 60 will be older people with mental health problems. The provider is HC-One. There were 54 people living in the home at the time of our visit.

The home is located in Glasgow and is near to public transport facilities. The building is purpose-built with accommodation over two levels. There are four separate units which have access to their own enclosed garden areas and a car park to the front. At the time of the inspection, one unit was not operational.

This was a focused inspection to review progress on the requirement made following a complaint investigation visit in August 2022. This follow up inspection was carried out by an inspector from the Care Inspectorate complaints team.

What people told us

We did not speak with any people living in the service during this inspection.

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?	not assessed
How good is our leadership?	not assessed
How good is our staff team?	not assessed
How good is our setting?	not assessed
How well is our care and support planned?	not assessed

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

How well do we support people's wellbeing?

This key question was not assessed.

How good is our leadership?

This key question was not assessed.

How good is our staff team?

This key question was not assessed.

How good is our setting?

This key question was not assessed.

How well is our care and support planned?

This key question was not assessed.

What the service has done to meet any requirements we made at or since the last inspection**Requirements****Requirement 1**

By 16 September 2022, the provider must ensure that people's health and wellbeing needs are being accurately assessed, documented and met by all relevant staff. To do this, the provider must, at a minimum:

- a) Ensure that information and guidance received by staff, following a person attending an external health appointment or an in house visit, is recorded in the care plan and monitored for effectiveness.
- b) Ensure that the care plan is reviewed and updated on a regular basis, to evidence that staff have considered any progress or changes with a person's needs.
- c) Ensure that care plans are audited to ascertain that medical advice is being followed and recorded in a meaningful way, to support the health and wellbeing of a person receiving care.

This requirement was made on 1 August 2022.

Action taken on previous requirement

We sampled care plans for people living in the home, who received health professional support since our last visit. This was either attending an outpatient appointment or following a visit to them in the home. Since our last visit an audit of care plans in one of the units had been started. However, we found that this has not been sufficient to capture and improve the record keeping for people whose needs had changed, or required to be updated, following advice from a health professional.

Any health appointments or GP visits were recorded on the professional visitors record. The details of what the appointment was for was sometimes omitted and the reason for an antibiotic being prescribed was also

sometimes omitted. This made it difficult to determine what health need was being addressed. There was no follow through of the outpatient appointments in the records. Therefore, staff had not recorded what had taken place following an appointment and the care plan had not been updated. It was unclear what action staff should be taking to support a person living in the home, following an appointment with or a visit from an external health professional. This practice did not support good health and wellbeing outcomes for people living in the home.

We discussed this lack of progress with the management team. They gave assurances that immediate action would be taken and that improvements would be made over the next week. This requirement has not been met and will be continued.

By 5 October 2022, the provider must ensure that people's health and wellbeing needs are being accurately assessed, documented and met by all relevant staff. To do this, the provider must, at a minimum:

- a) Ensure that information and guidance received by staff following a person attending an external health appointment or an in house visit, is recorded in the care plan and monitored for effectiveness.
- b) Ensure that the care plan is reviewed and updated on a regular basis, to evidence that staff have considered any progress or changes with a person's needs.
- c) Ensure that care plans are audited to ascertain that medical advice is being followed and recorded in a meaningful way to support the health and wellbeing of a person receiving care.

This is to ensure care and support is consistent with Health and Social Care Standard 3.18: I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability or frailty.

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)

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

The provider should ensure that complaints are handled in line with the company Complaints, Concerns and Compliments Policy. Any person who makes a complaint should be kept up to date with progress and receive a formal, comprehensive response to their complaint.

This area for improvement was made on 1 August 2022.

Action taken since then

Not assessed at this inspection.

Previous area for improvement 2

Staff should follow the current PPE and IPC guidance particularly with regard to mask etiquette and hand hygiene. Visitors should be asked for proof of a clear LFT and there should be PPE available for staff at points of need for their protection and the protection of people living in the home.

This area for improvement was made on 1 August 2022.

Action taken since then

Since our last visit, guidance and practice has changed. We discussed current PPE and IPC practice with the management team. We were satisfied that staff continued to be aware of how to keep people safe whilst adhering to current recommendations.

This area for improvement has been met.

Previous area for improvement 3

When an antibiotic is prescribed by a health professional, it should be dispensed as soon as possible and administered to the recipient. If pain is expressed by the person, then a pain assessment tool should be put in place to monitor the pain and assess the effectiveness of any medication given.

This area for improvement was made on 1 August 2022.

Action taken since then

We sampled two care plans for people who had recently been prescribed an antibiotic, following a visit from their GP. The details of the antibiotic and why it was prescribed were detailed on the professional visitors record and also in a short term care plan. If the medication was for a urine infection, we saw that there was a fluid chart in place to support the monitoring of the effectiveness of the medication. We will review pain management and pain assessment tools at the next inspection. This area for improvement will continue but good progress was noted.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Detailed evaluations

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