

Linlithgow Care Home Care Home Service

45 St Ninian's Road
Colthill
Linlithgow
EH49 7BW

Telephone: 01506 842 482

Type of inspection:
Unannounced

Completed on:
8 September 2023

Service provided by:
HC-One Limited

Service provider number:
SP2011011682

Service no:
CS2011300743

About the service

Linlithgow Care Home is registered with the Care Inspectorate to provide 24 hour care for up to 80 older people. At the time of inspection 75 people were living at the service.

The service is part of the HC-One Group and is situated on the outskirts of the West Lothian town of Linlithgow. This is a purpose-built care facility with accommodation provided on two floors, in 80 single bedrooms with en-suite facilities. Stairs and lifts provide access to the upper floor.

Bathing facilities and additional toilets are available throughout the home. There are a selection of pleasant and comfortable lounges and communal areas.

There are separate kitchen, laundry and staff facilities in the home. The home has its own car park and has attractive well maintained gardens.

The building is divided into three separate units: Cairnpapple, which is over two floors and cares for people with dementia, Cockleroy and Avonfield.

About the inspection

This was an unannounced inspection which took place on 6 September 2023. The inspection was carried out by two inspectors 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 four people using the service and three of their family
- spoke with 6 staff and management
- observed practice and daily life
- reviewed documents

Key messages

Staffing levels had improved

Further work was required to ensure peoples stress and distress care plans were accurate and up to date

Wellbeing staff had made good progress to ensure there were up to date details of peoples wishes, choices and preferences and how they like to spend their time.

Improvements were still required to ensure all staff receive training and are deemed competent to carry out their role

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?	3 - Adequate
How well is our care and support planned?	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 carried out an initial inspection of the service on 23, 24 and 25 May 2023. The overall evaluation for this key question was adequate. We completed another visit to the home on 6 September 2023 to follow up on the improvements that were required.

We have reported on our findings under the following sections of this report:

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

'What the service has done to meet any areas for improvement we made at or since the last inspection'.

Improvements had been made to meet one of the two requirements made at the last inspection. We have extended the timescale for the unmet requirement to give the service additional time to make the required improvements.

Requirements

1. By 20 October 2023 the provider must demonstrate that personal plans record all risk, health, welfare and safety needs and preferences in a coherent manner which identifies how needs are met. In order to do this the provider must ensure:

a) that documentation and records are accurate, sufficiently detailed and reflect the care planned or provided to include, but not limited to, stress and distress strategies and support

b) Staff should be aware of the range of interventions to be used before giving prescribed medication for people experiencing stress and distress and, protocols are in place that provide a description of signs and symptoms that may indicate the need for medications.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations, Scottish Statutory Instruments 2011 No 210: regulation 4(1)(a) - requirement for the health and welfare of service users. And regulation 5(1) – requirement for personal plans.

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

'My 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).

How good is our staff team?

3 - Adequate

We carried out an initial inspection of the service on 23, 24 and 25 May 2023. The overall evaluation for this key question was adequate. We completed another visit to the home on 6 September 2023 to follow up on the improvements that were required.

We have reported on our findings under the following sections of this report:

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

'What the service has done to meet any areas for improvement we made at or since the last inspection'.

Improvements had been made to meet one of the two requirements made at the last inspection. We have extended the timescale for the unmet requirement to give the service additional time to make the required improvements.

Requirements

1. By 20 October 2023, the provider must ensure that staff receive appropriate training and support, and are competent in their role.

To achieve this, the provider must, at a minimum;

a) Ensure that all staff participate in mandatory training and additional training to ensure staff are skilled and competent to meet peoples needs. This should include as a priority, but not be limited to, training in the following areas:

- i Dementia care, including stress and distress
- ii Moving and handling
- iii Personal care

b) Develop a system to ensure that the learning from the training is implemented in practice and there is a record of staff competency.

c) Ensure staff supervision is carried out in accordance with the provider's policy and procedures to ensure staff are supported to discuss and develop their roles and reflect on practice.

This is in order to comply with Regulations 4(1)(a) and 15(b)(i) 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: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes.' (HSCS 3.14)

How well is our care and support planned?

4 - Good

We carried out an initial inspection of the service on 23, 24 and 25 May 2023. The overall evaluation for this key question was good. We completed another visit to the home on 6 September 2023 to follow up on the improvements that were required.

We have reported on our findings under the following sections of this report:

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

'What the service has done to meet any areas for improvement we made at or since the last inspection'.

The service had made some progress with the area for improvement made at the last inspection. We have re-instated the area for improvement to enable the service to progress with improvements.

Areas for improvement

1. To ensure peoples care, support and meaningful engagement is outcome focused, staff should:

- a) accurately record peoples daily engagement, participation and wellbeing in daily notes and care plans.
- b) ensure outcomes are regularly evaluated to ensure they continue to meet each person's needs.

This is to ensure that care and support is consistent with the 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 30 July 2023, the provider must ensure that people are provided with high quality care and support and that this is evidenced by accurate recording of care.

To do this, the provider must, at a minimum, ensure that:

- a) All care is provided in line with with each person's support plan and is recorded consistently on appropriate recording charts.
- b) Records should include, but not be limited to, personal care, oral care and repositioning charts.
- c) A robust process is put in place for monitoring and review of personal care provided and recording charts.

This is to comply with Regulation 4(1)(a) and (d) (Welfare of users) 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 the Health and Social Care Standards which state: 'My care and support meets my needs and is right for me' (HSCS 1.19)

This requirement was made on 29 May 2023.

Action taken on previous requirement

We noted improvements in the regularity and consistency of care charts being completed. Where people required specific care charts such as fluid charts, these were in place and being recorded regularly. There was sufficient overview to enable senior staff to have good knowledge of care and support being carried out however, further work is required to ensure there is robust oversight of all care charts.

Met - within timescales**Requirement 2**

By 30 July 2023 the provider must demonstrate that personal plans record all risk, health, welfare and safety needs and preferences in a coherent manner which identifies how needs are met. In order to do this the provider must ensure :

- a) that documentation and records are accurate, sufficiently detailed and reflect the care planned or provided to include, but not limited to, stress and distress strategies and support
- b) Staff should be aware of the range of interventions to be used before giving prescribed medication for people experiencing stress and distress and, protocols are in place that provide a description of signs and symptoms that may indicate the need for medications.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations, Scottish Statutory Instruments 2011 No 210: regulation 4(1)(a) - requirement for the health and welfare of service users. And regulation 5(1) – requirement for personal plans.

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

'My 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 29 May 2023.

Action taken on previous requirement

We sampled care plans for people who experience stress and distress. We found inconsistency and contradictory information within the care plans relating to how people should be supported when experiencing stress and distress. This meant that carers were not fully informed on the tools and strategies to support people experiencing stress and distress. Some staff did have knowledge on how to support people during these times but not all staff were aware of the strategies. This meant that people could receive inconsistent support. Information was received from families about their loved ones history and life stories, however this information was not being used to record the strategies that could be used to support people at times of distress.

This requirement has not been met within the timescale. The timescale has been extended to give the service more time to make the required improvements.

Not met

Requirement 3

By 30 July 2023, the provider must ensure that staff receive appropriate training and support, and are competent in their role.

To achieve this, the provider must, at a minimum;

a) Ensure that all staff participate in mandatory training and additional training to ensure staff are skilled and competent to meet peoples needs. This should include as a priority, but not be limited to, training in the following areas:

- i Dementia care, including stress and distress
- ii Moving and handling
- iii Personal care

b) Develop a system to ensure that the learning from the training is implemented in practice and there is a record of staff competency.

c) Ensure staff supervision is carried out in accordance with the provider's policy and procedures to ensure staff are supported to discuss and develop their roles and reflect on practice.

This is in order to comply with Regulations 4(1)(a) and 15(b)(i) 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: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes.' (HSCS 3.14)

This requirement was made on 29 May 2023.

Action taken on previous requirement

The service had begun a programme of training for staff and most staff had completed the required training. However, we did not see evidence of the training being evaluated and staff observed following training to determine their knowledge and competency levels. Some records of observed competencies were in place but were of poor quality, generic and not specific to the training completed by staff. Staff had begun to receive supervision in line with the services' policy however, the record of supervisions did not record the discussion or reflective practice to demonstrate how staff are supported in their role. Further work is required to ensure the management team are confident staff are supported, skilled and competent in their role.

This requirement has not been met within the timescale. The timescale has been extended to give the service more time to make the required improvements.

Not met

Requirement 4

By 30 July 2023, in order to ensure people experience high quality care and support that is right for them, the provider must ensure that at all times suitably qualified and competent persons are working in the care service in such numbers as are appropriate for the health, welfare and safety of service users.

To achieve this the provider must;

- a) ensure there are sufficient numbers of staff to support people's health, welfare and safety.
- b) The skills mix and experience levels of staffing on each shift is in line with the assessed needs of people living in the care home.
- c) review staff duties, routines and skills to support a flexible approach to ensuring all staff roles are effectively supported.

This is to comply with Regulation 15 (staffing) 'a provider must a) ' Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations, Scottish Statutory Instruments 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states 'My needs are met by the right number of people' (HSCS 3.15) and 'People have time to support and care for me and to speak with me' (HSCS 3.16).

This requirement was made on 29 May 2023.

Action taken on previous requirement

The service had reviewed their staffing levels in line with peoples dependency levels and have appointed additional staff to cover at peak times with consideration given to the environment and layout of the care home. We observed staff spending time with people out with their task focused duties. Review of peoples' roles had been undertaken and new roles and appointments had been put in place in addition to a more enhanced induction to meet the needs of people living in the care home.

Met - within timescales

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

To promote opportunities for meaningful activities for all people who use the service, the provider should review the way in which these are planned and facilitated. Account should be taken of the abilities and preferences of each person. Participation in activities should be recorded and evaluated in an outcome focused manner, to review if the activity was a success for the person. Outcomes should be regularly evaluated to ensure they continue to meet each person's needs.

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).

This area for improvement was made on 29 May 2023.

Action taken since then

At this inspection there were two wellbeing co-ordinators in post. Progress had been made to identify peoples choices, wishes and preferences about their interests and how they like to spend their day. Activities were planned weekly for individual and group support. Information was displayed in communal areas giving information on daily and weekly activities. This meant people were able to see activities on offer and if they wished to participate. Wellbeing co-ordinators recorded peoples' participation however, information was not recorded within the care plans and there was a disconnect between information the wellbeing co-ordinators held and the care staff. We have addressed this in Area for Improvement 2.

Previous area for improvement 2

To ensure peoples care, support and meaningful engagement is outcome focused, staff should accurately record peoples daily engagement, participation and wellbeing in daily notes and care plans.

This is to ensure that care and support is consistent with the 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 area for improvement was made on 29 May 2023.

Action taken since then

Work had been carried out by the wellbeing co-ordinators to identify peoples choices, wishes and preferences however, this information was not recorded in the main care plan to enable care staff to support people with their activities and interests. There were minimal records of peoples participation, enjoyment or outcomes recorded in the main care plan or daily notes. We have re-instated this area for improvement under key question 5. We have also taken into consideration evaluation of activities, participation and outcomes within the 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 well do we support people's wellbeing?	3 - Adequate
1.1 People experience compassion, dignity and respect	3 - Adequate
1.2 People get the most out of life	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good

How good is our staff team?	3 - Adequate
3.2 Staff have the right knowledge, competence and development to care for and support people	3 - Adequate
3.3 Staffing arrangements are right and staff work well together	3 - Adequate

How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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