

Springfield Bank Nursing Home Care Home Service

36/38 Cockpen Crescent
Bonnyrigg
EH19 3PN

Telephone: 01316 605 060

Type of inspection:
Unannounced

Completed on:
11 September 2023

Service provided by:
HC-One Limited

Service provider number:
SP2011011682

Service no:
CS2011300760

About the service

Springfield Bank Nursing Home is a care home which provides care and accommodation for up to 70 older people. The provider is HC-One Limited.

The home is situated on the outskirts of Bonnyrigg in Midlothian. Accommodation is within two units named Dalhousie and Pentland. All of the care home is on a ground floor, around a fully enclosed courtyard garden. Some of the sitting rooms have patio doors to the garden. Each unit has sitting rooms and dining rooms.

HC-One, mission is 'to be the first-choice care home for Residents and Colleagues in each of the communities we serve. We hope to achieve this mission through providing the kindest possible care to residents.'

About the inspection

This was a follow up inspection which took place on 4 September 2023 from 2045 until 2315 and 5 September 2023 from 1015 until 1630. At the time of our visit there was 66 people being supported. 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 eight people using the service
- spoke with fifteen staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

- Staffing levels had improved in the evening to ensure people experiencing care were supported effectively.
- People experiencing care received compassionate and dignified support, we observed staff to be warm, kind and friendly.
- Staff had received training to ensure people were supported to eat and drink well. We observed improvements in quality assurance systems to ensure an effective oversight of people's weights.
- Improvements were needed to ensure food and fluid intake records were appropriately completed and evaluated.

How well do we support people's wellbeing?

This was a focused inspection to follow up requirements. Please refer to section: "What the service has done to meet any requirements made at or since the last inspection".

Areas for improvement

1. To support people's health and wellbeing, the manager should ensure that food and fluid intake records are completed appropriately. This should include, but is not limited to, ensuring there is an effective system in place to regularly monitor and evaluate intake records to ensure appropriate action is taken.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My care and support meets my needs and is right for me' (HSCS 1.19.).

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

Requirements

Requirement 1

By 4 September 2023, the provider must ensure that people are being supported to eat and drink well, and their nutritional and dietary needs are being met.

To do this the provider must, at a minimum:

- Ensure malnutrition risk assessments are accurately completed by staff and used to inform practice.
- Develop and implement clear treatment plans for people who are at risk of weight loss and/or dehydration.
- Ensure people's nutrition and hydration needs are being monitored, recorded, and evaluated as required.
- Ensure people are supported and encouraged to eat and drink well, and are offered appropriate food and fluids in line with their assessed needs.

e) Ensure that staff have the necessary skills and knowledge to support people safely with their nutrition and hydration needs, including fortifying their meals and snacks.

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 1.19: My care and support meets my needs and is right for me.

This requirement was made on 14 July 2023.

Action taken on previous requirement

This requirement was made following a visit to the service in relation to a complaint investigation which took place on 28 June 2023 and 3 July 2023. The provider submitted an action plan which detailed how the requirement would be met to ensure positive outcomes for people experiencing care.

The manager told us that they had sought support from the NHS and implemented training on the Malnutrition Universal Screening Tool (MUST). We were told that staff in different roles across the service attended this training including kitchen, care, nursing and management staff. Staff we spoke with told us they benefited from different staff groups attending together to understand different roles and responsibilities.

Care and support plans were completed to detail people's needs and provided sufficient information to determine how staff were to support people. We were reassured that the MUST was being used by staff to inform practice. We found improved quality assurance systems in place to monitor the use of the MUST and people's weights.

We observed people being supported in line with their assessed needs and we observed people being supported to eat and drink in a dignified way. Some people told us they liked the food. We were reassured there was a variety of snacks available for people to enjoy at different times throughout the day and night.

Staff we spoke with had a good understanding of people's need. Staff were able to tell us how to support people to eat and drink well and had a good understanding of fortifying food. Visiting professionals told us when they have visited, they had seen that people were supported to eat and drink well.

The service had implemented food and fluid intake records for people experiencing care. These were not always completed appropriately and we were concerned they were not always evaluated effectively. We were reassured that the service was supporting people to eat and drink well, however further improvements were needed to ensure food and fluid intake records were completed and evaluated. We have issued an area for improvement, please refer to section: 'How well do we support people's wellbeing?'.

Met - within timescales

Requirement 2

By 4 September 2023, the provider must ensure a review of staffing levels is undertaken to ensure the health, safety and welfare of people experiencing care.

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

- a) Review staffing levels over a 24-hour period.
- b) Undertake observations to determine how effectively people's needs are met.
- c) Ensure there is sufficient staff on duty to meet people's needs.

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 1.19: My care and support meets my needs and is right for me.

This requirement was made on 14 July 2023.

Action taken on previous requirement

This requirement was made following a visit to the service in relation to a complaint investigation which took place on 28 June 2023 and 3 July 2023. The provider submitted an action plan which detailed how the requirement would be met to ensure positive outcomes for people experiencing care.

The manager told us that staffing levels had been increased in the evening to support people more effectively. Staff we spoke with told us staffing levels in the evening had been increased and this had a positive effect for people experiencing care. People experiencing care told us that staff were available when they needed assistance.

Records showed that the service had undertaken observations over a 24-hour period to review staffing levels. Dependency assessments had been completed, the manager told us these were being reviewed weekly to ensure staffing arrangements remained appropriate. We reviewed rotas and could see evidence of increased staffing levels to meet people's needs.

We observed sufficient staffing levels on duty and observed staff being able to spend time with people. Visiting professionals told us there was sufficient staff on duty and told us staff knew people well. People experiencing care spoke positively of staff telling us they were 'kind'.

We were reassured that the service had taken action to ensure appropriate staffing levels were in place. The service should continue to undertake regularly observations over a 24-hour period to ensure staffing arrangements remain appropriate.

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 support people's safety, the provider should ensure that falls risk assessment and prevention strategies are completed, implemented, reviewed and updated. This includes, but is not limited to, ensuring completed

assessments reflect any health concerns which may impact risk management plans and contain relevant detail as to how people are to be supported.

This is to ensure care and support is consistent with Health and Social Care Standard 1.15: 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.

This area for improvement was made on 14 July 2023.

Action taken since then

This area for improvement has not been assessed and remains in place.

Previous area for improvement 2

To support people's health and wellbeing, the manager should ensure that people are supported with appropriate nail care. This should include, but is not limited to, ensuring people are supported to access podiatry when needed and records are kept to detail support provided with nail care.

This is to ensure care and support is consistent with Health and Social Care Standard 1.19: My care and support meets my needs and is right for me.

This area for improvement was made on 14 July 2023.

Action taken since then

This area for improvement has not been assessed and remains in place.

Previous area for improvement 3

To ensure people are supported appropriately in a meaningful way, all staff should be consistent in their approaches to people who exhibit stress and distress. This would include de-escalation techniques and what leads to the person becoming upset. All of which should be recorded in the personal plan and reviewed. To support staff, observed practices and self-reflection of how the techniques were put into practice should be part of their development.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: 1.15 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. 1.23 My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected.

This area for improvement was made on 12 April 2023.

Action taken since then

This area for improvement has not been assessed and remains in place.

Previous area for improvement 4

All staff should receive training on meaningful engagement with people living in a care home. This would give staff the knowledge, skills and confidence to initiate meaningful interactions with residents out with direct care tasks.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state 4.27 I experience high quality care and support because people have the necessary information

and resources, 1.25 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.

This area for improvement was made on 12 April 2023.

Action taken since then

This area for improvement has not been assessed and remains in place.

Previous area for improvement 5

To improve the environment of the home the provider should develop a full refurbishment plan. This should include a full inventory of any, furniture, fittings or equipment which is need of replacement. The plan should detail the timescales for refurbishment to take place and be reviewed on a regular basis.

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

This area for improvement was made on 12 April 2023.

Action taken since then

This area for improvement has not been assessed and remains in place.

Previous area for improvement 6

People should have choice about getting involved with activities and interests important to them, both in the care home and their community. The provider should continue to develop opportunities for people to participate in meaningful activities.

People with specific communication needs or cognitive impairment should also be supported to participate in a meaningful way and those important to them involved in planning activities and evaluating how meaningful they were. The recording and monitoring of this should help to promote positive outcomes for all.

An assessment of the number of health and wellbeing workers should be undertaken to ensure each person has the opportunity to engage in activities meaningful to them.

This is to ensure care and support is consistent with the Health and Social Care Standards 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 12 April 2023.

Action taken since then

This area for improvement has not been assessed and remains in place.

Complaints

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

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