

Muirton House Care Home Service

Essendy Road
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Type of inspection:
Unannounced

Completed on:
17 October 2023

Service provided by:
Larchwood Care Homes (North)
Limited

Service provider number:
SP2011011695

Service no:
CS2011301145

About the service

Muirton House is located in the town of Blairgowrie, Perthshire. The build is traditional, and the house is situated within large woodland grounds that can be enjoyed by residents and their visitors.

The home can accommodate up to 59 people and is set out over two storeys with lift access to the upper floor. Maple and Rowan units support older frail adults and are located on the ground floor. Upstairs there are the Alder and Beech units, which support people living with more advanced dementia and also the Erich View unit which provides support for adults with a learning disability. All rooms have ensuite toilets and there are communal baths and showers located on each floor.

The service is provided by Larchwood Care Homes (North) Limited who states their aims and objectives are:

"...we want everyone to enjoy life to the full. We never forget that our residents are individuals and we treat them with dignity, privacy and respect while offering freedom of choice and as much independence as possible in a supportive and caring environment".

We found that the service was meeting these aims and objectives.

About the inspection

This was a remote follow up inspection to focus on a requirement made as the result of a complaint investigation. The service provided with all relevant evidence that we requested for assessment and evaluation.

Key messages

The service cooperated well with the Care Inspectorate in terms of providing relevant information that evidenced improvements to meet the requirement.

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

Requirements

Requirement 1

By 29 September 2023 the provider must ensure that 'best practice' be implemented in respect of wound management. In order to achieve this, the provider must:

- a. Ensure that any wound has a detailed assessment and a care plan which clearly demonstrates how care and treatment is to be provided.
- b. Ensure that information from visiting professionals is clearly cross referenced within the service's own documentation.
- c. Ensure that documentation and records are accurate, sufficiently detailed and reflect the care/support planned or provided.
- d. Demonstrate that managers are involved in monitoring and the audit of records.

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 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 requirement was made on 19 July 2023.

Action taken on previous requirement

We assessed evidence provided to us by the service relating to wound care and treatment.

The service had a detailed wound assessment in place for an individual.

The wound treatment plan concurred with the assessment, in terms of frequency of dressing changes, hygiene, skin observations, pain management, nutrition, hydration, positional changes, use of equipment and ongoing involvement with health professionals to support the individual and ensure that treatment was healing the wounds.

The home manager had a skin integrity audit and tracking sheet in place, and we saw that this was capturing the care and treatment of any wounds within the service. We also noted that identified actions for improvement were addressed.

We also noted updated training for staff in relation to prevention and management of pressure ulcers. Also, use of the relieving of pressure, skin integrity framework 2003.

The care home liaison team also delivered further training.

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

The provider should ensure that staff are following management guidance when supporting residents with their care.

This is to ensure care and support is consistent with Health and Social Care Standard 3.19: My care and support is consistent and stable because people work together well.

This area for improvement was made on 19 October 2023.

Action taken since then

We were satisfied that improvements that were identified within the requirement also addressed the areas of improvement.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

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