



## Fortnightly report to the Scottish Parliament on Care Inspectorate inspections

28 April 2021

## Introduction

In accordance with Paragraph 22 in Part 9 of Schedule 1 to the Coronavirus (Scotland) (No.2) Act 2020, which came into force on 27 May 2020, the Care Inspectorate must lay before Parliament a report every two weeks setting out:

- (a) which care home services it inspected during those two weeks, and
- (b) the findings of those inspections.

This report covers inspections we have completed since those detailed in our previous report to parliament of 14 April 2021.

To meet the duties imposed by the Act and to comply with associated guidance, the Care Inspectorate must focus and report on infection prevention and control, PPE and staffing. Consequently, the Care Inspectorate has amended its quality framework for care homes to support this process. This enables us to focus on these areas while also considering the impact on people's wellbeing. Such a framework supports openness and transparency and helps to ensure a fair and consistent approach, including in any evaluations we make.

To support inspections being undertaken in these circumstances, we have developed inspection tools on wellbeing, infection prevention and control and staffing that have been agreed with Health Protection Scotland and Healthcare Improvement Scotland. Some of our inspections have been undertaken with inspectors from Healthcare Improvement Scotland and public health staff. We have taken account in all inspections of the scrutiny intelligence we have, including previous inspections, complaints made to us, notifications made by the services, and information shared with us by health and social care partnerships and directors of public health for the relevant area.

We have augmented our quality framework by creating an additional key inspection question with associated quality indicators. This reflects our current inspection focus on service performance in relation to COVID-19 infection prevention and control, PPE, staffing and people's wellbeing.

Key question 7: How good is our care and support during the COVID-19 pandemic?

The quality indicators for key question 7 are:

- 7.1 People's health and wellbeing are supported and safeguarded during the COVID-19 pandemic
- 7.2 Infection control practices support a safe environment for both people experiencing care and staff
- 7.3 Staffing arrangements are responsive to the changing needs of people experiencing care.

To meet the tight timescales imposed by the legislation, this report outlines our high-level findings following oral feedback to the provider. In due course and following our normal publication protocols, we will publish for each service outlined in this report, a more detailed, individual inspection report.

## Meadowburn Care Home, Glasgow

Meadowburn Care Home is registered to provide care to a maximum 120 older people. The provider is Glasgow City Council.

We carried out an unannounced inspection of the care home between 10 and 16 March with Healthcare Improvement Scotland.

People living in the home were supported to stay in touch with family and friends. The service has put in place indoor visits from relatives and other key people, following the principles of 'Open with Care' guidance.

Staff treated people with dignity and compassion and knew people well. Residents told us how they enjoyed living in the home and there was good support provided by staff. People were encouraged to remain active and participate in activities. Staff were proactive in seeking input from external healthcare professionals support for people.

Personal plans reflected people's likes and preferences and anticipatory care plans were in place to inform staff and relatives of the care people would like should they become unwell. We identified ways to improve care planning including routinely involving residents and relatives in co-production.

The environment was clean, tidy, and well maintained. It was well designed to promote easy cleaning and created a homely feel. While the service had introduced infection prevention control procedures these were not always followed in practice. PPE was plentiful, although this was not always used or stored in line with guidance. Staff did not always adhere to good hand hygiene practice. Staff were unsure about the correct labelling of cleaning solutions and this did not follow the 'Control of Substances Hazardous to Health (COSHH)' regulations. Further work was needed to ensure that staff adhere to good infection prevention control practices.

Staffing arrangements were sufficient to meet the needs of people and the home had good contingency arrangements in place.

We will undertake a further visit to monitor progress.

### Evaluations

Overall evaluation for key question 7 'How good is our care and support during the COVID-19 pandemic?' – Weak

Quality indicator (QI) evaluations:

QI 7.1 People's health and wellbeing - Good

QI 7.2 Infection prevention and control practices - Weak

QI 7.3 Staffing arrangements - Adequate

## **Moorburn Manor Nursing Home, Largs**

Moorburn Manor Nursing Home is a care home registered to provide care to 35 older people. The provider is Moorburn Manor Limited.

We carried out an inspection of this service on 2 March and issued a letter of serious concern outlining improvements that we required. We carried out a further visit to the service on 8 March and completed our inspection on 9 March. We found limited progress had been made in improvements required in the letter of serious concern and so we issued the provider with an improvement notice on 15 March. The findings of this inspection were outlined in our report laid before Parliament on 17 March.

We completed a further visit to the home 7 April to follow up on the improvements that were required, in relation to infection prevention and control and the care and support provided to people.

The service had made sufficient improvements in infection prevention and control practice. Staff practice in the use of PPE had been improved and there was appropriate guidance in place in relation to staff uniforms.

The service had also improved its support for people who experienced stress and distress. Staff had undertaken external training on supporting people with dementia, including those experiencing stress and distress. People's movements were no longer unnecessarily restricted in the home and care plans were being reviewed and developed to improve outcomes for people. The home had complied with our requirements in the improvement notice.

Visiting was taking place in line with public health guidance.

We informed North Ayrshire health and social care partnership of our findings and the partnership will continue to support the service.

We reviewed the evaluations for this care home based on our findings at this inspection. The updated evaluations are set out below.

### **Evaluations**

Overall evaluation for key question 7 'How good is our care and support during the COVID-19 pandemic?' – Adequate

Quality indicator (QI) evaluations:

QI 7.1 People's health and wellbeing – Adequate

QI 7.2 Infection prevention and control practices – Adequate

QI 7.3 Staffing arrangements – Adequate

## Nightingale House Ayrshire Limited, Cumnock

Nightingale House is a care home is registered to provide care for up to 29 older people. The provider is Nightingale House Ayrshire Limited.

We carried out an initial inspection of this service on 24 February with Healthcare Improvement Scotland, the findings of which were outlined in the report laid before Parliament on 17 March. We completed a further follow-up inspection on 8 April to follow up the outstanding requirements made.

There was a strong commitment from the provider to work collaboratively and implement the required improvements. We found improvement in infection prevention and control procedures and practice. There were improvements in the overall cleanliness of the home and in relation to PPE. We have asked for ongoing improved observations and audits to ensure staff practices are fully embedded and maintained across the service.

People received responsive care from a staff team who knew them well, their likes and dislikes and their support needs. There was a caring approach and genuine warmth and compassion evident.

There was progress in addressing the training needs of the staff. Although, opportunities were in place there was a lack of formal evaluation to embed practice and demonstrate improved outcomes for people living in the service.

Improvements made need to be embedded and sustained. We identified a further requirement in relation to management and leadership to implement appropriate quality assurance processes to ensure these improvements are maintained. We will continue to monitor the progress of this service within the timescales of this requirement.

We informed East Ayrshire health and social care partnership of our findings.

We reviewed the evaluations for this care home based on our findings at this inspection. The updated evaluations are set out below.

### **Evaluations**

Overall evaluation for key question 7 'How good is our care and support during the COVID-19 pandemic?' – Adequate

Quality indicator (QI) evaluations:

QI 7.1 People's health and wellbeing – Adequate

QI 7.2 Infection prevention and control practices – Adequate

QI 7.3 Staffing arrangements – Adequate

## **Rosaburn House, Glasgow**

Rosaburn House is a care home registered to provide care to 66 older people. The provider is Northcare (Scotland) Limited.

We carried out an unannounced visit to the care home on 9 April with Healthcare Improvement Scotland in response to a complaint. We will report on the outcome of the complaint in line with our complaint processes. During this visit, we inspected the service in relation to infection prevention and control practice.

We identified concerns relating to the cleanliness of the environment and the equipment being used and in relation to staff use of PPE and hand hygiene. Staff training and training records needed to be improved.

Staff supported people with kindness and respect. Measures were in place to maintain social distancing.

We informed South Lanarkshire health and social care partnership of our findings.

We will undertake a further visit to monitor progress.

### **Evaluations**

Overall evaluation for key question 7 'How good is our care and support during the COVID-19 pandemic?' – Weak

Quality indicator (QI) evaluations:

QI 7.2 Infection prevention and control practices – Weak

## **Lornebank Care Centre, Hamilton**

Lornebank Care Centre is a care home registered to provide a care service for a maximum of 74 older people. The provider is Hudson (Lorne) Limited.

We carried out an unannounced visit on 7 April with Healthcare Improvement Scotland in response to a complaint. During this visit we assessed the infection prevention and control practices. Following this, we issued a letter of serious concern detailing immediate action the service was required to take in relation to infection prevention and control.

We returned to the home on 12 and 13 April to follow up on the letter of serious concern and complete an inspection in relation to people's health and wellbeing, infection prevention and control and staffing arrangements.

Immediate action had been taken in response to our concerns about infection prevention and control and we found the premises, furnishings and equipment were clean and, where required, new items had been purchased. Improved systems were in place to support enhanced cleaning. Staff had received training in infection prevention and control.

PPE was available at convenient locations and staff were observed to use this correctly and were practicing good hand hygiene. There were measures in place to promote social distancing but changes to some dining areas were required.

We observed kind and caring interactions between staff and people experiencing care. Indoor visiting had commenced, and the service were supporting meaningful contact in the home by following the 'Open with Care' guidance.

Sufficient staffing levels were sufficient to meet residents' needs. Wellbeing support and resources were in place for the staff team.

The oversight of quality assurance is an area for improvement to ensure standards are maintained in relation to environment and staff practice.

We informed South Lanarkshire health and social care partnership of our findings.

## **Evaluations**

Overall evaluation for key question 7 'How good is our care and support during the COVID-19 pandemic?' – Adequate

Quality indicator (QI) evaluations:

QI 7.1 People's health and wellbeing – Good

QI 7.2 Infection prevention and control practices – Adequate

QI 7.3 Staffing arrangements – Good

## **Lomond View, Cupar**

Lomond View is a care home registered to provide care to 50 older people. The provider is Barrogil Limited (Kingdom Homes).

We carried out an inspection of the service on 10 September 2020 and a follow-up inspection on 5 October, the findings of which were outlined in the reports laid before Parliament on 30 September and 14 October, respectively. We made further visits to the home on 13 January 2021 and 10 March, the findings of which were outlined in the respective reports to Parliament on 20 January and 17 March.

We carried out further follow-up visits to the home on 8, 13 and 20 April to assess the standards of cleanliness, safe use and disposal of PPE and quality of record keeping.

While we continued to have concerns regarding clinical waste disposal and safe use of PPE at our visit on 8 April, when we returned to the home on 13 April there were improvements in infection prevention and control practice. PPE stations were appropriately placed, and a robust programme of cleaning audits was in place to assess the effectiveness of infection prevention and control measures.

Staff were provided with training and supervision to improve their knowledge and understanding of the infection prevention and control practice and procedures. Practice was evaluated through the home's quality assurance processes.

There were improvements in health and care records. Information for people's health needs was clearly recorded. Indoor visiting and opportunities for meaningful contact between people was in place, in line with national guidance.

We informed Fife health and social care partnership of our findings.

We reviewed the evaluations for this care home based on our findings at this inspection. The updated evaluations are set out below.

## **Evaluations**

Overall evaluation for key question 7 'How good is our care and support during the COVID-19 pandemic?' – Adequate

Quality indicator (QI) evaluations:

QI 7.1 People's health and wellbeing – Adequate

QI 7.2 Infection prevention and control practices – Adequate

QI 7.3 Staffing arrangements – Adequate

## **Lennel House, Coldstream**

Lennel House is registered to provide care to a maximum of 38 older people. The provider is St Philips Care Limited.

We carried out an unannounced inspection on 3 March with Healthcare Improvement Scotland, the findings of which were laid before Parliament on 17 March. We completed a further inspection on 13 April to follow up on the improvements required in relation to people's health and wellbeing and staffing arrangements.

We found improvements to the recording in care records, to staffing and quality assurance systems.

Electronic personal plans contained good information, which staff were familiar with. There was improved recording in medication administration records. Further improvements were needed around recording of topical medications.

Staff were kind and respectful towards people. Staff were available in sufficient numbers to provide the support people needed. Work was progressing to ensure staffing levels could be maintained and more meaningful activities promoted.

Essential visits were in place and plans were being made to resume visits from families and friends, in line with current guidance.

We have informed Scottish Borders health and social care partnership about our findings.

We reviewed the evaluations for this care home based on our findings at this inspection. The updated evaluations are set out below.

## **Evaluations**

Overall evaluation for key question 7 'How good is our care and support during the COVID-19 pandemic?' – Adequate

Quality indicator (QI) evaluations:

QI 7.1 People's health and wellbeing – Adequate

QI 7.2 Infection prevention and control practices – Adequate

QI 7.3 Staffing arrangements – Adequate

## **Bonnyholm Gardens Care Home, Glasgow**

Bonnyholm Gardens Care Home is registered to provide care for a maximum of 61 older people. The provider is JSL Care Ltd.

We carried out an initial unannounced inspection of the service between 11 and 13 November with Healthcare Improvement Scotland, the findings of which were outlined in the report laid before Parliament on 25 November. We completed a further unannounced visit to the home on 14 April to follow up on the improvements that were required in relation to the admission process, staffing levels and quality assurance systems.

We found that the management of the home had responded positively to the required improvements. Assessment and care planning for individuals new to the service had improved. Staffing levels and skill mix was appropriate to meet the needs of people who experience care. Improved management oversight and quality assurance systems provided assurance that peoples' health and wellbeing needs were being met.

Visiting had started in line with government guidelines.

We informed Glasgow health and social care partnership of our findings.

## **Evaluations**

This was a follow-up inspection. We did not change the service evaluations.

## **Craigieknowes, Perth**

Craigieknowes is a care home registered to provide care to 47 older people. The provider is Four Seasons Healthcare Group.

We carried out an initial inspection of the service on 6 and 8 October 2020 with Healthcare Improvement Scotland, the findings of which were outlined in the report

laid before Parliament on 28 October 2020. We completed a further visit to the home on 2 February 2021 to follow up on improvements that were required. The findings from this visit were laid before Parliament on 17 February.

We returned to the service on 14 April to follow up on improvements required in relation to support plans and staff training and supervision. We found adequate progress had been made and outcomes for people had improved. A consistent approach to care planning had been achieved through collaboration with staff from the health and social care partnership and Scottish Care. Staff training had taken place and there were more staff supervision meetings and other supportive developments in the service to help staff provide good, consistent support to people.

Visiting arrangements were in place in line with current guidance.

We informed Perth and Kinross health and social care partnership of our findings.

We reviewed the evaluations for this care home based on our findings at this inspection. The updated evaluations are set out below.

### **Evaluations**

Overall evaluation for key question 7 'How good is our care and support during the COVID-19 pandemic?' – Adequate

Quality indicator (QI) evaluations:

QI 7.1 People's health and wellbeing - Adequate

QI 7.2 Infection prevention and control practices - Adequate

QI 7.3 Staffing arrangements - Adequate

### **Bon Accord Care – Balnagask House, Aberdeen**

Balnagask House is a care home registered to provide care to 30 older people. The provider is Bon Accord Care.

We carried out an initial inspection of the service on 22 March, the findings of which were outlined in the report laid before Parliament on 31 March. We completed a further visit to the home on 14 April to follow up on the improvements that were required in relation to care plans and activities, infection prevention and control measures and staffing levels.

When we visited on 14 April there was an improvement in the individual planning for people. People were sitting, socially distanced, in the communal areas of the home. There were a variety of activities planned and we saw people enjoying being occupied and having the staff socialising with them.

Previous concerns about poor infection control practices had all been rectified, with signage and processes in place to ensure high standards continued. Infection prevention and control practice was consistent throughout the home.

There were sufficient staff working to support people safely. The management team were engaged with the staff to readily offer support and to maintain standards.

We informed Aberdeen City health and social care partnership of our findings.

We reviewed the evaluations for this care home based on our findings at this inspection. The updated evaluations are set out below.

## **Evaluations**

Overall evaluation for key question 7 'How good is our care and support during the COVID-19 pandemic?' – Adequate

Quality indicator (QI) evaluations:

QI 7.1 People's health and wellbeing - Adequate

QI 7.2 Infection prevention and control practices - Adequate

QI 7.3 Staffing arrangements – Adequate

## **Gibson House, St. Andrews**

Gibson House care home is registered to provide care for 34 older people. The provider is William Gibson's Trust.

We carried out an unannounced inspection on 2 February with Healthcare Improvement Scotland. We returned to the service on 4 February to monitor immediate actions which were required. The findings are outlined in our report laid before Parliament on 17 February. We completed a further unannounced visit on 15 April, to follow up on improvements we had required.

The home had developed robust systems to audit medication administration. There was increased accuracy of medication management and practice had improved as a result.

Safety of hot pipes and hot water had significantly improved. Pipes and hot surfaces were covered, and safety devices were attached to hot taps where required. An environmental audit ensured priorities for maintenance were identified.

We found significant improvement in the cleanliness of the environment and equipment. A number of items had been replaced and thorough cleaning and de-cluttering had taken place. Waste was segregated correctly, and appropriate bins were available throughout the home. Better systems and audits were in place for checking the cleanliness of care equipment. Procedures to manage infection prevention and control were more effective and policies in line with current guidelines.

Staff knowledge about COVID-19 and infection prevention and control had improved. Staff had been provided with training and their practice was observed regularly. The home had developed systems to audit infection prevention and

control measures and monitor staff practice such as hand washing and the use of PPE. There was good evidence that practice had improved as a result. We will continue to monitor progress in relation to this.

Dependency assessments were completed to help inform staffing levels.

We informed Fife health and social care partnership of our findings.

We reviewed the evaluations for this care home based on our findings at this inspection. The updated evaluations are set out below:

## **Evaluations**

Overall evaluation of key question 7 'How good is our care and support during the COVID-19 pandemic?' – Adequate

Quality indicator (QI) evaluations:

QI 7.1 People's health and wellbeing – Adequate

QI 7.2 Infection prevention and control practices – Adequate

QI 7.3 Staffing arrangements – Adequate

## **Ranfurly Care Home, Johnstone**

Ranfurly Care Home is registered to provide care to 62 older people. The provider is Silverline Care Caledonia Limited.

We carried out an unannounced inspection of the service on the 15 and 16 April.

People living in the home were supported by staff who were warm and friendly and worked hard to ensure their needs were met. People were able to move around the home and were encouraged to maintain social distancing. They were supported to remain active by taking part in a range of activities. People were supported to maintain contact with family and friends through visiting, phone calls and other technology. Feedback from families was positive.

Infection prevention and control practice, including cleaning of the environment, mattresses and care equipment, was not robust and should be improved. Not all staff had completed infection, prevention and control training. Leadership and governance required to be strengthened and an improvement plan developed to support the necessary improvements. The management team took prompt action during our inspection to address concerns in relation to cleanliness.

We identified a need to improve anticipatory care planning to ensure people's preferences were known and met in end-of-life care.

There were enough staff to meet people's health and care needs. There was a staffing contingency plan to help manage staff shortages.

We informed Renfrewshire health and social care partnership of our findings.

We will undertake a further visit to monitor progress.

## Evaluations

Overall evaluation for key question 7 'How good is our care and support during the COVID-19 pandemic?' – Weak

Quality indicator (QI) evaluations:

QI 7.1 People's health and wellbeing - Adequate

QI 7.2 Infection prevention and control practices - Weak

QI 7.3 Staffing arrangements – Adequate

## Grandholm Care Home, Bridge of Don

Grandholm care home is registered to provide care to 79 adults. The provider is Holmes Care Group Scotland Ltd.

We carried out an initial inspection of the service on 25 February, the findings of which were outlined in the report laid before Parliament on 17 March. We completed a further inspection on 16 April to follow up on the improvements that were required.

The provider had appointed a new manager to the service.

There were sufficient staff on duty to meet the needs of the people living at the service, and staffing numbers changed in response to clinical activity. Staff spent time with people, engaging in meaningful activities.

Significant improvements in infection prevention and control practices were observed. Staff had completed relevant training and robust systems were in place to track and ensure their knowledge of and competency in infection prevention and control.

Intensive decluttering and cleaning had been completed throughout the building to support ongoing effective cleaning and decontamination. Safe systems had been put in place for the management of laundry, waste and substances used for cleaning and decontamination. Staff demonstrated good knowledge of these systems.

A programme of indoor visits had commenced within the home, with a plan to further increase the number of visits, in accordance with guidance.

We informed Aberdeen health and social care partnership of our findings.

We have reviewed the evaluations for this care home based on our findings at this inspection. The updated evaluations are set out below.

### **Evaluations**

Overall evaluation of key question 7 'How good is our care and support during the COVID-19 pandemic?' – Adequate

Quality indicator (QI) evaluations:

QI 7.1 People's health and wellbeing – Adequate

QI 7.2 Infection prevention and control practices – Adequate

QI 7.3 Staffing arrangements – Adequate

### **Northcare Manor, Edinburgh**

Northcare Manor is a care home registered to provide care to 74 older people. The provider is Northcare (Scotland) Limited.

We carried out an unannounced visit to the care home on 15 April in response to a complaint. We will report on the outcome of the complaint in line with our complaint processes. During this visit, we inspected the service in relation to infection prevention and control practice.

Staff were compassionate and supported people with kindness and respect. Residents told us that they received good care. Indoor visiting was taking place for residents via a booking system and was well managed.

We found adequate levels of cleanliness. There were enhanced cleaning schedules in place but not enough domestic staff to carry these out in all areas of the home. Staff had received training in infection prevention and control and there was a weekly refresher to promote good practice. There were plentiful supplies of PPE which staff had access to and were wearing in line with current guidelines. Measures were in place to maintain social distancing.

The provider agreed with our findings as their own audits and quality assurance measures had identified some of the areas of cleaning that we found could be better. Action to address improvements was already underway.

We informed Edinburgh health and social care partnership of our findings.

### **Evaluations**

Overall evaluation for key question 7 'How good is our care and support during the COVID-19 pandemic?' – Adequate

Quality indicator (QI) evaluations:

QI 7.2 Infection prevention and control practices - Adequate

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