



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

12 May 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 28 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.

## **Rosaburn House, East Kilbride**

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

We carried out an initial inspection of the service on 9 April, the findings of which were outlined in the report laid before Parliament on 28 April.

At this initial inspection we identified concerns relating to the cleanliness of the environment and equipment being used, use of PPE and hand hygiene. Staff training and training records also needed to be improved.

We completed a further visit to the home on 19 April to follow up on the improvements required. We were not satisfied with the progress being made and a letter of serious concern was issued to the provider on 20 April. This detailed the immediate action that the provider must take to improve standards of cleanliness in the service.

We visited the home again on 23 April and found the home was clean with good cleaning routines in place. Enhanced cleaning schedules had been put in place. This included cleaning of equipment and frequently touched areas. PPE was easily accessible for staff throughout the home and staff were using this appropriately and in line with guidance. Training was being delivered and staff were knowledgeable about COVID-19 and infection prevention and control practice.

We reviewed the evaluation for infection prevention and control practices for this care home, based on our findings at this inspection. The updated evaluation is set out below.

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

### **Evaluation**

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

## **Millport Care Centre, Isle of Cumbrae**

Millport Care Centre is registered to provide care for up to 27 adults with a learning and/or physical disability. The provider is Sanctuary Care Limited.

We carried out an initial inspection of the care home on the 24 and 26 of March, the findings of which were outlined in the report laid before Parliament on 14 April. We served an improvement notice on 2 April relating to culture, practice and management oversight in the service.

We completed an unannounced visit to the home on 21 April to follow up on improvements that were required in relation to infection prevention and control. We found improvements in the required areas. The home was clean and uncluttered. Additional training had been provided and we observed improved staff practice in the use of PPE and hand hygiene. Laundry management had improved. Enhanced cleaning schedules were in place and this was supported by increased domestic staff and improved management oversight.

We will undertake a further visit to the service to evaluate progress on the requirements in the improvement notice of 2 April, in line with the timescales for these requirements.

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

## **Evaluations**

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

## **Deanston House, Doune**

Deanston House is a care home registered to provide care to 20 adults with learning disabilities. The provider is ECHO.

We carried out an inspection of the service on 22, 23 and 27 April.

People were supported by staff to maintain contact with family and friends. Visiting was in line with current guidance. People were able to freely move around the home and use the outdoor space available. People were supported by staff to access their local community in line with COVID-19 guidance. Families were informed and involved in their relatives' care. The feedback from families was very positive.

People living in the home were supported by care staff who were familiar with their choices and preferences. The staff had put in place appropriate measures to maintain social distancing. Personal plans were detailed and specific to people's needs including COVID-19 related safety measures. Staff adapted practice to meet those needs.

The home was clean, tidy and well maintained. Enhanced cleaning schedules were in place. A weekly audit system enabled the management team to have an informed overview of infection prevention and control practices. PPE supplies were good and were available for staff throughout the home. Staff had training in and were knowledgeable about COVID-19 and infection prevention and control.

The staffing arrangements were sufficient to meet the needs of the people receiving care. The manager should build capacity to bring in additional staff to cover during times of short notice absence.

We informed Clackmannanshire and Stirling 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?' – Good

Quality indicator (QI) evaluations:

QI 7.1 People's health and wellbeing - Very Good

QI 7.2 Infection prevention and control practices - Good

QI 7.3 Staffing arrangements – Good

## **Clashfarquhar House, Stonehaven**

Clashfarquhar House is a care home registered to provide care to 21 older people. The provider is Church of Scotland, trading as Crossreach.

We carried out an inspection of the service on 18 and 19 February, the findings of which were outlined in the report laid before Parliament on 3 March. We completed a further inspection on 19 March and outlined our findings of this in the report laid before Parliament on 31 March.

We carried out a follow-up inspection on 23 April.

Staff had undergone specific training to ensure competence in effective cleaning and decontamination of care equipment in line with guidance. They had also been trained in effective reporting and recording of tasks undertaken regarding infection prevention and control. Staff demonstrated a good working knowledge of these systems and processes and their accountability in ensuring these are put into practice.

The provider had taken steps to put in place safe systems for the management of clinical waste, including the security of the area where clinical waste was kept.

The provider was supporting people to maintain contact with families with the use of technology as well as facilitating indoor visits in line 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

## **Meadowvale Care Home, Bathgate**

Meadowvale care home is registered to provide care for up to 52 older people. The provider is Meadowvale Care (Bathgate) Limited.

We carried out an unannounced inspection on 23 November with NHS Lothian, the findings of which were laid before Parliament on 23 December. We made a further visit to the service on the 28 January and 2 and 5 February the findings of which were laid before Parliament on 17 February.

We carried out an unannounced inspection of this care home between 19 and 26 April.

A new management team had been put in place in the home and had contributed to improvements in the service which we had been concerned about.

People were cared for by staff who were familiar with their needs. We observed warm and caring interactions between staff residents. Relatives spoke positively about the care their family members received. Visiting was supported in line with guidance. One to one and small group activities needed to be organised and available to enhance meaningful activity and connection for people.

Staff were responsive to people's changing health needs and had access to a range of external professional services which they used appropriately to meet individual's needs. People were well cared for; however, personal plans did not always clearly reflect people's health and wellbeing needs and preferences.

Quality assurance systems and processes had been put in place and this would benefit from being further developed. People had the right level of support however further development of the dependency tool was required to ensure the right level of staff were available at all times.

We informed West Lothian 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 for key question 7 are set out below along with other evaluations for this service.

## 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 control practices – Adequate

QI 7.3 Staffing arrangements – Adequate

Overall evaluation for key question 1 'How well do we support people's wellbeing?' – Adequate

Quality indicator (QI) evaluations:

Q1 1.1 people experience compassion, dignity, and respect – Adequate

Q1 1.2 people get the most out of life - Adequate

Q1 1.3 Peoples health benefits from their care and support – Adequate

Overall evaluation for key question 2 'How good is our leadership?' – Adequate

Quality indicator (QI) evaluations:

QI 2.2 Quality assurance and improvement is led well – Adequate

Overall evaluation for key question 3 'How good is our staff team?' – Adequate

Quality indicator (QI) evaluations:

QI 3.3 Staffing levels are right, and staff work well together – Adequate

Overall evaluation for key question 5 'How well is our care and support planned?' – Adequate

Quality indicator (QI) evaluations:

QI 5.1 Assessment and care planning reflects people's needs and wishes – Adequate

## Ashlea House, Callandar

Ashlea House is a care home registered to provide care for 21 older people. The provider is Mauricare Ascot Care Limited.

We carried out an inspection of this care home on 16 July 2020, the findings of which were outlined in our report laid before Parliament on 22 July. We visited the service on 27 August and 9 September and outlined our findings in the report to Parliament on 14 October.

We carried out a follow-up inspection of the service on 15 February 2021. We identified serious concerns about the care people were receiving and issued an improvement notice on 19 February. We carried out a further inspection on 23 March and while improvements had been made, progress had been slow and further improvement was required. We outlined our findings in the report laid before Parliament on 14 April.

We completed two further visits to the home on 14 and 26 April.

The provider had met the two requirements in the improvement notice. These related to people's health and wellbeing. Systems were in place to monitor and assess people's levels of pain and the effectiveness of any prescribed pain relief. Training had taken place with staff and personal planning and the use of risk assessments had improved. External health care professionals were involved in people's care as required. Outcomes for people living in the care home had improved.

Two requirements, that were not included in the improvement notice in February, remain outstanding for the service. These relate to quality assurance and how people spend their day. We also made one further requirement in relation to staffing arrangements.

We informed Clackmannanshire and Stirling health and social care partnership of our findings.

We will undertake a further inspection to monitor progress and follow up on the improvements required.

We reviewed the evaluation for quality indicator 'QI 7.1 People's health and wellbeing', based on our findings at this inspection. The updated evaluation for this is set out in the evaluations below.

## **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 – Adequate

QI 7.3 Staffing arrangements - Weak

## **Ballumbie Court, Dundee**

Ballumbie Court is a care home for older people registered to care for a maximum of 58 people. The provider is HC-One Limited.

We undertook an inspection of the care home on 8 and 10 September, the findings of which were outlined in the report laid before Parliament on 30 September 2020.

We carried out a further visit to the home, on 11 and 19 November to investigate a complaint. We completed an inspection on 26 April to follow up on the improvements that were required from the complaint investigation.

On 26 April we found improvement in the care and support provided. We were satisfied with actions taken to improve oral care for people who use the service. Staff training was completed, and systems were in place to ensure audits of records. We also found the records about medication, hydration and nutrition were improved.

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

### **Evaluations**

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

### **Cumnor Hall, Ayr**

Cumnor Hall is a care home registered to provide care for up to 31 older people. The provider is Church of Scotland, trading as Crossreach.

We carried out an initial inspection of this service on 5 August with Healthcare Improvement Scotland. We issued a letter of serious concern to the provider on 6 August. We completed further visits to the home with Healthcare Improvement Scotland on 8 August, 11 August and 22 October, the findings of which were outlined in the reports laid before Parliament on 19 August and 11 November. We visited the service again on 9 November and 8 December and outlined our findings in our report to Parliament on 23 December.

We completed a further inspection on 27 April to follow up on an outstanding requirement relating to staff training and staff practice quality assurance. We found action had been taken to provide staff with training relevant to their individual roles. This included training in infection prevention and control, end of life care and anticipatory care planning. Monitoring of record keeping and observations of staff carrying out their duties had been implemented and had resulted in improved staff practice.

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

### **Evaluations**

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

## **Lower Johnshill, Lanark**

Lower Johnshill is a care home registered to provide care to 78 older people. The provider is MHA Auchlochan.

We carried out an initial unannounced inspection of the service on 16 and 17 March with Healthcare Improvement Scotland, the findings of which were outlined in the report laid before Parliament on 31 March.

We completed a further unannounced visit to the home on 27 April to follow up on improvements required in relation to support for people with their nutritional and other health care needs and infection prevention and control practices.

The service had improved practice relating to how they monitor and record the dietary needs of residents. However, further improvement was required to evidence that people's individual dietary needs were met.

We found items of equipment and furniture which had not been cleaned to an appropriate standard and some which were not fit for purpose. Previous scrutiny activities and internal audits had identified a range of equipment and furnishings that need to be replaced. The provider was replacing equipment on a phased basis but equipment that is not fit for purpose must be replaced immediately. There needed to be clear staff guidance on the cleaning of equipment, including the expectations of both care and domestic staff.

The staff team worked well together and were supportive of each other. We had concerns about staffing levels and staff monitoring in areas of the building by management.

Although progress was evident during this inspection, the service needed to continue to make improvements detailed above.

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

We will undertake a further visit to monitor progress.

### **Evaluations**

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

## **Corbenic Camphill Community, Dunkeld**

Corbenic Camphill Community is a care home registered to provide care to 43 people with learning disabilities. The provider is Corbenic Camphill Community.

We carried out an inspection of the care home between 14 December 2020 and 11 January 2021. We issued a letter of serious concern to the provider on 12 January and visited the service again on 17 January to follow up on this. Our findings were outlined in the report laid before Parliament on 3 February.

We completed a further visit to the home on 28 April to follow up on the improvements that were required in relation to risk enablement plans, physical interventions, training provision and quality assurance.

When we visited on 28 April, we found clear, up to date risk assessments. The service had introduced in-house trainers for training in appropriate physical intervention and had a clear matrix of training provision across all staff.

There had been improvements in the supervision of staff and clear and consistent records of this. There were more regular team meetings and a greater presence of management. Quality assurance processes had improved but were still being embedded into practice.

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

We will continue to monitor this service to ensure that progress is maintained.

We have reviewed the evaluations for key question 7 for this care home based on our findings at this inspection. The updated evaluations are set out below.

## **Evaluations**

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 control practices – Adequate

QI 7.3 Staffing arrangements – Adequate

## **Ochil Care Home, Perth**

Ochil care home is registered to provide care and support for up to 81 people. The provider is Barchester Healthcare.

We carried out an unannounced inspection of the care home on 28 April.

Staffing arrangements were sufficient to meet people's needs and staff treated people with dignity and compassion. People were supported to stay in touch with family and friends and indoor visiting was in place in line with the 'Open with Care' guidance.

Personal plans reflected people's likes and preferences and anticipatory care plans informed staff of people's wishes should they become unwell. We identified a need to improve social stimulation and increase opportunities for people to engage in meaningful activities. The service also needed to ensure that care reviews were carried out within the required timescales.

There were appropriate measures in place to maintain social distancing and support people to move around safely. The environment was clean. PPE stations were well stocked, and staff had received training in infection prevention and control. We observed some inconsistent practices in relation to infection prevention control and further work is required to ensure best practice is fully embedded and maintained across the service.

We informed Perth and Kinross 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 – Adequate

QI 7.2 Infection prevention and control practices – Adequate

QI 7.3 Staffing arrangements – Adequate

## **Nazareth House, Glasgow**

Nazareth House care home is registered to provide care to 70 older people. The provider is Nazareth Care Charitable Trust.

We carried out a COVID-19 inspection on 23 June 2020 with Healthcare Improvement Scotland and the local NHS public health team, the findings of which were outlined in the report laid before Parliament on 8 July. We completed a full inspection of the home on 23 November and reported our findings to Parliament on 06 January 2021. We completed a further visit to the home on 3 March to follow up on the improvements that were required and outlined our findings in our report to Parliament on 17 March.

We completed a further unannounced inspection on 28 April to follow up on the improvements that were required in relation to aspects of medication management, overnight staffing levels, social activities, quality assurance systems and the care planning and assessment process.

We found increased opportunities for residents to engage in social activities with further improvements planned. Indoor visiting was taking place in line with guidance.

The new manager was helping to effect positive changes in areas of service delivery and staff practice. Staff morale had improved. We found improvements to quality management systems, medication management and staffing levels.

The introduction of a new care planning system was underway to enhance the quality of information about residents' needs and wishes and the things that are important to them. A new supervision proforma had been introduced to help improve the quality of the supervision experience for staff.

We informed Glasgow 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 1 'How well do we support people's wellbeing?' – Adequate.

Quality indicator (QI) evaluations:

QI 1.1 People experience compassion, dignity and respect – Adequate

QI 1.2 People get the most out of life – Adequate

QI 1.3 People's health benefits from their care and support – Adequate

Overall evaluation for key question 2 'How good is our leadership?' – Adequate

Quality indicator (QI) evaluation:

QI 2.2 Quality assurance and improvement is led well – Adequate

Overall evaluation for key question 3 'How good is our staff team?' – Adequate

Quality indicator (QI) evaluation:

QI 3.3 Staffing levels and mix meet people's needs and staff work well together – Adequate

Overall evaluation for key question 4 'How good is our setting?' – Good

Quality indicator (QI) evaluation:

QI 4.2 The setting promotes and enables independence – Good

Overall evaluation for key question 5 'How well is our care and support planned?' - Adequate

Quality indicator (QI) evaluation:

QI 5.1 Assessments and care planning reflects people's needs and wishes – Adequate

## **Cluny Lodge Nursing Home, Edinburgh**

Cluny Lodge nursing home is registered to provide care to 72 older people. The provider is Elder Homes Limited.

We carried out an unannounced visit to the care home on 28 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.

The home was clean, tidy and well maintained. There were good quality assurance processes in place to ensure adherence to the current infection prevention and control guidelines. All staff had received training and were knowledgeable about COVID-19 and infection prevention and control. There were infection control champions who had a good overview of staff practices. Staff were using the appropriate PPE in line with guidance and were promoting social distancing.

There were good staffing levels, and they were well utilised to enhance support given to residents in their own rooms and in the communal areas. Family contact was supported by the staff and all types of visiting was being actively encouraged. The support given to people was person-centred and helped staff to deliver individualised care.

We informed the 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?' – Very Good

QI 7.2 Infection prevention and control practices - Very Good

## **Nightingale House, Paisley**

Nightingale House care home is registered to provide care to 43 older people. The provider is Sterling Care Homes Ltd.

We carried out an unannounced inspection of the care home on 28 April.

The care provided was warm and compassionate. People's needs and preferences were well recognised by the staff group. We saw people's health benefited from links with external healthcare professionals. People had been supported to maintain contact with friends and family. A COVID champion helped manage and support visiting. Relatives we spoke to felt well informed and welcomed the more frequent and closer contact.

Areas around the home had been adapted to support safe social distancing. Individuals who enjoyed the company of others were helped to do so. People isolated or spending time in their rooms received wellbeing checks from staff.

The home was clean and tidy and good cleaning routines were in place. This included the regular cleaning of touch points and shared equipment. Clinical waste was disposed of appropriately and new bins had been purchased. Appropriate signage was visible throughout the home and provided important prompts for staff, residents, and visitors.

The service shared plans for an extensive internal upgrade. This will address areas where the fabric, fittings and furniture were identified as tired. There were some storage areas that could be decluttered, and more attention was needed to improve elements of laundry management.

PPE supplies were good and were available for staff throughout the home. Staff had received training and were knowledgeable about COVID-19 and infection prevention and control. Practice was verified using observations and competency. We provided some guidance on how this could be further enhanced to ensure all the evidence from observations was captured and actioned.

Support staffing arrangements were sufficient to meet the needs of the people receiving care in the service. With the care home manager due to leave the service imminently, recruitment to management posts was both a concern and a priority. A contingency plan was being developed. We will follow up with the service to ensure the appropriate management support is in place.

We informed Renfrewshire 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 – Good

QI 7.3 Staffing arrangements – Adequate

## **Meadowburn Care Home, Glasgow**

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

We carried out an initial inspection of the care home between 10 and 16 March with Healthcare Improvement Scotland, the findings of which were outlined in the report were laid before Parliament on 28 April.

We completed a further visit to the home on 29 April to follow up on the improvements that were required in relation to infection prevention and control.

Further training, guidance and oversight of staff practice had taken place to promote good infection prevention and control practices. This included specific areas such as hand hygiene, the availability of alcohol-based hand rub, the use and storage of PPE and the management of linen.

There were improved procedures that helped to ensure cleaning products were appropriately labelled and that staff used products appropriately. A system was in place to check that staff were following guidance. The provider developed a risk assessment aligned to National Infection Control Manual.

The service continues to work on areas for improvement including staff training, systems to support the implementation of good practice and the development of outcome focused support plans.

We informed Glasgow 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 – Good

QI 7.2 Infection prevention and control practices – Adequate

QI 7.3 Staffing arrangements – Good

## **Drummohr Nursing Home, Musselburgh**

Drummohr Nursing Home is a care home registered to provide care to 60 older people. The provider is HC-One.

We carried out an initial inspection of the service on 29 May 2020 with Healthcare Improvement Scotland and NHS Lothain, the findings of which were outlined in the report laid before Parliament on 10 June.

We carried out an unannounced inspection of the service on the 30 of April 2021.

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. Feedback from residents and their families was positive.

Staff treated people with respect and knew them well. We observed warm interactions between staff and residents. People were encouraged to move around the care home and the layout of the home helped people to maintain social distancing.

Infection prevention and control practice, including cleaning of the environment and care equipment, was not robust and required to improve. Staff had been provided with training, but a review of learning and practice was needed. Quality assurance required to be strengthened to support the necessary improvements.

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

The provider agreed with our findings and had commenced an action plan to address improvements.

We informed East Lothian 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

## **Burnbrae, Falkirk**

Burnbrae is a care home registered to provide care to 28 older people. The provider is Falkirk Council.

We carried out an initial inspection of the service on 24 August with NHS Forth Valley, the findings of which were outlined in the report laid before Parliament on 2 September. We completed a further visit to the home, with NHS Forth Valley, on 8 October. Our findings were detailed in the report laid before Parliament on 28 October. We carried out a follow-up inspection on 4 March 2021 and reported our findings in the report laid before Parliament on 17 March.

We completed a further inspection on 30 April and found some improvement in the areas required. Risk assessments had been developed but further detail was needed in these. Staff had undertaken training in falls prevention and risk assessment. Records were up to date and a training plan was in place.

People's needs had been assessed and protocols were in place to inform staffing levels. Further improvement is required to improve people's health and wellbeing outcomes and experiences.

We will be undertaking a further inspection of this service.

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

## **Evaluations**

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

## **Newbyres Village, Gorebridge**

Newbyres Village is a care home registered to provide care to 61 older people. The provider is Midlothian Council.

We carried out an initial complaint investigation of the service on the 25 November 2020 using virtual technology. Feedback with the manager was carried out on the 16 December. We carried out a follow up inspection on the 30 April 2021 to follow up on the improvements that were required.

At the previous inspection there were concerns about the assessment, care planning and monitoring of people's health and wellbeing within the service.

We evaluated evidence provided to us on the 30 April. We found that people's needs had been appropriately assessed, personal plans were more outcome focussed, and effective systems were in place to monitor people's health and wellbeing.

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

## **Evaluations**

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

## **Adamwood Nursing Home, Musselburgh**

Adamwood Nursing Home is registered to provide care to 13 older people. The provider is Rollandene Ltd.

We carried out an unannounced inspection of the care home between 17 and 24 March which included consultation with the Scottish Fire Service and NHS Health Protection team. We issued a letter of serious concern to the provider on 23 March about laundry, housekeeping, and staff practice in relation to appropriate use of

PPE. We returned to the service on 24 March and found progress had made to address these concerns and reported our findings in the report laid before Parliament on 14 April.

On 4 May, we carried out an unannounced inspection to follow up on progress and check that improvements had been sustained in relation to the use of PPE, cleaning practices and laundry management.

We found PPE supplies were good and were easily available. There were enhanced cleaning regimes in place and staff used PPE appropriately. There had been improvements in the management of the laundry and procedures were in place to minimise cross infection and improve the management of waste. However, further improvements in the management of waste was required and the home needs to recruit a dedicated laundry worker. We extended the timescales to acknowledge improvement made and to enable the further improvements to be put in place.

The home needed refurbishment, redecoration and some equipment needed to be replaced.

There were kind and compassionate interactions between staff and residents. Staffing levels were sufficient to meet people's health and wellbeing needs. Work was progressing to review staff training needs and to put systems in place to enhance staff supervision and appraisal.

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

We will undertake a further visit to monitor progress.

## **Evaluations**

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

## **Finavon Court–Forfar, Forfar**

Finavon Court-Forfar is a care home registered to provide care to 57 older people. The provider is HC-One Limited.

We carried out an unannounced inspection of the care home on 04 May.

The premises, most furnishings and equipment were clean. However, we found equipment and mattresses in three bedrooms not to be clean. This was addressed immediately, but systems and processes for cleaning needed to improve including quality assurance.

Staff had received training and were knowledgeable about COVID-19 and infection prevention and control procedures. This did not always impact upon their practice in

relation to keeping the environment and equipment clean. Further work needs to be carried out to improve staff awareness of and practice in implementing safe and effective infection control measures in the home. Management need to enhance quality assurance of staff practice.

There were enough staff to meet people's needs. People living in the home were supported to stay both physically and mentally well. They were supported to engage in physical activities including access to the gardens. People were also supported to maintain contact with family and friends using technology and visiting was supported in line with guidance. The quality-of-care planning needs to improve to ensure there is sufficient detail to inform staff practice.

We have informed Angus 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?' - 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

## **Shoremill (Care Home), Cromarty**

Shoremill care home is registered to provide care to 13 older people. The provider is Sarina Duncan and Rita Portway, a partnership trading as Shoremill Care Home.

We carried out an initial inspection of the service on 1 October, the findings of which were outlined in the report laid before Parliament on 14 October. We completed a further visit to the home on 19 November the findings of which were outlined in the report laid before Parliament on 9 December.

We visited the service on 4 May and found progress in all areas identified for improvement. The service had established a quality assurance system that was used to support positive outcomes for people living in the service.

Laundry was managed in line with guidance and staff had received sufficient training to identify needs and risks and keep people safe from harm.

People's health and care needs had been evaluated, and care plans had adequate detail to support staff to meet people's health and care needs.

We informed NHS Highland of our findings.

## **Evaluations**

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

### **Clarence Court Care Home, Glasgow**

Clarence Court Care Home is registered to provide a service to a maximum of 40 older people. The provider is Guthrie Court Limited, a member of the Four Seasons Healthcare Group.

We carried out an unannounced inspection of the care home on 4 May.

Staff were available in sufficient numbers to support the care needed for people's general health and wellbeing. Interactions observed between staff and residents were kind and respectful.

Care plans reflected the support people needed. This included support in the event of an outbreak of COVID-19, and people's advanced wishes should they become unwell. Staff supported resident's health needs well and the service had good access to support from healthcare professionals.

People living at the service were supported to stay in touch with family and friends. This included virtual contact using technology as well as indoor visits, in line with the 'Open with Care' guidance.

A homely feel had been maintained while ensuring that the service was clean, tidy, and free of clutter. Frequent cleaning was taking place and housekeeping staff were using correct cleaning solutions. Shared equipment used by residents was clean and well maintained. Environmental audits need to be reviewed to ensure that these continue to promote proactive management of infection prevention and control.

Staff demonstrated an understanding of good practice in relation to infection prevention and control procedures and the safe use and disposal of PPE.

We informed Glasgow City 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

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