



Fortnightly report to the Scottish Parliament on Care Inspectorate inspections

Laid before Parliament 9 June 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 26 May 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.

Deanston House Nursing Home, Coatbridge

Deanston House nursing home is registered to provide a care service to a maximum of 33 older people. The provider is Enhance Healthcare Ltd.

We carried out an unannounced inspection and a complaint investigation in the home on 13 May. Following this inspection, we issued a letter of serious concern relating to the cleanliness of the environment.

We returned to the service on 17 May to ensure improvements had been put in place. There were significant improvements in the environment and staff practice which reduced the risk of infection and cross-contamination for people.

There was a sufficient supply of PPE equipment. Staff had completed training in relation to Covid-19 and infection control and prevention and practice had improved.

Individual care plans specific to Covid-19 were not always in place and the content of some needed to be improved. People did have anticipatory care plans that detailed the support they wished to receive at the end of their life.

We had some concerns around the staffing levels being able to fully meet people's health and wellbeing needs. Staff engaged with people in meaningful ways, however, there were limited one-to-one and group activities taking place within the home.

People were encouraged to keep in contact with their families and the service and the service had started to manage visits in line with Scottish Government Open with Care guidance. Feedback from families was positive and reflected that they felt informed and involved in their relatives' care.

Quality assurance systems did not demonstrate how they had helped the service to identify improved outcomes for people. Management needs to improve quality assurance systems that identify areas that need improved.

We informed North 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 - Adequate

QI 7.2 Infection prevention and control practices - Adequate

QI 7.3 Staffing arrangements – Adequate

Westbank Care Home, Troon

Westbank Care Home is registered to provide care to a maximum of 20 older people. The provider is Westbank care home Limited.

We carried out an unannounced inspection of the service on 17 and 18 May.

We found people were supported by a consistent care team who knew people's preferences well. Staff supported people to stay in touch with their families and communication with relatives had taken place to keep them informed as changes occurred. Window visits, outdoor visits and indoor visits had taken place. Plans were in place to further progress indoor visiting in keeping with Scottish Government Open with Care guidance.

Although relatives had been informed of visiting options, some residents were unaware that indoor visiting was allowed. We asked for improved information to be provided to people who live at the service.

Staff were aware of social distancing measures, and this was working well.

We found the premises and equipment to be clean. Some staff practices in relation to laundry and cleaning needed improvement for example adhering to cleaning schedules and quality assurance by management.

PPE was available at convenient locations and staff were observed to use this correctly. Hand hygiene posters were displayed, and alcohol hand rub was available. However, not all staff were knowledgeable on infection prevention and control procedures.

During the inspection, changes were made to housekeeping and aspects of laundry management following feedback on improvements required. Overall, compliance with infection prevention and control practice needed to be more closely monitored to help keep people safe with robust quality assurance.

Staffing was sufficient to ensure people's needs were met.

We informed South Ayrshire 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 control practices – Adequate

QI 7.3 Staffing arrangements – Adequate

Woodside Care Home, Coatbridge

Woodside care home is registered to provide care to 84 older people. The provider is Woodside Care Homes Ltd.

We carried out an unannounced inspection of the care home on 18 and 19 May.

Indoor visiting by family members was well managed in line with Scottish Government Open with Care guidance. People were also being supported by the staff to maintain contact with family and relatives using technology.

The feedback from families was positive. They told us that the service kept them informed of any changes in their relative's care.

People living in the home benefited from being supported by care staff who were familiar with their care and support needs.

Social distancing was being managed sensitively and people were supported to move around safely.

We saw that the level of cleanliness in the home was satisfactory. PPE stations were well stocked, but the number should be increased to ensure that PPE is available near to point of use.

There was inconsistency in staff practice regarding infection prevention and control. There was a need to increase direct observation of staff practice to ensure standards of practice were monitored and maintained.

The staffing arrangements were sufficient to meet people's needs and staff treated people with kindness and compassion.

We informed North Lanarkshire health and social care partnership of 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

Victoria Manor Nursing Home, Edinburgh

Victoria Manor nursing home is registered to provide care for 118 people. The provider is HC - One Oval Limited.

We carried out an initial inspection of the service on 4 December with Healthcare Improvement Scotland, the findings of which were outlined in the report laid before parliament on 23 December.

We carried out an unannounced inspection of the care home on 18 May to follow up on improvements.

There was significant progress in relation to infection prevention and control practice. Mattresses were clean and there was a quality assurance system in place to ensure these were checked regularly. The number of PPE stations and clinical waste bins had been increased. Staff demonstrated appropriate use of PPE.

People were supported to engage in one-to-one and small group activities safely and in line with current physical distancing guidance.

The management team had developed a system to improve care planning, which better reflected people's needs and choices. This should promote positive outcomes for people.

People were very complimentary about the care and support they received. There were kind and compassionate interactions between staff and people experiencing care.

There were processes in place to keep families up to date on their relative's care. People were supported to maintain contact with family and friends and visiting was supported in line with Scottish Government Open with Care guidance.

We informed City of 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?' – Good

Quality indicator (QI) evaluations:

7.1 People's health and wellbeing – Good

7.2 Infection prevention and control practices – Good

7.3 Staffing arrangements – Good

Forth View Care Centre, Leven

Forth View Care Centre is a care home registered to provide care to 45 older people and 10 adults with physical and sensory impairment. The provider is Balhousie Care Ltd.

We carried out an inspection on 12 August, the findings of which were outlined in the report laid before parliament on 19 August. The overall evaluation for key question 7 was adequate at this inspection.

Following an unannounced visit on 21 December, to investigate two complaints which were upheld, we issued a letter of serious concern. We made further visits on 6 and 12 January and reported on our findings in the report laid before parliament on 21 January.

We issued an improvement notice to the service on 15 January due to the lack of progress in addressing key areas including staff availability to assist people with personal care, peoples' nutrition and hydration needs and the overall governance and management of the service.

We completed a further visit to the home on 9 March to follow up on the improvements that were required. When we visited on 9 March, we found that sufficient improvements had been made in relation to staffing levels, and as a result people's experiences had improved.

Further progress was required to sustain and continue improvement for people who live in the service and to ensure staff were provided with the correct training and support on a day-to-day basis to carry out their roles. The findings of this inspection were outlined in the report laid before parliament on 17 March.

A further unannounced inspection was carried out on 19 and 21 May to check improvements had been sustained and governance systems were in place.

The home had reopened to indoor visiting. This was in line with Scottish Government Open with Care guidance.

Some improvement had been sustained since the previous inspection and improvement notice, however, there was practice where improvements had not been sustained and this had been identified by the providers. We also identified new issues of concern about the care people were receiving.

The healthcare needs of people were met but were compromised by weak infection prevention and control practice and cleanliness of the home. There were adequate supplies of PPE available, however, we observed staff not wearing PPE appropriately, including the wearing of masks. Working between residents, staff did not always practice hand hygiene and there were inadequate bins for disposal of PPE.

While most staff had received some training, we were not confident that staff were knowledgeable about best practice in infection prevention and control. This was from our observation of staff practice. The provider had not put in place quality assurance to ensure staff practice was appropriate and in line with guidance.

Care plans were not reflective of people's specific support needs. The staffing arrangements did not always fully meet the needs of people receiving care in the service. Assessment and setting of staffing levels must ensure there are sufficient staff to ensure the best care outcomes for people.

Management oversight of the service needed to improve, underpinned by direction, leadership and quality assurance systems and governance processes.

We issued a further improvement notice to the service on 28 May.

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

We will undertake further visits 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 – Weak

QI 7.2 Infection prevention and control practices – Weak

QI 7.3 Staffing arrangements – Weak

Saltgreens Care Home, Eyemouth

Saltgreens care home is registered to provide care for 35 older adults. The provider is Scottish Borders Council.

We carried out an initial inspection of the service on 30 March, the findings of which were outlined in the report laid before parliament on 14 April.

We carried out an inspection on 19 May to follow up on the improvements required in relation to infection prevention and control.

Some improvements had been achieved in relation to clinical waste management. However, there were issues regarding the management of laundry, the use of cleaning materials and the need for further improvement.

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 people's needs.

People were well cared for; however, personal plans did not always clearly reflect people's health and wellbeing needs and preferences.

A new manager had recently been appointed and was committed to taking forward these improvements.

We informed Scottish Borders 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.

The Beeches, Kilmarnock

The Beeches is a care home registered to provide care for 10 adults with physical disabilities. The provider is Thorntoun Limited.

We carried out an unannounced inspection of the service on 19 February, the findings of which were outlined in the report laid before parliament on 3 March. We made a further visit to the service on 31 March, the findings of which outlined in the report laid before parliament on 14 April.

We carried out a further unannounced inspection on 19 May to follow up on the improvements that were required.

We found that further progress had been made. The service had significantly improved people's care plans. These now included detailed person-centred content and included good information about each person's wishes and abilities. We suggested areas for improvement that would help sustain improved standards.

Progress had also been made with reviewing the training needs of staff and improving the planning and monitoring of staff training and staff supervision.

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

Evaluations

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

Craigard House, Ballater

Craigard House is a care home registered to provide care to 24 older people. The provider is Craigard Care Ltd.

We carried out an initial inspection of the service on 4 March, the findings of which were outlined in the report laid before parliament on 17 March.

We completed a further visit to the home on 20 May to follow up on the improvements required.

We found improvements had been made to the cleanliness of people's bedrooms, communal areas and ensuite bathrooms. Clutter had been removed and broken equipment replaced. This allowed for effective cleaning, which helped to prevent the spread of infection.

Further work is required to ensure the environment is continuously well maintained and any necessary improvements are identified as part of the service's ongoing quality assurance processes. This should ensure that people can experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment.

Staff knowledge in relation to infection control also needs to be assessed and any training needs identified and met. This will ensure staff have the right skills and knowledge to keep people safe.

Visiting was being progressed in line with Scottish Government Open with Care guidance. People were receiving visitors in their own bedrooms as well as enjoying outings in the community.

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

We informed Aberdeenshire 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

Pitkerro Care Centre, Dundee

Pitkerro Care Centre is a care home registered to provide care to 70 older people. The provider is Pitkerro Opco Ltd.

We carried out an inspection on 24 June 2020, the findings of which were outlined in the report laid before parliament 8 July. We completed a further visit to the home on 17 July to follow up on improvements made and outlined our findings in the report laid before parliament on 5 August. An unannounced visit to investigate complaints was undertaken on 16 February.

We carried out an unannounced inspection of the care home on 22 May.

The service had not yet fully implemented Scottish Government Open with Care guidance. Although feedback from families was positive, the service must improve visiting in line with current guidance.

Individual personal plans provided sufficient information on how current care and support needs were being managed. The service had good links with external

professionals to support wellbeing. We identified a need to improve social stimulation and increase opportunities for people to engage in meaningful activities.

The home environment was generally clean and well maintained. Some items of furniture required attention, and this was immediately addressed. Enhanced cleaning schedules were in place. Laundry management required improvement to ensure infection prevention and control measures were applied consistently.

PPE supplies were good however they were not stored properly or easily accessible for staff throughout the home. More clinical waste bins were needed.

The staffing arrangements were sufficient to meet the physical and health care needs of the people receiving care in the service. Staff had received appropriate training. Further work is required to ensure best practice is fully embedded and maintained across the service.

We informed Dundee health and social care partnership of our findings and they have agreed to provide support to the home.

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

Castle Gardens Care Home, Invergordon

Castle Gardens care home is registered to provide care to 38 older people. The provider is HC-One Ltd.

We carried out an initial inspection of the service on 22 January, the findings of which were outlined in the report tabled before parliament on 3 February.

We carried out a further unannounced inspection of the service on 24 and 25 May.

We observed kind and compassionate interactions between staff and people experiencing care. Feedback from relatives was positive. Arrangements were in place to keep relatives updated about changes in their family member's health and care. People were enjoying indoor visiting in line with Scottish Government Open with Care guidance.

There were enough staff to meet people's health and care needs. Staff had received training that supported them to maintain people's health and wellbeing. The home

had positive working relationships with external health practitioners who helped to support positive outcomes for people living in the service.

The home was clean, tidy and well maintained. Enhanced cleaning schedules were in place. The home managed laundry and clinical waste in line with guidance. There were good supplies of PPE and staff were seen to use, wear and dispose of PPE appropriately.

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

We informed NHS Highland 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 7.2 Infection prevention and control practices - Good

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

Quality indicator (QI) evaluations:

QI 1.1 People experience compassion, dignity, and respect – Good

QI 1.2 People get the most out of life – Good

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

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

Quality indicator (QI) evaluations:

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

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

Quality indicator (QI) evaluations:

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

QI 5.2 Carers and family members are encouraged to be involved in delivering care and support – Good

Dounemount Care Home, Macduff

Dounemount Care Home is registered to provide care to 34 older people. The provider is Dounemount Care Ltd.

We carried out an unannounced inspection of the care home on 24 May with NHS Grampian.

People spent long periods of time without engagement or occupation. Group activities were not available every day. Meaningful 1:1 interaction was limited. Some people were not supported to look their best. Improvements are needed to ensure that people are cared for with compassion and respect.

Improvements are also needed to the quality of people's care, support and treatment when they are involved in an accident or incident.

People's personal plans were of poor quality. It was not clear how their support needs were being managed. People's changing needs were not effectively planned for. Improvements are needed to ensure that people are supported to eat well and maintain healthy weight.

Indoor visiting had been reintroduced. It should be further expanded and normalised to help people maintain relationships with their family and friends. The provider must improve this in line with Scottish Government Open with Care guidance.

There was inconsistency in the standard of cleanliness. The number of domestic staff and the hours they worked contributed to the inconsistent standards.

PPE supplies and clinical bins were situated throughout the home and staff were using PPE correctly. This reduced the risk of cross contamination.

Staff were knowledgeable and informed about Covid-19 and current guidelines.

There were not enough staff on duty to ensure that people experienced good care and positive outcomes. Staff numbers did not alter in response to people's changing needs. This led to poor outcomes and impacted on the quality of people's day.

We informed Aberdeenshire health and social care partnership of our concerns and they have agreed to provide support to the home. They will continue to make assurance visits and provide nursing support.

We have given very short time scale for improvement that we will closely monitor. 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?' – Unsatisfactory

Quality indicator (QI) evaluations:

QI 7.1 People's health and wellbeing – Unsatisfactory

QI 7.2 Infection prevention and control practices - Weak

QI 7.3 Staffing arrangements - Unsatisfactory

Methven House, Kirkcaldy

Methven House is a care home registered to provide care for 62 older people. The provider is Kingdom Homes Ltd.

We completed an unannounced inspection of the care home on 24 May.

We found that people were able to have regular contact with family and friends. A dedicated Covid-19 coordinator ensured visits could be booked and all appropriate testing and safety measures were in place. The service was moving forward with visiting in line with Scottish Government Open with Care guidance.

The staff team was responsive to people's wellbeing needs and families reported being happy with the care provided. People living in the home were supported by care staff who were familiar with their choices and preferences. Care plans were person-centred and had sufficient detail to enable staff to meet people's needs.

The home was generally clean, tidy and well maintained. We identified catering equipment in use which was not clean and a dining area which required immediate attention to ensure it was cleaned to an acceptable standard. We informed the manager of our concerns and asked for immediate action to be taken.

PPE supplies were good and available for staff throughout the home. Staff knowledge about infection prevention and control was good and a number of Covid-19 related audits and checks were being undertaken regularly. However, these had failed to identify the issues above and ensure that all areas of the home were clean including equipment in use. Laundry systems supported good infection prevention and control practice.

Staffing was adequate however we found that the way dependency is calculated needed to be reviewed. We will continue to monitor and support the service.

We informed Fife 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

Redmill Nursing Home, Bathgate

Redmill Nursing Home is registered to provide care to 68 older people. The provider is HC-One Limited.

We carried out an initial inspection of the service with Healthcare Improvement Scotland and NHS Lothian between 21 and 28 October, the findings of which were outlined in the report laid before parliament on 11 November. We completed a further inspection of the home on the 19 November with Healthcare Improvement Scotland and NHS Lothian and outlined our findings in the report laid before parliament on 12 December. We carried out a further inspection of the service on 21 January with Healthcare Improvement Scotland and outlined our findings in the report laid before parliament on 3 February.

We inspected the home on 24 May to follow up on improvements.

People were well supported to maintain contact with family and relatives, in line with Scottish Government Open with Care guidance. We observed kind interactions between staff and residents. The mealtime experiences for people had improved. Staff supported people to eat and drink and there was independent access to fluids. Records about the evaluation of residents' fluid intake could be improved.

A training programme was in place and most staff had completed training in infection prevention and control, Covid-19, palliative care and food and nutrition. The provider had developed a competency framework to assess staff skills and knowledge.

We found some progress in the implementation of infection prevention and control practice. This improvement needs to be sustained and further developed to ensure consistent practice in waste disposal, hand hygiene and cleaning of equipment.

A new leadership team was recently appointed, and staff were positive about the impact of this change. The new team need some time to embed and establish improved practice.

We will undertake a further visit to ensure that the required improvements are fully implemented.

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

Evaluations

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

Drummohr Nursing Home, Musselburgh

Drummohr Nursing Home is 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 Lothian, the findings of which were outlined in the report laid before parliament on 10 June 2020.

We made a further visit to the service on the 30 April, the findings of which were outlined in the report laid before parliament on 12 May.

We carried out an unannounced visit to the home on 24 May to follow up on the improvements that were required in relation to infection prevention and control. Progress had been made in response to our concerns, but the requirements had not been met. The provider did give a commitment to making further improvements.

The cleanliness and condition of communal rooms and care equipment had improved. A process was in place for replacement of care equipment and for the longer-term refurbishment of the home. Treatment rooms and communal rooms were tidier which meant that they could be cleaned more effectively.

Quality assurance processes were in place and should be improved to include the cleaning of individuals rooms and belongings, so that people experience an environment that is well looked after.

Additional training had been provided for staff and we observed improved staff practice in the use of PPE and hand hygiene. As a result of additional PPE stations, staff had easy access to the protective equipment they needed to reduce the risk of transmission of infection. There were more infection control champions who had a good overview of staff practice.

Staff were available and 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.

Visiting was taking place in line with Scottish Government Open with Care guidance.

We will undertake a further visit to monitor progress.

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

Evaluations

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

Rutherglen Care Home, Glasgow

Rutherglen care home is registered to provide a care service to a maximum of 225 older people. The provider is Advinia Care homes Limited.

We carried out an unannounced visit to this care home on 24 and 25 May. We identified serious concerns relating to the cleanliness of the environment, furnishings and equipment, including access to sufficient PPE. Not all staff demonstrated an understanding or knowledge of infection prevention and control measures including the correct use of PPE or the safe disposal of domestic and clinical waste.

We issued a letter of serious concern on 25 May, detailing immediate action the service was required to take.

We returned to the home on 28 and 31 May to follow up on the letter of serious concern and complete an inspection.

We found there had been improvements in relation to cleanliness, infection prevention and control. The requirements identified in the letter of serious concern had been met.

Immediate action had taken place, the premises had been cleaned and mattresses, furnishings and equipment had been purchased and replaced. There was a sufficient supply of PPE and staff were wearing PPE correctly. There were appropriate systems in place for the disposal of domestic and clinical waste.

There were sufficient staff available, and we observed kind and caring interactions with people experiencing care. There was evidence of good links with external professionals for advice and support.

We identified the need to improve how peoples' care and support was planned and reviewed, particularly in relation to how staff supported people with meaningful activity to promote exercise and alleviate feelings of boredom and isolation.

Indoor visiting had commenced, and the service was supporting meaningful contact in the home by following Scottish Government Open with Care guidance.

We are concerned about the service's ability to sustain safe infection prevention and control practice as well as management oversight of quality assurance and have issued a requirement to ensure standards are monitored and maintained.

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 7.1 People's health and wellbeing – Adequate

QI 7.2 Infection prevention and control practices – Weak

QI 7.3 Staffing arrangements – Adequate

Ailsa Craig, Glasgow

Ailsa Craig is a care home registered to provide care for up to 90 older people. The provider is HC One Oval Limited.

We carried out an unannounced inspection of the care home on 25 and 26 May.

People living in the care home experienced meaningful and stimulating activities to support physical and mental wellbeing. The introduction of indoor visiting from relatives was in line with Scottish Government Open with Care guidance and had further enhanced people's morale.

We observed kind and caring interactions between staff and residents. Staffing arrangements were appropriate, and people were supported by experienced workers who knew their needs well. There was also regular joint working with external health professionals. This resulted in positive health outcomes in areas such as nutrition and wound care.

Care planning was inconsistent, and we identified gaps in important information related to stress and distress. Further staff training in this area is needed along with person centred approaches to personal planning. The quality assurance process in this area also requires improvement to further improve people's experiences.

An enhanced cleaning schedule ensured the care home was clean, tidy, and free of clutter. There was an effective system for laundry and waste to reduce the risk of infection. Staff had access to ample PPE which was stored appropriately around the service. On-going training and staff observations promoted good standards of infection prevention and control around the home.

We informed Glasgow health and social care partnership about 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 7.2 Infection prevention and control practices – Good

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

Quality indicator (QI) evaluations:

QI 1.1 People experience compassion, dignity and respect – Good

QI 1.2 People get the most out of life – Good

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

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

Ashgill Care Home, Glasgow

Ashgill care home is registered to provide care to a maximum of 60 older people. The provider is Ashgill Care Home Limited.

We carried out an initial unannounced inspection of the service on 5 and 6 May, the findings of which were outlined in the report laid before parliament on 26 May. We completed a further unannounced visit to the home on 25 May to follow up on the improvements that were required in relation to infection prevention and control practice and quality assurance systems.

We found improvements in the cleanliness of the environment and equipment used by people. Quality assurance systems for infection prevention and control had improved and showed effective monitoring of the environment and staff practice. Staff had a better understanding of when to report notifications to the Care Inspectorate.

The requirements identified at the last inspection had been met.

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

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.

We carried out an initial inspection of the service on 4 May, the findings of which were outlined in the report laid before parliament on 12 May. We completed a further visit to the home on 26 May to follow up on the improvements that were required.

At the previous inspection we had concerns about the cleanliness of mattresses. We asked the manager to conduct a full audit and to take appropriate action where required. We also advised the manager that the quality of information in care plans needed to improve to ensure sufficient detail to inform staff practice.

At our visit on 26 May we saw that the manager had introduced a mattress audit and mattresses were clean and mattress covers were intact. There had been some improvement in care plans however more time was required to make further improvement to the information in care plans.

Visiting was being progressed in line with Scottish Government Open with Care guidance and Covid-19 guidance. People were receiving visitors in the home as well as enjoying outings in the community.

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

Evaluations

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

Louisebrae, Perth

Louisebrae is a care home registered to provide care to 61 older people. The provider is Mead Medical Services Limited.

We carried out an unannounced inspection of the care home on the 26 and 27 May.

We observed kind and compassionate interactions between people living in the service and staff. Care staff were familiar with people's care and support needs.

Limited activities were taking place during our visits. We asked the service to ensure a range of activities were offered to people that were meaningful to them and linked to their individual preferences and interests.

We did see some improvements made in people's personal plans, however, these needed to be more person centred. There was good evidence of links to other health professionals to ensure people's health and wellbeing were maintained.

Arrangements were in place to ensure families were kept updated about their relatives changing health and care needs. The home had reopened to indoor visiting in line with Scottish Government Open with Care guidance.

The service was visibly clean and well kept. Staff had been trained in infection prevention and control. Communal areas had been adapted to maintain social distancing. PPE stations were visible throughout the home but were not always fully stocked. We asked the manager to ensure these were regularly checked to maintain sufficient stock levels. Hand sanitiser was easily available in wall mounted dispensers which were visible throughout the home.

A new manager had been appointed since our last inspection and was working to improve communication and quality assurance throughout the home.

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

Evaluations

Overall evaluation for key question 7 'How good is out 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

West Park Care Home, Glenrothes

West Park Care Home is registered to provide care to 38 older people. The provider is West Park House Ltd.

We carried out an 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 visit to the home between 26 and 28 May.

We observed kind and compassionate interactions between people. Staff were familiar with people's needs and preferences. People were able to move freely around the home and were supported to remain active.

People had been supported to maintain contact with family and friends through phone calls and other technology. People were by this time enjoying visits in their own rooms in line with Scottish Government Open with Care guidance. Feedback from families was very positive.

Staff were knowledgeable about the signs and symptoms of Covid-19 and infection prevention and control. Staff knew people well and had good information to meet people's needs and care for them safely. Access to external healthcare professionals was good and details of their input was clearly documented in care plans.

The care home was clean and clutter free, yet homely. There were good systems for cleaning and infection prevention and control, and we observed safe staff practices. Improvements were planned for the laundry room to help prevent the spread of infection. Enhanced cleaning schedules and robust monitoring systems had been introduced since the previous inspection. Cleaning and decontamination of reusable equipment was in line with guidance. PPE supplies were readily available and used in line with guidance.

There were enough staff to meet people's health and care needs. There was a staffing contingency plan to help manage staff shortages. Staff described feeling valued and well supported. They were empowered to make decisions that had positive health outcomes for people.

We have informed Fife health and social care partnership who will provide support to the service.

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 - Good

QI 7.2 Infection prevention and control practices - Good

QI 7.3 Staffing arrangements – Good

Glenlivet Gardens Care Home, Glasgow

Glenlivet Gardens care home is registered to provide care for 56 older people. The provider is JSL Care Ltd.

We completed an unannounced inspection of the home on 26 May.

We observed kind and caring interactions between staff and residents and staff were available in sufficient numbers to meet people's needs. Staff were proactive in the management of people's health needs and sought support from health partners where appropriate.

Comprehensive care plans guided staff, however, plans and reviews should be more outcome focused to ensure that people are being supported with the things that are important to them. Relatives provided positive feedback about the care of their relatives. Indoor visiting was being facilitated in line with Scottish Government Open with Care guidance, albeit tentatively.

We found quality assurance systems effecting positive outcomes in relation to infection prevention and control management.

There were sufficient supplies of PPE and staff were using this appropriately. Enhanced cleaning schedules were in place and housekeeping staff were aware of infection prevention and control practice. Laundry procedures were well managed. The home was clean and free of clutter and odour.

Staff said that they were well supported, morale was good and there was visible leadership.

We shared our finding with Glasgow City health and social care partnership.

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 – Good

QI 7.2 Infection prevention and control practices – Good

QI 7.3 Staffing arrangements – Good

Wheatlands, Bonnybridge

Wheatlands is a care home registered to provide care for 60 older people. The provider is Balhousie Care Limited.

We carried out an unannounced inspection of the service on 26, 31 May and 1 June, in response to a complaint. We will report on the outcome of the complaint in line with our complaint processes.

People were cared for by staff who were familiar with their needs and preferences, and we observed kind and warm interactions. Visiting was taking place in line with Scottish Government Open with Care guidance. The home had links with other health professionals, most of whom had resumed visiting the home in person.

The staffing arrangements did not always fully meet the needs of people receiving care in the service. The assessment of staffing levels did not consider the recent risk assessment to keep people safe while awaiting the replacement of the nurse call system. The provider must ensure there are sufficient staff to be certain of the best care outcomes for people.

We identified concerns with infection prevention and control practice in the home.

New staff had not received relevant training as part of their induction. Training needed to be re-assessed for existing staff particularly around the use of PPE, cleaning products and processes to help prevent the spread of infection.

The care home environment was in a very poor state of repair which compromised effective cleaning of surfaces, equipment and frequently touched areas. The provider responded to our concerns and brought forward their refurbishment plan which had been delayed due to the pandemic.

We informed Falkirk 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

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?' – Weak

Quality indicator (QI) evaluation:

QI 3.3 Staffing levels and mix meet people's needs, with staff working well together – Weak

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

Quality indicator (QI) evaluations:

QI 4.1 People experience high quality facilities - Weak

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

Quality indicator (QI) evaluation:

QI 5.2 Carers, friends and family members are encouraged to be involved – Good

Bridge View House Nursing Home, Dundee

Bridge View House Nursing home is registered to provide care to a maximum of 43 people. The provider is Sanctuary Care Limited.

We carried out an inspection of the nursing home on 17 June 2020 and issued a letter of serious concern to the provider on the same date. We visited the service again on 22 June to follow up on this. Our findings were outlined in the report laid before parliament on 8 July 2020.

We completed an inspection of the home on 27 May 2021.

There were sufficient staff available to meet people's needs and a good variety of activities being provided. Care plans were clear and had been reviewed within necessary timescales. There was good evidence of links to other health professionals to ensure people's health and wellbeing were maintained.

Records showed that staff had completed the required training in relation to infection prevention and control.

There had been improvements in the supervision of staff, support over mealtimes, and quality assurance processes. There remained some environmental improvements to be carried out, particularly in relation to access to the garden area for residents.

The service had fully implemented Scottish Government Open with Care guidance and feedback from families was positive. The environment was clean and well-maintained. We identified a need to improve laundry management.

We informed Dundee 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 service 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 control practices – Adequate

QI 7.3 Staffing arrangements – Good

Nightingale House Ayrshire Limited, Cumnock

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

We carried out an initial inspection of this service on 1 March with Healthcare Improvement Scotland. We returned on 25 March for a follow-up visit and the service was given extra time to meet requirements made. We completed a further inspection on 8 April, the findings of which were outlined in the report laid before Parliament on 14 April.

We carried out an inspection of the service on 27 and 28 May.

During this inspection we found that improvements identified at previous inspection visits had not been sustained or addressed. We had significant concerns in relation to the standard of cleanliness/maintenance of the environment and equipment, infection prevention and control practices, management, leadership and governance.

Overall, management oversight of the care home environment and staff practice was poor. Several servicing requirements for equipment throughout the home had not been addressed. The overall cleanliness and infection prevention and control procedures were lacking, with previously identified problems not being suitably addressed.

Despite our significant concerns we continued to observe staff delivering support with care and compassion. Visiting was taking place in line with Scottish Government Open with Care guidance.

We served an improvement notice on 2 June detailing the improvements required.

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

We will undertake a further visit to follow up on the improvements required.

We reviewed the evaluations for this care home based on our findings. 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?' – Weak

Quality indicator (QI) evaluations:

QI – 7.2 – Infection prevention and control practices - Weak

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

Quality indicator (QI) evaluations:

QI – 1.1 – People experience compassion, dignity and respect – Adequate

QI - 1.2 – People get the most out of life – Weak

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

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

Quality indicator (QI) evaluations:

QI – 2.2 – Quality assurance is well led - Weak

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

Quality indicator (QI) evaluations:

QI – 4.1 – People experience high quality facilities - Weak

Earlsferry House Care Home, Leven

Earlsferry House care home is registered to provide care for 26 older people. The provider is Earlsferry House Care Limited.

We carried out an unannounced inspection of the care home on 31 May. We returned to the service on 2 June, to follow up on areas of immediate concern.

When we visited on 31 May we found that people were able to have regular contact with family and friends. The service was moving forward with visiting but were not yet fully compliant with Scottish Government Open with Care guidance.

The staff team was responsive to people's wellbeing needs and families reported being very happy with the care provided. People living in the home were supported by care staff who were familiar with their choices and preferences. Care plans were person-centred and had sufficient detail to enable staff to meet people's needs.

A homely environment was provided throughout the service, however some attention to maintenance was required in a number of areas. We identified some food preparation areas, food storage and catering equipment which were not clean. Some care equipment and furnishings were not clean. These presented an infection risk. We informed the manager of our concerns and asked for immediate action to be taken.

PPE supplies were good and available for staff throughout the home. However, PPE was not always disposed of correctly. Staff did not always practice good hand hygiene when supporting people at mealtimes. Laundry systems were compromised by equipment breakdown at the time of the inspection and required immediate attention.

Staffing levels were adequate, and we saw consideration being given to deployment of staff during busy times.

On return to the service on 2 June we saw improvement in the standard of hygiene in the catering area which had caused us concern. Care equipment was clean, and PPE was being disposed of correctly. Laundry systems continued to be compromised by equipment breakdown and alternative solutions were being sought.

We informed Fife 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 - Weak

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 -Good

QI 1.2 People get the most out of life -Adequate

QI 1.3 people's health benefits from their care and support -Good

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

Quality indicator (QI) evaluations:

QI 5.2 Carers and family members are encouraged to be involved in delivering care and support – Adequate

Thornhill House, Wishaw

Thornhill House is a care home registered to provide care to 22 older people. The provider is Dr Talib Alkureishi & Mrs Elizabeth Jasmine Alkureishi, a Partnership.

We carried out an unannounced visit to the care home on 1 June 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, but more attention to detail was needed in some areas. Management audits were in place, although these could have been more effective. Enhanced cleaning was in place for touch points and communal areas. Some equipment was being shared between people which increased the risk of infection. Additional equipment was purchased during our visit to reduce this risk.

There were sufficient supplies of PPE and staff used this appropriately. However, there was an overuse of PPE at mealtimes and moments for staff hand hygiene were missed. All staff had received training in Covid-19 and infection prevention and control.

There were enough staff available to meet people's needs and there was a contingency plan to help manage staff shortages. We saw that staff worked well together and supported each other.

Staff were compassionate and respectful towards people experiencing care. Indoor visiting was being supported safely, although this was mainly in communal areas. People were supported to physically distance in lounge areas but were not currently using the dining room for their meals. We suggested a review of the mealtime experience for people.

We informed North 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:

7.2 Infection prevention and control practices – Adequate

Moss Park, Fort William

Moss Park care home is registered to provide care to 34 older people and 5 adults. The provider is HC-One Ltd.

We carried out an unannounced inspection of the care home on 27 May.

There were not enough staff on duty to provide safe good quality care and as a result, people experienced stress and distress. We issued a letter of serious concern on 28 May requiring an immediate improvement in staffing levels.

When we followed up on the 1 June, people were benefiting from increased staff numbers during the day and overnight.

Increased staff numbers will remain in place while the service works with the multi-disciplinary team to review people's needs and identify the right staffing levels and skill mix.

People living in the home were supported to stay in touch with family and friends. The service followed Scottish Government Open with Care guidance. People were enjoying indoor visits and some outings.

Care plans were not person-centred and did not accurately reflect people's health and care needs. Staff did not have clear guidance on how to support people, particularly in times of distress. Environmental restraint was being used without the necessary safeguards to ensure it was in people's best interests.

Some equipment and furnishings were not clean, and parts of the home were malodorous. Areas of the home needed refurbishment and redecoration.

While we observed staff using PPE correctly and there was access to PPE, this needed to be improved by increasing the numbers of PPE stations. Access to clinical waste bins also needed to be improved. Staff were aware of guidance around infection prevention and control and had completed a range of relevant training.

We informed NHS Highland 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 –Weak

QI 7.2 Infection prevention and control practices –Weak

QI 7.3 Staffing arrangements –Weak

Archview Lodge Care Home, Dalkeith

Archview Lodge care home is registered to provide care to 76 older people. The provider is Barchester Healthcare Ltd.

We carried out an unannounced inspection of the care home on 1 February with Healthcare Improvement Scotland, the findings of which are outlined in the report laid before parliament on 17 February.

We carried out a further inspection on 2 June to follow up on the improvements required in relation to personal planning and infection prevention and control.

Families were kept informed about their relatives' care, and feedback from families was positive. Social distancing was being managed sensitively and people were supported to move around safely. Visiting was facilitated well, and people benefited from seeing those who were important to them.

People were supported by staff who knew them well and this promoted good health outcomes. Residents were provided with regular opportunities for stimulation and meaningful engagement.

Personal plans had improved and contained up to date information to identify people's needs and wishes. However, there was an inconsistent approach to anticipatory care planning (ACP). The health and social care partnership were supporting the staff to improve ACP.

Infection prevention and control had improved. New equipment had been purchased and the appropriate cleaning solutions provided in line with government guidance. PPE supplies were good and were available for staff. The manager was increasing direct observation of staff practice to ensure that standards of practice were monitored and maintained.

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

We reviewed the evaluations for this care home based on our findings at this inspection and added two further key questions. 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?' – Good

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 – Good

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

Quality indicator (QI) evaluations:

QI 1.3 Peoples health Benefits from their care and support – Good

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

Quality indicator (QI) evaluations:

QI 5.2 Families and carers are involved – Good

Thornwood Hall, Glasgow

Thornwood Hall is a care home registered to provide care to 23 older people. The provider is Burnside Care Homes Limited.

We carried out an unannounced inspection of the service on 5 May, the findings of which were outlined in the report laid before parliament on 26 May.

We completed a further unannounced visit to the home on 2 June to follow up on improvements that were required in relation to staffing arrangements, the cleanliness of the environment and care equipment, and the management of laundry.

When we visited on 2 June there were sufficient staff on duty to meet the needs of people experiencing care. However, we remained concerned about the skills mix of staff during some shifts. The service was actively recruiting staff and we provided further guidance on the importance of prioritising this, including timescales.

The home was clean and tidy with good cleaning routines in place. Equipment was clean and well-maintained. Effective management oversight was in place to monitor and sustain improvements in practice. Laundry management had improved and complied with current guidelines. Some maintenance work of the laundry setting had been undertaken and a refurbishment plan created.

Visiting was taking place in accordance with Scottish Government Open with Care guidance.

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

We will undertake a further visit to monitor progress.

We reviewed the evaluations for infection prevention and control practices 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

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 home on 24 March, the findings of which are outlined in our report laid before parliament on 31 March. We carried out a further inspection on 4 May and outlined our findings in the report laid before parliament on 12 May.

Following an inspection by the Scottish Fire and Rescue Service, they issued an enforcement notice under their regulations to the provider on 25 May. Because of the significant breach of fire regulations, we issued our own letter of serious concern on 28 May. The letter required improvements in staffing, training and maintenance to make sure people were safe.

We undertook an unannounced inspection of the care home on 1 June to follow up on the improvements required in our letter of serious concern. The health and social care partnership had supported the provider and the short-term improvement required had been made.

However, given the deficiencies identified by the Scottish Fire and Rescue Service and the potential risks to people if they are not addressed, we issued an improvement notice on 4 June. The notice requires improvements to be made which will ensure people experience a safe environment. It also requires that there be enough staff with the correct skills to promote people's safety, especially in the event of a fire in the home.

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

We will work with the Scottish Fire and Rescue Service and undertake further visits to monitor progress.

We reviewed the evaluations for infection prevention and control practices 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?” - Weak

Quality indicator (QI) evaluations:

QI 7.1 People’s health and wellbeing – Weak

QI 7.3 Staffing arrangements - Weak

Overall evaluation for key question 2 “How good is our leadership?” - Weak

Quality indicator (QI) evaluations:

QI 2.2: Quality assurance and improvement is well lead – Weak

Overall evaluation for key question 4 “How good is our setting?”

Quality indicator (QI) evaluations:

QI 4: People experience high quality facilities – Weak

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