

Balhousie Clement Park Care Home Service

4 Clement Park Place
Dundee
DD2 3JN

Telephone: 01382 610 960

Type of inspection:
Unannounced

Completed on:
27 January 2022

Service provided by:
Balhousie Care Limited

Service provider number:
SP2010011109

Service no:
CS2010273694

About the service

Balhousesie Clement Park is a purpose built care home. It is located in the residential area of Lochee Dundee, close to bus services, local shops and schools. The service has been registered since 30 November 2010.

Clement Park offers a range of support, including residential, nursing and respite care. It's stated aim is to "provide a dignified and sensitive level of care at all times."

Accommodation is provided over two floors and divided into four distinct units: Discovery, Keillor, Cox and Thomson. Each unit has its own dining and lounge area and all 49 bedrooms are single occupancy with ensuite facilities. There is lift access to the upper floor. Outside there is a pleasant and secure garden area that is accessible from the ground floor units.

What people told us

We spoke informally to people living at Clement Park and spent time observing how staff and people interacted to help us evaluate the experiences of people who cannot always tell us about their care. We saw kind, compassionate and patient interactions and people responded positively.

We also spoke by telephone to relatives. People spoke positively about the staff who provide care.

People felt that there were not always enough staff available to support their relative.

There was also some feedback about the recent management changes:

'It used to be a lovely place but has suffered from management changes which has led to instability'

'Normally management is reliable, but currently manager is off sick' and 'substitute manager is in. Quality of care is just the same.'

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How good is our care and support during the COVID-19 pandemic?	3 - Adequate
--	--------------

Further details on the particular areas inspected are provided at the end of this report.

How good is our care and support during the COVID-19 pandemic?

3 - Adequate

7.1 People's health and wellbeing are supported and safeguarded during the COVID-19 pandemic.

The focus of this inspection was to evaluate the care and support which people have received during the Covid-19 pandemic. We considered whether people's rights had been respected and if their physical and mental health had been promoted during the covid-19 pandemic. We found that the service was performing

at an adequate level with strengths just outweighing weaknesses.

Personal plans should reflect people's wishes and be reviewed and updated to reflect their changing needs. People's personal plans contained details to guide their care and included Covid-19 planning. We found that staff were knowledgeable about possible symptoms of Covid-19 and they knew who they should discuss concerns with. There was evidence of input from external professionals in respect of wider health matters, to support people with health issues.

Anticipatory care plans were in place, which reflected people's wishes for end of life care and involved discussions with relatives. This information was clear and accessible. Staff were knowledgeable about who they should consult.

People were supported and encouraged with their daily food and fluid intake. Plans indicated what action was required in response to health concerns. We found that staff were compassionate and respectful in how they supported people.

The service was following the current guidance for visiting, in consultation with local health protection team for adult care homes where there is a Covid-19 outbreak. People had received essential visits as needed and the service was returning to open visiting. Staff were updated about changes to guidance, and staff clearly understood this guidance.

Feedback from people's relatives about communication was generally good, although several recent changes in the service's manager has resulted in a lack of continuity. One relative told us, 'There is good communication. No problems, and the Facebook page is good too.' Another person said that, 'communication from management could be better, I didn't get told anything.'

Support plans identified that people need to be supported to remain active, however we found that there was limited scope for staff to meet this need as a result of staffing levels. The service is already working towards a requirement in relation to this as well as another in relation to monitoring of care and treatment and we will report on these at our next inspection (see requirement 1 and 2).

Medication administration records in some cases were not completed to a suitable standard. This meant that people could not always be confident that medication is always given safely. We have made a requirement in respect of medication (see requirement 3).

7.2 Infection control practices support a safe environment for both people experiencing care and staff.

During an outbreak of Covid-19 the application of strict infection control procedures is paramount to make sure the risk to people's safety is minimised. Public Health Scotland has issued practice guidance that all social care providers must follow to protect the safety and wellbeing of people experiencing care as well as all staff.

We evaluated how well infection control practices support a safe environment for people experiencing care and support. We found the service was performing at an adequate level. Where there are some strengths, it is important the provider builds on these strengths, to increase the likelihood of people experiencing positive experiences and outcomes.

People should expect to live in an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment. Communal areas, corridors and lounges were generally clean and free from clutter. Mattress checks were being carried out routinely and, where identified, mattresses were replaced. However, we found some items that required replacement including a mattress protective cover that was damaged, a wheelchair seat pad that was perished as well as dining chairs whose seat pads were perished and ripped. The damage to these items meant they could not be cleaned effectively and increased the risk of contamination.

Although the service had quality assurance processes in place in relation to infection prevention and control, these processes were not being used effectively to ensure that environmental concerns and practices were identified and addressed to reduce the risk of harm to people. A requirement is made (see requirement 4).

We found the service had good supplies of Personal Protective Equipment (PPE) and staff knew how to access it. The PPE was situated at the entrance of the home and at many PPE stations. PPE includes the wearing of masks by staff and visitors in all parts of the home. We saw staff and visitors wearing masks appropriately to reduce the risk of transmission of airborne infections. We found some waste bins without signage or appropriate bags; the provider rectified this during the inspection to ensure that staff could dispose of used PPE safely.

Staff performed hand hygiene at the key points of providing care and when entering or exiting different areas of the home. Staff performed hand hygiene before and after providing care to people, before tasks such as serving meals and after touching frequently touched surfaces. This is required to break the transmission path between people.

There was a good supply of cleaning equipment, products, and solutions (including chlorine releasing agents) which were suitable for a range of cleaning purposes and used according to guidelines. However, we found potentially harmful cleaning products in an unlocked sluice as well as accessible on a cleaning trolley. This presents a risk to the people living in the service. Cleaning schedules had been put in place in accordance with ARHAI (Antimicrobial Resistance and Healthcare Associated Infection) Safe Management of the Care Environment, however we could not be confident that staff understood and carried out cleaning in accordance with the specifications (see requirement 4).

Laundry management and systems to collect and distribute laundry were in line with current guidance. Laundry staff were knowledgeable about the ways in which laundry could be managed to reduce risk.

Government guidelines and processes provide regular testing for staff. The availability of this testing was communicated to staff and there were opportunities each week for staff to be tested.

7.3 Staffing arrangements are responsive to the changing needs of people experiencing care.

Staffing arrangements, in relation to the changing needs of people experiencing care, were adequate. Where there were some strengths, it is important the provider builds on these strengths, to increase the likelihood of people having positive experiences and outcomes.

People should have confidence in staff because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes. The service has been under significant staffing pressures for several months that had impacted on both leadership and continuity for the staff team. Several key posts are vacant and there have been two temporary managers during this time.

We acknowledge the widespread staffing crisis within social care and the significant challenges this presents to care providers. The provider advised they were trying to find ways to try to manage these challenges. A requirement is made (see requirement 5).

The service had plans in place to ensure that staffing levels were right to meet people's needs. Although we were unable to establish that a contingency plan was in place to help maintain safe staffing levels, we heard how the provider had responded to staff shortages as a result of isolating staff and staff vacancies. Agency staff had been used where available, staff had done additional shifts and some staff had covered from another home in the group. We advised the service to put in place an accessible contingency plan to support staff in the future and ensure that people's care needs are prioritised and met.

Many people were being supported in their rooms; this was because at the time of the inspection there was an outbreak of Covid-19 within the home. Staff were working hard to meet people's needs. Buzzers were being responded to promptly and we saw staff engage sensitively with people, at a pace that was right for them when they came out of their room.

A training programme was in place for core and mandatory training. Although the majority of staff had high levels of completion, there was still a significant number of staff who had failed to complete this training and we were advised that this was being addressed individually. It is essential that all staff complete the core and mandatory training to ensure they have the necessary skills and knowledge to undertake their role and keep themselves and others safe. The provider had worked with the local health and social care partnership care home liaison team to plan a training programme to meet identified development needs.

A system had recently been put in place for observing staff practice to assess their competence and knowledge in infection control and Covid-19. We would recommend competency assessments continue to be undertaken to ensure ongoing compliance with safe practice and identified this as an area for improvement (see area for improvement 1).

Staffing arrangements in relation to the changing needs of people experiencing care during the Covid-19 pandemic were assessed as adequate. A performance of adequate applies where strengths may still have positive impact however the likelihood of achieving positive outcomes is reduced as key areas of performance need to improve.

Requirements

1. In order to improve people's physical and mental wellbeing, the service provider must, by 11 February 2022, review the way in which activities are organised and provide sufficient staff to support people to engage in them. There should be a focus on the quality and amount of physical and social activity made available for people, within and outside the home.

This is to comply with Regulation 15(a) - Staffing, of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/2010)

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I can choose to have an active life and participate in a range of recreational, social, creative, physical, and learning activities every day, both indoors and outdoors' (HSCS 1.25).

2. In order to ensure the health and wellbeing of people using the service, by 11 February 2022, the provider must ensure that people are protected by improving the assessment, treatment and monitoring of care. This includes, but is not restricted to, hydration and wound management.

This is to comply with the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011/210 Regulation 4 (1) and Regulation 5 (1).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24).

3. By 25 February 2022 the provider must ensure that people are safe from harm by administering medication safely. In particular:

- a) ensure that each person is given the right support with their medication as identified in their support plan;
- b) ensure that medication administration records are completed accurately and;
- c) ensure monitoring arrangements are responsive to any errors in the administration or recording of a people's medication.

To do this the providers must as a minimum:

- a) ensure staff receive the right training to administer medication safely;
- b) implement a system to audit and review the safe administration of medication.

This is in order to comply with Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'My care and support meets my needs and is right for me' (HSCS 1.19); and
'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

4. By 25 February 2022, the provider must ensure that people experience care in an environment that is safe and minimises the risk of infection.

To do this the provider must, at a minimum:

- a) ensure that the internal premises, furnishings, and equipment are safe, clean, and tidy;
- b) ensure that all staff understand and implement ARHAI (Antimicrobial Resistance and Healthcare Associated Infection) Scotland's, 'Safe Management of the Care Environment' standard operating procedures; and
- c) ensure that all harmful chemicals are stored securely.

This is to comply with Regulation 4(1)(a) and (d) and Regulation 10(2)(b) and (d) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment' (HSCS 5.22).

5. By 25 February 2022, the provider must ensure there are enough suitably qualified and competent persons working in the care service in such numbers as are appropriate for the health, welfare, and safety of service users.

To do this the provider must, at a minimum:

- a) assess support needs of each person, including risks, stress and distress, end of life care and any other considerations as well as identify staff availability and anticipated non direct care hours;
- b) ensure that a robust, accessible contingency plan is in place and accessible to key staff to implement as necessary; and
- c) ensure that all staff have undertaken the training necessary for their role.

This is to comply with Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(a) - A provider must take proper provision for the health, welfare, and safety of service users.

This is also to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14); and
'My needs are met by the right number of people' (HSCS 3.15).

Areas for improvement

1. To ensure staff maintain effective infection prevention and control practice, the provider should undertake a system to observe and monitor staff practice in infection prevention and control. Where deficits or breaches of good practice are seen, a plan of action should be implemented to support improvement.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their organisational codes' (HSCS 4.14).

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

Requirements

Requirement 1

In order to improve people's physical and mental wellbeing, the service provider must, by 11 February 2022, review the way in which activities are organised and provide sufficient staff to support people to engage in them. There should be a focus on the quality and amount of physical and social activity made available for people, within and outside the home.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state that:

'I can choose to have an active life and participate in a range of recreational, social, creative, physical, and learning activities every day, both indoors and outdoors.' (HSCS 1.25); and in order to comply with Regulation 15(a) - Staffing, of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/2010)

This requirement was made on 22 July 2021.

Action taken on previous requirement

We carried out a Covid focused inspection during an outbreak prior to the date for improvement therefore we did not assess progress on this requirement. We will assess this at our next inspection.

Not assessed at this inspection

Requirement 2

In order to ensure the health and wellbeing of people using the service, by 11 February 2022, the provider must ensure that people are protected by improving the assessment, treatment and monitoring of care. This includes, but is not restricted to, hydration and wound management.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state that:

'Any treatment or intervention that I experience is safe and effective.' (HSCS 1.24); and in order to comply with the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011/210 Regulation 4 (1) and Regulation 5 (1).

This requirement was made on 22 July 2021.

Action taken on previous requirement

We carried out a Covid focused inspection during an outbreak prior to the date for improvement therefore we did not assess progress on this requirement. We will assess this at our next inspection.

Not assessed at this inspection

Complaints

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

Detailed evaluations

How good is our care and support during the COVID-19 pandemic?	3 - Adequate
7.1 People's health and well being are supported and safeguarded during the COVID-19 pandemic	3 - Adequate
7.2 Infection control practices support a safe environment for people experiencing care and staff	3 - Adequate
7.3 Staffing arrangements are responsive to the changing needs of people experiencing care	3 - Adequate

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iarrrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.