

Craigieknowes Care Home Service

Carlton
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Type of inspection:
Unannounced

Completed on:
13 February 2024

Service provided by:
Four Seasons Health Care (Scotland)
Limited, a member of the Four
Seasons Health Care Group

Service provider number:
SP2007009144

Service no:
CS2022000400

About the service

Craigieknowes is a purpose-built care home for older people situated in a residential area of Perth, part way up a steep road. The service provides nursing, residential and respite care for up to 45 people over the age of 65. The service provides accommodation over two floors in single bedrooms with ensuite toilet and wash-hand basin. On the first floor there is a combined lounge and dining room and on the ground floor there are separate lounge and dining areas. There is access to the outside garden/patio area.

About the inspection

This was a follow up inspection which took place on 13 February 2024. The inspection was carried out by two inspectors from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection. In making our evaluations of the service we: spoke with two people using the service and spoke with four staff and management observed practice and daily life reviewed documents.

Key messages

This Inspection was undertaken in order to follow up on requirements made as a result of a Complaint Investigation.

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

Requirements

Requirement 1

The provider must make proper provision for the health, welfare and safety of people using the service. In particular, the provider must:

- a) Ensure an assessment of resident's needs is undertaken on their admission to the service with the full involvement and consultation with the resident's representative.
- b) Ensure a fall prevention care plan is in place where a risk of falls has been identified.
- c) Ensure the fall prevention care plan includes all measures required to reduce the likelihood of falls.
- d) Ensure equipment to reduce the risk of falls is provided at the point of need.
- e) Should the use of equipment require additional assessment, this is undertaken without delay.
- f) Ensure falls are subject to post fall investigation and review.
- g) Ensure information regarding falls, accidents and incidents and subsequent investigations is fully shared with the Welfare Power of Attorney when requested.

To be completed by: 03 December 2023

This is to ensure care and support is consistent with Health and Social Care Standard 1.12: I am fully involved in assessing my emotional, psychological, social and physical needs at an early stage, regularly and when my needs change.

This is in order to comply with:

Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This requirement was made on 19 December 2023.

Action taken on previous requirement

The service had taken insufficient action in response to this requirement.

We noted that some improvement work had been undertaken to improve the quality of information in care planning, however;

we did not find that the risk of residents' falling had been accurately and consistently undertaken. A newly admitted resident's risk of falling had not been accurately undertaken. The risk assessment continued to assess the risk as low, despite the resident experiencing two falls since admission. This meant that the staff team had inaccurate information relating to the risk of this resident falling. This had resulted in no care planning to ensure effective measures were in place to reduce the risk and likelihood of the resident experiencing a fall.

We noted that a resident who had a high risk of falling did not have the required equipment as detailed in the care plan. This resident should have a motion sensor in her room to detect movement, however this was not in place. This meant that preventative measures were not provided to reduce the risk of this resident falling. In addition, this resident's call alarm was not within reach meaning she had no means of summoning assistance from the staff team while in her room. There had been no consideration of alternative measures or equipment while the motion sensor was unavailable.

We did not see evidence of post fall investigations, analysis or audit to establish trends and potential causes of falls within the service. This highlighted that there continued to be a lack of oversight and quality assurance measures in relation to fall prevention.

We have expended the timescale for the requirement to be completed to 31 March 2024

Not met

Requirement 2

By 13 October 2023, the provider must support people to eat and drink safely to maintain their health and wellbeing.

To do this, the provider must, at a minimum:

- a) ensure staff receive appropriate training to recognise the choking risk indicators in older people.
- b) ensure choking risk assessments are carried out by staff who have the appropriate skills, and knowledge, required to do so.
- c) ensure appropriate referrals are made when concerns are identified.
- d) ensure an appropriate care plan is developed and put in place.

To be completed by: 13 October 2023

This is to ensure care and support is consistent with Health and Social Care Standard 1.13: I am assessed by a qualified person, who involves other people and professionals as required.

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)

An extension to this timescale has been agreed to 15 December 2023.

This requirement was made on 14 August 2023.

Action taken on previous requirement

It was pleasing to find that choking risk information sessions had been held for the staff team and advice and guidance had been provided to the catering team. Management should ensure that this learning is applied to practice and informs care delivery.

Good progress was being made with updating choking risk assessments and related care planning. Additional training has been planned to provide staff with the support they need to undertake appropriate and meaningful assessment and care planning of people's needs and how they should be met.

While we were reassured that progress was being made we are not satisfied this requirement has been fully met. We have expended the timescale for the requirement to be completed to 31 March 2024

Not met

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

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