

Harbour Care Home Care Home Service

91C High Street
Dysart
Kirkcaldy
KY1 2UQ

Telephone: 01592 650 800

Type of inspection:
Unannounced

Completed on:
8 March 2024

Service provided by:
Enhance Healthcare Ltd

Service provider number:
SP2012011938

Service no:
CS2014329901

About the service

Harbour Care Home is an established care home provided by Enhance Healthcare Ltd.

The home is registered to provide 24 hour care and support for up to 23 older people and 30 adults between the ages 25 - 65 with a physical and sensory impairment. At the time of this inspection there were 42 people living here.

About the inspection

This was an unannounced inspection which took place on 5 and 6 March 2024. The inspection was carried out by two inspectors from the Care Inspectorate. This was a follow up inspection, following up on requirements made at an inspection in August 2023, which were extended during a further inspection in December 2023. Please refer to the 'outstanding requirements' and 'outstanding areas for improvement' sections of this report for details.

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 four people using the service
- spoke with six staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

- We found auditing and oversight of medication management was supporting safer practice.
- As required medication protocols were in place.
- Quality assurance systems were significantly improved and supporting better outcomes for people living in the service.

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

Requirements

Requirement 1

By 26 February 2024, the provider must protect the health and welfare of those who use the service. In particular, you must ensure that medication is managed in a manner that is safe and protects people from risk of harm. In order to achieve this, you must ensure:

- staff are supported to be competent in the use of the medication administration and recording system.
- accurate records of medication administration are maintained.
- suitably detailed protocols are in place to inform the consistent and appropriate administration of medication that is prescribed on an 'as required basis'.
- that there is sufficient and effective oversight of medication management.

This is in order to comply with Regulations 3, 4, (1)(a), 4 (1)(b), 4(2)(b)(welfare of users) and 9, (2)(b) (fitness of employees) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience high quality support based on relevant evidence, guidance and best practice' (HSCS 4.11).

This requirement was made on 11 August 2023.

Action taken on previous requirement

We found auditing and oversight of medication management had resulted in improvement in the management of medication and meant people could receive prescribed treatments.

The service had prioritised a complete review of their ordering system to mitigate the risk of medication being out of stock. Accurate records of administration were now maintained.

Staff who are administering medication had undergone refresher training and direct observation was integral to assuring competency in administration. We found peer audit was an accepted habit resulting in discrepancies being quickly identified and managed to ensure safe day to day practice.

As required protocols were in place for all residents who may need symptom control out with their regular regime including pain management, stress and distress and epilepsy care and treatment. These protocols should continue to be reviewed to ensure they give appropriate person-centred guidance on their use and are linked to care planning and assessment.

Met - within timescales

Requirement 2

By 26 February 2024, the provider must make proper provision for the health, welfare and safety of people using the service. To do this the provider must evidence that effective quality assurance systems are in place and result in consistent good standards of care and support for people living in the home. This must include, but is not limited to:

- ensuring a continuous service improvement plan that reflects the needs and wishes of service users and the needs of the service.
- ensuring that audits are robust and effective in monitoring safe practice.
- analysis of training needs to ensure these are service user led and that staff have the right training to meet people's needs.

This is 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 environment is safe and secure' (HSCS 5.17).

This requirement was made on 11 August 2023.

Action taken on previous requirement

The service demonstrated development and implementation of quality assurance systems to monitor and evaluate people's experiences and staff skills and knowledge. We saw evidence of how these systems had improved practice. The service continues to prioritise embedding this practice and involving the whole staff team in auditing systems.

The service further evidenced a robust and dynamic improvement plan that captured the key improvements needed across the service, with action plans on how these will be met. We saw evidence of resident meetings and resident feedback being used to inform this improvement plan, supporting better outcomes.

Training plans captured core training needs for all staff, as well as the need for bespoke and person specific training, to ensure that people's needs are met, and staff are well skilled. The service should continue to develop ways to monitor and assess competency across the whole staff team.

Met - within timescales

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

To promote responsive care and ensure that people have the right care at the right time, the service provider should ensure that people have person-centred care plans in place, that offer clear guidance to support staff and are regularly reviewed. Priority should be given, but not be limited to, epilepsy care plans, pain management, bowel and continence care and anticipatory care plans.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15).

This area for improvement was made on 11 August 2023.

Action taken since then

Not assessed at this inspection. Area for improvement remains in place.

Previous area for improvement 2

The provider should engage in proactive communication with people, and their representatives, following any significant incidents occurring. This would support an open and honest learning culture where people feel included, respected, and listened to.

This is to ensure care and support is consistent with Health and Social Care Standard 4.8: I am supported to give regular feedback on how I experience my care and support and the organisation uses learning from this to improve.

This area for improvement was made on 13 December 2023.

Action taken since then

Not assessed at this inspection. Area for improvement remains in place.

Previous area for improvement 3

The provider should ensure that preferred methods of contact for representatives regarding changes to health and wellbeing are established on admission, and are reviewed, and updated as required.

This is to ensure care and support is consistent with Health and Social Care Standard 1.15: My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices

This area for improvement was made on 13 December 2023.

Action taken since then

Not assessed at this inspection. Area for improvement remains in place.

Previous area for improvement 4

The provider should ensure that cleaning processes are revised to ensure all areas of the care home are maintained. This should include, but is not limited to, communal bathrooms, and equipment such as cutlery storage and communal fridges.

This is to ensure care and support is consistent with Health and Social Care Standard 4.23: I use a service and organisation that are well led and managed.

This area for improvement was made on 13 December 2023.

Action taken since then

Significant improvements were noted to general cleanliness and tidiness of communal corridors and residents' bedrooms. Increase in housekeeping staff had positively contributed to these infection prevention and control measures.

Our inspection found some areas where attention to detail was needed, this included shower chairs, cutlery storage areas and communal fridges.

This area for improvement therefore remains in place to allow for continued improvement to the cleaning practices across the service.

Area for improvement is 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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