

# Bute House Care Home Care Home Service

Barrhill Terrace  
Cumnock  
KA18 1PT

Telephone: 07977555469

**Type of inspection:**  
Unannounced

**Completed on:**  
23 May 2024

**Service provided by:**  
Harveys Healthcare (Scotland) Ltd

**Service provider number:**  
SP2019013259

**Service no:**  
CS2019372681

## About the service

Bute House Care Home is registered to provide nursing care and support for up to 45 older people. The provider is Harveys Healthcare (Scotland) Ltd.

The home is close to the town centre of Cumnock and near to local amenities including shops and bus routes. The care home is purpose-built, with the accommodation provided over two floors and lift access between them. There are 45 bedrooms with en suite facilities. Lounge and dining facilities are located on the ground floor. The home has a small enclosed garden for people using the service.

## About the inspection

This was a follow up inspection to assess progress with meeting requirements identified at the inspection completed on 8 May 2024.

This inspection, which took place on 22 May 2024, was carried out by one inspector 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 eight people using the service and two family members
- spoke with staff and management
- observed practice and daily life
- reviewed documents

## Key messages

Staff supported people with kindness and warmth.

The management and staff teams had worked hard to meet the three requirements with a timescale for completion of 21 May 2024. This has helped improve outcomes for people living in the home.

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

### Requirements

#### Requirement 1

By 21 May 2024, the service provider must ensure that people living in the service are safeguarded and that their health, welfare, and safety needs are effectively managed and met.

In order to do this, the provider must at a minimum ensure the following,

- a) that risk assessments for nutrition, skin care and falls risk are carried out for all residents and kept up to date
- b) the outcomes of risk assessments are used to inform plans of care to manage risks effectively
- c) implement clinical governance systems to ensure that where there are indications of poor care provision and risk that action is taken promptly to address this, and a record is maintained of all improvements made.

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).

To ensure care and support is consistent with the Health and Social Care Standards which state -

'I am protected from harm because people are alert and respond to signs of significant deterioration in my health and wellbeing, that I may be unhappy or may be at risk of harm.' (3.21 HSCS).

**This requirement was made on 8 May 2024.**

#### Action taken on previous requirement

The clinical team had carried out risk assessments for everyone living in the home. This included nutrition, skin care and falls assessments. This information was being used inform care plans to direct staff about the management of identified risks.

Systems had been introduced to ensure that the outcomes of clinical risk and plans of care to minimise risk were being monitored and regularly updated. Staff involved with assessing and recording clinical care had been supported to ensure that they understood how the systems were to be applied. This helped ensure that any changes in people's health status or clinical risks would be identified early, and prompt action taken to safeguard them from harm.

Information regarding risks was being shared between teams. There were clear directions for staff recorded in care plans and communicated at shift handovers. this helped to ensure that peoples clinical needs were being managed in a consistent and agreed manner.

We saw that improvements had been made to ensure that people living in the service were safeguarded from harm and that their health, welfare, and safety needs were being more effectively managed.

### Met - within timescales

#### Requirement 2

By 21 May 2024, the provider must ensure that individuals legal rights are protected. In order to do this, the provider must at a minimum ensure:

- a) systems are put in place to record and verify the validity of Adults with Incapacity section 47 certificates and Do Not Attempt Cardiopulmonary Resuscitation (DNACPR) certificates
- b) accurate records of the legal representatives of individuals living in the service are maintained and kept up to date.

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).

To ensure care and support is consistent with the Health and Social Care Standards which state -

'My human rights are protected and promoted, and I experience no discrimination' (1.2 HSCS).

**This requirement was made on 8 May 2024.**

#### Action taken on previous requirement

There was an overview of the documents and certificates needed to ensure that people's legal rights were protected. Any documents that were to be reviewed or updated had been passed to the appropriate external health professionals to action. Documents to support information about power of attorney and guardianship were now available.

Measures were in place to ensure that the information held was reviewed regularly to assure its accuracy.

These measures ensure that individuals legal rights are protected.

### Met - within timescales

#### Requirement 3

By 15 July 2024, the provider must demonstrate that people are safeguarded and experience consistently good outcomes, and that quality assurance and improvement is well led.

In order to do this, the provider must at a minimum:

- a) implement quality assurance systems that continually evaluate and monitor service provision to inform improvement and development of the service
- b) that action plans to address issues identified are fully developed following audit

- c) ensure that actions taken are reviewed to ensure that they effectively improve outcomes for service users
- d) use the feedback from people living in the home and their families to inform service development
- e) ensure that the providers complaints policy and procedure are adhered to
- f) ensure that outcomes of audits, feedback from stakeholders and the outcome of adverse events inform a service improvement plan that is specific, measurable, achievable, relevant and time bound.

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

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

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19).

'I am supported to give regular feedback on how I experience my care and support and the organisation uses learning from this to improve' (HSCS 4.8).

**This requirement was made on 8 May 2024.**

#### Action taken on previous requirement

This requirement was not assessed during this inspection.

#### Not assessed at this inspection

### Requirement 4

By 21 May 2024, the provider must ensure that accidents and incidents are managed in a manner which safeguards people from harm.

In order to do this, the provider must at a minimum:

- a) ensure that accidents and incidents are accurately recorded
- b) ensure that risk assessments and personal plans are kept up to date in response to accidents and incidents
- c) ensure that systems are implemented to ensure that accidents and incidents are analysed for patterns and trends and the outcomes used to inform risk management
- d) ensure that Care Inspectorate guidance regarding the submission of notifications is followed.

This is to comply with Regulation 4(1) (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 benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

**This requirement was made on 8 May 2024.**

#### Action taken on previous requirement

There had been a review of the systems for recording accidents and incidents. Additional tools were available and accessible to support effective recording of accidents and incidents and any aftercare needs for the person involved.

We noted that record keeping had improved. There was a commitment from the management team to continue to support staff with developing their knowledge of record keeping and risk management.

An audit tool had been sourced to ensure that incidents and accidents were assessed monthly for patterns and trends. This would help staff teams to learn from adverse events and ensure safe outcomes for people living in the home.

There was evidence that risk assessments and care plans had been updated following recent accidents. This ensured that staff had the relevant information to support the person and safeguard them from further risks.

Issues that needed to be notified to Care Inspectorate were being submitted in line with current guidance.

**Met - within timescales**

#### Requirement 5

By 15 July 2024, the provider must ensure that safer recruitment practices are followed in line with the providers policy and current best practice guidance. This includes but is not restricted to ensuring that references are sought from previous or current employers prior to someone commencing employment.

This is to comply with Regulation 9(1)(a) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI2011/210).

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

'I am confident that people who support and care for me have been appropriately and safely recruited' (HSCS 4.24).

**This requirement was made on 8 May 2024.**

#### Action taken on previous requirement

This requirement was not assessed during this inspection.

**Not assessed at this inspection**

## Requirement 6

By 15 July 2024, the provider must ensure that people experience a high-quality care home environment. To drive improvement of the care home environment, the provider must at a minimum carry out a full assessment of the environment of the home internally and externally and use the outcome to inform an environmental improvement plan that is specific, measurable, achievable, relevant and time bound.

The improvement plan should be shared with the Care Inspectorate.

This is to comply with Regulation 10 (2)(a)(b)(d) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI2011/210).

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

'My environment is relaxed, welcoming, peaceful, and free from avoidable and intrusive noise and smells' (HSCS 5.18).

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

**This requirement was made on 8 May 2024.**

### Action taken on previous requirement

This requirement was not assessed during this inspection.

### Not assessed at this inspection

## Requirement 7

By 15 July 2024, the provider must ensure that personal plans clearly set out how individuals health, welfare and safety needs are to be managed and met, as well as their wishes and choices.

In order to do this, the provider must at a minimum ensure:

- a) personal plans are developed in consultation with the individual and their representative to reflect a responsive, person centred approach taking account of choices and preferences
- b) personal plans accurately record the management of health, welfare, and safety needs and how these will be managed
- c) personal plans fully reflect that advice from healthcare professionals has been followed
- d) measures identified in personal plans are being implemented in practice to meet the individual's health, welfare, and safety needs
- e) evaluations are outcome focused and reflective of how effective the planned care had been in promoting positive choices
- f) ensure that people have opportunity to discuss their care on a six monthly basis at formal care reviews



g) staff should be supported to develop their skills regarding developing personal plans and record keeping.

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

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

'My personal plan is right for me because it sets out how my needs are to be met, as well as my wishes and choices' (HSCS 1.15).

**This requirement was made on 8 May 2024.**

#### Action taken on previous requirement

This requirement was not assessed during this inspection.

#### Not assessed at this inspection

## 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 support better outcomes for people linked to their choices and preferences, the service provider should enhance the range and access to meaningful activities throughout the home. This should include but not be limited to developing links with the local community.

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

'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).

'I can maintain and develop my interests, activities and what matters to me in the way that I like' (HSCS 2.22).

**This area for improvement was made on 8 May 2024.**

#### Action taken since then

This area for improvement was not assessed during this inspection.

#### Previous area for improvement 2

To ensure that people's hydration needs are monitored effectively the provider should ensure effective systems are in place where a person requires support. Information recorded in fluid charts should be accurate and used inform the support needed to manage people's hydration needs effectively.

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 professional and organisational codes (HSCS 3.14)

**This area for improvement was made on 8 May 2024.**

### Action taken since then

This area for improvement was not assessed during this inspection.

### Previous area for improvement 3

To ensure that medication is managed safely and in line with best practice guidance the provider should.

a) ensure medication prescribed to be given 'as needed' is regularly reviewed and up to date protocols are in place to guide staff

b) improve the management and record keeping regarding topical medication.

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).

'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).

**This area for improvement was made on 8 May 2024.**

### Action taken since then

This area for improvement was not assessed during this inspection.

### Previous area for improvement 4

To protect the best interests of people living in the service the provider should implement systems to check accounts of people's personal allowances and ensure that monies are used to benefit the individual.

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

'If I need help managing my money and personal affairs, I am able to have as much control as possible and my interests are safeguarded' (HSCS 2.5).

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

**This area for improvement was made on 8 May 2024.**

### Action taken since then

This area for improvement was not assessed during this inspection.

### Previous area for improvement 5

To improve connections and communication between people, their families and staff the provider should develop a keyworker system in the home. Staff assigned as keyworkers should have clear guidance regarding their role and responsibilities.

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

'I get the most out of life because the people and organisation who support and care for me have an enabling attitude and believe in my potential.' (HSCS 1.61).

'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).

**This area for improvement was made on 8 May 2024.**

#### Action taken since then

This area for improvement was not assessed during this inspection.

### Previous area for improvement 6

To ensure that the acceptable standards of cleanliness are maintained in the service the provider should review the hours worked by the housekeeping team to ensure that housekeeping services are available into the evening.

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).

**This area for improvement was made on 8 May 2024.**

#### Action taken since then

This area for improvement was not assessed during this inspection.

### Previous area for improvement 7

The provider should ensure that continence aids are stored and managed in line with current guidance and available at the point of need to support people's dignity and independence.

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

'If I require intimate personal care, this is carried out in a dignified way, with my privacy and personal preferences respected' (HSCS 1.4).

'I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability or frailty' (HSCS 3.18).

This area for improvement was made on 8 May 2024.

## Action taken since then

This area for improvement was not assessed during 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](http://www.careinspectorate.com).

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