

Golfhill Care Home Care Home Service

35 Hanson Street
Dennistoun
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Telephone: 01415 502 662

Type of inspection:
Unannounced

Completed on:
8 May 2024

Service provided by:
Advinia Care Homes Limited

Service provider number:
SP2017013002

Service no:
CS2017361011

About the service

Golfhill Care Home is registered to provide a care service to 105 older people. The provider is Advinia Care Homes Limited. The home is in Glasgow, close to public transport and local amenities.

Accommodation is purpose-built with four separate units that can support: 60 older people with dementia in the Alexander and Whitehill units, 30 older people in the Craigpark unit and 15 adults/older people in the Dennistoun unit. Dennistoun unit remained closed at the time of the inspection.

All bedrooms are provided on a single occupancy basis with en suite shower facilities. There are garden areas for each unit that people can access through patio doors. Car parking facilities are available in the grounds of the home.

About the inspection

This was an unannounced follow up inspection which took place on 08 May 2024. The inspection was carried out by one inspector from the Care Inspectorate Complaints Team. This follow up inspection was undertaken to review the progress of the requirements made at the follow up inspection 20 March 2024.

To prepare for the inspection we reviewed previous reports and the action plan. We spoke with the case holding inspector and reviewed any intelligence received since our last visit.

In making our evaluations of the service we spoke with the management team, a visiting professional and reviewed documentation.

Key messages

We saw significant progress had been made with the requirement made on 20 March 2024. The record keeping relating to continence care had been improved. The manager demonstrated a planned and inclusive approach to improvement that involved all staff in the team.

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

Requirements

Requirement 1

By 06 May 2024, extended from 01 February 2024, you must ensure that peoples' continence health and wellbeing needs are being accurately assessed, documented, and met. To do this, you must, at a minimum:

- (a) Ensure that there is a continence care plan in place for each person experiencing care that is accurate and reflective of current assessed needs, including the risk of UTI's.
- (b) Ensure that the continence assessment tool is accurate and reflective of current assessed needs.
- (c) Ensure that the process notes evidence the daily support offered to people experiencing care with their continence needs.
- (d) Ensure that specific documentation is put in place to support a person experiencing care when they have a UTI.

This requirement was made on 20 March 2024.

Action taken on previous requirement

We sampled personal plans for people experiencing care across the three units within the care home. We did this to assess progress with the requirement made at the last follow up inspection. We could see action had been taken to improve recording as all people had a 'long-term' continence care plan in place. These were reviewed at least monthly, with additional reviews where circumstances changed. On the whole the care plans were detailed, accurate and up to date and contained information about the needs and preferences of the person and how staff should support them to meet their continence needs. This included a record of continence products where appropriate, and how to identify and mitigate any known risks. Therefore, we were satisfied there were good person led care plans in place.

We saw that the digital care recording system (PCS) had a short term care plan section. It was generated when someone required additional interventions or treatments for short term conditions, such as a urinary tract infection (UTI). This meant all staff had accurate and up to date information to provide appropriate care and treatment when someone had a UTI.

We looked at risk assessments and the daily care notes for the personal plans we sampled. The risk assessments had been updated monthly and were consistent with the assessed needs in the care plans and the notes recorded by staff on a daily basis.

This meant staff had access to the appropriate information they needed to support people with their continence needs in a safe and planned manner.

We viewed records that confirmed staff had received additional training to improve and develop their understanding of continence care planning and recording. This was provided by an NHS continence nurse specialist and the organisation's quality team. We spoke with the continence nurse specialist who confirmed she delivered two training sessions. These were well attended, and she told us staff were engaged and motivated in the sessions.

There were some care plans, from the same unit, which had not yet been fully updated. We viewed the audit records and spoke with the manager, and we confirmed these were the last on the audit list. We felt confident that this work was planned and would be completed in the very near future. The manager provided us with a copy of the improvement plan and confirmation of the quality assurance checks that had been completed to ensure consistency.

Overall, we could see there had been significant improvements made with care planning and recording in relation to continence care. We also acknowledged the work undertaken, by the management team, to implement change, develop staff understanding and share the responsibility of providing good continence support and comfort to people experiencing care. Therefore, this requirement has been met.

Met - within timescales

Complaints

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

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