

Oakview Manor Care Home Care Home Service

41/43 Newark Drive Pollokshields Glasgow G41 4QA

Telephone: 01414 238 525

Type of inspection:

Unannounced

Completed on:

13 August 2024

Service provided by:

Oakminster Healthcare Ltd

Service provider number:

SP2003002359

Service no: CS2003014530



Inspection report

About the service

Oakview Manor Care Home is registered to provide a care service for a maximum of 80 places for older people, of which a maximum of four places may be used for respite or short breaks. Within the 80 places, a maximum of two places can be for two specific, named adults currently in residence, who are not yet older people.

The provider is Oakminster Healthcare Ltd. The home is in a residential area of Pollokshields in Glasgow and is close to local amenities and transport links. There is a car park to the rear of the building. The home is divided into two units over four floors, Caledonia House and Rannoch House.

All bedrooms are single with ensuite toilet and showering facilities, with lounge and servery areas available on each floor. The ground floor has the main residents' lounge and dining areas, as well as a café and conservatory area for all to use. There is access to a garden area at the side of the building via a ramp.

During this follow up inspection there were 64 people using the service.

About the inspection

This was an unannounced follow up inspection which took place on 13 August 2024 from 09:30 to 18:45. The purpose of the inspection was to follow up on the requirements set at the previous inspection on 04 June 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 one of their family
- · spoke with nine staff and management
- · observed practice and daily life
- · reviewed documents.

Key messages

- People were being supported in a kind and caring way by a consistent staff team.
- Staff knowledge and understanding of how to prevent cross infection had improved.
- The provider is making progress with managing stress and distressed behaviours.
- All staff require refresher adult support and protection training to improve their understanding and skills in identifying when people could be at risk of harm.

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

Requirements

Requirement 1

By 2 August 2024, the provider must make proper provision for the health, welfare and safety of service users. To do this, the provider must, at a minimum:

- a) ensure there are effective strategies in place to identify potential triggers and develop risk reduction strategies to manage and support people living with dementia who are experiencing stress and distressed behaviours;
- b) ensure all staff have appropriate training to understand and manage their responsibility to keep people safe from harm and abuse. This should include, but is not limited to, training in adult support and protection and safe and effective management of stress and distress in people living with dementia;
- c) make timeous and accurate notifications to the Care Inspectorate and other appropriate agencies in line with the guidance contained in "Records that all registered care services (except childminding) must keep and guidance on notification reporting" (Care Inspectorate 30 April 2020). This should include, but is not limited to, all allegations of abuse (as defined in adult support and protection legislation) involving someone using the service.

This is in order to comply with Regulation 4(1)(a) (Welfare of users) and Regulation 15(a) (Staffing) 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 am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities" (HSCS 3.2) and "I am helped to feel safe and secure in my local community" (HSCS 3.25).

This requirement was made on 4 June 2024.

Action taken on previous requirement

We previously had concerns about the lack of management of stress and distressed behaviour. This had adversely impacted on the wellbeing of people living in the service as well as on the people experiencing stress and distress.

The service had begun a process of putting in place strategies to identify potential triggers and develop reduction strategies to manage and support people experiencing stress and distress. We observed one person had a very detailed positive behaviour personal support plan in place. This was well written and detailed clear instructions for staff, including potential triggers and de-escalation techniques that should be attempted. However, the service had not yet completed positive behaviour support plans for everyone who needed these plans. We acknowledge this remains a work in progress.

The service had sought input from multi-disciplinary professionals to review people's medication to reduce the occurrence of stress and distress and to better support good outcomes for people.

A process of improving staff's skills, knowledge and understanding of the management of stress and distressed behaviour was underway. A small number of staff had received positive behaviour support training. These staff told us it had helped them improve their practice and that outcomes for people in their care had improved. However, a number of the staff team had yet to complete this training. This meant that people were not always being supported by staff who could manage and support people with more complex behaviours. The provider had already planned further training dates late August and September for staff to receive this training.

We were not confident staff could always accurately discern when harm may be occurring. In particular, they were unsure if a resident was being subjected to possible verbal abuse by another resident. Behaviour involving a risk of verbal abuse was being consistently recorded in people's behavioural charts. This however, was not consistently being reported to the management team as an adult support and protection event. This meant that timeous and accurate notifications were not always reported to the Care Inspectorate or other appropriate agencies. The provider acknowledged they were in a process of sourcing more robust face to face adult support and protection training for all staff. This would ensure staff are clear about adult support and protection events which need to be reported to the management team and the appropriate agencies.

Although some progress was acknowledged, this requirement has not been met. We have extended the date of this requirement until 25 September 2024.

Not met

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 protect people's rights to experience privacy and dignity, the provider should:

- a) complete a review of all window coverings in bedrooms throughout the home; and
- b) replace all broken or inappropriate window coverings in bedrooms to ensure people's right to experience privacy and dignity is maintained.

This is to ensure 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)

This area for improvement was made on 4 June 2024.

Inspection report

Action taken since then

We viewed a number of bedrooms within the service. We found progress with replacing broken or inappropriate window coverings in bedrooms had begun. The process of fitting new window coverings had been allocated to the in-house maintenance team as outside contractors were taking a protracted length of time to complete the work. The provider explained the plan was to remove blinds from all bedrooms and replace these with curtains. This meant people would be afforded greater privacy. Three bedrooms were scheduled to be completed each week until all bedroom window coverings have been replaced. Priority was being given to those bedrooms where the window coverings were most compromised.

To ensure people's dignity is not compromised, an audit of all bedroom window coverings had been undertaken and all damaged window coverings had been repaired. The service also had in place a system of daily reporting of any further damaged blinds which were being immediately temporarily repaired.

This area for improvement has not been met.

We will continue and monitor progress at the next inspection.

Previous area for improvement 2

To ensure people are protected from the risk of cross infection the provider should:

a) ensure staff have the appropriate training to inform their skills, knowledge and understanding of the correct use of cleaning solutions and the safe dilution and handling of chemical products; andb) ensure staff have the appropriate training to inform their knowledge and understanding of the guidance outlined in the NIPC Manual for Care Homes Scotland guidance.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "My environment is secure and safe". (HSCS 5.19)

This area for improvement was made on 4 June 2024.

Action taken since then

Staff had attended training on the use of the correct chemical products to clean the environment and the safe handling and dilution of chemical product. There was information displayed in all domestic service rooms to remind staff of the safe management and dilution of cleaning chemicals. Staff we spoke to were knowledgeable about which cleaning products should be used in various areas of the home in line with the guidance contained in the National Infection and Prevention Control Manual (NIPCM) for care homes Scotland.

The management team had provided a paper copy of the NIPCM for care homes Scotland to all members of the housekeeping team. Access to the NIPCM for care home Scotland was also available for all staff to access via an on-line terminal. This enabled staff to consult and complete self-directed learning in relation to the most up to date guidance. This meant people could be confident they were protected from the risk of cross infection.

This area for improvement has been met.

Previous area for improvement 3

In order that people feel safe and are protected, the manager should continue to monitor measures in place and build on the learning from previous events to improve staff awareness and outcomes for people living in the home.

This area for improvement was made on 21 June 2022.

Action taken since then

Although this area for improvement has not been met, it relates to keeping people safe from harm and is therefore encapsulated in Requirement 1.

This area for improvement will not be re-stated.

Previous area for improvement 4

In order for the manager and provider to improve the quality of their service, they should clearly identify areas for improvement, the impact on people's outcomes, the learning from these, and the improvements made on people's outcomes as a result.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes" (HSCS 4.19) and "I use a service and organisation that are well led and managed" (HSCS 4.23).

This area for improvement was made on 21 June 2022.

Action taken since then

This area for improvement was not assessed and will be followed up at the next inspection.

Complaints

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

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 cànain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

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

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.