

# Tantallon House Care Home Service

7 Tantallon Road  
North Berwick  
EH39 5NF

Telephone: 0141 333 1495

**Type of inspection:**  
Unannounced

**Completed on:**  
30 July 2024

**Service provided by:**  
Morar North Berwick Limited

**Service provider number:**  
SP2022000185

**Service no:**  
CS2022000277

## About the service

The service is a care home providing care and support for up to 70 older people, located in North Berwick, East Lothian. There were 45 people experiencing care with the service during the inspection. The care home was registered with the Care Inspectorate on 12 September 2022 and is provided by Morar Living.

The service consists of three floors, all rooms are single with en suite shower facilities. Additional toilets and bathing facilities are available throughout the home. Communal lounges, quiet areas and dining areas are on each floor. There are separate kitchen, laundry and staff facilities. The service also has a hair salon, games room, small cinema room, tearoom and café bar area. The service has its own car park and public parking nearby. An enclosed garden area is available to the rear of Tantallon House.

## About the inspection

This was an unannounced inspection which took place on 30 July 2024. The inspection was carried out by one inspector from the Care Inspectorate. This was a follow up inspection to check whether the remaining requirement regarding medication administration had been met.

We had previously inspected the service on 11 and 12 April 2024 where the service had met four requirements regarding care planning, quality assurance, managing falls and assessing pain. We inspected the service again on 6 June 2024 where the service met two requirements regarding adult protection procedures and essential training. There had been reasonable progress with the one remaining requirement regarding medication and therefore extended until 29 July 2024 and the service inspected again on 30 July 2024.

## Key messages

- Medication administration had improved with no errors since the new electronic medication administration system had launched on 22 July 2024.

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

### Requirements

#### Requirement 1

By 27 May 2024 the provider must ensure people are supported safely with their medication to support their health and wellbeing.

To do this the provider, must at a minimum:

- a) Ensure the medication administration systems and supporting policy, procedure and recording documents are safe, up-to-date and accurate and follows best practice.
- b) Ensure that each person has been appropriately assessed by a competent person to determine the support they require with their medication and the level of support is clearly recorded in care plans and associated risk assessments.
- c) Ensure staff receive medication training and ongoing refresher training in line with their roles and responsibilities and that is a system in place to assess staff competency on a regular basis.
- d) Ensure there is a competent person to follow up any concerns related to medication.

This is to ensure care and support is consistent with Health and Social Care Standard 1.19: My care and support meets my needs and is right for me.

This is in order to comply with:

Section 64(1)(b) and section 64(3)(a) of the Public Services Reform (Scotland) Act 2010.

**This requirement was made on 20 March 2024.**

#### Action taken on previous requirement

This requirement was extended to 29 July 2024 to allow the provider to launch the new electronic medication administration system to reduce errors. The system had been launched on 22 July 2024 and was well organised. There had been training for staff and managers to use the electronic system competently. Staff undertaking medication administration were confident with using the new system.

This electronic system had the advantage of the community pharmacist transcribing people's medications directly into it. This meant there had been no errors where the medication administration details had been recorded incorrectly causing a wrong dose to be administered. There had been no missed medications while using the electronic system. It could send alerts to managers for any late or missed medications to reduce the chance of mistakes. Managers were undertaking regular medication audits. Staff were observed through medication competency assessments to support and compliment their learning. There was a robust medication policy in place. This ensured that people experienced safe and effective medication.

Part a) of the requirement has been met. Parts b), c), and d) had previously been met at the inspection on 6 June 2024. See inspection report of 7 June 2024 for more details.

**Met - outwith 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

The service should ensure that essential e-learning staff training has been completed by all staff and repeated regularly. This should include but not be limited to:

- adult protection
- dementia awareness
- fire awareness
- food hygiene
- infection prevention and control
- medication administration
- moving and handling people

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

'I have confidence in people because they are trained, competent and skilled, can reflect on their practice and follow the professional and organisational codes' (HSCS 3.14).

**This area for improvement was made on 7 June 2024.**

#### Action taken since then

This was a follow up inspection for the medication administration requirement, therefore this area for improvement was not considered.

### 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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