

Collidene Care Centre Care Home Service

126/128 Glasgow Road
Strathaven
ML10 6NL

Telephone: 01357 521 250

Type of inspection:
Unannounced

Completed on:
25 September 2024

Service provided by:
Canterbury Care Homes Limited

Service provider number:
SP2005007835

Service no:
CS2006137442

About the service

Collisdene Care Centre is registered as a care home to provide support to a maximum of 40 people, 10 of whom will be older, 26 of whom may have learning disabilities and four may have physical or sensory impairment. The provider is Canterbury Care Homes Limited.

The home is located in the town of Strathaven, South Lanarkshire and is within easy access to local amenities and transport links.

Accommodation is provided over three split units over two floors. Each unit has a communal lounge, kitchen and dining facilities. This is serviced by a passenger lift and a staircase. There are 21 rooms that have toilet ensuite facilities and each unit has communal bathing and showering facilities for people to access.

There are outside garden areas for residents and visitors to use. A car park is available to visitors.

At the time of the inspection 27 people were living in the home.

About the inspection

This was an unannounced follow-up inspection which took place on 25 September 2024 between 08:40 and 15:15. The inspection 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. To inform our evaluations we:

- spoke with four people using the service and observed interactions with other people
- spoke with nine staff and management
- observed practice and daily life
- reviewed documentation.

Key messages

- Two requirements and five areas for improvement made at the previous inspection had been met.
- Staff were observed to support people in a kind and caring way.
- Laundry management and support had improved.
- Maintenance works had been carried out in relation to water ingress.
- The service had made positive progress in carrying out a self-evaluation.

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

Requirements

Requirement 1

By 1 September 2024, the provider must notify the Care Inspectorate that they have improved management arrangements for the oversight of domestic and laundry management. To do this, at a minimum, the provider must evidence that:

- a) They have improved arrangements for ordering domestic cleaning and laundry products, so they do not run out of stock.
- b) They have reviewed arrangements for the disposal of continence products to ensure they are disposed of safely to avoid contaminating laundry.
- c) They have improved management support arrangements for laundry and domestic staff.

This is to comply with Regulation 4 (1) (a) (Welfare of users) 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: "My environment is secure and safe." (HSCS 5.17)

This is also to comply with the standards contained within the National Infection Prevention and Control Manual (NIPCM).

This requirement was made on 22 April 2024.

Action taken on previous requirement

The provider told us of a system of ordering cleaning and laundry products that had been implemented. Staff were aware of this process and reported an improvement in stock available. Domestic cleaning and laundry products are then reviewed throughout the month to ensure there is sufficient stock levels.

Arrangements for the disposal of continence products had been reviewed. In line with good practice safe management of linen training had taken place with staff. Daily flash meetings and team meetings evidenced ongoing focus to address this area of concern. Staff told us of significant improvement in the disposal of continence products where these were no longer contaminating the laundry.

A senior housekeeper was recently appointed in the service. Annual appraisals and team meetings had taken place with laundry and domestic staff. There was a plan in place for the senior housekeeper to oversee regular supervision with the laundry and domestic staff team.

This requirement has been met.

Met - outwith timescales

Requirement 2

By 1 September 2024, the provider must notify the Care Inspectorate that they have completed an initial walk round inspection of the home. This must include all rooms and cupboards to check for signs of water ingress, which may impact the health and safety of people in the home. Appropriate action should be taken promptly to reduce any risks identified. The provider should also confirm that regular maintenance checks will be expanded to cover every room and cupboard.

This is to comply with Regulation 10 (2) (b) (Fitness of Premises) of the 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: "My environment is secure and safe." (HSCS 5.17)

This requirement was made on 22 April 2024.

Action taken on previous requirement

The provider had shared a walkaround report of all rooms in the home for signs of water ingress. This demonstrated that concerns about water ingress had been addressed and roof repairs carried out.

Marks on walls and ceilings caused by water ingress were still evident in some areas of the home. Some walls required plastering work before painting could begin. There was a plan in place for contractors to complete this work with some bedrooms already completed.

There was an environmental improvement plan in place for the home. This showed several areas for improvement in maintenance. For example, ceiling cracks, painting and decorating, kitchen and window replacement. The provider should ensure maintenance needs are addressed in a timely manner and the action plans are shared with people.

This requirement has been met.

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

To ensure people benefit from a culture of continuous improvement the provider should develop a service improvement plan for Collisdene Care Centre. The plan should utilise SMART principles.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: "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 22 April 2024.

Action taken since then

The provider had a service improvement plan in place where regular reviews had been recorded using specific, measurable, achievable, relevant and time-based principals.

The provider had made positive progress in carrying out a self-evaluation of the service. This covered key areas the service had identified to address. We discussed adding all actions identified from self-evaluation to the service's improvement plan.

This area for improvement has been met.

Previous area for improvement 2

To ensure people benefit from a culture of continuous improvement, action points from team meetings should adhere to SMART principles to make monitoring and accountability for progress easier.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: "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 22 April 2024.

Action taken since then

Team meetings with all staff teams had taken place since the last inspection. The minutes included action plans which adhered to specific, measurable, achievable, relevant and time-based principals. Action plans were clear and included action required, timeframe, who is responsible and where are we now. There was evidence of review of these actions, progress and relevant outcomes noted.

This area for improvement has been met.

Previous area for improvement 3

To assure people who use the service that any concerns received are fully investigated, the provider should quality assure the response to any complaint received to ensure it is in line with the provider's policy.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: "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 area for improvement was made on 22 April 2024.

Action taken since then

There had been two concerns received by the service since the last inspection in June 2024. The concerns had been managed in line with the providers policy. This included acknowledgment letters, reports of investigation, outcomes and follow up conversations with the complainant. The service had received positive feedback from complainants in relation to their management of their concern.

This area for improvement has been met.

Previous area for improvement 4

People should live in a clean, hygienic environment. To support this the provider should review support arrangements for domestic and laundry staff to ensure they have the correct training and equipment to perform their duties within the home.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: "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 22 April 2024.

Action taken since then

A housekeeper had recently started in post in the service, and they will carry out management and support to domestic and laundry staff. Staff appraisals and team meetings had taken place since the last inspection.

Infection prevention control training showed 100% completion by staff. There had also been NHS infection control training courses provided to staff. This included, hand hygiene, personal protective equipment, safe management of care equipment and safe management of linen.

There was a new system to ensure sufficient stock of cleaning and laundry supplies as reported under requirement 1. Feedback from domestic and laundry staff was positive of the improvement in support and they felt equipped to carry out their role.

This area for improvement has been met.

Previous area for improvement 5

People should be supported by a service that continuously looks for improvement. The provider should ensure that analysis is undertaken of incidents and accidents to inform the delivery of care.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: "My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event." (HSCS 4.14)

This area for improvement was made on 22 April 2024.

Action taken since then

The provider used the Tool 19 falls data spreadsheet the "Managing Falls and Fractures in Care Homes for Older People good practice resource" which helped identify ongoing themes or trends for analysis. Analysis had begun for other types of accidents or incidents on a monthly basis. External support was being provided to the service to analyse any incidents in relation to stressed or distressed behaviours. The provider told us of a new system being implemented which allowed analysis of accidents and incidents over a longer time frame.

This area for improvement has been met.

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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