

Castle Lodge Care Home Service

Castle Lodge Care Home
Kirkburn
Inverbervie
Montrose
DD10 0RS

Telephone: 01561 361206

Type of inspection:
Unannounced

Completed on:
2 October 2024

Service provided by:
Castle Lodge (Inverbervie) Limited

Service provider number:
SP2023000433

Service no:
CS2023000418

About the service

Castle Lodge is a care home for older people situated in a residential area of Inverbervie. The home holds a prominent position overlooking the seafront, offering spectacular views to the beach and out to the sea. It is close to local transport, shops, and community services. The service provides residential care for up to 21 people and there were 21 people living at the service at the time of this inspection.

Accommodation is arranged over two floors, in single bedrooms. There is a communal lounge, dining room, bathroom, and shower room for people to use.

About the inspection

This was an unannounced follow up inspection which took place on 1 October 2024. 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.

In making our evaluations of the service we:

- spoke with five people using the service, and five of their families;
- spoke with staff and management;
- observed practice and daily life;
- reviewed documents.

Key messages

- People's personal plans were person-centred.
- People were being repositioned regularly to protect their skin from breaking down.
- Improvements to the electronic accident/incident system were required.
- An action plan was in place to ensure people experience care in an environment that was safe and well maintained.
- Laundry processes helped to minimise the risk of infection.

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

Requirements

Requirement 1

By 1 July 2024, the provider must ensure people experience care in an environment that is safe, well maintained and minimises the risk of infection.

To achieve this, the provider must as a minimum:

- a. Develop a system to ensure laundry processes support adequate infection prevention and control guidance.
- b. Ensure all repairs and identified deficits are undertaken timeously.
- c. Carry out an environmental audit to ensure furnishings, decoration and fixtures are in a good state of repair.
- d. Following the environmental audit, develop an action plan that describes the action to be taken, who is responsible and timescales for works to be undertaken.
- e. Provide the Care Inspectorate with a copy of this action plan.

This is to comply with Regulations 4 (1) (a) and (d) (welfare of users and procedures for the prevention and control of infection) 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:

'My environment is safe and secure' (HSCS 5.19).

This requirement was made on 8 April 2024.

Action taken on previous requirement

The general environment was clean and tidy with no intrusive noise or odours. We saw domestic staff worked hard. Cleaning schedules were in place which were being completed consistently. One family member told us that "the care home is always very clean and tidy".

The laundry was clean and organised. We observed, effective processes in place to manage used and infected linen, and to limit the potential for cross-contamination. Clean clothes were covered and stored appropriately. This ensured adequate infection control was taken to minimise risk and keep people safe.

Environmental checks and audits were taking place. This enabled any issue to be quickly resolved, to ensure the environment was safe, well maintained and minimises the risk of infection.

The service benefitted from a new handyman, and we saw routine repairs and maintenance were being actioned. The handyman was visible and accessible throughout our visit. A maintenance log was in place

where people and staff could raise any repairs to be undertaken.

We found furnishings, decoration and fixtures were of a good standard.

Areas which had previously been damaged by water had been repaired and redecorated. This provided a safe and dignified living environment for people.

An improvement plan was in place which describes how the service intends to bring about the remaining improvements which the service were actively working through. Going forward we would recommend a system is put in place to prioritise required improvements based on risk.

This requirement has been met.

Met - within 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's skin integrity is maintained, people should be supported to reposition at regular intervals.

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

'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', (HSCS 3.21).

This area for improvement was made on 8 April 2024.

Action taken since then

A preventative approach was being taken to keep people's skin healthy. People told us that they were being supported to reposition at regular intervals and records of support were being completed. We recommended that the manager continues to monitor this to ensure people are receiving their care and support at the frequency they require.

This area for improvement has been met.

Previous area for improvement 2

To ensure people receive adequate support and assessment in respect of the prevention and management of falls, the provider should undertake a post falls analysis following each fall which looks at any follow up action to be taken for that person to reduce reoccurrence.

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

'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,' (HSCS 3.21); and
'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 April 2024.

Action taken since then

The service was using a multifactorial risk assessment to minimise the risk of falls.

Where people had experienced a fall, electronic accident/incident forms were being completed. We heard that this included a post fall analysis to look at any follow up action to be taken to reduce reoccurrence. However, due to technical issues with the electronic system this information was unavailable to view. We were therefore unable to assess and evaluate this information at the time of the inspection. This meant we could not be confident that staff had taken the right steps to keep people safe and learn from events. The manager was actively trying to address this with their electronic system provider.

We found post falls observations had not been fully completed for recent falls.

This area for improvement has not been met.

Previous area for improvement 3

To ensure that people are supported well, the service should ensure that personal plans, health charts and daily notes are accurate, sufficiently detailed, and reflective of the care/support planned or provided.

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

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

This area for improvement was made on 8 April 2024.

Action taken since then

People's personal plans, health charts and daily notes were held electronically.

We sampled some people's personal plans and found them to be person centred, sufficiently detailed and reflective of their care/support needs. Families and people were involved in developing their personal plans to ensure support was tailored to meet their needs and wishes. One family told us they were part of their relative's "care planning process" and another told us they are "very much listened too".

We found people's health charts such as fluid intake records had been completed timeously.

Daily recordings of care and support were of varying quality. However, we found them to be mostly task orientated and did not reflect people's views or feedback. We will follow this up at our next inspection.

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.

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 cànan eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

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

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

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.