

Dalginross House Care Home Service

Comrie
Crieff
PH6 2ED

Telephone: 01764 670 861

Type of inspection:
Unannounced

Completed on:
4 November 2024

Service provided by:
Linda Paterson trading as Dalginross
House

Service provider number:
SP2003002113

Service no:
CS2003009752

About the service

Dalginross House is a privately owned care home for older people situated in a residential area of Comrie, close to local transport links, shops and community services. The service is registered to provide care for up to 15 older people and two named adults under the age of 65 years.

The service provides accommodation over three floors in single bedrooms, each with an en-suite wash hand basin. There is one double bedroom that may be used by a couple. There is a sitting room and dining room on the ground floor level, the mezzanine and first floor are accessible by a stairway with stairlift. There is a large welcoming entrance hall to the home and access to a well-tended garden surrounded by mature trees.

At the time of inspection there were 15 people living in Dalginross House

About the inspection

This was an unannounced inspection which took place on 4 November 2024. The inspection took place between 09:15 and 12:45 hours, and was carried out by two inspectors from the Care Inspectorate. This was a follow up inspection to evaluate progress made since our last inspection which took place on 21 August 2024.

To prepare for the inspection we reviewed information about the 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
- spoke with four staff and management
- observed practice and daily life
- reviewed care-related documents.

Key messages

This was a follow up inspection to evaluate progress made by the service to address three requirements which had been extended at our last inspection.

- The service was experiencing ongoing management and leadership challenges.
- Due to absence, the manager has not been present in the service for several weeks. We were therefore unable to evaluate the registered manager's oversight of the running of the service.
- We identified no concerns about meeting people's care and support needs; however, the day-to-day operation of the service was led by the deputy manager, with little support provided by the registered manager.
- Since the last inspection, there has been some progress with staff supervision. Team meetings remained inconsistent. Further improvements were needed in holding regular supervision and team meetings with staff.
- Communication between the registered manager and staff needed to improve.
- Some identified repairs and maintenance work had been undertaken since the last inspection; however, it was not possible to examine future environmental improvement plans due to the registered manager's absence.

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

Requirements

Requirement 1

By 31 July 2024, the provider must ensure the safety, wellbeing and positive experiences of people living in the service:

To do this the provider must, at a minimum:

a) ensure that the registered manager has day to day oversight of the running of the service.

This is to comply with Regulation 17(c) 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 use a service and organisation that are well led and managed' (HSCS 4.23).

This requirement was made on 26 April 2024 and extended until 4 October 2024.

This requirement was made on 26 April 2024.

Action taken on previous requirement

Due to absence, the manager has not been present in the service for several weeks. We were therefore unable to evaluate the registered manager's oversight of the running of the service. We identified no concerns about meeting people's care and support needs; however, the day-to-day operation of the service was led by the deputy manager, with little support provided by the registered manager. We were informed that staff find it difficult to contact the manager and often received no response to communications. This may, however, be due to the manager's personal circumstances.

We noted that support was being provided to the service by professionals from the local health and social care partnership. This provided further assurance that people's needs were being regularly assessed and reviewed. The staff were appreciative of the partnership's assistance.

This requirement was originally made on 26 April 2024 and was extended until 4 October 2024. As a result of our findings at this inspection, this requirement has not been met and has been further extended to 19 January 2025.

Not met

Requirement 2

By 31 July 2024, the provider must ensure people experience care in an environment which is safe and well maintained. This must include, but is not limited to:

- (a) immediate repairs to ensure the building is draught and watertight
- (b) an assessment of all repairs required both inside and outside the premises
- (c) implementing a plan for the upgrading of the premises which sets out all of the work required
- (d) providing timescales for the commencement and completion of all work.

This is to comply with Regulation 4(1)(a) and 10(2)(b) & (d) and 14(d) of The Social Care and Social Work Improvement Scotland.

This is to ensure that 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 requirement was made on 26 April 2024 and extended until 6 September 2024.

This requirement was made on 26 April 2024.

Action taken on previous requirement

We noted that repairs had been made to ensure the building was draught-proof and watertight. People we spoke with told us that the lounge was warmer due to these repairs.

The deputy manager was unable to comment on further planned repairs and did not have access to the service's environmental improvement plan, because this was held by the registered manager who was absent at the time of inspection.

The service had weekly input from a maintenance person and could call on their services for emergency repairs. More specialist works were carried out by relevant professionals who could be easily accessed.

The repairs register did not clearly identify actions and timescales for works identified. The repairs register should include such information to allow for effective audit of works planned and completed.

This requirement was originally made on 26 April 2024 and was extended until 6 September 2024. As a result of our findings at this inspection, this requirement has not been met and has been further extended to 19 January 2025.

Not met

Requirement 3

By 3 March 2023, you must ensure that:

Staff have a schedule of supervision and regular team meetings to enable them to reflect on their practice, develop knowledge and skills and provide consistent care to those they support. This will also provide a forum for staff to contribute to the improvement of the service.

This is in order to comply with sections 7 and 8 of the Health and Care (Staffing) (Scotland) Act 2019 (as substituted for regulation 15) 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 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).

Also the Code of Practice for Employers of Social Service Workers which state you will: 'Effectively manage and supervise social service workers to promote best practice and good conduct and support staff to continuously improve their performance and make sure they are fit to practice' (2.2).

This requirement was made on 18 February 2023 and further extensions made until 04 October 2024.

This requirement was made on 18 February 2023.

Action taken on previous requirement

Since the last inspection, there has been some progress with staff supervision. The staff we spoke with told us that supervision meetings had been scheduled. However, due to staffing and on-going leadership challenges, these have not been taking place consistently. Staff told us that supervision meetings include enough time to discuss matters important to them. Staff spoke of feeling supported by their colleagues and being able to raise any concerns with the deputy manager, as and when required.

Team meetings have been inconsistent since the last inspection. The staff we spoke with were aware of one that took place in or around August 2024; however, other planned meetings have not taken place due to on-going management and leadership challenges.

This requirement was originally made on 18 February 2023 and further extensions made until 4 October 2024. As a result of our findings at this inspection, this requirement has not been met and has been further extended to 19 January 2025.

Not 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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