

Crudenlea Care Home Service

17 Cruden Terrace
Stonehaven
AB39 2LQ

Telephone: 01569 765 512

Type of inspection:
Unannounced

Completed on:
9 December 2024

Service provided by:
Cornerstone Community Care

Service provider number:
SP2003000013

Service no:
CS2003000275

About the service

Crudenlea is a care home that provides care and support to a maximum of 11 people with a learning disability and associated needs. At the time of this inspection, there were nine people living in the home.

It is set in the North East coastal town of Stonehaven, which has good road and rail links to Aberdeen and Dundee.

The service states it aims "to enable people who require support to enjoy a valued life". In addition, the service's written statement of aims and objectives was developed from the provider's mission statement and takes into account the individual needs of the service users within the home.

About the inspection

This was an unannounced inspection which took place on 09 December 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 people using the service and their family
- spoke with staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- This was a follow up inspection to evaluate progress made to address requirements made at our previous inspection.
- An environmental improvement plan had been produced and was being updated to reflect work planned and work completed.
- Tools introduced since our last inspection to provide management oversight had not been consistently used to help bring about improvements.
- Whilst we did see improvements overall, some areas of the home were not clean enough.
- There was a new management team supporting the home who were open and transparent and had a clear view of where improvements continued to be required.
- People we spoke to and saw appeared happy and were aware of the improvements planned.

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

Requirements

Requirement 1

By 31 May 2023, the provider must ensure that people are supported in an environment that is safe, clean and minimises the risk of the spread of infection. To do this the provider must at a minimum:

- a) Ensure that staff receive the appropriate training in infection control.
- b) Ensure that there are sufficient staff on duty to undertake domestic duties and that cleaning schedules are followed
- c) Ensure that quality assurance checks are made at regular intervals to ensure compliance with infection control practice and general cleanliness of the home, including personal care equipment.

This is to comply with Regulation 4 (1) (a)(Welfare of users) and (d) (Infection control) 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 experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

This requirement was made on 25 April 2024.

Action taken on previous requirement

Date for requirement should have read 31 May 2024.

All staff had completed infection control training within the last 12 months. Most staff had completed a refresher within the last six months.

Staffing arrangements had been reviewed and sufficient staff were available to undertake domestic duties. Management oversight of this however had been inconsistent and cleaning schedules had not been completed fully. The provider had recognised this and there was a new management team in place to help improve standards in this area.

Weekly spot checks were not happening consistently and staff observations of practice were also inconsistent.

We did see some progress where flooring had been replaced and redecoration had helped to bring about improvements in the environment.

Some areas however were not clean enough. Radiators were dusty as were some window ledges and skirting boards. The kitchen floor had a build up of dirt and debris in corners and we also pointed out a build up of dirt down the side and underneath appliances. The food store cupboard was also not clean enough.

The management took prompt action to address these areas of concern during our visit. Overall some parts of the home require a deep clean to restore them to a good level of cleanliness and robust cleaning schedules and management oversight process are required to maintain the expected standard.

We acknowledge that there is a new management team supporting the home and we were reassured by their response to our observations and with the actions taken. We have therefore extended the timescale for this requirement to enable a robust and effective quality assurance process to be established and maintained.

The revised deadline is 31 March 2025.

Not met

Requirement 2

By 31 January 2024, the provider must ensure that the premises are of sound construction and kept in a good state of repair, externally and internally, and is decorated and maintained to a standard appropriate for the care service. Furthermore, the provider must;

- provide the Care Inspectorate with an overall environmental improvement plan laying out in detail works required and expected completion dates.
- the provider must provide the Care Inspectorate with, at a minimum, monthly progress reports of environmental improvements.

This is to comply with Regulation 10(2)(a) and (b) (Fitness of premises) 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 states that: 'My environment is secure and safe' (HSCS 5.17); and 'I experience an environment that is well looked after with clean, tidy, and well maintained premises, furnishings, and equipment' (HSCS 5.22).

This requirement was made on 25 April 2024.

Action taken on previous requirement

An environmental refurbishment plan was submitted to the Care Inspectorate. The branch leader has maintained regular contact to discuss progress and any potential delays.

We observed that work had commenced and some areas in the home had been refloored and redecorated. Contractors were working through the home to help update and refresh the environment for people.

The manager should continue to ensure that their environmental action plan is reviewed regularly and populated with dates of planned and actual completion of works.

We have agreed to maintain monthly contact to review progress, however, this requirement had 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

The manager should ensure staff have opportunities to increase their knowledge around people's human rights and the Health and Social Care Standards. This would help to ensure staff are supporting people in a manner that promotes and upholds peoples rights and minimises the risk of unnecessary or unlawful restrictions.

This is to ensure that care and support reflects the Health and Social Care Standards (HSCS) which state that: 'I am supported to understand and uphold my rights' (HSCS 2.3) and '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 25 April 2024.

Action taken since then

We did not fully review this area for improvement at this inspection. We will include in a future inspection.

Previous area for improvement 2

In order to ensure there is a culture of sustained improvement, the provider must ensure that regular quality assurance processes are embedded and are effective in identifying and promoting outcome focused care. The processes should be responsive to improving the outcomes for service users and actively drive good practice and standards.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that: '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 25 April 2024.

Action taken since then

We did not fully review this area for improvement at this inspection. We will include in a future inspection.

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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