

ASC Orchard Court and Dalguise Care Home Service

Balbeggie Perth PH2 6AT

Telephone: 01821 585 012

Type of inspection:

Unannounced

Completed on:

10 February 2025

Service provided by:

Advanced Specialist Care Limited

Service provider number:

SP2005007542

Service no: CS2011298007



Inspection report

About the service

ASC Orchard Court and Dalguise is a care home. It provides support for up to 24 adults with learning disabilities. It is set in a rural location, close to a village which provides some amenities and transport links.

The care home consists of two separate buildings each of which can accommodate up to 12 people in individual en-suite rooms. There are communal areas in each building for people to spend time together. There is also a large garden.

About the inspection

This was an unannounced inspection which took place on 10 February 2025. The inspection was carried out by two inspectors 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 four people using the service
- spoke with four staff and management
- · observed practice and daily life
- · reviewed documents

Key messages

- Overall oversight of the service had improved since the last inspection.
- Staff we spoke to reported improvements in the service, such as the environment.
- There was an increase in training opportunities available to staff. to enhance their skills and knowledge.
- Quality assurance systems had been implemented and were being carried out more consistently.
- Further consideration should be given to the deployment of staff on each shift.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	3 - Adequate
How good is our leadership?	3 - Adequate
How good is our staff team?	3 - Adequate
How good is our setting?	3 - Adequate

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

3 - Adequate

We have evaluated this key question upwards to adequate. During the inspection, we found evidence to demonstrate that people's experiences and outcomes have improved since the previous inspection and were being sustained.

Please refer to the section 'What the service has done to meet any requirements made at or since the last inspection' for further information.

How good is our leadership?

3 - Adequate

We have evaluated this key question upwards to adequate. During the inspection, we found evidence to demonstrate that people's experiences and outcomes have improved since the previous inspection.

Please refer to the section 'What the service has done to meet any requirements made at or since the last inspection' for further information.

How good is our staff team?

3 - Adequate

We have evaluated this key question upwards to adequate. During the inspection, we found evidence to demonstrate that people's experiences and outcomes have improved since the previous inspection.

Please refer to the section 'What the service has done to meet any requirements made at or since the last inspection' for further information.

How good is our setting?

3 - Adequate

We have evaluated this key question upwards to adequate. During the inspection, we found evidence to demonstrate that people's experiences and outcomes have improved since the previous inspection.

Please refer to the section 'What the service has done to meet any requirements made at or since the last inspection' for further information.

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

Requirements

Requirement 1

By 14 June 2024, extended to 29 November 2024, the provider must ensure the health, safety and well-being of people in the service.

To do this, the provider must, at a minimum:

- a) Ensure that people receive their medication as prescribed.
- b) Ensure that medication administration processes are followed.
- c) Ensure that wounds are monitored and managed appropriately.

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 that: 'My care and support meets my needs and is right for me' (HSCS 1.19).

This requirement was made on 16 May 2024.

Action taken on previous requirement

Since the last inspection, the service had introduced a new digital medication administration system. Although this system was still quite new to the service, staff who used it spoke positively about the system. We were informed of new 'alert' systems and 'follow up' reminders. These meant that when an 'as required' medication had been administered to someone, staff were reminded to check and record the effectiveness of this medication. As a result, in the event staff had not checked within a set time period, the system would remind them. This ensured that people's needs were being monitored as required, in relation to medication.

New wound care plans and wound care plan audits had been implemented within the service. We saw that wound care plans were being reviewed as per the plan of care, and audits were reflective of the detail within these care plans. The leadership team informed us that more staff had been trained in the wound care plan audit process and as a result, on-going monitoring and oversight of people's wounds had improved.

This requirement has been met.

Met - outwith timescales

Requirement 2

By 26 July 2024, extended to 29 November 2024, the provider must ensure better outcomes through a culture of continuous improvement, underpinned by robust and transparent quality assurance processes. To do this, the provider must, at a minimum:

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- a) Effectively assess the service's performance through the use of appropriate audit tools.
- b) Ensure that where quality assurance identifies areas for improvement, appropriate action is taken.

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) Regulation 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 benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS, 4.19).

This requirement was made on 16 May 2024.

Action taken on previous requirement

Overall, quality assurance processes in the service had improved and were being carried out more frequently. Some new audit tools had been implemented, such as the wound care audit which the leadership team reported was having a positive impact. Other tools such as medication audits, clinical risk meetings and daily flash meetings were being carried out more consistently and there were detailed recordings, including any actions, for each of these. The leadership team explained that more staff were now involved in the monitoring of service performance through the use of audit tools. This was improving oversight and resulted in areas for improvement being identified and actioned quickly.

This requirement has been met.

Met - outwith timescales

Requirement 3

By 26 July 2024, extended to 29 November 2024, the provider must ensure that people are supported by staff who have the appropriate knowledge and skills to meet their needs.

To do this, the provider must, at a minimum:

- a) Take account of staff skill mix when allocating staff.
- b) Ensure that staff complete adequate and appropriate training to be able to meet people's needs.

This is to comply with Regulations 7 (1) and (2) and 8 (1)(a) of the Health and Care (Staffing) (Scotland) Act 2019.

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 organisational codes.' (HSCS3.14) and 'I can understand the people who support and care for me when they communicate with me.' (HSCS 3.12)

This requirement was made on 16 May 2024.

Action taken on previous requirement

Training opportunities available to staff working in the service had been increased. The majority of staff had recently completed a number of relevant training courses such as Adult Support and Protection and Restrictive Practice. Staff told us that this helped them to identify adult protection concerns and supported them to ensure they promoted people's independence by applying the least restrictive practice.. A new ongoing training calendar has been developed with multiple courses available to staff throughout the year. To promote oversight of staff skills and knowledge, the leadership team had implemented new training

matrices which were easily accessible.

Staff 'champion' roles were being implemented within the service. Staff who wanted to be 'champion' of a specific area (for example, medication) were going to be encouraged and supported to fulfil these roles. Plans were in place to enable staff to enhance their knowledge in particular subject areas, to ensure that they could better support people who use the service, or their colleagues.

New staff allocation sheets had been implemented in the service. These were generally being completed daily. They clearly identified staff responsibilities and deployment for each shift.. Further work could be done to ensure that staff deployment is focused around relationships with people, and staff skills and knowledge. We discussed this with the leadership team at the time of inspection, who were responsive to our feedback.

This requirement has been met.

Met - outwith timescales

Requirement 4

By 14 June 2024, extended to 29 November 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) Undertake immediate repairs to ensure the premises, including the outside areas, are safe and useable for people.
- b) Carry out an assessment of all repairs required both inside and outside the premises.
- c) Implement a plan for the upgrading of the premises which sets out all of the work required; and contains timescale.

This is to comply with Regulation 4(1)(a) and 10(2)(b) & (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 16 May 2024.

Action taken on previous requirement

The premises had undergone a number of repairs, both internally and externally, since the last inspection. Orchard Court and Dalguise had both recently been redecorated and the improvements to the environment appeared to have a positive impact on people's wellbeing. New communal living room furniture had also been ordered to improve people's comfort. The service appeared to be better maintained than it was during our last visit, and now felt more welcoming.

A service improvement plan was in place, which took account of environmental improvements required. A new service improvement plan, with an additional focus on specific areas, was being developed. We were advised by the leadership team that once complete, this will be shared with stakeholders for feedback.

This requirement has been met.

Met - outwith timescales

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Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How well do we support people's wellbeing?	3 - Adequate
1.1 People experience compassion, dignity and respect	3 - Adequate
1.3 People's health and wellbeing benefits from their care and support	3 - Adequate

How good is our leadership?	3 - Adequate
2.2 Quality assurance and improvement is led well	3 - Adequate

How good is our staff team?	3 - Adequate
3.2 Staff have the right knowledge, competence and development to care for and support people	3 - Adequate
3.3 Staffing arrangements are right and staff work well together	3 - Adequate

How good is our setting?	3 - Adequate
4.1 People experience high quality facilities	3 - Adequate

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