

Holmesview Care Home Service

2 Holmes Road
Broxburn
EH52 5JZ

Telephone: 01506 859 660

Type of inspection:
Unannounced

Completed on:
6 April 2022

Service provided by:
Randolph Hill Nursing Homes
(Scotland) Ltd

Service provider number:
SP2003002451

Service no:
CS2010270153

About the service

Holmesview is a care home providing care and support for up to 60 older people.

The service is owned and managed by Randolph Hill Care Homes Ltd and has been registered since 2011. The service is situated on the main street in Broxburn and has some local shops, public transport and amenities within walking distance.

Accommodation is provided over two floors, in six living units, each containing ten single en-suite bedrooms, a lounge and dining area, and a communal bathroom. There is also a larger public lounge on the upper floor, and an enclosed sensory garden with access from some bedrooms and one of the downstairs lounges. Kitchen and laundry facilities are situated on the ground floor, and there is also a small hairdressing salon.

The philosophy of Randolph Hill Care Homes Ltd is "to provide high quality, skilled and empathetic individual care".

At the time of the inspection there were 56 people using the service.

About the inspection

This was a follow up inspection which took place on 5 April 2022 between 21:00 and 23:45 and 6 April 2022 between 09:30 and 18:15. The inspection was carried out by 2 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 23 people using the service and 2 of their families.
- spoke with 31 staff and management
- observed practice and daily life, reviewed care plans and other documents
- spoke with 4 other professionals who knew Holmesview.

Key messages

- The home had a nice atmosphere and people were able to move more freely around the care home.
- The restrictions which were in place on people's freedoms, such as locked doors, were no longer in place.
- The care home team had introduced new systems to reduce the risk of spread of infection.
- More staff were available and this had improved outcomes for people.
- Work was still needed to improve people's stress and distress care plans.

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
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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 carried out an initial inspection of the service on 1 and 2 March 2022. The overall evaluation for this key question was weak. We completed another visit to the home on 5 and 6 April 2022 to follow up on the improvements that were required.

We have reported on our findings under the following sections of this report:

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

'What the service has done to meet any areas for improvement we made at or since the last inspection'.

Because there was improvement in how well the service supports peoples wellbeing, we have re-evaluated quality indicators 1.1 and 1.3 from weak to adequate and assessed 1.5 as adequate.

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

Requirements

Requirement 1

By the 14 February 2022 the provider must demonstrate that the service has systems in place to ensure that the health needs of individual service users are adequately assessed, monitored and met. In order to do this, you must:

Demonstrate that staff will contact a GP or other relevant healthcare team member when people's health condition is not improving and continues to deteriorate.

Ensure that staff have the necessary skills and experience to implement effective systems of monitoring people's health and wellbeing if their condition changes, or there has been a significant event.

Ensure that care and support plans are in place detailing the person's needs and preferences and how these are to be met.

Ensure that staff have the necessary skills and experience to give key information to other healthcare professions, to allow for an accurate overview of a person's health and wellbeing.

Ensure that planned support is fully implemented for people whose health has changed and close monitoring of their health is implemented, including frequent observations, risk of dehydration, skin integrity and the assessment of their capabilities.

Ensure that managers monitor and audit health needs robustly.

This requirement was made on 28 January 2022.

Action taken on previous requirement

People could now be assured that the service had a system in place to ensure that their health needs were assessed and met.

Met - outwith timescales

Requirement 2

By 1 April 2022 the provider must ensure that where people experience any restrictions or restraint, these are legally authorised, proportionate and necessary; restrictions must be in the person's best interests and take account of their human rights.

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

- a) no person should be locked in their bedroom unless they request this
- b) people who want to have their doors locked while in their room have appropriate legal consents in place and this is identified within their personal plan
- c) where people choose to have their door locked, there is a risk assessment in place which includes a mechanism for emergency access to the room
- d) staff are clear about the purpose of obtaining consent from people or their representative, and how this should be used.

This is to comply with: Regulation 4(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 which state: 'My human rights are protected and promoted' (HSCS 1.2) and 'If my independence, control and choice are restricted, this complies with relevant legislation and any restrictions are justified, kept to a minimum and carried out sensitively' (HSCS 1.3).

This requirement was made on 3 March 2022.

Action taken on previous requirement

People could be assured that where there was any restrictions in place, this was people's choice and appropriate consent and care plans were in place.

Met - within timescales

Requirement 3

By 1 April 2022 the provider must ensure that people's outcomes are not compromised when they experience stress or distress.

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

- a) have up to date personal plans in place for people who may experience stress or distress, that contain established triggers, tried and tested alleviation techniques and strategies to provide support
- b) ensure that staff are familiar with people's personal plans and are able to identify triggers for stress or

- distress and use alleviation techniques consistently in practice
- c) staff are clear about when health care needs are not being met due to stress or distress and how to record and report that
- d) management have a robust process in place for reviewing all incidents including incidents of stress or distress and that these reviews are used to inform and support staff in the provision of care that meets people's health outcomes
- e) staff and management recognise potential harm and understand their duty to report this under the Adult Support and Protection Act (Scotland) 2007.

This is to comply with: Regulation 4(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure care and support is consistent with the Health and Social Care Standards which state: 'My care and support meets my needs and is right for me' (HSCS 1.19) and 'any treatment or intervention that I experience is safe and effective'(HSCS 1.24).

This requirement was made on 3 March 2022.

Action taken on previous requirement

Stress and distress care plans did not have sufficient information to support people when they experience stress or distress. This requirement has been extended until 3 June 2022

Not met

Requirement 4

By 1 April 2022, the provider must ensure that people can be confident that staff receive training appropriate to the work they are to perform.

To do this the provider must, at a minimum, ensure staff receive up to date training in:

- a) Infection Prevention and Control, Covid-19, safe use of personal protective equipment (PPE) and hand hygiene.
- b) Practical moving and handling.
- c) Adult support and protection.
- d) Supporting people with stress and distress.

This is to comply with Regulation 4(a) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations, Scottish Statutory Instruments 2011/210.

This is also to ensure that care and support is consistent with the Health and Social Care Standards 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 code.' (HSCS 3.14)

This requirement was made on 3 March 2022.

Action taken on previous requirement

Good progress had been made with staff training in practical moving and handling and infection prevention and control. Arrangements had been made to deliver stress and distress and adult support and protection training. Only 10 staff had been able to attend both of these as courses had to be cancelled due to staff self

isolating. The service had still to arrange dates to deliver this training. This requirement will be extended until 3 June 2022

Not assessed at this inspection

Requirement 5

By 1 April 2022, the provider must ensure that people are supported at all times by enough staff to meet their health, safety and wellbeing needs. This must include, but is not limited to, ensuring people's emotional wellbeing needs are met, including when people experience stress and distress.

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

- a) that daily direct care hours are sufficient to support good outcomes for people
- b) that dependency levels are assessed, at least every 28 days, and take account of the layout of the building, current care needs of people and feedback from staff.

This is to comply with Regulation 15(a) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI2011/210).

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

'My needs are met by the right number of people' (HSCS 3.15) and
'People have time to support and care for me and to speak with me' (HSCS 3.16).

This requirement was made on 3 March 2022.

Action taken on previous requirement

People could be assured that an additional staff member, both day time and overnight, had improved outcomes for people.

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 fully support meaningful contact to resume between adult care home residents and their loved ones, the provider should work within the Scottish Government Guidance - 'Open with Care'. They should also support people to get the most out of life by the re-introduction of external activities and entertainers.

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

- a) ensure people benefit from a range of activities that takes account of the current restrictions resulting from Covid-19
- b) ensure staff are available to lead activities and encourage people to remain active on a regular basis
- c) ensure activities are based on people's preferences, wishes and choices and personal plans reflect involvement in meaningful activities and outcomes.

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

'I can maintain and develop my interests, activities and what matters to me in the way I like' (2.22).

This is also to ensure that care and support is consistent with Open with Care, Supporting Meaningful Contact in Care Homes. Published by The Scottish Government, February 2021.

This area for improvement was made on 3 March 2022.

Action taken since then

Activities for people had increased and activity staff were no longer deployed to other duties. Planned activities were not aligned with peoples interests and hobbies and were limited by social distancing between groups of people who lived at Holmesview. This meant that people did not always experience good outcomes from planned activities.

This area for improvement had not been met and will be followed up at the next inspection

Previous area for improvement 2

To ensure that people can be confident that their nutrition needs are fully met, the provider should ensure that:

- a) Fluids and snacks are offered out-with set mealtimes.
- b) Hot food that is cooked or reheated must be kept at a temperature above 63°C.
- c) Reheated foods must be raised to a temperature of not less than 82°C.

This ensures care and support is consistent with the Health and Social Care Standards, which state: "My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected." (HSCS1.23) and "My meals and snacks meet my cultural and dietary needs, beliefs and preferences." (1.37).

This area for improvement was made on 3 March 2022.

Action taken since then

There were plenty snacks and drinks available but people were not being offered these consistently. Food probes were available and in use for reheated foods but some of the food was cold at the time of serving.

This area for improvement had not been met and will be followed up at the next inspection

Previous area for improvement 3

To support good infection prevention and control practices, the provider should ensure that:

- a) The service is outbreak-ready and that any outbreak of Covid-19 is managed as per the National Infection Prevention and Control Manual: Winter (21/22), Respiratory Infections in Health and Care Settings Infection Prevention and Control (IPC) Addendum.
- b) There is a process in place for the safe management of contaminated linen.

c) There is a procedure for the safe management and disposal of personal protective equipment (PPE) and clinical waste.

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

'I have confidence in people because they are trained, competent and skilled' (HSCS 3.14).

This area for improvement was made on 3 March 2022.

Action taken since then

The service was organised with information and plans to adopt in the event of outbreak of infectious disease and staff were aware of the plan. A procedure was in place and practiced for the safe management and disposal of linen, waste and PPE.

This area for improvement had 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.

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
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	3 - Adequate

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