

Forefaulds Care Home Care Home Service

33-39 Blackbraes Road
East Kilbride
G74 3JY

Telephone: 01355 220102

Type of inspection:
Unannounced

Completed on:
21 October 2020

Service provided by:
Sanctuary Care Limited

Service provider number:
SP2019013443

Service no:
CS2019378609

About the service

Forefaulds Care Home is situated within a residential area of East Kilbride. It has 52 single rooms spread between two floors. There are 12 rooms located on the first floor and 40 rooms located on the ground floor. People have access to a range of en suite facilities as well as access to shared bathrooms and shower facilities. Lounge and dining facilities are available on both floors. There is a lift available between both floors and individuals have access to three secure courtyard/garden areas.

The service is registered to provide care and support to a maximum of 53 older people, which includes two places for people younger than 65 with neurological or physical disabilities.

Sanctuary Care state that they aim to offer care that is of the highest standard and is tailored to meet individuals specific wishes and choices. These choices will be respected and honoured at all times.

This was a focused inspection to evaluate how well people were being supported during the COVID-19 pandemic. We evaluated the service based on key areas that are vital to the support and wellbeing of people experiencing care during the pandemic.

This inspection was carried out by two inspectors and a representative from Healthcare Improvement Scotland.

What people told us

We spoke with residents who were happy with the quality of the service and support they received.

Some residents had difficulty using verbal communication to give their views therefore we spent a considerable time observing how residents and staff interacted with each other.

We spoke with four relatives by telephone and a visitor. All were positive about the way communication had been maintained during the pandemic and told us:

'Communication was via e mails and discussions, no concerns, feel home have managed very well'

'The home have coped very well. I am kept well up to date via e mail around government up- dates and what the service was doing in relation to this etc. When I e-mailed back with queries it was dealt with very quickly'

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 good is our care and support during the COVID-19 pandemic?	4 - Good
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Further details on the particular areas inspected are provided at the end of this report.

How good is our care and support during the COVID-19 pandemic?

4 - Good

7.1 People's health and wellbeing are supported and safeguarded during the COVID-19 pandemic.

Our focus in this inspection area was to establish if people's health and wellbeing benefitted from their care and support in relation to COVID-19. We also wanted to ensure that people experienced high quality care and support that was right for them.

People had been supported to remain in contact with family and friends during the lockdown period. Window and garden visits were taking place in line with government guidance and protocols and we spoke with a visitor during inspection. They told us visits were well organised and it was important to both of them these were maintained.

People should have a personal plan that sets out how their needs will be met as well as their wishes and choices. Personal plans were person centred and reflected people's current support needs guiding staff to offer appropriate care and support. Anticipatory Care Plans noted resident's end of life choices and preferences.

There were procedures in place to monitor fluid intake which showed residents received adequate fluids throughout the day. We observed drinks available in bedrooms. This meant residents were hydrated which was beneficial to their health and wellbeing.

People should be able to choose to have an active life and participate in a range of activities each day, both indoors and outdoors. There were some group activities taking place with the garden being well used. Regular opportunities to be outside is good for mental health and wellbeing. New one-to-one activities had been developed to meet the needs of those who preferred individual activities. However, we asked the management team to consider how more individual time could be provided to support the increased number of people who stayed in their rooms. This would provide stimulation and may help prevent isolation. We were assured additional hours will be available to increase the level and variety of activities.

The activity co-ordinator had not received training in how to offer a stimulating environment. This could give her knowledge and skills to motivate people to participate in a range of meaningful activities that could benefit their physical and mental health. It was agreed that the activity co-ordinator would benefit from observing activities in another of the providers homes. This would give an opportunity to ask questions and discuss ideas with someone of experience in the same role. We signposted the activity co-ordinator to the Care Inspectorate HUB where there are a number of resources that maybe helpful.
(see area for improvement 1)

We observed residents freely moving around the home with social distancing measures in place. Staff monitored communal areas to ensure social distancing was maintained which helped reduce the transmission of infection and keep people safe.

7.2 Infection control practices support a safe environment for both people experiencing care and staff.

We noted the cleanliness of the environment was mainly of a good standard and free from clutter. In general care equipment was found to be clean with cleaning schedules in place. The management of laundry was good and met infection prevention and control standards.

Housekeeping staff told us they had enough equipment and products and could explain how they used them. However, although there was enhanced cleaning of frequently touched surfaces housekeeping staff were not using the correct dilution of the cleaning solution to ensure correct infection control measures. This was rectified by day two of the inspection and will be monitored daily by the management team.

The service was undertaking a number of audits including a monthly environmental audit and infection control audit. We suggested the service could get other staff to undertake the observational hand hygiene audits to provide a more peer to peer review. This would help empower staff and increase their knowledge and skills.

Some areas of the home showed signs of wear and tear which made it difficult for housekeeping staff to ensure the environment was cleaned effectively. A refurbishment plan was already in place and underway. The plan had been reviewed and upgraded to ensure sluices and domestic service rooms were fit for purpose and provided staff with adequate handwashing facilities. The manager agreed to send a fortnightly update of progress to the case holding inspector to provide evidence the necessary upgrades are progressing in a timely manner.
(See area for improvement 2)

The home had introduced an isolation unit. This was a separate area where new admissions could safely isolate before moving into the main units. Although there had been no cases of the virus within the home staff were prepared and able to explain how an outbreak would be managed.

Staff had completed COVID-19 training appropriate to their role. They appeared knowledgeable about identifying both typical and atypical signs of COVID-19. This will ensure action is taken quickly to try to prevent any spread of the virus.

There was adequate supplies of PPE and staff were able to describe its appropriate use. Staff were overall practicing appropriate use of PPE and hand hygiene. They were supported by the management team to maintain correct and consistent practice.

7.3 Staffing arrangements are responsive to the changing needs of people experiencing care.

Throughout the COVID-19 pandemic we found staff had worked well as a team and offered valuable support to each other. Staff reported they felt supported by the management team. They said that they were approachable and available to discuss any issues or concerns staff had.

Staff had covered extra shifts to try to reduce the use of agency staff in an attempt to lessen the footfall and the risk of the infection being introduced into the home. As a result, fewer agency staff were needed and where possible the same agency workers had been provided which gave them opportunities to get to know residents and staff. The service had continued to recruit and now had a full staff team.

New staff had shadowing opportunities and completed an induction. They were provided with a mentor who offered support and monitored their progress.

There was a staffing contingency plan in the event of an outbreak and any staff shortages to ensure adequate staffing levels were maintained. We have asked this is reviewed to ensure the plan is up to date.

We spent time observing interactions between staff and residents and found these were warm and friendly with easy chat. Residents looked comfortable with staff and happy to be in their company.

Areas for improvement

1. In order to ensure that care and support is consistent with the Health and Social Care Standard 2.22 which states 'I can maintain and develop my interests, activities and what matters to me in the way that I like' the activity co-ordinator should have appropriate training and support.
2. In order to ensure that care and support is consistent with the Health and Social Care Standard 5.22 which states 'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment' the refurbishment plan should be progressed in a timely manner

Detailed evaluations

How good is our care and support during the COVID-19 pandemic?	4 - Good
7.1 People's health and well being are supported and safeguarded during the COVID-19 pandemic	4 - Good
7.2 Infection control practices support a safe environment for people experiencing care and staff	4 - Good
7.3 Staffing arrangements are responsive to the changing needs of people experiencing care	4 - Good

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