

Kintyre House (Care Home) Care Home Service

Saltburn
Invergordon
IV18 0JX

Telephone: 01349 853248

Type of inspection:
Unannounced

Completed on:
25 August 2020

Service provided by:
Gate Healthcare Limited

Service provider number:
SP2003001705

Service no:
CS2003008482

About the service we inspected

The service has been registered since 2002.

Kintyre House is a purpose built care home for older people and is situated in the town of Invergordon. The care home has a pleasant setting and overlooks the Cromarty Firth. The care home is close to local amenities and facilities. Kintyre House is surrounded by spacious garden areas, which are maintained to a very high standard. There is also access to a community wood that is suitable for people using a wheelchair. This area contains garden furniture, benches and is well used by people who live in the care home and their families.

Kintyre House is registered to provide a care service to a maximum of 41 older people and at the time of the inspection, the home was full. Kintyre House aims to provide a quality service in a stimulating, homely and caring environment where people can enjoy the best quality care.

Kintyre House also aims to provide a non institutional environment for people who live there, with caring and professional staff to ensure that people are cared for according to their individual needs.

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 inspectors from the Care Inspectorate.

How we inspected the service

This report was written following an unannounced follow up inspection on 25 August 2020. Feedback was provided to the service and provider on 25 August 2020.

At this inspection we focused on the two requirements we made at the last inspection on 1 July 2020. During the inspection, we gathered evidence from various sources.

We:

- looked at the service training plan and training records
- looked at quality assurance tools, systems and action plans
- looked at care plans and associated documentation
- spoke with staff.

Taking the views of people using the service into account

We were unable to speak with people during this inspection. However we did observe that they were being engaged in meaningful activities and appeared chatty, happy and content.

Taking carers' views into account

We were unable to speak with any relatives as part of this inspection.

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

Previous requirements

Requirement 1

It is a requirement that the provider, by 17 July 2020, must ensure that all staff (including domestic and laundry staff) are trained, competent and skilled to the prevention and managing an outbreak of COVID-19 and are following and applying all relevant Public Health guidance (COVID-19 Information and Guidance for Care Home Settings). In order to achieve this, the provider must ensure:

- a) there is an on-going assessment of staff competence and skills in relation to the identified aspects of care and support;
- b) that staff received training based on the above assessment;
- c) there are effective systems in place to monitor that staff are competent and skilled and where there are indications of poor practice they are recognised, and action is taken promptly to address them;
- d) that accurate training records are maintained which indicate the training events that have been attended.

This is in order 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 codes' (HSCS 3.14).

This is in order to comply with: Regulations 4(1)(a) and 15(b)(i) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This requirement was made on 3 July 2020.

Action taken on previous requirement

Staff told us that recent training had increased their knowledge and awareness of COVID-19. Staff were familiar with the signs and symptoms of COVID-19 and knew how to prevent and manage any potential outbreak. We saw staff wearing and disposing of protective personal equipment, (PPE), in line with guidance. One staff member explained: "the training has helped me feel more confident in my job."

Training records demonstrated that most staff had completed training in relation to infection control procedures, wearing and disposing of and the management of COVID-19. As a result, people using the service could be confident that they were cared for by trained, competent staff. We saw that new staff did not commence employment until they had completed the same training.

Staff training was evaluated through regular monitoring of staff practice, quality assurance audits and reflective accounts. The manager had also commenced one to one supervision meetings. The information gathered was used to inform individual training plans that provided staff with the skills and knowledge to maintain people's health and wellbeing. Consequently, people who used the service could feel reassured that staff worked in a safe way to protect them.

Met - within timescales

Requirement 2

The provider must by 21 August 2020, ensure that service users receive care and support that meets their health, safety and wellbeing needs. In order to achieve this, the provider must ensure that:

- a) service users' needs are assessed and their care is planned by skilled professionals;
- b) service users, other relevant people and professionals are fully involved in the care planning process;
- c) service users receive care and support from trained, competent and skilled staff who are familiar with their needs;
- d) staff are led well and work together to consistently provide high quality care;
- e) staff respond to signs of deterioration in service users' health and wellbeing, that they are unhappy or at risk of harm and use the care planning process to improve service users' experiences and outcomes;
- f) the quality of service users' care and support is evaluated and action taken to make any necessary improvements. This process must take account of service users' views, experiences and outcomes, the views of staff and relatives involved in their care and support and their written care records.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state that: 'My care and support meets my needs and is right for me' (HSCS 1.19), 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11) and 'My care and support is provided and planned in a safe way.' (HSCS 4.14)

This is also in order to comply with Regulation 4(1)(a) and Regulation 5 of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This requirement was made on 3 July 2020.

Action taken on previous requirement

The service had prioritised people with higher levels of support needs and taken action to review and improve their care. As a result, the potential risk of harm had been reduced. For example, one person experienced a reduction in feeling stressed and distressed. As they were now less anxious, they were able to take more interest in their day to day life and their surroundings. In addition, the person was eating well and putting on weight and taking more meals with others, which promoted their social contact. For another person we could see that they were gaining weight which promoted their wellbeing.

Many of the care plans had been reviewed and amended. We found people's needs, choices and preferences had been considered through discussion and involvement with relatives. Consequently, people were involved in the planning of their care. Staff told us that they felt more confident in completing care plans. Some of the care plans were task based and lacked a person centred approach. This compromises people's ability to be recognised as an expert in their own experiences, needs and wishes.

For two people we could see through daily recording that their healthcare needs had changed and this had resulted in medical intervention. There were no care plans in place to support what actions staff were taking to meet these needs. There were no evaluations as to whether or not the medical intervention was successful. This could potentially lead to further health complications and compromise people's safety, well-being and comfort.

The service should further develop the care plans to make sure that a person's individual needs, wishes and choices are embedded fully into their plan of care. This would ensure that each person's healthcare, wishes and choices were respected in order to improve people's experiences and outcomes.

We extended the timescale for meeting the requirement to 7 November 2020.

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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