WEST DUNBARTONSHIRE COUNCIL

Report by the Director of Community Health and Care Partnership

Community Health and Care Partnership: 20th November 2013

Subject: Care Inspectorate Reports for Older People's Care Homes operated by Independent Sector Providers in West Dunbartonshire

1. Purpose

1.1 To provide Members with a routine up-date on the most recent Care Inspectorate assessment of independent sector older peoples' Care Homes within West Dunbartonshire.

2. Recommendations

2.1 The Committee is asked to note the content of this report.

3. Background

- **3.1** Care Inspectorate inspections of Care Homes focus on any combination of the four thematic areas: quality of care and support, environment, staffing and management & leadership.
- 3.2 Any care homes which has been awarded Grade 2/weak or less and/ or who have requirements placed upon them will usually be inspected again within the following twelve weeks. These follow-up visits present the opportunity to demonstrate progress on the improvement action plan agreed and to have an improved grade awarded if merited.
- 3.3 Committee will recall from previous reports that the CHCP's Quality Assurance Section continue to monitor the independent sector care homes in line with the terms of the National Care Home Contract; and arrange monitoring visits to ensure continued progress is being maintained in relation to agreed improvement plans. In addition, CHCP staff work with independent sector providers to maintain their awareness of new developments and provide opportunities to share good practice/learning via correspondence and regular care home provider meetings.
- **3.4** The independent sector Care Homes reported within this report are:
 - Clyde Court Care Home
 - Castle Glen Care & Nursing Home

Copies of the inspection reports can be accessed on the Care Inspectorate web-site: www.scswis.com.

4. Main Issues

Clyde Court Care Home

- **4.1** Clyde Court Care Home is owned and managed by Four Seasons (No 9) Limited.
- **4.2** The care home was inspected on 20th August 2013 and the report published on 11th September 2013. The following grades were awarded:
 - For the theme of *Care and Support* Grade 3/Adequate.
 - For Environment Grade 3/Adequate.
 - For Staffing Grade 3/Adequate.
 - For Management and Leadership Grade 3/Adequate.
- **4.3** The inspection report detailed the following four requirements to be addressed:
 - Provider to ensure that the measures to monitor the fluid intake of residents identified as being at risk of dehydration are being regularly assessed and fully completed. This is with reference to ensuring that the charts used for monitoring risk of fluid intake record the target intake for the 24 hour period and that there are clear records of the steps taken if the targets are not achieved. This requirement was carried over from the previous inspection of 24th April 2013 and reported on at the August 2013 Committee. The Inspector acknowledged improvements but thought there were some continuing issues regarding monitoring fluid intake so reiterated it in this inspection report. This was to be completed within 24 hours of receipt of the inspection report. The provider has confirmed that this requirement was completed as per the timescale.
 - To review and improve the delivery of diet of soft and textured diets to
 ensure that food reaches the residents at an appropriate temperature and
 that a full range of food is made available for residents. This was to be
 completed within two weeks of receipt of the inspection report. The
 provider has confirmed that this requirement was completed as per the
 timescale.
 - Ensure records of medicines held on the premises for use by the residents are safe, up to date and accurate. To do this they must ensure there is a complete, accurate and consistent auditable record of all prescribed medicines entering, administered or destroyed, and leaving the service. This requirement was also carried over from the previous inspection of 24th April 2013, although the the Inspector noted progress had been regarding medication being stored and medication information recorded in personal plans. This was to be completed within four weeks of receipt of the inspection report. The provider has confirmed that this requirement was completed as per the timescale.
 - Ensure that they meet the health and welfare needs of residents with regards to the administration of covert medication. To do this they must ensure that the records of administration pathways are reviewed and

contain up to date information, including advice from the pharmacist about the administration of covert medication in line with best practice guidance from the Mental Welfare Commission. This was to be completed within four weeks of receipt of receipt of the inspection report. The provider has confirmed that this requirement was completed as per the timescale.

Castle Glen Care & Nursing Home

- **4.4** Castle Glen Care & Nursing Home was most recently inspected on 8th May 2013 and the report published on 9th August 2013. It was assessed as:
 - For the theme of *Care and Support* Grade 3/Adequate.
 - For *Environment* Grade 2/Weak.
 - For Staffing Grade 2/Weak.
 - For Management and Leadership Grade 2/Weak.
- **4.5** The inspection report detailed twelve requirements to be addressed:
 - To take account of the residents and families views and provide accommodation appropriate for a care service. This was to be completed within three months of inspection report receipt. The provider has confirmed that this requirement was completed as per the timescale.
 - To ensure all private and confidential discussions between staff and visiting professionals or relatives are conducted in private. This was to be completed within two weeks of inspection report receipt. The provider has confirmed that this requirement was completed as per the timescale.
 - Produce a complete plan of redecoration and refurbishment for the internal of the building and the external environment. This was to be completed within one week of inspection report receipt. The provider has confirmed that a plan was submitted to the Care Inspectorate as per the timescale.
 - Ensure proper arrangements are in place for carrying out all repairs and maintenance to the internal and external areas of the building. This was to be completed within one week of inspection report receipt. The provider has confirmed that this requirement was completed as per the timescale and that they have a programme for on-going maintenance and repairs.
 - Ensure the external area of the home and the grounds are suitable for people with mobility issues and wheelchair users. This was to be completed within one month of inspection report receipt. The provider has confirmed that this requirement was completed as per the timescale and that a maintenance programme has been developed.
 - Remove from the main lounge area all items of equipment and furniture no longer used by people using the service. This was to be completed within 48 hours of inspection report receipt. The provider has confirmed that this requirement was completed as per the timescale.
 - Replace all worn and unsanitary bedding, towels and personal care equipment to ensure the health and safety of people using the service. This was to be completed within one week of inspection report receipt.

- The provider has confirmed that this requirement was completed as per the timescale.
- Ensure that at least two members of the organisation undertake staff interviews. This was to be completed within one week of inspection report receipt. The provider has confirmed that this requirement was completed as per the timescale.
- Undertake PVG checks for all staff prior to them commencing employment, and where in exceptional circumstances, following discussion with the Care Inspectorate, they wish to have the person in place prior to their PVG check being received, must ensure that appropriate risk assessments are put in place. This was to be completed within 24 hours of inspection report receipt. The provider has confirmed that this requirement was completed as per the timescale.
- The provider to ensure that the recruitment process follows best practice guidance and the Scottish Social Services Council's (SSSC) Code of Practice for Employers. This was to be completed within 24 hours of inspection report receipt. The provider has confirmed that this requirement was completed as per the timescale.
- Manager or a senior member of staff must personally vet all recruitment documentation to ensure that all appropriate checks have been carried out in accordance with good employment practice. There was no timescale given in the inspection report for the completion of this requirement. The provider has confirmed that this requirement was completed as per the timescale.
- To put in place and implement appropriate quality assurance systems to ensure the wellbeing of people using the service. This was to be completed within one month of inspection report receipt. The provider has confirmed that this requirement was completed as per the timescale.
- **4.6** The table below summarizes the gradings between the last two inspections for both Care Homes:

Care Home	Previous Grades						Current Grades					
	1	2	3	4	5	6	1	2	3	4	5	6
	24 April 2013						20 August 2013					
Clyde Court Care Home												
Care & Support		✓							✓			
Environment		√							√			
Staffing		✓							√			
Management & Leadership			✓						√			
	11 January 2013						8 May 2013					
	1	2	3	4	5	6	1	2	3	4	5	6
Castle Glen Care & Nursing			✓						√			
Home			\checkmark					✓				
Care & Support			√					√				
Environment			✓					√				
Staffing												
Management & Leadership												

5. People Implications

5.1 There are no implications for staff employed by the CHCP.

6 Financial Implications

- 6.1 The National Care Home Contract provides an additional quality payment, by the Council, to Care Homes if the Care Inspectorate Inspection report awards grade of 5 or 6 in the Quality of Care and Support thematic area. There is a second additional quality payment if the high grade in Quality of Care and Support thematic area is coupled with a grading of a 5 or 6 in any of the other three thematic areas.
- 6.2 The National Care Home Contract also accounts for providers receiving low grades of 1 or 2 in the Care Inspectorate Inspection report. If either of these grades are awarded it may trigger the withdrawal of the quality funding component, resulting in a reduction of £20 per resident per week from the weekly fee payable.
- 6.3 Castle Glen Care & Nursing Home's inspection report awarded the service a low grading of 2 in three of the quality themes. This may have future financial implications for the Provider as, in line with the National Care Home Contract, the service has been given the opportunity to correct this via a robust action/improvement plan. However, if the low grades are awarded again in their next inspection then the reduction of £20.00 per week per resident will be applied.

7. Risk Analysis

- 7.1 Grades awarded to a service after a Care Inspectorate inspection are an important performance indicator for registered services. For any service assessed by the Care Inspectorate, failure to meet requirements within the time-scales set out could result in a reduction in grading or enforcement action. Consistently poor grades awarded to any independent sector Care Home would be of concern to the CHCP and the Council, particularly in relation to the continued placement of older people by the authority in such establishments.
- **7.2** A moratorium on new admissions by the CHCP to Castle Glen Care & Nursing Home is currently in place.

8. Equalities Impact Assessment (EIA)

8.1 No issues were identified in a screening for potential equality impacts.

9. Consultation

9.1 Not relevant or required for this report.

10. Strategic Assessment

10.1 The Council's Strategic Plan 2012-17 identifies "improve care for and promote independence with older people" as one of the authority's five strategic priorities.

R.Kein D.

Keith Redpath

Director of the Community Health & Care Partnership

Date: 5th November 2013

Person to Contact: Mrs Sharon Elliott

Quality Assurance Manager West Dunbartonshire CHCP

Room 1.6, LevenValley Enterprise Centre

Castlehill Rd, Dumbarton G82 5BN

E-mail: sharon.elliott@west-dunbarton.gov.uk

Telephone: 01389 772196

Appendices: None

Background Papers: All the inspection reports can be accessed from

http://www.scswis.com/index.php?option=com_content&t

ask=view&id=7909&Itemid=727

Wards Affected: All.