

To: Renfrewshire Integration Joint Board Audit, Risk and Scrutiny Committee

On: 18 November 2022

Report by: Head of Health and Social Care

Subject: Inspection of Renfrew Care Home by the Care Inspectorate

1. Summary

- 1.1 Social care services are subject to a range of audit and scrutiny activities to ensure that they are undertaking all statutory duties and are providing appropriate care and support to vulnerable individuals and groups. Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. The Care Inspectorate inspect, award grades and help services to improve. The Care Inspectorate also investigate complaints about care services and can take action when standards of care are not met.
- 1.2 Since 1 April 2018, the Health and Social Care Standards have been used across Scotland. They were developed by Scottish Government to describe what people should experience from a wide range of care and support services. They are relevant not just for individual care services, but across local partnerships. The Care Inspectorate's expectation is that they will be used in planning, commissioning, assessment and in delivering care and support.
- 1.3 This report summarises the findings from the inspection conducted at Renfrew Care Home on 31 August 2022 2 September 2022.

2. Recommendations

It is recommended that the IJB Audit, Risk and Scrutiny Committee:

• Note the content of this report.

3. Background and Context

3.1 Protecting and safeguarding care home residents and staff continues to be a key priority for the HSCP and as a result our clinical and care

governance arrangements were strengthened significantly during the Covid-19 pandemic including: daily huddle meetings; weekly Multi-Disciplinary Team meetings; routine staff and resident testing; undertaking supportive assurance visits and supporting care homes following inspections. Whilst some of these arrangements have been stepped back, adaptations to our practice using the learning from additional infection prevention and control measures, allows efficient step up of arrangements in the event of any risk.

3.2 The Care Inspectorate use a quality framework that sets out the elements that address key questions about the difference care is making to people and the quality and effectiveness of the aspects contributing to those differences.

The quality framework is framed around six key questions. The first of these is:

How well do we support people's wellbeing?

To try and understand what contributes to that, there are four further key questions: How good is our leadership? How good is our staff team? How good is our setting? How well is our care planned?

The final key question is: What is our overall capacity for improvement?

3.3 There are up to 5 quality indicators associated with each key question, with key areas identifying clear practice cover by each indicator.

Quality indicators are evaluated against a six-point scale:

- 6 Excellent Outstanding or sector leading
- 5 Very Good Major strengths
- 4 Good Important strengths, with some areas for improvement
- 3 Adequate Strengths just outweigh weaknesses
- 2 Weak Important weaknesses and priority action required
- 1 Unsatisfactory Major weaknesses and urgent remedial action required
- 3.4 On conclusion of an Inspection, the Care Inspectorate publish a report which details: feedback from families/carers; their observations throughout the Inspection including strengths and areas for improvement; any requirements, recommendations, or enforcement; and an evaluation. In addition, the Care Inspectorate will also consider any areas for improvement identified in previous inspections to the care home.

4. Inspection of Renfrew Care Home

- 4.1 On 31 August 2022, the Care Inspectorate began an unannounced 3 day inspection of the service at Renfrew Care Home. Following this inspection, there was 1 area of improvement recorded, 3 previous areas for improvement were recorded as met and the Care Inspectorate graded Renfrew Care Home as 4 Good.
- 4.2 The breakdown of the key questions considered during the inspection and the quality indicators are as follows:

How well do we support people's wellbeing? 4 - Good

1.3 People's health and wellbeing benefits from their care and support. **(4 - Good)**

1.4 People experience meaningful contact that meets their outcomes, needs and wishes. (**5 - Very Good**)

1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure. **(4 – Good)**

How good is our leadership? 4 - Good

- 2.2 Quality assurance and improvement is led well (4 Good)
- 4.3 In making their evaluation of the service, the inspectors:
 - Spoke with five people using the service and four of their family and friends during the inspection process.
 - Sought the views of five family members by email.
 - Spoke with 13 staff and management.
 - Received two emails from staff.
 - Observed practice and daily life.
 - Reviewed documents.
 - Spoke to one visiting professional.
 - Received one email from a visiting professional.
- 4.4 Key messages from the inspection:
 - Staff treated everyone with kindness, compassion, dignity and respect.
 - People living in the service were supported to maintain relationships with those people important to them.
 - People had up to date assessments and care plans that informed their care and support.
 - Staff worked closely with health and social care partners to support people's health and wellbeing.
 - The service was visibly clean, odourless and dust free.
 - The service had a consistent and stable staff team.

- The management team acknowledged improvements to their IPC (Infection Prevention and Control) were necessary to be in line with the best practice guidance NIPCM (National Infection Prevention and Control Manual).
- The management team acknowledged improvements to their quality assurance would better improve people's outcomes
- 4.5 The report noted that staff were observed supporting residents with dignity and respect. The inspectors noted that one relative said, "The staff have been amazing over the last couple of years. Mainly they have definitely gone above and beyond any job grade in looking after the relatives in the home in the most difficult of circumstances." Another relative said, "We are very happy with the care my relative receives, which I believe, is compassionate and definitely considers us, their family alongside their care."
- 4.6 The report noted that the service had developed good working relationships with external healthcare professionals. The management team informed inspectors of a new initiative being implemented to further improve the multidisciplinary care and support people living in the service received. People's health and wellbeing benefitted from the proactive approach to care and support offered by the service
- 4.7 The report noted that people benefitted from their medical needs being met quickly and efficiently. Relatives told inspectors that staff vigilantly monitored their loved one's health needs and noted changes quickly. Staff confidently explained the procedure they would undertake when requesting information and advice from an external health professional. A visiting health professional told inspectors "I have found the staff within Renfrew care home to follow any instructions we give and participate in meeting people within their care health needs very well.
- 4.8 The report noted that the service recognised that relatives and friends may wish to be actively involved in their loved one's care and support. Relatives told inspectors they were able to assist their family member with support tasks such as eating and drinking. People's health and wellbeing benefitted their loved one being directly involved in their care and support.
- 4.9 The report noted that throughout the inspection, inspectors observed visits taking place with no restrictions and in line with the 'Open with Care' guidance published by the Scottish Government. However, inspectors heard from some relatives who did not have the correct guidance at the time of the inspection. One person said, "If we could change anything, it would be to have better access to the facilities i.e., pre-Covid. Able to sit in the lounge, make a cuppa with them, even chatting to the other residents and relatives can help when you are unsure or sometimes just to help with conversations with others in the same situation." The management team acted immediately and

informed all visitors of the 'Open with Care' guidance during the inspection. This enabled all visitors to have the current information on visiting. People and their relatives benefitted from the quick management response to the concerns of visitors during the inspection.

4.10 The report noted that decisions about care and treatment were informed by care plans and a range of good practice tools, reviews, and risk assessments. However, inspectors found medication management could be further improved by implementing robust PRN (as required) medication protocols to further support the stress and distress care plans for people living in the service. Inspectors noted they were very pleased to see that during the inspection, the management team started work on their medication procedures

Area for Improvement: To support peoples heath and wellbeing and improve the quality of their experiences the provider should improve the current management of medications. This should include PRN (as required) medication and link directly to peoples stress and distress care plans. This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'Any treatment or intervention that I experience is safe and effective.' (HSCS 1.24)

The Care Homes Service has a protocol in place for administration of PRN medication, supporting care staff to manage stressed and distressed behaviour of residents appropriately. There is recognition that care staff in Renfrew Care Home would benefit from some practice development about using the protocol and recording decision making with more clarity.

- 4.11 The report noted that people experienced a service with a visible management and staff team. People told inspectors they could raise concerns or issues with any staff member, and they would be taken seriously, and their issue would be dealt with quickly and efficiently. One person said, "I would have no hesitation in raising any concerns or complaints with the home and would be assured they would be listened to." Another person said "The staff are lovely, if I have an issue, I can talk to anyone. They all help me." People benefited from an open and transparent culture facilitated by the staff and management team.
- 4.12 The report noted that supervisions and team meetings were regular and up to date at the time of the inspection. Staff said they found the management team very supportive, and an open-door policy was in place. Inspectors noted supportive and nurturing relationships between the management and the staff team throughout the threeday inspection. Staff told inspectors they felt very supported and could ask any of management team for support if they required it. Inspectors discussed ways to further improve both supervisions and

team meetings with the management team. People benefitted from a well-supported staff team that meaningfully reflected on their practice.

4.13 As part of the Inspection, the Care Inspectorate also considered the four areas for improvement identified in the last inspection of the care home which took place on 27 January 2020. These areas for improvement together with the update from the most recent inspection are as follows:

Previous Area for Improvement 1 - Meaningful activity should be available for each resident and respond to their needs, wishes and choices. The home needs to review the activities provided for those residents cared for in their rooms or living with a cognitive impairment.

Update: The provider had recently employed advertised for a full time activities worker. At the time of the inspection the provider was following their own recruitment process to safely appoint the new worker to the role. This area for improvement has been met.

Previous Area for Improvement 2 - The management team need to review the current practice of locking the doors to the units.

Update: Due to the Covid-19 pandemic, people were restricted in the service for infection prevention and control purposes. The service complied with all appropriate guidance during the pandemic. This area for improvement has been met.

Previous Area for Improvement 3: Staff need to ensure that record keeping in personal care charts and medication protocols is accurate and meaningful to inform the ongoing care needs of each resident. Staff must follow their professional codes of practice in these areas.

Update: At the time of the inspection personal care charts and medication charts were in place and being used to inform staff practice. This area for improvement has been met.

4.14 Care Home services are committed to the strategic vision where "Renfrewshire is a caring place where people are treated as individuals and supported to live well". Care Home services acknowledged the areas for improvement raised in the Care Inspectorate report and took action to address these. A detailed improvement plan has been developed to closely monitor the progress against the actions to ensure that the service continues to work towards achieving the standards expected by the Care Inspectorate and Integration Joint Board.

Implications of the Report

- **1. Financial** None
- 2. HR & Organisational Development None
- **3. Community Planning** None
- 4. Legal None
- 5. Property/Assets None
- 6. Information Technology None
- 7. Equality & Human Rights None
- 8. Health & Safety None
- 9. **Procurement** None
- **10. Risk** Failure by services to meet and exceed the National Care Standards could lead to poor inspection results and enforcement action from the Care Inspectorate, as well as negative outcomes for service users and carers.
- **11. Privacy Impact** None

List of Background Papers

(a) The Inspection reports for all Renfrewshire Council Care Homes are available to download from the <u>Care Inspectorate Website</u>.

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