

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

On: 17 November 2023

Report by: Head of Health and Social Care

Subject: Inspection of Hunterhill 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 Hunterhill Care Home in September 2023.
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2. Recommendations

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

- Note the content of this report.
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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. 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:

How well do we support people's wellbeing?
How good is our leadership?
How good is our staff team?
How good is our setting?
How well is our care planned?
What is our overall capacity for improvement?

- 3.3 Under each key question, there are three or four quality indicators, covering specific areas of practice.

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 Hunterhill Care Home

- 4.1 On 12 September 2023, the Care Inspectorate began an unannounced inspection of the service at Hunterhill Care Home, returning on 14 September 2023 to complete the inspection and provide feedback. There were no areas of improvement recorded in their report, and the Care Inspectorate graded Hunterhill 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

1.1 People experience compassion, dignity and respect

(4 - Good)

1.2 People get the most out of life

(5 - Very Good)

1.3 People's health and wellbeing benefits from their care and support

(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 11 people using the service and 8 of their representatives during the inspection process.
- Spoke with 10 staff and management.
- Observed practice and daily life.
- Reviewed documents.
- Spoke with visiting professionals.

4.4 Key messages from the inspection:

- Staff were motivated and dedicated to their roles.
- There was a newly appointed manager in post who had begun to make some improvements in the service.
- The provider was actively engaged in further improving the environment and the menus.
- People were cared for by staff who knew them well and there was a good degree of consistency.
- The service benefitted from skilled activity staff who offered a very good range of high-quality meaningful activities.

4.5 The report noted that People were treated with dignity and respect which they should expect. Staff interactions with people were done in a gentle, well paced and respectful way.

4.6 The report noted that People were clean and well presented, and we heard how staff planned to support people out as needed to get personal shopping and new clothes.

- 4.7 The report noted Staff told inspectors that at times, due to short notice absence, things were more pressured and they would be under more stress; however, they felt confident that staffing levels were overall good and there was a commitment to maintaining these levels
- 4.8 The report noted that staff worked in a proactive way to support people's continence. This meant that people received more dignified care and support and there was less risk of infection or skin integrity issues.
- 4.9 The report noted that People were able to move around freely in the home, accessing the garden and group activities that happened in the downstairs lounge area, and these areas were used well by people and their relatives. The report further noted that part of the development plan of the service was to further develop the garden area and build connections with other care homes in the area to bolster sense of community and build networks
- 4.10 The report noted a lack of snacks available in a visible way on the first day of the inspection, however on their return, inspectors saw that snack boxes, including fresh fruit, were now available in visible locations around the home, which meant people could more easily help themselves to snacks.
- 4.11 The report noted Hunterhill Care Home had a really interesting and exciting range of events and activities for people to get involved with. Staff leading on these were motivated and enthusiastic, and care staff participated in activities and worked well as a team to ensure these were well attended and people got the most out of them.
- 4.12 The report noted that relatives commented that they really appreciated the weekly emails and monthly planner that was shared with them, as this meant they could chat with their loved one about things they had done and knew when to plan their visits.
- 4.13 The report noted that inspectors heard from health professionals involved in the service that they had confidence that staff knew people well, staff responded to any concerns appropriately and linked in with the right specialists as needed in order to ensure people's health and wellbeing benefitted from their care and support. This meant that people were being helped to stay well.
- 4.14 The report noted that there was a range of quality assurance tools at a local level that were centred around how the senior and management team were measuring and identifying improvements. These included robust audits that captured meaningful details about aspects of care, care planning, dining experiences, medication practices, and addressing when things went wrong, such as medication errors and taking appropriate action on these. These contributed to an effective improvement culture across the service.

- 4.15 The report noted that there was effective delegation of duties between the manager and senior team, and this meant that audits were assigned to people on a regular basis. There were regular monthly reviews of care planning/care needs, as well as environmental and premises checks, for example, room/bed/mattress to ensure these remained clean, hygienic and comfortable.
- 4.16 The report noted that inspectors sampled some recent recruitment records and confirmed that new staff were recruited in line with 'Safer recruitment through better recruitment' guidance. Inspectors suggested looking at developing interview questions to be values-based and capture better detail around people's responses at interview. This will contribute to recruitment of the most suitable candidates.

Implications of the Report

1. **Financial** – None
2. **HR & Organisational Development** – None
3. **Strategic Plan and Community Planning** – None
4. **Wider Strategic Alignment** – None
5. **Legal** – None
6. **Property/Assets** – None
7. **Information Technology** – None
8. **Equality & Human Rights** - None
9. **Health & Safety** - None
10. **Procurement** – None
11. **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.
12. **Privacy Impact** - None

List of Background Papers

The Inspection reports for all Renfrewshire Council Care Homes are available to download from the [Care Inspectorate Website](#).

This specific report is available via the following [link](#).

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