

Richmond House, Crieff Care Home Service

Richmond House
Drummond Terrace
Crieff
PH7 4AF

Telephone: 01764 653 934

Type of inspection:
Unannounced

Completed on:
18 May 2022

Service provided by:
Richmond House, Crieff, a Scottish
Charitable Incorporated Organisation

Service provider number:
SP2015012632

Service no:
CS2015343348

About the service

Richmond House is a large Victorian style property which can provide care for up to 19 residents. The organisation is a "non-profit" residential care home facility operating within Crieff, in the local authority area of Perth and Kinross. The care home is managed by a Board of Trustees who delegate the day-to-day management to the manager.

The care is provided by a dedicated group made up of the management team, care assistants, catering and domestic staff. The care staff work on a 24 hour rota while the other staff work more standard hours between 08:00 and 17:30.

The main building is stone built with a new extension having being built on at the side of the property. The property is a three storey building with the bedrooms located on the ground and first floor. There are offices on the first floor and a flat/residence in the third floor/loft space. This is accessed by a staircase from the first floor.

A lift is also in place on the ground floor. In addition to the bedrooms there is an office, toilet and staff rest room on the first floor.

The residents have a large lounge they can use, with a small conservatory and smaller lounge in addition to this, should residents wish a smaller space in which to relax. There is one dining room which is also used for the residents to enjoy some structured activities that may require the use of tables. There is a main kitchen area and small staff kitchen adjoining this which both residents and relatives can access.

The home has a beautiful, secure garden that can be accessed by all residents from one of the small lounges. The garden includes sensory features and exercise stations. There are hens and guinea pigs kept within the grounds. In addition, there are apple trees, a variety of plants and vegetables. During our inspection we saw the enjoyment people experienced from the resident cats and visiting dogs.

About the inspection

This was an unannounced which took place on 16, 17 and 18 May 2022. The inspection was carried out by one inspector from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection. In making our evaluations of the service we:

- spoke with three people using the service and three of their family/friends/representatives;
- spoke with six staff and management;
- observed practice and daily life;
- reviewed documents; and
- spoke with visiting professionals.

Key messages

- staff were kind, compassionate and caring
- people were well supported to maintain relationships and connect with the local community
- people were encouraged to identify their own goals and supported to work towards them
- people's well being was supported by a variety of imaginative and creative, meaningful activities
- the service was proactive in ensuring people had access to the right health professionals
- the provider must ensure that they are implementing current guidance in relation to infection prevention and control

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 well do we support people's wellbeing?	3 - Adequate
How good is our leadership?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

3 - Adequate

Overall we evaluated this key question as adequate, where strengths only just outweighed weaknesses.

People's health and wellbeing should benefit from their care and support. People's personal plans were accessible and personalised. It was clear that people had been involved in setting their own goals and plans were in place to support people to access interests and activities that mattered to them. The service had good links with health professionals and were responsive to people's changing needs. We provided guidance to ensure that care plans were updated promptly in accordance with changing health care needs.

People and their families were supported to be involved in reviewing their care in the way that suited them, and the service should ensure that reviews take place every six months. Families expressed a high level of satisfaction in relation to the standard of care: one relative said 'the care is exemplary' another person told us, 'she has complex needs and the staff are remarkable.'

The service provided a range of personalised and creative activities both as groups and for individuals. People were involved in the planning and development of projects and activities and their feedback and input was constantly sought. The service made very good use of technology to support activities. The safe and secure garden provided many points of interest for people, including exercise stations, vegetable plot and lots of bird feeders as well as resident chickens and guinea pigs. People were supported to enjoy spending time outside in the garden and we heard that people had also been supported to go for short walks in the local community. The service also organised outings on a minibus. We heard from relatives how activities had benefitted their loved ones' well being, 'He's thrived since moving there - he's happy and so I'm happy' another said, 'my relative can be difficult to engage, but they try to keep her active and she seems quite content.'

People could choose to eat their meals in the dining room or their own room. Mealtimes were relaxed and unhurried. People had their own individual snack box and water bottle to suit their preferences. People enjoyed being able to manage this themselves and it supported them to maintain their food and fluid intake.

Staff were creative at supporting people to stay connected to their community and loved ones during the Covid-19 pandemic. We saw some really good examples of where family/friends relationships were developed and encouraged. Residents and relatives meetings had continued on line during the pandemic and had recently returned to in person meetings.

The service had a strong connection with the local primary school and held weekly choir rehearsals with them using technology. The relatives we spoke with were very happy with the visiting arrangements and the contact they had with their relatives. They found staff to be welcoming and open. Comments included: 'there's no restrictions on visiting, it's back to normal you just wear a mask and do a test.'

The home is a large building with many rooms and communal areas. There was a good standard of cleanliness throughout the whole home. Communal areas, corridors and lounges were clean and free from clutter.

The service had good supplies of Personal Protective Equipment (PPE) that were accessible at PPE stations throughout the home. PPE includes the wearing of masks by staff and visitors in all parts of the home. We saw staff and visitors wearing masks appropriately to reduce the risk of transmission of airborne infections.

The management of clinical waste was not of an acceptable standard at the start of our inspection. All clinical waste should be segregated and stored out of public access in accordance with the NIPCM guidance to minimise exposure to infection. The management team took action and were putting in place a clinical waste management system which included separate internal bins, clearly labelled so staff knew where to dispose of clinical waste with outside storage being locked for safety. We've made a requirement and will follow up on how well this is embedded in practice (see requirement 1).

Laundry and domestic staff were generally knowledgeable, however the provider must ensure that all staff are aware of and implement the most recent guidance from Health Protection Scotland in order to support people's health and wellbeing. Comprehensive daily cleaning schedules were in place, however we found that there were days where they were not completed. We could not be assured that essential cleaning had been done on these days, this could have a detrimental impact on people's health and wellbeing. Policies, procedures and practices should comply with current guidance, particularly in relation to the recording of daily cleaning schedules. We've made a requirement and will follow up on how well this is embedded in practice (see requirement 1).

Staff performed hand hygiene at the key points of providing care and when entering or exiting different areas of the home. Staff were seen to perform hand hygiene before and after providing care to people, before tasks such as serving meals and after touching frequently touched surfaces. This is required to break the transmission path between people.

Requirements

1. By 1 July 2022, the provider must ensure that infection prevention and control practices take into account the most up to date guidance from Health Protection Scotland. To do this, the provider must, at a minimum:
 - a) ensure that clinical waste is stored safely and disposed of in a manner which takes account of the most up-to-date guidance from Health Protection Scotland; and
 - b) ensure that daily cleaning is undertaken in accordance with up to date guidance.

This is to comply with Regulations 4 (1) (a) and (d) Welfare of Users and procedures for the prevention and control of infection) of the Social Care and Social Work, Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'My environment is secure and safe.' (HSCS 5.17); and
 'I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment.' (HSCS 5.22).

How good is our leadership?

4 - Good

During this inspection we considered the Quality Indicator 2.2 'Quality assurance and improvement is led well'. We evaluated performance as good where several strengths impacted positively on outcomes for people and outweighed areas for improvement.

It is important that services have effective systems in place to assess and monitor the quality of service they provide. These systems will help to drive improvement and create good outcomes for people experiencing care.

The manager used a range of audit tools to monitor and assess standards of service provision. This included systems to ensure staff were appropriately registered with their professional bodies, training requirements of staff and the ongoing maintenance of the building. Audits in relation to infection prevention and control should be updated to ensure that they are aligned to the most recent guidance from Public Health Scotland. We have made an area for improvement (see area for improvement 1).

The service had a development plan, however the manager acknowledged it needed to be updated. The service places a strong emphasis on meaningful participation of people and their family. People and their family members were involved in the planning and reviewing their care and support and in the development of activities and projects. This approach should contribute to the service's new development plan as well as linking to updated quality audits.

Both relatives and people living in the home were complimentary about the management team and staff in general. Comments included 'I know the staff there - there's a nice family atmosphere', 'I feel confident in the staff, they are receptive if I need to raise anything with them', 'the manager and staff go the extra mile.'

Regular meetings were held with staff in which they had the opportunity to learn and share information as a team. Observations of staff practice and spot checks had been completed to assess learning and competence.

Areas for improvement

1. To support people's wellbeing, the provider should update their quality audit tools to ensure that they reflect most recent guidance from Public Health Scotland.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that:

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19)

This is to ensure that staff practice, skills and knowledge are consistent with Antimicrobial Resistance and Healthcare Associated Infection (ARHAI) Scotland's Scottish Health Facilities Note 01-05 Safe Management of the Care Environment, Cleaning Specification for Older people and Adult Care Homes.

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

Requirements

Requirement 1

In order to ensure that people get the medication they need, the provider must put in place effective medicines management systems by 31 December 2019.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state:

'If I need help with medication, I am able to have as much control as possible.' (HSCS 2.23) and in order to comply with Regulation 4 - Welfare of Users of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011.

This requirement was made on 20 December 2019.

Action taken on previous requirement

The provider had in place an effective medicines management system. We could see that accurate records were kept of administration of medication and followed practice and guidelines.

Met - within timescales

Requirement 2

The provider must put into place a quality assurance system which they can use to effectively assess that the quality of care they provide meets the Health and Social Care Standards by 31 January 2020. The service needs to follow-up on findings and actions to bring about improvements which should then be included in a development plan.

This ensures that care and support is consistent with the Health and Social Care Standards which state:

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19) and in order to comply with Regulation 3 of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011.

This requirement was made on 20 December 2019.

Action taken on previous requirement

The provider has quality assurance processes in place and have worked hard to ensure that people have been supported to maintain their wellbeing and connections with their families throughout the duration of the pandemic.

Met - within timescales

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How well do we support people's wellbeing?	3 - Adequate
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	3 - Adequate
How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good

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Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

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