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Park Homes (UK) Limited
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05 December 2024
2024383351
CS2021000288

Dear Park Homes (UK) Limited

IMPROVEMENT NOTICE – 2ND EXTENSION OF TIMESCALE

On 6 September 2024 you were served with an Improvement Notice in relation to Carlingwark House, Carlingwark Street, Castle Douglas, DG7 1TH, in terms of section 62 of the Public Services Reform (Scotland) Act 2010 ("the Act"). The Improvement Notice stated that unless there was a significant improvement in provision of the service, Social Care and Social Work Improvement Scotland (hereinafter referred to as "the Care Inspectorate") intended to make a proposal to cancel your registration. The Improvement Notice specified the nature of the improvements to be made, and the period within which it/they were to be made.

The Care Inspectorate has decided to extend the timescale within which some of the improvements must be made in order to give you a further opportunity to make a significant improvement in the provision of the service. The revised timescales are as follows:

- 1. By 30 December 2024, extended from 18 October 2024,** to ensure the safety, health, dignity and wellbeing of people experiencing care, the level of staffing on each shift must be adequate to provide the assessed level of support to people at all times. This must include, but is not limited to:
 - a) there must be sufficient staff on duty who are competent and who are meeting the physical and social support needs of people using the service;
 - b) staff must be deployed appropriately to ensure that people receive assistance with their care needs at times that meet their needs and preferences;

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- c) undertake a thorough evaluation of all the current needs of people who use the service and use the findings to ensure that there are sufficient staff on duty; and
- d) assessed staffing levels must take into account the layout of the building and communal areas.

This is in order to comply with section 7(1)(a) & (b) and (2) of the Health and Care (Staffing) (Scotland) Act 2019.

2. By 30 December 2024, extended from 18 October 2024, you must promote the health, welfare and safety of people experiencing care and protect them from harm. This must include, but is not limited to:

- a) a system is implemented to enable oversight of any incidents that occur;
- b) thorough investigations are conducted following serious incidents; and
- c) any incidents or Adult Support and Protection concerns are recognised and reported timeously to the Care Inspectorate and relevant bodies, with actions taken to mitigate identified risks.

This is in order to comply with Regulations 3 and 4(1)(a) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

3. By 11 November 2024, extended from 18 October 2024, you must ensure that people experiencing care are supported in an environment that is safe and clean and procedures for the prevention and control of infection are in place and being implemented. This must include, but is not limited to:

- a) ensure that the premises, furnishings, and equipment are clean, tidy and well maintained at all times;
- b) implement a process to ensure the standard of cleanliness throughout the home is maintained in line with 'Antimicrobial Resistance and Healthcare Associated Infection Scotland' (ARHAI) good practice guidance; and
- c) ensure staff are trained and competent in safe infection prevention and control practice and implement this in the work that they do.

This is in order to comply with Regulations 3, 4(1)(a), 4(1)(d) and 9(2)(b) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) and section 8(1)(a) of the Health and Care (Staffing)(Scotland) Act 2019.

Premises were seen to be clean, free from any debris and malodours. Managers and staff were completing daily walkarounds to identify any areas of concern to address. Soiled and worn furniture had been disposed of and new mattresses and cushions were in place and further items of furniture had been ordered.

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There had been improvement in recording using cleaning schedules and audits taking place in relation to infection prevention control in the home. The service had further planned for improving the auditing process of cleaning schedules. Housekeeping staff had increased within the home which allowed staff to have sufficient time to complete the required tasks. This reduced risk for people living in the home.

Training and guidance was compliant in Infection prevention and control. Competency checks had been recorded for all staff in relation to Infection prevent and control, hand hygiene, and donning and doffing. We observed staff to be following best practice in relation to infection prevention and control.

This improvement has been complied with.

4. By 30 December 2024, extended from 18 October 2024, you must ensure that people experiencing cares' health and wellbeing needs are accurately monitored and recorded to meet people's individual outcomes. This must include, but is not limited to:

- a) there is a clear system, which is being implemented, for ongoing daily recording documentation when this is required;
- b) personal plans provide clear information on the health and care needs that require to be monitored and requisite actions to be taken;
- c) staff are aware of the importance of accurately completing documentation and their accountability in line with their professional Codes of Practice;
- d) documentation is accurately completed at the time the support is provided; and
- e) documentation is part of the service's audit process to ensure the health, welfare and safety needs of people are being met.

This is in order to comply with Regulations 3, 4(1)(a) and 9(2)(b) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/ 210).

5. By 2 February 2025 extended from 29 November 2024, you must ensure people experiencing care receive a service which is well led and managed. You must support better outcomes through a culture of continuous improvement, underpinned by robust and transparent quality assurance processes. This must include, but is not limited to:

- a) assessment of the service's performance through effective audit and analysis;
- b) where areas for improvement are identified through audit: -
 - i) implement action plans which set out specific, achievable, and realistic actions required to address the areas for improvement.
 - ii) put in place and implement a process by which actions will be measured to ensure positive outcomes are achieved for people experiencing care; and
 - iii) set out detailed timescales for completion/review.

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- c) ensuring all staff are accountable for and carry out the required remedial actions set out within action plans; and
- d) reviewing the effectiveness of actions put in place to ensure these elicit positive outcomes for the health, safety, and welfare of people experiencing care.

This is in order to comply with Regulations 3 and 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI2011/210).

6. By 1 December 2024 you must ensure people are experiencing care that promotes dignity and choice in an environment that has sufficient bathing and showering facilities. This must include, but is not limited to:

- a) ensure there are accessible shower facilities for people's assessed needs;
- b) enable people to maintain independence and choice as regards the facilities they use; and
- c) when people's choice of bathing and showering facility cannot be met, the reason for this must be clearly recorded with the actions taken to address this.

This is in order to comply with Regulations 4(1)(a) & (b) and 14(d) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

There is now an accessible shower in place within the home. This was recently fitted and deep cleaned ready to use.

Peoples bathing or showering preferences had been recorded in their personal plan. A relevant referral had been made for one person who would prefer a shower and requires further support to shower safely. Further detail is required in personal plans as to the frequency and creating strategies to support people in using the shower safely if that is their preference.

There was one person at time of inspection who was unable to bathe or shower. Advice had been taken from district nurses and recorded in their personal plan. Options were also being explored with that person and relevant health professionals, so actions could be taken to allow them to bathe or shower safely.

This improvement has been complied with.

If there is no significant improvement within the revised timescale, we intend to make a proposal to cancel your registration in terms of section 64 of the Act.

A copy of this notice has been sent to the local authority within whose area the service is provided.

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Please contact me if you would like to discuss this letter or if there is anything in the notice you do not understand.

Yours sincerely



Shona Shelton
Team Manager

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