

Clinton House Nursing Home Care Home Service

1 Ayr Road
Shawsburn
Larkhall
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Telephone: 01698 883 043

Type of inspection:
Unannounced

Completed on:
15 February 2023

Service provided by:
Clinton House Strathclyde (Care
Homes) Ltd

Service provider number:
SP2003002417

Service no:
CS2003010566

About the service

Clinton House Nursing Home is a care home in Shawsburn near Larkhall. The home is registered to provide support to a maximum number of 26 people, with up to eight who are not yet 65 years old. The majority of the bedrooms benefit from ensuite facilities. There is an upstairs which is accessible by passenger lift or stairs. There is an enclosed garden space and a large car parking facility for visitors. At the time of inspection there were 26 residents.

The home aims "to deliver care in a professional manner and adopt a holistic approach to care, while affording dignity and respect to each individual resident."

About the inspection

This was an unannounced follow up inspection which took place on 15 February 2023. 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 people using the service, their families, staff and management, visiting professionals, reviewed documents and observed practice and daily life.

Key messages

- We observed kind and caring interactions between people using the service and the staff.
- The people living in the home and their families were positive about their experience in relation to the care from the staff and food options.
- The environment was clean, tidy and homely.
- The management need to address all of the elements required in the outstanding requirement to ensure staff are following best practice in relation to promoting continence.

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

Requirements

Requirement 1

By 1 September 2022, the service provider must ensure that safer recruitment practice is followed at all times.

This is to comply with Regulation 9 (1) (Fitness of employees) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulation 2011 (SSI2011/210).

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state: 'I am confident that people who support and care for me have been appropriately and safely recruited.' (HSCS 4.24)

This requirement was made on 1 June 2022.

Action taken on previous requirement

We are satisfied that the provider has taken corrective action to ensure that robust measures are in place to ensure that the service follows safer recruitment guidance. This is essential in order to provide assurances to people using the service and their families that all staff employed have been vetted to ensure that they are suitable for working within the care home.

Met - within timescales

Requirement 2

By 1 September 2022, the provider must ensure that the team are actively promoting continence for all residents who are not self managing.

To do this they must:

(a) introduce continence care plans for the residents who require assistance to ensure that these detail how staff should promote continence with and for individuals.

- (b) ensure that for those who are fully dependent on staff support have detailed in their care plan/risk assessment the frequency within which this support should be provided.
- (c) Practice observations must be undertaken to confirm that all staff are actively promoting continence and providing safe care in this area.

This is to ensure the continence care and support is consistent with the Health and Social Care Standard which states that: 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11). It is also necessary to comply with Regulation 4 (1) (a) and 4 (1) (b) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) 2011 (SSI 2011/210).

This requirement was made on 1 June 2022.

Action taken on previous requirement

Promoting continence aims to maintain a person's continence by regularly encouraging them to use the toilet or altering the environment to prevent disability incontinence. The service has continued to develop the personal plans to reflect the individuals' needs and preferences in line with continence care. However, the service was unable to demonstrate that they have undertaken staff practice observations which would allow them to accurately self assess the practice in promoting continence within the home.

The management need to undertake these practice assessments and incorporate this into their quality assurance system in order to assess, monitor and offer assurance that this area for improvement is being progressed. This should include facilitating learning and discussion across the staff team and providing the opportunity for staff to reflect on this learning and their own practice in promoting continence.

This requirement has not been met. The deadline for this requirement has been extended to 1 April 2023.

Not met

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

The service provider should review the staffing levels in the home to ensure that there is sufficient staff numbers available to meet the health and care needs of the people living in the home.

This is to ensure care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'My needs are met by the right number of people' (HSCS 3.15) and 'I am confident that people respond promptly, including when I ask for help.' (HSCS 3.17).

This area for improvement was made on 1 June 2022.

Action taken since then

During the inspection we observed caring and compassionate support being given by the staff members with the people living in the service. It was our observation that the staff knew the residents well and both residents and their families provided positive feedback on the care that they receive. It was our observations that the staff found it difficult at times to offer supervision to people in the home particularly those who chose to remain in their bedrooms during mealtimes. The management shared ideas on how this could be improved and offered assurances that they would undertake further observations in the service to assess the staffing levels and how best to deploy staff in the service.

We will continue to assess this area for improvement at future inspections.

Previous area for improvement 2

The service provider should ensure staff access mandatory training including refreshers and are supported through supervision, to identify areas where support is required to improve practice. This should include observed practice and competency checking.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14) and "I experience high quality care and support based on relevant evidence, guidance and best practice." (HSCS4.11).

This area for improvement was made on 1 June 2022.

Action taken since then

The management have improved their systems to provide an overview of staff training (mandatory and refresher training). This now enables management to have a clear overview of the training that has been completed and indeed identify areas that need to be actioned. This area of improvements requires further improvement by offering staff regular opportunities to reflect on their practice and identify their own learning and development needs. The Management also need to carry out regular observations of staff practice in order to have confidence that staff have the necessary competencies to undertake their roles.

We will continue to assess this area for improvement at future inspections.

Previous area for improvement 3

To reduce the risk of cross-contamination of equipment and supplies, the provider should ensure that the sluice rooms are de-cluttered and cleaned.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment.' (HSCS5.22)

This area for improvement was made on 1 June 2022.

Action taken since then

This area for improvement has been fully actioned, therefore has been met.

Complaints

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

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