

Darnley Court Care Home Service

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Darnley
Glasgow
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Telephone: 01418 760 144

Type of inspection:
Unannounced

Completed on:
16 March 2022

Service provided by:
HC-One No. 1 Limited

Service provider number:
SP2016012770

Service no:
CS2016349791

About the service we inspected

Darnley Court is registered to provide a care service to a maximum of 120 people of whom 60 will be older people with mental health problems. Inclusive in the total numbers are three places for specifically named people under 65, who were resident in the home on 12 February 2020. The provider is HC-One.

The home is located in Glasgow and is near to public transport facilities. The building is purpose-built with accommodation over two levels.

There are four separate units, which have access to their own enclosed garden areas and a car park to the front. At the time of the inspection, one unit was not operational.

At the time of the inspection, there were 71 people living in the care home.

This was a focused inspection to focus on the two requirements and one area for improvement from the last inspection. The last inspection was 20 January 2022.

This inspection was carried out by inspectors from the Care Inspectorate.

How we inspected the service

We spoke to the management team and eight staff.

We sampled eight care plans.

We examined quality assurance systems and processes.

We examined staff training records.

We observed staff and resident interactions.

We spoke with four residents.

We spoke with one family who were visiting.

Taking the views of people using the service into account

People were positive about their care.

Taking carers' views into account

Relatives were positive about their loved ones' care.

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

Previous requirements

Requirement 1

By 3 March 2022, the provider must comply with the Care Inspectorate guidance; 'Records that all registered care services (except childminding) must keep and guidance on notification reporting'. To do this, the provider must notify the Care Inspectorate of all relevant incidents. In order, the provider must at a minimum, ensure:

- Ensure that incidents, accidents, causes for concern and relevant events are notified to the Care Inspectorate as per our notification guidelines.

[https://www.careinspectorate.com/images/documents/2609/Rcds cm services must keep and notification reporting guidance COVID-19 \(100320\).pdf](https://www.careinspectorate.com/images/documents/2609/Rcds%20cm%20services%20must%20keep%20and%20notification%20reporting%20guidance%20COVID-19%20(100320).pdf)

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

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20) and 'I benefit from different organisations working together and sharing information about me promptly where appropriate'.

This requirement was made on 20 January 2022.

Action taken on previous requirement

Since the last inspection appropriate notifications had been made to the Care Inspectorate in accordance with the notification guidance. Systems and processes to capture and manage incidents, accidents, causes for concern and adverse events were effective.

Met - within timescales

Requirement 2

By 3 March 2022, the provider must ensure that the service is well led, priorities are identified and acted upon to promote positive outcomes for people living in the service. To do this the provider must, at a minimum, ensure:

- The management team implement robust auditing processes, to demonstrate all relevant care plan documentation required to guide staff, is reviewed, and provides comprehensive information in order that they can deliver a safe and quality service to people.
- Quality assurance systems and audits include direct observations of practice.
- A training needs analysis is completed to support the management team to prioritise training. Learning and knowledge should be evaluated through supervision. Training should include, but not be limited to, infection prevention and control, coronavirus update.

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19) and 'I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment' (HSCS 5.22).

It is also necessary to comply with Regulation 4(1)(a)(d), 10(2)(b) and 15(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011.

This requirement was made on 20 January 2022.

Action taken on previous requirement

Full care plan audits had commenced, and we saw examples of audits highlighting omissions, which generated tracked follow up action, however the auditing of care plans remains an ongoing process.

Infection Prevention and Control (IPC) audits had been completed, including observations of staff IPC practice; however, it was unclear how these audits informed actions that led to improvements. Further work was needed to ensure that these audits were effective.

Staff had access to a range of on-line learning and the management team were planning off-site face to face training. This included IPC and Covid-19. The coordination and oversight of training should be improved, to ensure that staff learning was prioritised and targeted to their specific roles.

Themed supervision records had been completed with some staff, however the quality of these varied. The format and structure of supervision should be developed to promote reflective practice and individual staff learning needs. This promotes improved knowledge and practice and supports positive outcomes for people who experience care.

We recognise the timescales given and the challenges the service has faced. We were encouraged by the efforts of the new management team and staff, and the progress made to date. However this requirement was not met, and we will extend the timescale for this.

The revised timescale is 29 April 2022.

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

In order that people receive the care and support that is right for them, the quality of personal plans should be regularly evaluated and reviewed by the service. Staff practice should be directed by the content of care plans which comprehensively identify people's needs, strengths and personal goals in an outcome focused way.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'My personal plan (sometimes referred to as my support plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15) and 'I experience high quality care and support because people have the necessary information and resources' (HSCS 4.27).

This area for improvement was made on 20 March 2022.

Action taken since then

Care plans gave good direction to staff on peoples' needs and wishes. Care plans we sampled were regularly reviewed by management and staff. Full care plan audits had commenced. This helps to ensure that care plans reflect peoples' current needs.

Satisfactory progress had been made and this area for improvement had 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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