ITEM No ...13.....



REPORT TO: PERFORMANCE & AUDIT COMMITTEE – 25 SEPTEMBER 2024

REPORT ON: CARE INSPECTORATE GRADINGS - REGISTERED CARE HOMES FOR

ADULTS/ OLDER PEOPLE AND OTHER ADULT SERVICES 2023-24

REPORT BY: CHIEF FINANCE OFFICER

REPORT NO: PAC22-2024

1.0 PURPOSE OF REPORT

The purpose of this report is to summarise for the Performance and Audit Committee the gradings awarded by the Care Inspectorate to Dundee registered care homes for adults/older people and other adult services in Dundee for the period 1 April 2023 to 31 March 2024.

2.0 RECOMMENDATIONS

It is recommended that the Performance & Audit Committee (PAC):

- 2.1 Note the scale and scope of Care Inspectorate led inspections carried out in 2023-24 during the reporting year (section 4.1)
- 2.2 Note the contents of this report and the gradings awarded as detailed in the attached performance report (Appendix 1) and highlighted in section 4.2.
- 2.2 Note the range of continuous improvement activities progressed during 2023-24 as described in section 4.3 and Appendix 1.

3.0 FINANCIAL IMPLICATIONS

None

4.0 MAIN TEXT

4.1 Background

- 4.1.1 The Care Inspectorate is responsible for the inspection and regulation of all registered care services in Scotland. The regulatory authority ensures that care service providers meet the Health and Social Care Standards¹ that came into effect in April 2018. The Care Inspectorate use a six-point grading system against which certain key themes are graded. The grades awarded are published in inspection reports and on the Care Inspectorate's website at www.careinspectorate.com.
- 4.1.2 During 2023-24 the Care Inspectorate continued to work with the different sectors to produce new scrutiny frameworks and update existing ones. This has included the development of self-evaluation templates for providers to ensure they can evidence through inspection that identified core assurances are being met. The current inspection framework for adult services is supported by a series of sector specific quality frameworks, which support providers to self-evaluate their own performance and are used by inspectors to provide independent assurance about the quality of care and support. As well as supporting inspection these quality frameworks

¹ https://www.gov.scot/binaries/content/documents/govscot/publications/advice-and-guidance/2017/06/health-social-care-standards-support-life/documents/health-social-care-standards-support-life/govscot%3Adocument/health-social-care-standards-support-life.pdf

are also designed to support improvement activity. The full range of relevant frameworks can be accessed at: Quality frameworks for care services | Care Inspectorate Hub (care homes for adults and older people, care at home, support services, and housing support services). Whilst there is variation across each framework, some core areas of focus are:

- How well people's wellbeing is supported.
- How good the leadership of the service is.
- How good the staff team is.
- How good the setting (physical environment) within the service is.
- How well care is planned.
- 4.1.3 The Care Inspectorate base their inspection priorities for each service on risk and intelligence and have set out a baseline for which key questions will be evaluated at each inspection dependent on grade and whether there are high scrutiny or medium/ low scrutiny requirements. Two key questions (elements of Key Question 1 How well do we support people's wellbeing? and Key Question 2 How good is our leadership?) are the minimum for all services, with the Care Inspectorate having discretion to look at and evaluate any further key question(s) and quality indicator(s) in addition to this if there are any practice concerns or concerns arising from the assessment of the core assurances during the actual inspection.

4.2 Gradings Awarded

- 4.2.1 Across the 46 registered services listed in the performance report contained within appendix 1, 69 inspections were undertaken during 2023-24. This included 44 inspections carried out across 24 care homes and 25 inspections carried out across 22 other adult services. Three care homes operated by Dundee Health and Social Care Partnership were inspected during the reporting year.
- 4.2.2 Table 2 illustrates the number of services receiving a grade of 1-6 in one or more key question along with a comparison from 2022-23.

Table 2: Grade Received by Service	Care	Homes	Other Adult Services		
Year	2023-24	2022-23	2023-24	2022-23	
Number of Services Inspected	24 22		22	18	

6 'excellent' in one or more key questions	2	8%	1	5%	0	0	0	0
5 'very good' in one or more key questions	5	21%	6	27%	11	50%	9	50%
4 'good' in one or more key questions	17	71%	13	59%	17	77%	12	67%
3 'adequate' in one or more key questions	15	63%	12	55%	7	32%	7	39%
2 'weak' in one or more key questions	4	17%	4	18%	0	0	2	11%
1 'unsatisfactory' in one or more key questions	-	-	-	-	-	-	-	-

4 'good' and above in all grades (first annual inspection)	9	38%	9	41%	17	77%	10	56%
3 'adequate' or below in all grades (first annual inspection)	8	33%	3	14%	0	0	2	11%

The number of inspections for both care homes and other adult services increased during 2023-24 from the previous year. The gradings data evidences a significant improvement in grades between 2022-23 and 2023-24 for other adult services, whilst care home grades remained similar with a noted increase in the number of care homes receiving a grade of 'adequate' or less in all assessed aspects. Whilst other adult services did not receive an 'excellent' in any Key Question they also did not receive a 'weak'. No inspected service received a grade 1 (unsatisfactory).

- 4.2.3 A requirement is a statement which sets out what a care service must do to improve outcomes for people who use services and must be linked to a breach in the Public Services Reform (Scotland) Act 2010, its regulations, or orders made under the Act, or a condition of registration. Requirements are enforceable in law. Requirements were placed on 13 of the 24 care homes and 6 of the 22 other adult services following inspection during 2023-24 (this is a small reduction from the proportion in 2022-23 which was 19 out of 40). Details of the improvement support provided to some of these services is set out in section 4.3 and appendix 1.
- 4.2.4 Enforcement is one of the Care Inspectorate's core responsibilities and is central to protecting residents and bringing about an improvement in the quality of care services. There was one enforcement measure put in place for one care home service during 2023-24. This took the form of an Improvement Notice. Further details regarding enforcement measures and improvement support from Dundee Health and Social Care Partnership to the service provider are contained within appendix 1.
- 4.2.5 Table 3 shows the overall percentage awarded at grades 1 to 6 for care homes. Of the 24 care homes inspected, 105 grades were awarded against the key questions noted below:

Table 3: Grade 2023-24	Overall	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 and support planned?
6 'excellent'	3%	1 (3%)	2 (7%)	0	0	0
5 'very good'	7%	3 (9%)	2 (7%)	1 (6%)	0	1 (7%)
4 'good'	35%	10 (30%)	11 (38%)	7 (44%)	3 (25%)	6 (40%)
3 'adequate'	42%	14 (43%)	12 (41%)	4 (25%)	8 (67%)	6 (40%)
2 'weak'	13%	5 (15%)	2 (7%)	4 (25%)	1 (8%)	2 (13%)
1 'unsatisfactory'	0	0	0	0	0	0

Table 3 demonstrates that grades of 'very good' or excellent' were more likely to be awarded against key questions relating to supporting people's wellbeing and leadership of care home services. Where grades of 'weak' were awarded these were more likely to be associated with supporting people's wellbeing, quality of staffing and quality of care and support planning.

Of the 3 Partnership operated care homes inspected during 2023-24, one ended the year with an evaluation of 'good' against all Key Questions inspected; another with an evaluation of 'adequate' against all Key Questions inspected; and the third with a mix of 'good' and 'adequate' against all Key Questions inspected.

Table 3(a) Tenancy Support (3 inspections / 6 grades awarded)

Table 3(a): Grade 2023-24	Overall	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 and support planned?	
6 'excellent'	0	0	0	0	0	0	
5 'very good'	0	0	0	0	0	0	
4 'good'	83%	2 (100%)	2 (67%)	0	0	1 (100%)	
3 'adequate'	17%	0	1 (33%)	0	0	0	
2 'weak'	0	0	0	0	0	0	
1 'unsatisfactory'	0	0	0	0	0	0	

Table 3(b) Support Services – Not Care at Home (3 inspections / 6 grades awarded)

Table 3(b): Grade 2023-24	Overall	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 and support planned?	
6 'excellent'	0	0	0	0	0	0	
5 'very good'	67%	2 (67%)	2 (67%)	0	0	0	
4 'good'	33%	1 (33%)	1 (33%)	0	0	0	
3 'adequate'	0	0	0	0	0	0	
2 'weak'	0	0	0	0	0	0	
1 'unsatisfactory'	0	0	0	0	0	0	

Table3(c) Support Services - With Care at Home (9 inspections / 26 grades awarded)

Table 3(c): Grade 2023-24	Overall	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 and support planned?
6 'excellent'	0	0	0	0	0	0
5 'very good'	27%	3 (43%)	2 (25%)	1 (17%)	0	1 (20%)
4 'good'	42%	3 (43%)	3 (37.5%)	2 (33%)	0	3 (60%)
3 'adequate'	31%	1 (14%)	3 (37.5%)	3 (50%)	0	1 (20%)
2 'weak'	0	0	0	0	0	0
1 'unsatisfactory'	0	0	0	0	0	0

Table 3(d) Care at Home with Housing Support (9 inspections / 26 grades awarded)

Table 3(d): Grade 2023-24	Overall	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 and support planned?	
6 'excellent'	0	0	0	0	0	0	
5 'very good'	35%	5 (56%)	2 (22%)	1 (25%)	0	1 (25%)	
4 'good'	58%	4 (44%)	6 (67%)	3 (75%)	0	2 (50%)	
3 'adequate'	7%	0	1 (11%)	0	0	1 (25%)	
2 'weak'	0	0	0	0	0	0	
1 'unsatisfactory'	0	0	0	0	0	0	

Tables 3(a) to 3(d) for other adult services cover a variety of service provision models therefore comparisons cannot be made against each model for the purposes of this report. A small number of inspections were undertaken within each model of service however data evidences that all services are meeting expected standards, with no grades of 'weak' awarded. Key Question 4 is not inspected against in the majority of other adult services as they are primarily provided in the service user's own home.

4.3 Continuous Improvement

4.3.1 There continues to be a joint commitment to continuous improvement and a proactive approach to improving and sustaining quality that involves care home providers, other adult service providers, the Care Inspectorate and representatives of Dundee Health and Social Care Partnership. This is particularly evident when significant concerns arise. There have been many benefits of such an approach e.g. effective sharing of information, shared agreement about improvement activity required and monitoring of the same until such point concerns have been

adequately addressed. Appendix 1 contains further information about the range of improvement support available to providers across care home, care at home, housing support and other adult services.

- 4.3.2 Appendix 1 provides further information about improvement support provided to care home providers who achieved grades of 'weak' in some aspects of their inspection gradings. This included:
 - Enhanced contract monitoring arrangements;
 - Additional support from the Care Home Team; and
 - Commencement of Adult Support and Protection Large Scale Investigations, supported by a voluntary embargo on new admissions.

Feedback from care home providers who have experienced issues within their care homes has been positive with regard to the above interventions from the Partnership. In 2 of the 3 care homes grades have now improved and enhanced monitoring and support has concluded.

4.3.3 A number of high performing services are also identified within Appendix 1, having received grades of 'excellent' and 'very good' across multiple aspects of the key questions utilised for inspection. Some of the common areas of strength identified across these services included: motivated staff who are eager to provide high quality services; quality of relationships and communication between the service, people they care for and support, unpaid carers and other agencies; good leadership of the service; the availability of a wide range of meaningful social activities; high standards of infection prevention and control practice; adequate staffing resources in place to support high quality service provision; and, a commitment to seeking and listening to feedback from services users and unpaid carers.

5.0 POLICY IMPLICATIONS

5.1 This report has been subject to the Pre-IIA Screening Tool and does not make any recommendations for change to strategy, policy, procedures, services or funding and so has not been subject to an Integrated Impact Assessment. An appropriate senior manager has reviewed and agreed with this assessment.

6.0 RISK ASSESSMENT

This report has not been subject to a risk assessment as it relates to the publication of Care Inspectorate information and is for information only.

7.0 CONSULTATIONS

The Chief Officer, the Clerk, Heads of Service - Health and Community Care and Chief Social Work Officer were consulted in the preparation of this report.

8.0 BACKGROUND PAPERS

None.

Dave Berry Chief Finance Officer

Rosalind Guild Contracts Officer

DATE: 31 August 2024

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APPENDIX 1 - PERFORMANCE REPORT - CARE INSPECTORATE GRADINGS

DUNDEE REGISTERED CARE HOMES FOR ADULTS/OLDER PEOPLE AND OTHER ADULT SERVICES

1 APRIL 2023 - 31 MARCH 2024

INTRODUCTION

The purpose of this report is to summarise for members the findings and gradings awarded by the Care Inspectorate to registered care homes for adults/older people and other adult services within Dundee for the period 1 April 2023 to 31 March 2024.

The Care Inspectorate regulate care services for people of all ages in Scotland. Their work includes registering services, inspecting and grading them, dealing with complaints, carrying out enforcement action where necessary and helping services to improve.

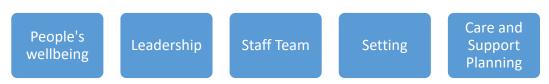
The Care Inspectorate also champion good quality care whenever encountered across the thousands of inspections carried out each year in Scotland. They work closely with all care providers to support them to improve all the time and collaborate and take action where experiences and outcomes are not meeting individuals' needs.

The role of the Care Inspectorate is to regulate and inspect care services so that:

- vulnerable people are safe;
- the quality of service delivered is high and continues to improve;
- people know the standards they have a right to expect;
- reports are made available publicly on the quality of services across Scotland; and
- they can support the review and development of how services are delivered.

In consultation with the social care sector, the Care Inspectorate have developed a self-evaluation and quality framework model based on the Scottish Government's Health and Social Care Standards. This model has been used to develop a suite of quality frameworks for different service types to evaluate the quality of care during inspections and improvement planning. It is recognised that self-evaluation is a core part of quality assurance and supporting improvement and this framework is primarily designed to support care services in self-evaluation. The same framework is then used by the Care Inspectorate to provide independent assurance about the quality of care and support. By setting out what Inspection Officers expect to see in high-quality care and support provision, it can help support improvement too. Using a framework in this way also supports openness and transparency of the inspection process.

The Care Inspectorate continue to inspect using a six-point grading scale (see below) against which the following key themes are graded:



Each theme is assessed from 1 to 6 with1 being 'unsatisfactory' and 6 'excellent'.

The grading scale used is:



very goodgoodadequateweakunsatisfactory

CHANGE OF FOCUS FOR CARE INSPECTIONS SINCE 2022-2023

During 2023-24 the Care Inspectorate continued to work with the different sectors to produce new scrutiny frameworks and update existing ones. This has included the development of self-evaluation templates for providers to ensure they can evidence through inspection that identified core assurances are being met. The current inspection framework for adult services is supported by a series of sector specific quality frameworks, which support providers to self-evaluate their own performance and are used by inspectors to provide independent assurance about the quality of care and support.

The Care Inspectorate base their inspection priorities for each service on risk and intelligence and have set out a baseline for which key questions will be evaluated at each inspection dependent on grade and whether there are high scrutiny or medium/ low scrutiny requirements. Two key questions (elements of Key Question 1 – How well do we support people's wellbeing? and Key Question 2 – How good is our leadership?) are the minimum for all services, with the Care Inspectorate having discretion to look at and evaluate any further key question(s) and quality indicator(s) in addition to this if there are any practice concerns or concerns arising from the assessment of the core assurances during the actual inspection.

OVERVIEW OF THE SERVICES INSPECTED

A total of 69 inspections were carried out in 46 services during 2023-24 (see Appendices A and B):

- 44 inspections in 24 care homes
- 25 inspections in 22 other adult services

Where there are performance concerns at an inspection resulting in a number of requirements being imposed, a follow up visit is arranged. This can result in further action being taken or grades being amended. This is relevant in 13 care home services and 6 other adult services during 2023-24. A breakdown of the requirements IS listed in Appendix C for care homes if grades were grade 2 (weak) or lower at any time during the initial or follow-up inspections. There were no adult services inspected with grade 2 (weak) or lower with requirements.

Inspection/investigations are also carried out if complaints are made against a service and can result in a change to grades. Complaint investigations which resulted in the complaint(s) being upheld in services not inspected during 2023-24 applies to one care home and 4 other adult services.

Table 1 shows which sectors received an inspection during 2023-24:

Table 1: Inspected Services - Sector Data	DHSCP	Private	Voluntary	Total
Number of Care Homes	3	20	1	24
%	13%	83%	4%	100%
Number of Other Adult Services	5	1	16	22
%	23%	4%	73%	100%

Summary of the gradings awarded in Dundee

Table 2 illustrates the number of services who received the undernoted gradings in one or more of the key questions inspected and the comparison from previous year, 2022-23.

Table 2: Grade Received by Service	Care Homes			Other Adult Services				
Year	202	3-24	202	2-23	202	3-24	202	2-23
Number of Services Inspected	2	24	2	2	2	2	1	8
6 'excellent' in one or more key questions	2	8%	1	5%	0	0	0	0
5 'very good' in one or more key questions	5	21%	6	27%	11	50%	9	50%
4 'good' in one or more key questions	17	71%	13	59%	17	77%	12	67%
3 'adequate' in one or more key questions	15	63%	12	55%	7	32%	7	39%
2 'weak' in one or more key questions	4	17%	4	18%	0	0	2	11%
1 'unsatisfactory' in one or more key questions	-	-	-	-	-	-	-	-
4 'very good' and above in all grades (first annual inspection)	9	38%	9	41%	17	77%	10	56%
3 'adequate' or below in all grades (first annual inspection)	8	33%	3	14%	0	0	2	11%

The number of inspections for both care homes and other adult services increased during 2023-24 from the previous year. The gradings data evidences a significant improvement in grades between 2022-23 and 2023-24 for other adult services, whilst care home grades remained similar with a noted increase in the number of care homes receiving a grade of 'adequate' or less in all assessed aspects. Whilst other adult services did not receive an 'excellent' in any Key Question they also did not receive a 'weak'. No inspected service received a grade 1 (unsatisfactory).

Table 3 – Care Homes (44 inspections, 105 grades awarded)

Table 3: Grade 2023-24	Overall	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 and support planned?
6 'excellent'	3%	1 (3%)	2 (7%)	0	0	0
5 'very good'	7%	3 (9%)	2 (7%)	1 (6%)	0	1 (7%)
4 'good'	35%	10 (30%)	11 (38%)	7 (44%)	3 (25%)	6 (40%)
3 'adequate'	42%	14 (43%)	12 (41%)	4 (25%)	8 (67%)	6 (40%)
2 'weak'	13%	5 (15%)	2 (7%)	4 (25%)	1 (8%)	2 (13%)
1 'unsatisfactory'	0	0	0	0	0	0

Table 3 demonstrates that where grades of 'very good' or excellent' were awarded these were against against key questions relating to supporting people's wellbeing and leadership of care home services. Where grades of 'weak' were awarded these were more likely to be associated with supporting people's wellbeing, quality of staffing and quality of care and support planning. Of the 3 Partnership operated care homes inspected during 2023-24, one ended the year with an evaluation of 'good' against all Key Questions inspected; and the third with a mix of 'good' and 'adequate' against all Key Questions inspected.

Table 3(a) Tenancy Support (3 inspections / 6 grades awarded)

Table 3(a): Grade 2023-24	Overall	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 and support planned?	
6 'excellent'	0	0	0	0	0	0	
5 'very good'	0	0	0	0	0	0	
4 'good'	83%	2 (100%)	2 (67%)	0	0	1 (100%)	
3 'adequate'	17%	0	1 (33%)	0	0	0	
2 'weak'	0	0	0	0	0	0	
1 'unsatisfactory'	0	0	0	0	0	0	

Table 3(b) Support Services – Not Care at Home (3 inspections / 6 grades awarded)

Table 3(b): Grade 2023-24	Overall	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 and support planned?
6 'excellent'	0	0	0	0	0	0
5 'very good'	67%	2 (67%)	2 (67%)	0	0	0
4 'good'	33%	1 (33%)	1 (33%)	0	0	0
3 'adequate'	0	0	0	0	0	0
2 'weak'	0	0	0	0	0	0
1 'unsatisfactory'	0	0	0	0	0	0

Table3(c) Support Services – With Care at Home (9 inspections / 26 grades awarded)

Table 3(c): Grade 2023-24	Overall	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 and support planned?
6 'excellent'	0	0	0	0	0	0
5 'very good'	27%	3 (43%)	2 (25%)	1 (17%)	0	1 (20%)
4 'good'	42%	3 (43%)	3 (37.5%)	2 (33%)	0	3 (60%)
3 'adequate'	31%	1 (14%)	3 (37.5%)	3 (50%)	0	1 (20%)
2 'weak'	0	0	0	0	0	0
1 'unsatisfactory'	0	0	0	0	0	0

Table 3(d) Care at Home with Housing Support (9 inspections / 26 grades awarded)

Table 3(d): Grade 2023-24	Overall	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 and support planned?
6 'excellent'	0	0	0	0	0	0
5 'very good'	35%	5 (56%)	2 (22%)	1 (25%)	0	1 (25%)
4 'good'	58%	4 (44%)	6 (67%)	3 (75%)	0	2 (50%)
3 'adequate'	7%	0	1 (11%)	0	0	1 (25%)
2 'weak'	0	0	0	0	0	0
1 'unsatisfactory'	0	0	0	0	0	0

Tables 3(a) to 3(d) for other adult services cover a variety of service provision models therefore comparisons cannot be made against each model for the purposes of this report. A small number of inspections were undertaken within each model of service however data evidences that all services are meeting expected standards, with no grades of 'weak' awarded. Key Question 4 is not inspected against in the majority of other adult services as they are primarily provided in the service user's own home.

Enhanced Support and Monitoring – Care Homes

Balhousie St Ronan's Care Home (owned by Balhousie Holdings Limited) – An inspection was carried out on 8 June 2023 which resulted in grades of (3) adequate and (2) weak with a number of requirements identified. At a follow-up inspection on 12 July 2023 the Care Inspectorate issued an Improvement Notice as none of the initial requirements had been met within timescale.

Prior to these inspections taking place and due to concerns having already arisen within this service, Dundee Health and Social Care Partnership (the Partnership) had commenced the Adult Support and Protection Large Scale Investigation process (LSI) in January 2023. The findings of these inspections and additional complaints investigations upheld by the Care Inspectorate were included in the LSI as the Care Inspectorate are a partner in this process. The provider agreed to place a voluntary embargo on new admissions to the care home throughout this time.

The LSI continued until September 2023. This was followed up with Enhanced Contract Monitoring by the Partnership up until February 2024 when it was considered the care home had made sufficient sustainable improvements in the delivery of care and support to their residents and the Care Inspectorate in their subsequent follow-up visits had re-graded the service favourably.

However, at a further inspection held on 5 March 2024 the care home again received grades of (3) adequate and (2) weak and Enhanced Contract Monitoring re-commenced to continue to support the care home make and sustain improvement.

Ballumbie Court (owned by HC-One Ltd) – A Large Scale Investigation had been ongoing in this care home from February 2023 with a voluntary embargo in place for new admissions.

A care inspection visit held on 25 April 2023 resulted in (3) adequate and (2) weak grades which were incorporated into the LSI process. A follow up inspection on 26 May 2023 showed improvement and grades were changed by the Care Inspectorate to 3 (adequate). The LSI ended in July 2023 as all outstanding requirements had been met, grades improved and sustainable improvement evidenced by all those involved. Enhanced Monitoring was in place to support the care home which was reduced to 3 monthly contract monitoring meetings by 21 February 2024 as continued improvement was evidenced throughout this time.

Lochleven Care Home (owned by Thistle Healthcare Ltd) – A Care inspection visit on 18 May 2023 resulted in a number of requirements being but in place. At a follow up visit on 29 August 2023 the requirements had not been met within timescale and resulted in the home being re-graded in Key Question 1 from 3 (adequate) to 2 (weak). This along with a number of Adult Support and Protection concerns raised by the Partnership resulted in a Large Scale Investigation commencing and a voluntary embargo on admissions to the care home. The LSI continued until 4 December 2023 during which time grades had improved and improvement evidenced in the provision of care and support to residents. Enhanced Contract Monitoring followed to ensure the improvements were sustained.

Care Inspectorate Key Messages – High Performing Services

Harestane Care Home – Priority Care Ltd

- Staff were warm, kind, and respectful of people's wishes and choices.
- Management had excellent oversight of the home. They were viewed as approachable and responsive by people who lived at Harestane Nursing Home and their relatives/ representatives.
- There was a full activity programme in place which included the local community.
- The management team encouraged a positive, reflective learning ethos within the staff team.

Balcarres Care Home - HC-One Ltd

- There was a track record of exceptionally high-quality care.
- People were supported by a skilled and consistent staff team.

- People were at the heart of decision making in Balcarres.
- There was a person led approach to the delivery of care.
- Quality assurance processes were effective in identifying and driving innovative change.
- The service was committed to achieving the best possible experiences for people living in Balcarres.

Capability Scotland (Support Service with Care at Home)

- We saw that staff were caring and compassionate and had enough time to do their jobs well.
- People told us that there were plenty of meaningful things for them to do.
- We heard from the people who use the service that they participated in how it was developed; this promoted inclusion.
- The service had clear and well written policies and procedures in place, which were available in an easy to read and accessible format.
- Staff told us that their leaders were approachable and knowledgeable and their colleagues were supportive.
- Staff attended a wide range of training courses, which helped them to do their jobs well.
- The service had effective audit processes and quality assurance policies in place.
- We heard a few comments, from relatives and staff that some aspects of the service's communication should be improved.
- We concluded that the service had the desire and capacity to strive for excellence.

DCC Home Care - Enablement and Support Citywide and Community Mental Health Older People Team

- People experiencing care felt well supported and had positive relationships with staff.
- People were supported with compassion, dignity and respect.
- The service promoted a strong culture of person-centred care.
- The service had an experienced, well trained staff team.

The Richmond Fellowship Scotland – Dundee Services (Care at Home/Housing Support)

- The people who were supported by the service received very good support.
- The people we spoke to, who used the service, told us that they were very happy with their support and spoke positively about the staff.
- We found that the staff group were competent and knowledgeable and approached their work in a caring and sensitive way.
- Staff told us that their seniors were very supportive.
- We found that the service had a few staff vacancies, but overall staffing levels were reasonably good.
- At times the outreach service was under pressure, but we heard that staff managed to maintain high quality support for people.
- The service had a wide range of well written and relevant policies and procedures in place, which underpinned the quality of support it provided.
- Although we saw that the service was very well led and provided very good support for people, we identify some potential challenges facing the service.

Requirements

A requirement is a statement which sets out what a care service must do to improve outcomes for people who use services and must be linked to a breach in the Public Services Reform (Scotland) Act 2010, its regulations, or orders made under the Act, or a condition of registration. Requirements are enforceable in law.

Requirements were placed on 13 of the 24 (54%) care homes inspected and 6 of the 22 (27%) other adult services inspected.

Complaints

A complaint is an expression of dissatisfaction by about a registered care service's action or lack of action, or about the standard of service provided by or on behalf of a registered care service'. Following investigation, a decision will be made by the Care Inspectorate whether the complaint is upheld or not upheld.

During 2023-24 the Care Inspectorate received one or more complaints relating to 8 care home services and 5 other adult services in Dundee. Of these, all were upheld or at least one of the following elements upheld.

Complaints – Care Homes	Complaints – Other Adult Services
Wellbeing	Communication Between staff and service users/relatives/carers Information about the service Staff Other Training/qualifications Levels Healthcare Medication issues Inadequate healthcare or healthcare treatment Wellbeing Other Environment Security Record-keeping Personal plans/agreements

Enforcements

Enforcement is one of the Care Inspectorate's core responsibilities and is central to protecting residents and bringing about an improvement in the quality of care services.

There was one enforcement measure put in place for a care home service during 2023-24. See above information regarding Balhousie St Ronan's Care Home.

CONTINUOUS IMPROVEMENT

There continues to be a joint commitment to continuous improvement and a proactive approach to improving and sustaining quality that involves service providers, the Care Inspectorate and representatives of Dundee Health and Social Care Partnership. This is particularly evident when significant concerns arise. There have been many benefits of such an approach eg effective sharing of information, shared agreement about improvement activity required and monitoring of the same until such point concerns have been adequately addressed.

Care Home Services

The Care Home Team continues to provide support to all care homes in Dundee with enhanced supports available at times of concern for individual homes. The Care Home Team recruited an Occupational Therapist in 2023 who has been providing support to the care homes.

Dundee Health and Social Care Partnership continue to host Care Home Providers Forums on a monthly basis which is now co-chaired with the Scottish Care Independent Sector Lead. Regular meetings also take place between the Partnership and the Care Inspectorate.

There is now a respite unit within Turriff House to cater to older people in order to facilitate carers breaks for those who meet the criteria. The respite unit at Mackinnon Centre now has multi-use which includes facilitating hospital discharges for people with complex needs until such a time as appropriate accommodation/care is sourced.

Works are being undertaken to install WiFi within all older peoples' care homes in 2024.

Care at Home Services

The approach of paying providers commissioned to deliver care at home services on a shift hours model - which means paying them for any gaps/downtime, cancelled services and full travel time - was established as the way forward following a successful test of change. This helped services continue to experience good levels of staff retention during 2023-24 and, along with other improvement measures within the Resource Matching Unit (RMU), had a positive impact on providers being able to deliver care and thus keep the level of unmet need as low as possible.

The RMU receives the majority of referrals for people who have been assessed as requiring an ongoing care at home service. The RMU then engages with providers to source packages of care for these individuals. Typically this was achieved by sending out lists of service requests by email or supporting providers to build new runs for staff who have recently been recruited. Improvement measures were introduced by the RMU and they started to arrange bite sized meetings with groups of providers, to make runs of work more efficient by collectively reducing gaps and to proactively try and address unmet need in specific areas of the city. Further work is ongoing to develop an electronic system that can more readily identify any gaps, which the RMU will then look to fill to make the runs as efficient as possible. The RMU also established a new support worker role to actively monitor and review people who are waiting on a service and to try and ensure the service requests that providers are considering are as accurate as possible.

Care At Home/Housing Support (Learning Disability and Mental Health)

During 2023-24 work has continued on Strategic Housing Investment Plan (SHIP) developments. These are new housing developments that provide supported accommodation to service users with a variety of assessed learning disability/mental health needs in Dundee. Three developments were handed over to the Partnership during this year, following completion of building work. Providers are appointed via the Dundee Collaborative Group, which uses a partnership working approach to decision making and is

viewed positively by providers involved in the process. The Partnership is working in collaboration with the support providers and other stakeholders to establish the new services and support services users to transition into their new homes, which will better meet their support needs.

There is ongoing work to consider the reprovisioning of services and this may have an impact on commissioned services. In 2023-24, one development was handed back to the housing provider as it was recognised that other services could better meet the needs of service users. Staff and tenants from this service transferred to a new service in one of the developments that had recently been handed over.

In 2023-24 discussions took place regarding a planned Test of Change to support individuals pre- and post- diagnostic support to individuals with Autism, as well as those not seeking a formal diagnosis, and who may not be meet thresholds for receiving support from other commissioned services. The planned service is intended to address a gap in need and provide direct support as well as signposting individuals to other supports available across the city and work in partnership with other stakeholders to achieve this. The Test of Change is taking place during 2024-25.

DUNDEE HEALTH & SOCIAL CARE PARTNERSHIP CARE INSPECTORATE GRADINGS FOR CARE HOMES IN DUNDEE - 1 APRIL 2023 TO 31 MARCH 2024

				KQ1	KQ2	KQ3	KQ4	KQ5		ıt(s) 3-24	_
Name of Care Home and Provider Organisation	Service Type	Category DHSCP/ Private/ Vol	Inspection Date	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 and support planned?	Requirements	Upheld Complaint(s) received during 23-24	Enforcement / Notice of Improvement
Balcarres HC-One Limited	Care Home (Older People)	Private	11.12.23	6	6	-	-	-	No	No	No
Balhousie Clement Park Balhousie Holdings Limited	Care Home (Older People)	Private			Upheld Co	omplaint			No	Yes	No
Balhousie St Ronan's Balhousie Holdings Limited	Care Home (Older People)	Private	08.06.23	2	2	2	3	2	Yes	Yes	No
			12.07.23	No cha	nge to grade	es – Improve 19/07/23	ment Notice	issued	Yes	Yes	Yes
			04.09.23	3	-	3	-	-	Yes	Yes	No
			14.11.23	-	3	-	-	3	No	Yes	No
			05.03.24	2	-	2	-	3	Yes	Yes	No
Ballumbie Court HC-One Limited	Care Home (Older People)	Private	25.04.23	2	3	2	3	3	Yes	No	No
			26.05.24	3	-	3	-	-	Yes	No	No
			06.07.23		No c	hange to gr	ades	1	Yes	No	No

			28.11.23		No c	change to gr	ades		No	No	No
Benvie Duncare Ltd	Care Home (Older People)	Private	04.07.23	3	3	-	-	-	Yes	Yes	No
Bridge View Sanctuary Care	Care Home (Older People)	Private	31.07.23	3	3	-	-	-	No	Yes	No
			28.08.23	4	4	-	-	-	No	No	No
The Bughties Enhance Healthcare Ltd	Care Home (Older People)	Private	14.06.23	3	3	-	-	-	Yes	No	No
			01.02.24	4	4	-	-	-	No	No	No
Carmichael House Carmichael House (Dundee) Limited	Care Home (Older People)	Private	08.02.24	3	3	4	3	3	Yes	No	No
Ellen Mhor Cygnet Healthcare	Care Home (Learning Dis)	Private	14.12.23	4	4	-	-	-	No	No	No
Ferry House Committee of Management	Care Home (Older People)	Voluntary			C	Care Home C	Closed 31.03	.24			
Forebank Care Home Brookesbay Care Group	Care Home (Older People)	Private	29.06.23	3	3	-	-	-	Yes	No	No
			02.10.23	4	4	-	-	-	No	No	No
Harestane Care Home Priority Care Group Limited	Care Home (Older People)	Private	11.10.23	5	6	-	-	-	No	No	No
Janet Brougham House Dundee HSCP	Care Home (Older People)	Dundee HSCP	19.03.24	4	3	-	-	-	Yes	No	No
Lochleven Thistle Healthcare Ltd	Care Home (Older People)	Private	18.05.23	3	3	4	3	4	Yes	No	No

1			29.08.23	2	_	_	_	_	Yes	No	No
				_							
			03.10.23		No c	hange to gr	ades		Yes	Yes	No
			07.11.23	3	-	-	-	-	Yes	Yes	No
			09.01.24		No c	hange to gr	ades	l	No	Yes	No
McGonagall House Enhance Healthcare Limited	Care Home (Adults-ARBD)	Private	01.06.23	4	4	4	4	3	Yes	No	No
			07.11.23	-	-	-	-	4	No	No	No
Mackinnon Centre Dundee HSCP	Care Home (Phys/Sensory Impairment - Respite)	Dundee HSCP			Last I	nspected 24	.02.23		No	No	No
Menzieshill House Dundee HSCP	Care Home (Older People)	Dundee HSCP	09.02.24	3	3	-	-	-	Yes	No	No
Moyness Care Home Balhousie Holdings Limited	Care Home (Older People)	Private	25.04.23	4	5	-	-	-	No	No	No
Orchar Nursing Home Orchar Care Ltd	Care Home (Older People)	Private	26.07.23	5	4	-	-	-	No	Yes	No
Pitkerro Care Centre Hudson Healthcare Ltd	Care Home (Older People)	Private	14.02.24	5	4	5	4	5	No	No	No
Redwood House Redwood House (Broughty Ferry) Limited	Care Home (Older People)	Private	04.03.24	4	5	4	3	4	No	No	No
Riverside View Care Home HC-One Limited	Care Home (Older People)	Private	20.07.23	3	4	4	3	4	Yes	No	No

			25.10.23		No o	change to gr	ades		No	No	No
Sense Scotland Dundee Respite Sense Scotland	Care Home (Learning Dis)	Private	01.07.22	-	4	-	-	-	No	No	No
St Columba's Care Home Priority Care Group Limited	Care Home (Older People)	Private	04.10.23	3	3	4	3	4	Yes	No	No
			22.02.24	3	-	3	-	-	No	Yes	No
St Margaret's Home – Dundee Trustees of St Margaret's Home	Care Home (Older People)	Voluntary	16.05.23	2	2	2	2	2	Yes	Yes	No
			02.06.23	No change to grades						No	No
			11.07.23		No o	change to gr	ades		Yes	No	No
			05.10.23	3	3	3	3	3	Yes	Yes	No
			Care Hom	e issued no	otice to close	on 30 Janu	ary 2024 an	d subseque	ntly close	d in Apr	il 2024
Thistle Care Home Cygnet Social Care	Care Home (Learning Disabilities)	Private	09.01.24	4	4	4	No	No	No		
Turriff House Dundee HSCP	Care Home (Older People	Dundee HSCP	25.01.24	4	4	-	-	-	No	No	No
White Top Dundee HSCP	Care Home (Learning Dis - Respite)	Dundee HSCP			Last Inspect	ed 09.08.22			No	No	No

KEY: 6 excellent 5 very good 4 good 3 adequate 2 weak 1 unsatisfactory

Appendix B
DUNDEE HEALTH & SOCIAL CARE PARTNERSHIP
CARE INSPECTORATE GRADINGS FOR ADULT SERVICES (EXCLUDING CARE HOMES) - 1 APRIL 2023 TO 31 MARCH 2024

				KQ1	KQ2	KQ3	KQ4	KQ5		nts	
Name of Care Home and Provider Organisation	Service Type	Category DHSCP/ Private/ Vol	Inspection Date	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 and support planned?	Requirements	Upheld Complaints	Enforcement / Notice of Improvement
TENANCY SUPPORT											
Dundee Survival Group Dundee Survival Group Charitable Company Limited	Housing Support Service	Voluntary	08.09.23	4	4	-	-	-	No	No	No
Hillcrest Homes Tenancy Support Services Hillcrest Homes (Scotland) Ltd	Housing Support Service	Voluntary	26.05.23	4	3		-	-	Yes	No	No
			21.02.24		No ch	ange to grad	les		No	No	No
Positive Steps (East) The Positive Steps Partnership	Housing Support Service	Voluntary	25.08.23	-	4	-	-	4	No	No	No
SUPPORT SERVICES - NOT CA	RE AT HOME										
Capability Scotland Dundee (City Quay Support Service)	Support Service	Voluntary	18.08.23	5	5	-	-	-	No	No	No
Hillcrest Futures Dundee – Student Support Service Hillcrest Futures Limited	Support Service	Voluntary	05.05.23	4	5	-	-	-	No	No	No

Penumbra Dundee Nova	Support Service	Voluntary	14.12.23	5	4	-	-	-	No	No	No	l
Service												l

SUPPORT SERVICES - WITH CARE AT HOME

Avenue Care Services Perth/ Dundee Avenue Care Services Ltd	Support Service	Private			Upheld Co	mplaint			No	Yes	No
Blackwood North East Care and Support Services Blackwood Homes and Care	Housing Support Service	Voluntary	21.04.23	5	4	5	-	5	No	No	No
Call-In Homecare Ltd (Dundee)	Support Service	Private	Upheld Complaint						No	Yes	No
Capability Scotland Community Living and Family Support Services (Dundee) – Care at Home	Support Services – Care at Home	Voluntary	01.08.23	5	5	-	-	-	No	No	No
DCC – Home Care – Enablement and Support Citywide & Community MH Older People Team	Housing Support Service	Dundee HSCP	25.10.23	5	5	-	-	-	No	No	No
Dundee Specialist Mental Health Outreach Scottish Action for Mental Health	Housing Support Service	Voluntary	29.09.23	4	4	3	-	4	Yes	No	No
The Inclusion Group Support Services – Care at Home The Inclusion Group (Dundee)	Support Services – Care at Home	Voluntary	16.01.24	4	4	4	-	4	No	No	No
Integrity Social Care Solutions Housing Support with Care at Home	Housing Support with Care at Home	Private	24.04.23	3	3	4	-	3	Yes	No	No

Integrity Social Care Solutions Ltd											
			01.11.23			No	No	No			
My Care Tayside My Care (Tayside) Limited	Support Services - care at home and housing support combined	Voluntary	Upheld Complaints							Yes	No
My Homecare (Dundee) Ltd Support Service My Homecare (Dundee) Ltd	Support Service – Care at Home	Private		Upheld Complaint							No
TLA Neighbourhood Services TLA Neighbourhood Services Limited	Support Services – Care at Home	Private	27.07.23	4	3	3	-	4	Yes	No	No
			07.02.24	-	3	3	-	-	No	No	No

CARE AT HOME/HOUSING SUPPORT (24/7 SERVICES)

Capability Scotland – Dundee Housing Support Service Capability Scotland	Care at Home/ Housing Support	Voluntary	18.08.23	5	5	5	-	5	No	No	No
Dudhope Villa and Sister Properties	Care at Home/ Housing Support	Private	29.06.23	4	3	4	-	3	Yes	No	No
Hillcrest Futures Dundee – Alexander Street, Lismore Terrace, Longfield Drive Hillcrest Futures	Care at Home/ Housing Support	Voluntary	24.04.23	4	4	-	-	-	No	No	No

The Inclusion Group (Dundee)	Housing Support Service	Voluntary	16.01.24	4	4	4	-	4	No	No	No
Jericho Society The Jericho Benedictine Society	Care at Home/ Housing Support	Voluntary	25.07.23	5	4	-	-	-	No	No	No
Magdalen House Priority Care Limited	Care at Home/ Housing Support	Private	03.11.23		rance Inspectes from prev		No	No	No		
				5	4	-	-	-	No	No	No
The Richmond Fellowship Scotland – Dundee Services Richmond Fellowship Scotland Limited	Care at Home/ Housing Support	Voluntary	07.08.23	5	5	-	-	-	No	Yes	No
Transform Community Development	Care at Home/ Housing Support	Private	01.03.24	4	3	4	-	4	Yes	No	No
Turning Point Scotland – Dundee Turning Point Scotland	Care at Home/ Housing Support	Voluntary	11.08.23	5	4	•		-	No	No	No

KEY: 6 excellent 5 very good 4 good 3 adequate 2 weak 1 unsatisfactory

APPENDIX C

DUNDEE HEALTH & SOCIAL CARE PARTNERSHIP - CARE HOME SERVICES

CARE INSPECTORATE REQUIREMENTS 2023-24

Date of Inspection	Name of Org/Service	Service Type	How well do we	How good is our	How good is	How good is	How well is our
			support	leadership?	our staff	our	care and
			people's		team?	setting?	support
			wellbeing				planned?

08.06.23	Balhousie	Care Home -	2	2	2	3	2
	St Ronan's	Private					
12.07.23	No change to grades		(2)	(2)	(2)	(3)	(2)
04.09.24			3	-	3	-	-
14.11.23			-	3	-	-	3
05.03.24			2	-	2	-	3

Requirement 1

By 06 July 2023, the provider must ensure that service users are provided with meals, snacks, drinks which are appropriate to meet their needs, and are supported to eat and drink in accordance with their nutrition and hydration needs and preferences. To do this, the provider must, at a minimum:

- a) Ensure that service users' care plans record their nutrition and hydration needs and preferences.
- b) Ensure that nursing and care staff are familiar with, and can implement, service users' nutrition and hydration needs identified in care plans.
- c) Ensure that nursing and care staff are able to identify, and respond to, any change to a service user's nutrition and hydration needs and review and update personal plans accordingly.

Requirement 2

By 06 July 2023, the provider must keep people safe from harm by managing the administration of medication safely. To do this, the provider, must at a minimum:

- a) Create a complete, accurate and auditable record of all prescribed medication in the care home.
- b) Ensure that staff receive and record completion of appropriate training to enable them to administer medication safely.
- c) Ensure that staff demonstrate competency in medication administration and managers implement a system for ongoing evaluation of staff practice.
- d) put in place and effectively implement a system to audit people's medication records to provide assurance that people are having their prescribed medication administered in accordance with their individual needs.
- e) ensure that monitoring arrangements identify any errors in administration or recording of a service user's medication and appropriate actions are taken.

Requirement 3

By 06 July 2023, the provider must ensure that service users experience care in an environment that is clean and safe, and that minimises the risk of infection. To do this, the provider must, at a minimum:

- a) Ensure the care home environment, furnishings, and equipment are kept in a good state of repair and are safe, clean, and tidy at all times.
- b) Ensure there are appropriate procedures in place for the prevention and control of infection and staff are familiar with these and implement them.

Requirement 4

By 20 August 2023, the provider must ensure that the care service is led and managed in a manner that results in service users' health, safety and wellbeing needs being met. To do this, the provider must, at a minimum:

- a) Ensure the quality of service users' care and the environment is continuously assessed by knowledgeable, skilled and competent staff using a range of methods.
- b) Ensure that where quality assurance identifies areas for improvement, appropriate action is taken
- c) develop action plans which take into consideration views of staff, people and their representatives and include specific, measurable actions designed to lead to continuous improvements

Requirement 5

By 20 August 2023, the provider must ensure that service users experience care delivered by staff that have appropriate training to allow them to undertake their role safely. This is to support the health, safety and welfare of service users. To do this, the provider must, at a minimum:

- a) Ensure a review is conducted to identify all areas of staff training required for each staff member.
- b) Ensure identified training is provided to staff to staff and completion of any training is recorded.
- c) Ensure observations of care practice and staff competency are regularly assessed and recorded.
- d) Ensure training and development records are in place for all staff including supervision and appraisal meetings

Requirement 6

By 20 August 2023, you, the provider, must ensure that there are, at all times, enough suitably qualified and competent individuals working in the care service to provide safe and high quality services to ensure the best health care outcomes for people. To do this, you, the provider, must, at a minimum consider and record:

- a) the appropriate mix of staff skills required to meet the needs of people using the service over a 24 hour period. This should include nursing staff, care staff, wellbeing co-ordinators, and medication administration as well as ancillary staff;
- b) how and where staff are deployed;
- c) the location of the service and time taken for additional support to arrive if needed; d) significant events, for example, end of life care, people starting to use or leaving the service.

Requirement 7

By 20 August 2023, the provider, must promote the health, welfare, and safety of those who use the service by ensuring that all personal plans, risk assessments and care plans:

- a) accurately reflect the current health and care needs of the person and accurately describe the support required to meet those needs;
- b) accurately identify any risks to the person's health, and include an assessment of those risks and the steps that are to be taken to reduce or mitigate them;
- c) have up to date records of the person's representative and the circumstances under which they wish to be contacted
- d) contain an accurate record of communication with people's representatives in line with their wishes
- e) are always implemented
- f) are reviewed every six months with the person and/or their representative

Follow up inspection 12.07.23 – Requirements 1 and 2 NOT MET and extended to 20.08.23. Requirement 3 NOT MET – Improvement Notice issued by Care Inspectorate on 19.07.23.

Follow up inspection 04.09.23 – Improvement Notice requirement met but one element unmet added as a further requirement:

By 30 October 2023, the provider must ensure that service users experience care in an environment that is safe and minimises the risk of infection. To do this, the provider must, at a minimum: ensure that clinical waste is disposed of promptly, safely and in a manner which takes account of the most up-to-date guidance.

Requirements 1, 2, 4 and 7 NOT MET – timescales extended to 30.10.23 Requirements 5 and 6 MET

14.11.23 – All outstanding requirements MET

05.03.24 - 6 requirements added:

Requirement 1

By 19 April 2024 the provider must ensure that people are provided with meals, snacks, and drinks which are appropriate to meet their needs, and are supported to eat and drink in accordance with their nutrition and hydration needs and preferences. To do this, the provider must, at a minimum:

- a) Ensure that care plans record people's nutrition and hydration needs accurately.
- b) Ensure effective and accurate monitoring of people's oral intake so staff can identify, and respond to, any potential health risks

Requirement 2

By 31 May 2024, the provider must ensure that medication is administered and managed in a manner that protects the health and wellbeing of people. To do this the provider must, at a minimum:

- a) Ensure correct medication recording and administration processes are followed.
- b) Ensure information within medication documents and care plans is accurate, up to date, consistent and used by staff to direct people's support

Requirement 3

By 31 May 2024, the provider must ensure people receive personal care and hygiene support that is consistent with their needs, wishes and preferences. To do this the provider must, at a minimum:

a) Ensure information within care plans is accurate, up to date, and used by staff to direct people's support

Requirement 4

By 31 May 2024, the provider must ensure people receive wound care and treatment support that is consistent with their needs, wishes and preferences. To do this the provider must, at a minimum:

- a) Ensure information within care plans is accurate, up to date, and used by staff to direct people's support.
- b) Ensure that staff are aware of and follow any external professional advice and this is recorded in the care plans.

Requirement 5

By 31 May 2024, the provider must ensure people working in the care service have been safely recruited. To do this, the provider must, at a minimum:

- a) Ensure all essential pre-employment checks are carried out prior to commencing employment in the service.
- b) Ensure leaders have an understanding of their responsibilities in the safe recruitment of staff

Requirement 6

By 31 May 2024, the provider must ensure that there are, at all times, enough suitably qualified and competent individuals working in the service to provide safe and effective care to ensure the best health outcomes and experiences for people. To do this the provider must, at a minimum:

- a) ensure the number of staff and mix of staff skills are appropriate to meet the needs of people using the service.
- b) ensure staffing reflects changes to levels of need impacted by significant events, for example, end of life care, people starting to use or leaving the service.

25.04.23	Ballumbie Court	Care Home - Private	2	3	2	3	3
26.05.23	Re-grading		3	-	3	-	-
06.07.23	No change to grades		(3)	-	-	-	
28.11.23	No change to grades		(3)	(3)	(2)	(3)	(3)

Requirement 1

By 30 June 2023 the provider must ensure that all activity care plans are of sufficient quality and are used to inform and guide staff practice to ensure people get the most out of life. To do this, the provider must at a minimum

- a) Ensure that activity support plans are meaningful, and person centred by completing a quality review of all support plans and implementing changes as identified.
- b) Ensure all staff are aware of their role in participating in and facilitating activities and have sufficient resources to do so.
- c) Ensure that risk assessments are completed prior to undertaking activities and/or outings to encourage a positive risk-taking attitude towards activities.

Requirement 2

By 23 May 2023 the provider must ensure that staff IPC practice is safe and effective and takes account of best practice guidance to ensure people in the care home are kept safe from infection. To do this the provider must at a minimum:

- a) ensure the environment, equipment and furnishings are clean and fit for purpose
- b) ensure all staff follow IPC guidelines for safe use of PPE, frequent handwashing and disposal of clinical waste
- c) ensure that cleaning schedules are completed in full and effectively audited

Requirement 3

By 30 June 2023 the provider must ensure 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 audits such as IPC, medication and care

b) develop action plans which take into consideration views of staff, people and their representatives and include specific, measurable actions designed to lead to continuous improvements

Requirement 4

By 23 May 2023 the provider must ensure that people are confident in staff because they are appropriately and safely recruited. To do this, the provider must at a minimum:

- a) ensure that authentic and appropriate references are sought and recorded properly and; Inspection report Inspection report for Ballumbie Court page 7 of 16
- b) ensure recruitment files are audited to ensure safe recruitment practices and company policy are followed.

Requirement 5

By 30 June 2023 the provider must ensure the care plans and risk assessments are comprehensive, accurate and comply with legislation to ensure they accurately reflect people's choices and needs. In particular the provider must:

- a) Ensure and record that people and/or their representatives are involved in six-monthly care reviews and there is a robust system is in place to monitor and record this.
- b) ensure the use of restraint, such as sensor beams and lap belts, is supported by evidence of assessment, discussion and agreement with the person and/or their representative.
- c) ensure they accurately reflect and assess any identified risks to the person's health such as falls, wounds and adequate hydration and detail the steps to be taken to reduce these risks.
- d) ensure care plans are actively used to direct support

Follow up inspection 26.05.23 - Requirements 1 and 2 MET

Follow up inspection 06.07.23 - Requirement added

By 13 August 2023, the provider must ensure that service users are safe from harm by administering medication safely and effectively. To do this, the provider must, at a minimum:

- a) ensure that people receive their time sensitive medications, at the prescribed time
- b) ensure that medication administration records are completed accurately

c) ensure that monitoring arrangements are effective in responding to any errors or delays in the administration or recording of a service user's medication.

Follow up inspection 28.11.23 - All Requirements MET

18.05.23	Lochleven	Care Home - Private	3	3	4	3	4
29.08.23			2	-	-	-	-
03.10.23	No change to grades		(2)	-	-	-	-
07.11.23			3	-	-	-	-

Requirement 1

By 9 June 2023, you must ensure that service users experience care in an environment that is safe and minimises the risk of infection. In particular you must:

- a. ensure that the internal premises, furnishings and equipment are safe, clean and tidy
- b. ensure that there is a plan in place for the refurbishment of the kitchen areas within a reasonable timeframe

Follow up inspection 29.08.23 - Requirement 1 NOT MET and another added

By 28 September 2023, you must ensure that service users experience care in an environment that is safe and minimises the risk of infection. In particular you must:

- a) ensure that the internal premises, furnishings and equipment are safe, clean and tidy
- b) ensure that when the integrity of mattress protectors and chairs are compromised, they are replaced promptly
- c) ensure that any rusty equipment is replaced.

By 28 September 2023, the provider must ensure that service users experience care in an environment that is safe. In particular you must:

a) ensure all sluices are locked and harmful chemicals are stored securely

Follow up inspection 03.10.23 - Requirement 1 NOT MET - timescale extended

By 30 October 2023, you must ensure that service users experience care in an environment that is safe and minimises the risk of infection. In particular you must:

- a) ensure that the internal premises, furnishings and equipment are safe, clean and tidy
- b) ensure that when the integrity of chairs are compromised, they are replaced promptly
- c) ensure that all mattresses are clean and free from dirt, stains and malodour.

By 30 October 2023 the provider must ensure that service users experience care in an environment that is safe and minimises the risk of infection. In particular you must ensure that all pullcords are replaced, cleanable and subject to routine cleaning

Follow up inspection 07.11.23 - Requirements MET

Follow up inspection 09.01.24 – Requirement made on 7 November 2023 (outcome of an outstanding complaint) - MET

By 21 December 2023, the provider must use current good practice guidance to develop effective falls prevention strategies. In order to achieve this, the provider must:

- a) ensure that risk assessment information is being used to inform personalised and meaningful falls prevention care plans. These should be regularly reviewed and updated, to reflect changes in individual circumstances, presentations, and care needs.
- b) be able to demonstrate adequate monitoring and supervision when people are identified as at risk of falls.

c) Be able to show evidence of regular ongoing monitoring and evaluation of records to demonstrate that staff have a clear understanding about their role and responsibilities in relation to falls and can demonstrate this through their practice.

16.05.23	St Margaret's	Care Home - Voluntary	2	2	2	2	2
02.06.23	No change to grades		(2)	(2)	(2)	(2)	(2)
11.07.23	No change to grades		(2)	(2)	(2)	(2)	(2)
05.10.23			3	3	3	3	3

Requirement 1

By 31 July 2023, the provider must, having regard to the size and nature of the care service, the stated aims and objectives and the number and needs of the service users, always ensure suitably qualified and competent persons are working in the care service in such numbers as are appropriate for the health, welfare and safety of service users. To do this the provider must:

- a) Ensure that staff levels consider the physical, social, psychological and recreational needs and choices in relation to the delivery of care for all individuals.
- b) Consider the physical layout of the building, staff training and staff supervision needs

Requirement 2

By 30 June 2023, you must ensure medication is managed in a manner that protects the health and wellbeing of service users. In order to achieve this, the provider must:

- a) Ensure that all handwritten entries are signed and dated by two members of staff and reference is made to the prescriber.
- b) Ensure that medications are stored appropriately in a clean, hygienic, temperature controlled environment.
- c) Ensure that people receive their medication within the prescribed timescales. d) Ensure appropriate recording of 'as required' medication

Requirement 3

By 30 May 2023, you must ensure that service users experience care in an environment that is clean and safe, and that minimises the risk of infection. In particular you must demonstrate that:

- a) There are adequate numbers of domestic staff working on each shift to maintain a clean and safe environment.
- b) The care home environment, furnishings, and equipment are kept in a good state of repair and are safe, clean, and tidy at all times.
- c) Commodes are cleaned immediately after use.
- d) Clinical and offensive waste is disposed of appropriately.
- e) That beds are regularly checked to ensure that both the mattress cover and mattress are not soiled.
- f) Members of staff are familiar with, and implement, current best practice guidance on how to prevent and control infection in a care home setting.
- g) Regular quality assurance checks of the environment are undertaken in order to ensure that the cleanliness of the environment is maintained and that current best practice guidance on how to prevent and control infection in a care home setting is always being followed

Requirement 4

By 30 June 2023, you must ensure that service users are provided with meals, snacks, drinks, and support to eat and drink in accordance with their nutrition and hydration needs and preferences. In order to achieve this you must demonstrate that:

- a) Service users' care plans record their nutrition and hydration needs and preferences.
- b) Catering staff are familiar with each service user's nutrition and hydration needs and that they have the knowledge and skills to provide meals, snack and drinks which meet those needs.
- c) Care staff are familiar with, and implement, service users' nutrition and hydration needs care plan.
- d) Care staff are able to identify, and respond to, any change to a service user's nutrition and hydration needs

Requirement 5

By 30 June 2023, you must ensure that the care service is led and managed in a manner that results in service users' health, safety and wellbeing needs being met. In particular you must ensure that:

- a) The quality of service users' care and the environment must be continuously assessed by knowledgeable, skilled and compassionate staff in leadership roles using a range of methods. This may include but is not limited to observation of service users' care experiences, observation of staff practice and communication, seeking service user and staff views and review of care and housekeeping documentation.
- b) Where quality assurance identifies areas for improvement, leaders must take action and make any achievable improvements to service users' care and the environment at the time. This may include but is not limited to role-modelling, providing feedback, direction and guidance to individuals or groups of staff and reviewing service users' care plans.
- c) The quality assurance must be used to identify any further staff training or support that is necessary to ensure service users' health, safety and wellbeing needs are met.
- d) Action planning must be used to assist the service to plan, make and measure improvement. This must include putting in place reasonable timescales for completing and measuring the impact of improvement activities on service users' experiences and outcomes

Requirement 6

For people to be protected the provider must, by 31 July 2023, evidence:

- a) Effective audit of staff recruitment and induction to identify gaps in safer recruitment and induction procedures.
- b) Recruitment policies are in place and implemented thoroughly on every occasion.
- c) Induction is thorough and developed to meet the needs of people living in St. Margaret's and subsequent staff learning needs are identified and supported through their probationary period

Requirement 7

By 30 June 2023, the provider must promote the health, welfare and safety of those who use the service by ensuring that all personal plans, risk assessments and care plans:

- a) Accurately reflect the assessed current health and care needs of the person.
- b) Describe in detail the need and abilities of the person and the support required to meet those needs.
- c) Accurately reflect any identified risks to the person's health and includes an assessment of those risks and the steps that are to be taken to reduce or mitigate these risks.
- d) Are always implemented; and
- e) Are reviewed every six months.

Follow up inspection 02.06.23 - Requirement not met within timescale - requirement extended

Follow up inspection 11.07.23 - Requirement 2 met outwith timescale – outstanding requirement extended

Follow up inspection 05.10.23 - Requirements met outwith timescale

Key:

6 excellent5 very good4 good

3 adequate

2 weak

unsatisfactory

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