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website: www.careinspectorate.com telephone: 0345 600 9527

email: enquiries@careinspectorate.com

Twitter: @careinspect

Chief Executive: Karen Reid

Chair: Paul Edie

Recorded Delivery

Park Homes (UK) Ltd 50 Brantwood Oval Bradford BD9 6QP

CS2006131208 23 October 2015

Dear Sirs

IMPROVEMENT NOTICE

SECTION 62 PUBLIC SERVICES REFORM (SCOTLAND) ACT 2010 ("the Act")

Social Care and Social Work Improvement Scotland (hereinafter referred to as "the Care Inspectorate") has concluded that St. Andrews care Home, Stirches, Hawick, TD9 7NS is not operating in accordance with conditions imposed by or under the Act. The Care Inspectorate hereby gives you notice that unless there is a significant improvement in provision of the service, it intends to make a proposal to cancel your registration in terms of section 64 of the Act. The nature of the improvements to be made, and the period within which they must be made, are specified below.

Improvements:

- 1. By 30 November 2015, you must review the staffing levels in the home to ensure that:
 - a) There are sufficient staff numbers working in the service to meet the care needs of residents taking into account their physical, social and emotional needs at all times.
 - b) There is a system of deploying staff across the service dependent on resident's needs.
 - c) There is effective monitoring so that people's physical, social and emotional needs are met on a daily basis.

This is to comply with Regulation 4(1)(a) and Regulation 15(a) of The Social Care and Social Work Improvement (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

2. By 30 November 2015, you must ensure that your medication procedures and practice promotes the health and wellbeing of service users. This must include but is not restricted to including that:

Care Inspectorate, Headquarters, Compass House, 11 Riverside Drive, Dundee, DD1 4NY We have offices across Scotland. You can find details page in protocolars.com

photopy / steve Butcher/ N. mautiman /OP5.



- a) All staff working with service users have received training in the administration of medication and that a record is kept and maintained of the date the training was completed for each member of staff.
- b) Medicines are administered as prescribed.
- c) Staff who administer medication, accurately record that administration in the service users' medication record.
- d) The period of time between doses of "as required" medication and the "maximum" dose allowed to be given within 24 hours are written in the medication record.
- e) The care plan for the covert administration of medicines is fully completed in accordance with the guidance given by the Mental Welfare Commission.

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

- 3. By 30 November 2015, you must make proper provision for the health, welfare and safety of service users. In order to do so, you must put in place a system to ensure that:
 - a) All service users are assessed at appropriate intervals for their risk of undernourishment and their need for support with eating and drinking.
 - b) The information from these assessments is used to develop an appropriate plan of care for each service users' nutritional needs and included in each service users' care plan. Care plans must take account of any special dietary requirements, any support to increase calorie intake, choices and preferences, any adapted cutlery, crockery or other equipment and any practical support or assistance needed with eating and drinking.
 - c) All service users receive support at mealtimes to meet their assessed needs.
 - d) Where an assessment indicates that support at mealtime is necessary, is necessary, advice is sought from an appropriate healthcare professional and the care plan for eating and drinking updated to take account of that advice.
 - e) The information recorded on food intake charts is sufficiently detailed to identify the quality and quantity of the service users' nutritional intake.

This is to comply with Regulation 4(1)(a), 4(2) and Regulation 5 of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).



- 4. By 30 November 2015, you must ensure that service users' needs relating to skin care and tissue viability are met and that factors that contribute towards the risk of skin damage are recognised and steps taken to minimise that risk. In order to achieve this, you must put in place a system to ensure that:
 - a) Skin assessments are undertaken for all service users to identify each service user's needs in relation to skin care.
 - b) All service users have a care plan in place which sets out how their skin care needs are to be met. This must include information about any specialist equipment in use, as well as the relevant settings for that equipment where appropriate.

This is to comply with Regulation 4(1)(a), 4(2) and Regulation 5 of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

5. By 30 November 2015, you must review the care files of all service user's in the service to ensure that there is accurate information about significant people who should be involved in the care and decision making of the service user.

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

- 6. By 30 November 2015, you must make proper provision for the health, welfare and safety of service users and put into practice, appropriate procedures for the prevention and control of infection. In order to do so, you must:
 - a) Undertake a deep cleaning throughout the home, ensuring that surfaces and items of equipment are properly cleaned to minimise the risk of spreading infection.
 - b) Put into place and document, detailed and specific cleaning schedules which identify expected levels of cleanliness and hygiene.
 - c) Implement effective quality assurance systems to monitor the standards of hygiene and cleanliness in the service and maintain records of quality assurance activity to show how these systems support improvement in the quality of cleanliness in the service.
 - d) Put in place a system of ensuring that all staff are aware of and take account of, current best practice guidance (such as Health and Safety Executive "Personal Protective Equipment at Work Regulations 1992. Guidance on Regulations L25" and NHS Scotland "Scotland "Infection Control Standards for Adult Care Homes: Final Standards 2005)".



e) Ensure that food items stored in fridges are in sealed containers and are clearly marked with the date of opening and the use by date.

This is to comply with Regulation 4(1)(a) and Regulation 10(1) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

7. By 30 November 2015, you must review the system currently in place for reporting notifiable incidents to the Care Inspectorate. You must ensure that all staff are aware of what type of incidents should be reported to the Care Inspectorate, the method by which notifiable events are to be reported and the time by which notifiable events must be reported.

This is to comply with Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) and Regulation 19(3)(d) of The Regulation of Care (Requirements as to Care Services) (Scotland) Regulations 2002 (SSI2002/114).

- 8. By 30 November 2015, you must ensure that persons employed in the care service receive training appropriate to the work they are to perform. In order to do so you must:
 - a) Undertake an assessment of staff training needs relevant to each staff member's role within the care service. This assessment must take into account the needs of the current service user group, the aims and objectives of the service and the individual professional development needs of staff to support them to maintain any professional registration.
 - b) Develop a training plan for the next 12 months which shows how identified training needs will be met. This training plan must include, but need not be restricted to including:
 - 1. Care planning.
 - 2. Nutrition for older people.
 - 3. Fluid and hydration for older people.
 - 4. Oral care.
 - 5. Dignity, privacy and respect.
 - 6. Adults with Incapacity Act 2000 and the rights of people who lack capacity.
 - 7. Dementia awareness and dementia care.
 - 8. Medication management.
 - 9. Use of specialist pressure relieving equipment.
 - 10. Accountability and Professional Codes.
 - 11. Infection Control.
 - c) Provide a copy of the training plan to the Care Inspectorate.
 - d) Develop and implement a system to assess the effectiveness of the training in practice.



e) Develop and implement a system to identify future staff training needs that will be used to inform future staff training plans.

This is to comply with Regulation 15(b)(ii) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

Please note that where more than one improvement is specified, failure to demonstrate compliance with any one of the improvements within the required timescale may result in us proceeding to make a proposal to cancel registration.

A copy of this notice has been sent to the local authority within whose area the service is provided as required by section 62(2) of the Act.

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

Yours faithfully

Stephen Butcher Team Manager

Direct:

Email: Stephen.Butcher@careinspectorate.com

cc: Local Authority Chief Executive, Scottish Borders Council, Newton St. Boswalls,

Melrose, TD6 0SA.

The Manager, St. Andrews Care Home, Stirches, Hawick.