

Inspection report

Duncraggan Care Home Care Home Service

73 Blairbeth Road
Burnside
Glasgow G73 4JD

Inspected by: Gillian McPake
(Care Commission Officer)

Type of inspection: Announced

Inspection completed on: 1 October 2008

Service Number

CS2006118663

Service name

Duncraggan Care Home

Service address73 Blairbeth Road
Burnside
Glasgow G73 4JD**Provider Number**

SP2006008288

Provider Name

Burnside Care Homes Ltd.

Inspected ByGillian McPake
Care Commission Officer**Inspection Type**

Announced

Inspection Completed

1 October 2008

Period since last inspection

6 Months

Local Office AddressPrinces Gate
60 Castle Street
Hamilton
ML3 6BU

Introduction

Duncraggan Care Home has been registered with the Care Commission since September 2006 and provides a service for 23 older people.

During the inspection there were 19 service users living there.

The home situated in a quiet residential area of Burnside consists of two buildings; the main house which can accommodate 15 service users and the bungalow which can accommodate 8 service users.

The current provider was providing single roomed accommodation in rooms which were originally double rooms.

The two buildings are situated in mature gardens, with local shops and transport links close by.

Based on the findings of this inspection the service has been awarded the following grades:

Quality of Care and Support - 4 - Good

Quality of Environment - 4 - Good

Quality of Staffing - 3 - Adequate

Quality of Management and Leadership - 3 - Adequate

This inspection report and grades represent the Care Commission's assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. Please refer to the care services register on the Care Commission's website (www.carecommission.com) for the most up-to-date grades for this service.

Basis of Report

This report was written following an announced inspection.

Before the Inspection

The Annual Return

The service submitted a completed Annual Return as requested by the Care Commission.

The Self-Assessment Form

The service submitted a self-assessment form as requested by the Care Commission.

Views of service users

There were 16 service user questionnaires issued by the Care Commission prior to inspection and 8 were returned prior to or during the inspection.

Regulation Support Assessment

The inspection plan for this service was decided after a Regulation Support Assessment (RSA) was carried out to determine the intensity of inspection necessary. The RSA is an assessment undertaken by the Care Commission Officer (CCO) which considers complaints activity, changes in the provision of the service, nature of notifications made to the Care Commission by the service (such as absence of a manager) and action taken upon requirements. The CCO will also have considered how the service responded to situations and issues as part of the RSA.

This assessment resulted in this service receiving a low RSA score and so a low intensity inspection was required. The inspection was based on the relevant Inspection Focus Areas and associated National Care Standards, recommendations and requirements from previous inspections and complaints or other regulatory activity.

This service will receive a number of inspections over the year 08/09. This inspection was based upon requirements and recommendations made at the last inspection on XXXX 2007/08 or 2008/09.

During the inspection process

Staff at inspection

The announced inspection was carried out by Gillian McPake Care Officer (CCO) and Barbara Barnes Lay Assessor and took place on, 25th September between 9.45 and 17.00, 1 October between 9.10 and 13.30.

Feedback was given to the Manager and Provider of the service on 1 October 2008.

Discussion took place with a range of staff including

- the manager
- 1 Senior care assistant
- 3 care assistants

As well as observation of staff practices and their interaction with service users.

Evidence

During inspection evidence was gathered from a number of sources including:

- Discussion with service users and staff
- A review of a range of policies, procedures, records and other documentation, including the following:
 - service user's personal plans
 - training records and policy and procedures
 - staff files

Observations of the home's environment and equipment.

All of the above information was taken into account during the inspection process and reported on.

The Lay Assessor's report can be seen under the relevant quality statements of this report. A Lay Assessor is a member of the public who volunteers to work alongside Care Commission Officers during the Inspection process. Lay Assessors have a unique experience of either being a service user themselves or being a carer for someone who has used services.

The Lay Assessors role is to speak with people using the service being inspected and gathering their views. In addition, where the Lay Assessor makes their own observations from their perspective as a recipient or a carer, these may also be recorded.

The inspection also took account of The Regulation of Care (Requirements as to Care

Services) (Scotland) Regulations 2002 (SSI 2002/114)

Inspection Focus Areas and links to Quality Themes and Statements for 2008/09
Details of the inspection focus and associated Quality Themes to be used in inspecting each type of care service in 2008/09 and supporting inspection guidance, can be found at:
<http://www.carecommission.com/>

Fire Safety Issues

The Fire (Scotland) Act 2005 introduced new regulatory arrangements in respect of fire safety, on 1 October 2006. In terms of those arrangements, responsibility for enforcing the statutory provisions in relation to fire safety now lies with the Fire and Rescue service for the area in which a care service is located. Accordingly, the Care Commission will no longer report on matters of fire safety as part of its regulatory function, but, where significant fire safety issues become apparent, will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Further advice on your responsibilities is available at www.infoscotland.com/firelaw

Action taken on requirements since last inspection

There was 1 requirement made since the last inspection. An action plan was submitted on 3 April 2008.

1. The Provider must review staffing arrangements taking account of service user's dependency levels.

Although the service had taken some action to address some of the staffing arrangements this had not taken account of the late shift staffing levels and the overall layout of the buildings.

Staff spoken with advised staffing levels were problematic at times due to the increased dependencies of service users. (See repeat requirement 1)

1. The Provider must review staffing arrangements taking account of service user's dependency levels and the layout of the buildings.

This information must be forwarded to the Care Commission and a new staffing schedule is to be issued.

This is in order to comply with:

SSI/2002/114. Regulation 13(a) - A requirement to ensure there are sufficient numbers of suitably qualified and competent people working in the care service to maintain service users health and welfare needs.

Timescale for implementation: 2 weeks from time of receiving this report.

Comments on Self Assessment

A completed self assessment was forwarded to the Care Commission. This identified strengths and areas for improvement.

View of Service Users

There were 16 service user questionnaires issued by the Care Commission prior to inspection and 8 were returned prior to or during the inspection.

The majority of the questionnaires returned to the Care Commission were positive about the service and the staff.

During the inspection, the Lay assessor spoke with twelve service users.

Comments from service users can be seen in the Lay Assessor's report under the relevant quality statements under each quality theme of this inspection report.

View of Carers

16 relative/carer questionnaires were sent to the service and 8 of these were returned.

However some relatives had completed the questionnaires sent to service users.

Overall these were positive about the service and the staff who worked there.

During the inspection, the Lay assessor spoke with three carers.

Comments from relatives/carers can be seen in the Lay Assessor's report under the relevant quality statements under each quality theme of this inspection report.

Quality Theme 1: Quality of Care and Support

Overall CCO Theme Grading: 4 - Good

Statement 1: We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service Strengths

An appropriate participation strategy was available.

Meetings had taken place with service users and staff about the Care Commission inspections and the grading systems.

The service had a regular newsletter which provided evidence of service users enjoying themed nights and celebrations.

This also provided service users and their representatives with information of events and meetings taking place and feedback with actions taken to address any issues previously raised.

Questionnaires for service user, carers past and present, staff and other stakeholders were all available and had been collated and evaluated.

A comprehensive and informative information pack was available to service users; this included a copy of the Care Commissions inspection reports and the rights of service users.

Advocacy information was available in the service.

Areas for Development

The manager as an area for improvement was reviewing the participation strategy as it was felt by the service the original strategy was hard for service users and staff to fully understand.

The service identified meetings were to continue with regard to participation.

Staff spoken with had not fully understood the concept of participation however this was an area the manager was addressing by reviewing the participation strategy and providing further training.

The service were still to address the actions to be taken with regard to responses from the questionnaires returned with more focus on service users and carers involvement within the service.

The service as an area of improvement are to consider processes of identifying those service users and carers who wish to participate in the improvement and development of Duncraggan Care Home for example chairing meetings or becoming involved in the newsletter production.

The service are also considering relative meetings.

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

0

Statement 3: We ensure that service user's health and wellbeing needs are met.

Service Strengths

Recommendation from last inspection:

1. The service should develop a contact list that supports staff to access external agencies for specialist palliative care advice within their local area.

This was suitably met.

A range of policy and procedures for example medication, continence, restraint, bereavement and nutritional polices were available which had recently been reviewed and updated by the manager.

These were accessible to staff in the service and service users if they wished to see them. Information was provided for service users and their representatives advising them about the policy and procedures.

Each service user had a personal plan which identified and included a full detailed health assessment and life history.

Various parts of the plans for example reviews were signed by the service user or a representative of the service user and indicated they had been involved in the planning of their care.

A senior member of the staff team and colleagues had undertaken a review of service user continence needs this identified areas to be improved upon which were acted upon to improve the outcome for service users.

Lay assessor's report

The Lay assessor spoke with people using the service and their carers about the support and care they received and asked them how they could influence the provision of this care.

The service users spoken with were all full of praise for the care they receive.

Comments were

"I'm very well looked after and the meals are great."

"Meals are wonderful."

"Couldn't ask for a better place."

"You can have a bath when you like."

"I'm going to write to the local paper and tell them how wonderful it is."

Service users enjoy a range of activities including visiting the local town hall for dances. One resident remarked

"I love the music and enjoy going dancing in the Town Hall."

Other activities include birthday celebrations, fish & chip teas and Open Days.

Carers I spoke to said they were very happy with their relatives care.
Carer's comments were

"Mum is very content here."

"The meals are varied."

"If I was to go into care this is where I would choose."

Areas for Development

Recommendations made at the last inspection:

2. An activities programme should be devised which incorporates the preferences of the service users, this should be carried out on a regular basis and recorded in individual's care plan information.

An activities programme had been devised and details of this were in service user's care plans. However the activities mainly consisted of videos and music. As an area for improvement the service are to look at other activities service users can become more involved in.

A small minority of the carer and service user questionnaires returned to the Care Commission identified a lack of activities.

The personal plans sampled, some elements had been written person centred, however this approach to planning varied in parts of the plan.

The service is to improve upon this by using a more person centred approach to planning and providing training for staff.

Although there was evidence of service users or their representative's involvement in their personal plan, the service could improve upon this by having the signatures updated when new information or further review of the plans are made to ensure evidence of participation.

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

0

Quality Theme 2: Quality of Environment

Overall CCO Theme Grading: 4 - Good

Statement 1: We ensure that service users and carers participate in assessing and improving the quality of the environment within the service.

Service Strengths

See 1:1

There are plans for the home to have further refurbishments and decoration.

All service user, relatives and staff have been fully informed of this during meetings held in the service.

A relative spoken with advised they had participated in the choice of room for their relative as well as the decoration.

Lay Assessor Report

The Lay assessor spoke with people using the service and their carers about the environment. She asked them how they could influence this.

Service user's comments were

"We have our own room and can do what we like."

Carer's comments were

"I chose it because it's homely."

Areas for Development

The environment was having a phased refurbishment and redecoration programme and this was mainly in the communal areas, halls and some bedrooms of the home. The manager advised due to the urgency to decorate these areas to improve them service users were not always consulted with prior to this occurring.

The manager has indicated this is an area they need to improve upon with regard to service user participation and she aims to address this and consult service users about the environment they live in especially their bedrooms.

This was evident from minutes of a meeting where service users were asked their choice of colour and paper for their bedrooms.

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

0

Statement 4: The accommodation we provide ensures that the privacy of service users is respected.

Service Strengths

The privacy of service users was respected by staff.

Service users could choose to see their relatives in the privacy of their bedrooms or in the dining areas of the two buildings.

Service users were treated with respect and dignity by the staff and any personal care was carried out in the privacy of their own bedroom or toilet.

Service users spoken with advised they were treated with respect and care. One service user advised " it's a good place to be - staff respect me and let me choose what I want to do".

A single room policy was being addressed by the provider and all of the service users in Duncraggan had the option of a single room. Anyone sharing a room was provided with the choice of a single room.

Areas for Development

All of the bedrooms and toilets had a lock on the door however some of these locks were not appropriate. The provider identified this as an area to be improved upon while carrying out the refurbishments.

The manager identified, missing clothing was at time a problem. This was highlighted as an area of improvement to ensure all service users clothing was clearly identifiable.

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Quality Theme 3: Quality of Staffing

Overall CCO Theme Grading: 3 - Adequate

Statement 1: We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service Strengths

See 1.1

Areas for Development

No action had been taken to address the quality of staffing and service user participation as yet but the manager advised this was planned.

The service is to consider a range of methods of how service users and staff could participate in the evaluation of staff and their practices and how this will in turn improve the quality of staffing in the service.

CCO Grading

3 - Adequate

Number of Requirements

0

Number of Recommendations

0

Statement 3: We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Service Strengths

There was a variety of recently reviewed policies and procedures which reflected the National Care Standards (NCS's). These were appropriate to this service.

Staff advised there was ongoing training which reflected the care needs of the service users and that a training plan was available.

Staff advised supervision was on a regular basis and they found this very helpful not only did it review their performance but it helped to inform and identify training.

Staff files had records of their training with copies of certificates of the training they had attended.

Staff evaluations were available of training they had completed and this information was then evaluated to inform future training.

All of the staff spoken with were aware of the NCS.

Staff meetings took place on a regular basis which they could participate fully in and staff advised any issues or views would be considered and addressed where it was appropriate to do so.

An induction plan was available for new staff with reference to the Scottish Social Services Council (SSSC).

Staff were all very positive and during this inspection there was a sense of team work.

The overall atmosphere was relaxed and friendly. This was acknowledged by service users, relatives and staff.

Lay assessor's Report

The lay assessor spoke with service users about the staff and how they could influence staffing arrangements.

Service user's comments were

"Staff are lovely."

"They look after us well."

Carer's comments were

"The staff are very caring."

"Staff are very helpful."

Areas for Development

Staff meetings had taken place however the minutes of the meetings did not reflect discussion or how improvements could be driven by staff. The manager could improve upon this as staff develop in the service.

The service have identified as an area for improvement to discuss the NCS's with staff and to review and "upgrade" the induction programme.

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

0

Quality Theme 4: Quality of Management and Leadership

Overall CCO Theme Grading: 3 - Adequate

Statement 1: We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Service Strengths

See 1.1

The service had addressed this by way of questionnaires and meetings and the results collated to inform percentages of service users, their representatives and staff views.

Staff spoken with advised they felt their views were respected, and that they could approach the manager with any concerns they had.

Service user and carer questionnaires returned to the Care Commission advised they were involved in the development of the service and could feedback their views about the quality of the service knowing these views would be acted upon.

Areas for Development

Lay Assessor Report

The Lay assessor spoke with service users and their carers about the management of the service and asked how they could influence the management of the service.

There are service users meetings held occasionally in the service.

There are no relatives meetings in the service. One carer commented

"There are no relatives' meetings but I can bring any problems to the staff and they will be dealt with."

See 1:1

Although staff had access to personal care plans not all staff were involved in the development and assessment processes. This was identified by the manager as an area that the service needed to improve upon and hoped to further pursue this when all staff had gained their Scottish Vocational Qualifications.

The service as an area for improvement is to encourage participation with regard to management and leadership and to progress the development of staff in promoting leadership values throughout the workforce.

The service were to consider other ways of engaging and involving service users in improving and assessing the quality of management and leadership.

CCO Grading

3 - Adequate

Number of Requirements

0

Number of Recommendations

0

Statement 4: We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide.

Service Strengths

The inspection focus area for this quality statement was in relation to notifications made to the Care Commission and the Scottish Social Services Council (SSSC), the manager of this service was fully aware of her responsibility to notify the relevant bodies of any misconduct or dismissal of staff working in the service.

No staff had been dismissed from the service prior to or during this inspection.

The service provided a suggestion book and a complaints procedure, together with the Care Commissions Complaint procedure.

An agenda was made available and provided evidence of an ongoing quality assurance system with outcome focus. This was given to the provider each month with information of actions taken and the outcomes and identified areas (if any) the provider needed to address.

As a strength the service has identified the manager has an open door policy and is available to discuss any matters including suggestions for improving Duncraggen care Home.

Areas for Development

The service are to continue to look at other quality assurance models to improve this service further and systems of engagement with service users, carers, staff and other stakeholders.

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

0

Regulations / Principles

National Care Standards

Enforcement

There has been no enforcement action against this service since the last inspection.

Other Information

Recommendation from the last inspection:

1. The service should provide more suitable brighter lighting in the upstairs hallway and some of the bedrooms.

This was met.

Lay Assessor's Report

The villa part of the home has a large bright lounge with large windows overlooking the garden. The rooms on the upper floor are colourfully decorated and spacious. However the landing is dark and the room doors have no signage apart from a small label on the door. I did feel that if the décor was light and there was pictorial signage on the room doors it would be better for the service users.

One of the fire doors on this floor was not alarmed and led to stone steps. (See recommendation 1)

Bathrooms and toilets could be made more comfortable with a blind at the window.

Some of the rooms were cool and the radiators have no covers on them. (see recommendation 2 and 3)

The bedrooms and communal areas were very clean and tidy.

The staff spoke in a quiet reassuring and compassionate manner with the service users and appeared to have a clear understanding of their individual needs and personalities.

As the lay assessors report highlights the hallway to the upper landing was dark in appearance and it was very difficult to distinguish bedroom doors from exit and bathroom doors. (See recommendations 4 and 5)

The service while refurbishing and decorating are to consider the bathroom and toilet areas to enhance the overall experience for service users.

While in the service the fire door alarm on the top landing was set off, staff on the lower ground could not hear this. (See recommendation 6)

The smoking area identified for a service user in the bungalow, was not appropriate and was to be relocated in accordance with the smoke legislation.

The provider advised this was to be addressed.

Recommendations / Requirements

1. The fire exit door to the top landing must be made secure to ensure the safety of service users.

National Care Standards Care Homes For Older People Standard 4 : your Environment.

2. All bedrooms should be suitably heated and service users should have access to the heating controls.

National Care Standards Care Homes For Older People Standard 4 : your Environment.

3. All radiators should have suitable covers fitted to ensure the safety and prevent injury to service users.

National Care Standards Care Homes For Older People Standard 4 : your Environment.

4. The provider should ensure doors are noticeably distinguishable and recognisable to service users especially those with dementia. When doing so service users should be consulted with as to their preference.

National Care Standards Care Homes For Older People Standard 4 : your Environment.

5. The decoration of the upper landing should be looked at to provide a lighter area for service users to enjoy and utilise.

National Care Standards Care Homes For Older People Standard 4 : your Environment.

6. The provider should ensure staff are able to hear and be alerted to alarms in the building to maintain the safety of service users. Consideration should also be taken to the suitability of the alarms.

National Care Standards Care Homes For Older People Standard 4 : your Environment.

Requirements

Recommendations

Gillian McPake
Care Commission Officer