

# Inspection report

## Central Scotland Brain Injury Rehabilitation Unit Independent Health Care Service

Murdostoun Castle  
Bonkle  
Newmains  
Wishaw ML2 9BY

**Inspected by:** Alan Hughes  
**(Care Commission Officer)**

**Type of inspection:** Announced

**Inspection completed on:** 9 August 2005

**Service Number**

CS2003010557

**Service name**

Central Scotland Brain Injury Rehabilitation Unit

**Service address**Murdoch Castle  
Bonkle  
Newmains  
Wishaw ML2 9BY**Provider Number**

SP2003002125

**Provider Name**

Four Seasons Health Care Limited

**Inspected By**Alan Hughes  
Care Commission Officer**Inspection Type**

Announced

**Inspection Completed**

9 August 2005

**Period since last inspection**

4 months

**Local Office Address**

Princes Gate, Castle Street, Hamilton ML3 6BU

## **Introduction**

Central Scotland Brain Injury Rehabilitation Unit is a single storey purpose built building providing an independent healthcare facility for up to 20 people in single room accommodation. The unit is modern well equipped purpose built and provides a wide range of rehabilitation facilities.

The unit is located in the grounds of Murdostoun Castle on the outskirts of Bonkle. Due to its location the unit is not easily accessible by public transport. There are adequate parking facilities provided.

## **Basis of Report**

Prior to the inspection the service returned a Pre Inspection Return and a self evaluation form The Care Commission Officer wrote to the service advising them when the visit would take place.

During the visits which began on 9th August 2005 and concluded on 10th August 2005 the Care Commission Officer interviewed

- The Home Manager
- 5 staff members
- 4 service users

Care Commission Officers spent time talking with the service users either on an individual basis or in small groups.

The Care Commission Officers also looked at the services policies procedures, records care plans and spent time observing the care processes and staff - service user interaction in the different units

The inspection has focussed on the following 5 National Care Standards for Independent Hospitals and compliance with clinical governance via Regulation 15

Standard 1: Before you come for your outpatient appointment.

Standard 2: Your outpatient appointment.

Standard 11: Deciding on your treatment.

Standard 14 :Information held about you.

Standard 17 :Security

SSI No 114 : Regulation 15: Quality of Independent Health care

The inspection assessed the service compliance with The Regulation of Care( Requirements as to Care Services) (Scotland) Regulations 2002 (Scottish Statutory Instrument 2002/114) (SSI 2002/114)

## **Action taken on requirements in last Inspection Report**

There were two requirements arising from the previous inspection. These have both been satisfactorily addressed.

## **Comments on Self-Evaluation**

The self evaluation was completed and the information contained within was of benefit during

this inspection.

**View of Service Users**

Service users spoken to felt that they were well looked after and that their needs were being met.

**View of Carers**

No carers were available for interview during inspection.

## **Regulations / Principles**

### **Regulation 15: SSI 114 Regulation 15 Quality of Independent Health Care**

#### **Strengths**

The service identified the nurses station as the only area where records are not consistently stored in a secure manner consistent with data protection principles and best practice guidance, and are taking steps to address this.

The care plans were of a very high standard.

The service operated a employment protocol that included a 3 monthly induction period followed by quarterly reviews of training and development. An enhanced disclosure and two references were always sought before employment.

All staff received a general company induction, covering mandatory issues such as fire safety and confidentiality of service user information.

The service documented staff professional registrations and renewal dates.

The service had systems in place to answer any staff capability or disciplinary issues.

The service garnered service user opinion via assessment and review meetings, suggestions and complaint forms, and a quality survey.

The service had recently set up a Clinical Governance Committee to look at issues such as audit, critical incident analysis, staff training and risk assessment.

Staff regularly contributed to the quality review process via staff meetings and the new Clinical Governance Committee.

The service sought to learn from external sources, such as links with the Southern General Hospital, as well as internal processes such as complaints.

#### **Areas for Development**

The service did not inform service users that they can, and how to, access their personal records. (see recommendation 4)

The policies manual was written from an English perspective e.g it mentioned the Healthcare Commission as opposed to the Care Commission. ( see recommendation 5)

## **National Care Standards**

### **National Care Standard Number 1: Independent Hospitals - Before You Come for Your Outpatient Appointment**

#### **Strengths**

This standard was not applicable as the service did not operate an outpatient facility.

## **Areas for Development**

### **National Care Standard Number 2: Independent Hospitals - Your Outpatient Appointment**

#### **Strengths**

This standard was not applicable as the service did not provide an outpatient service

#### **Areas for Development**

### **National Care Standard Number 11: Independent Hospitals - Deciding on Your Treatment**

#### **Strengths**

Service users received written information advising of the planned treatment programme which included the period of assessment and the rehabilitation process.

Key workers were appointed to all service users, normally before the planned admission occurred. Service users and their families or representatives were encouraged to visit before an admission occurred. They were also provided with written information which was included in formal offer of placement correspondence.

Upon admission a detailed multi disciplinary assessment followed. The service user or their representative were fully advised of the proposed treatment plan and signed an agreement to undergo this. During ongoing reviews the service user or their representative were fully involved and they would sign review documentation to confirm their agreement to the proposed plan. The success of any treatment programme was dependant on service user agreement and participation.

Where service users were unable to give consent and had no legal guardians appointed the service would work in line with The Adults with Incapacity (Scotland) Act 2000.

#### **Areas for Development**

Service users did not receive written information advising them that they could request a copy of their consent form. (see recommendation 1)

The unit had not yet considered whether the forthcoming implementation of new mental health legislation would have any impact upon the existing admission, treatment criteria. (see recommendation 2)

### **National Care Standard Number 14: Independent Hospitals - Information Held about You**

## **Strengths**

The hospital had a detailed confidentiality policy which all staff were required to comply with. On occasions where it was identified that confidential/personal information required to be disclosed to other services as part of the treatment programme, written consent would be sought from the service user and/or their representative in the first instance.

Service user treatment plans were of very high quality. They were excellently maintained, accurate, relevant and multi disciplinary in nature.

To assist the service user to understand the content of the treatment plan the service would allocate as a key worker a member of staff from the discipline most heavily involved in the service users rehabilitation programme.

There were various systems in place for ensuring that medical staff would receive prompt notification of the outcomes of any tests carried out.

In the event of the hospital ceasing to operate management advised that patient care records would be transferred and securely stored in the organisations head office.

## **Areas for Development**

The existing storage of files at the nurses station does not afford sufficient security in order to satisfactorily safeguard client confidentiality. (see recommendation 3)

## **National Care Standard Number 17: Independent Hospitals - Security**

### **Strengths**

All service users admitted to the hospital had health needs which were regularly monitored and reviewed on a multi disciplinary basis.

During office hours the reception desk adjacent to the main entrance was fully manned. All visitors were required to sign in and out of the building. Outwith office hours access could only be gained via a secure entry system. Throughout the building there was an efficient call system in operation.

Service users could access lockable storage facilities if requested. Valuables etc. could be deposited at reception for safekeeping if necessary. Information provided to service users prior to admission actively discouraged individuals to bring valuables into the hospital if possible.

Privacy was afforded with the provision of individual bedrooms. Service users could use their mobile telephones if they wished and a pay phone was also available at reception.

### **Areas for Development**

The location of the pay phone did not afford service users privacy. (see recommendation 6)

## **Enforcement**

None

## **Other Information**

The unit did not have a designated health and safety officer appointed. (see requirement 1)

Staff participation and response times were not recorded when the fire alarm was activated (see requirement 2)

The fire risk assessment previously carried out in July 2004 was overdue for review (see requirement 3)

The inspection timescales for fire fighting equipment had been exceeded (see requirement 4)

## **Requirements**

1. A designated officer responsible for health and safety issues must be identified and appropriately trained. ( SSI. 2002 No.114, 4,1a) (3 months)
2. Fire alarms and fire drills that have been conducted must be accurately recorded including details of all staff in attendance. (SSI.2002 No. 114, 13,c) (4 weeks)
3. A regular fire risk assessment must be carried out. The fire risk assessment must comply with current fire authority guidance. An action plan arising from the assessment must be developed and implemented. ( SSI. 2002 No.114, 4,1a) (8 weeks)
4. Fire fighting equipment must be maintained in accordance with contracted timescales. ( SSI. 2002 No.114, 4,1a) (within 24 hours of receipt of this report)

## **Recommendations**

1. Service users should be formally notified that they are entitled to request copies of any consent forms. ( National Care Standards: Independent Hospitals, Standard 11.5 : your safety deciding on your treatment.)
2. The service should consider whether forthcoming, revised mental health legislation will have any impact upon existing or future service provision. ( National Care Standards: Independent Hospitals, Standard 11.9 : your safety deciding on your treatment.)
3. The hospital should take action to improve upon existing procedures to ensure the secure storage of personal files occurs at all times. ( National Care Standards: Independent Hospitals, Standard 14.1: your safety - information held about you)
4. The service should have written information available for service users on how to access their personal records. ( National Care Standards: Independent Hospitals, Standard 14 - Information Held About You).
5. The service should develop the work of the Clinical Governance Committee covering the issues of audit, critical incident analysis, staff training and risk assessment. (National Care Standards: Independent Hospitals, Standard 12 - Clinical Effectiveness)
6. The location of the pay phone should be revised in order to provide a facility that offers service users privacy. (National Care Standards: Independent Hospitals, Standard 17.4: your safety - security)

**Alan Hughes**  
**Care Commission Officer**