

DUNDEE CITY COUNCIL

REPORT TO: SCRUTINY COMMITTEE - 19TH MAY 2010

REPORT ON: ANNOUNCED AND UNANNOUNCED INSPECTIONS OF MENZIESHILL HOUSE CARE HOME FOR OLDER PEOPLE BY THE SCOTTISH COMMISSION FOR THE REGULATION OF CARE.

REPORT BY: DIRECTOR OF SOCIAL WORK

REPORT NO: 257 2010

1.0 PURPOSE OF REPORT

1.1 The purpose of this report is to report the findings of the Inspection of Menzieshill House Care Home carried out on 7th December 2009 and 1st March 2010.

2.0 RECOMMENDATIONS

2.1 It is recommended that the Scrutiny Committee:
ii) notes the content of these reports and
iii) requests that the Director of Social Work monitor the continued progress towards improving this service.

3.0 FINANCIAL IMPLICATIONS

3.1 None.

4.0 MAIN TEXT

4.1 Menzieshill House had an announced inspection on 7th December 2009 by the Scottish Commission for the Regulation of Care. A report of the findings was published in February 2010. At the time of the inspection there were 32 older people resident in Menzieshill House.

4.2 The Care Commission's focus of inspection targeted the following Quality Themes;
• Quality of Care and Support
• Quality of Staffing

Each Quality Theme is made up of several quality statements and this inspection focussed on four of these quality statements.

4.3 The Care Commission identified the following strengths at Menzieshill House from the Quality Themes and statements inspected:

- There was very good evidence that Service User's and carers were encouraged to participate in both assessing and improving the quality of the care and support provided by the service. A range of methods were used to involve residents and relatives.
- The Service had introduced questionnaires for residents and relatives.
- Service User's and carers are encouraged to chair meetings.
- Six monthly review meetings for each resident and their relatives.
- Minutes of meetings and the Care Home newsletter evidenced that the service has acted on comments it had received from residents and their relatives.

- Regular carer group meetings are held.
- The Service had a very good range of methods to ensure the needs of the Service User's are met. Communication needs are detailed in Care Plans
- Minutes of meetings and newsletters are made readily available to residents and relatives.
- There was evidence of positive interactions between staff and Service User's.
- Communication between staff and relatives was very good.
- The service had very good involvement of residents and relatives in assessing and improving the quality of the staffing in the care home.
- A very good range of methods were used to involve residents and relatives.
- Residents and their relatives contributed questions which were used as part of the interview process.
- Some residents were involved in interviewing and gave their views on the suitability of applicants.
- There were good outcomes from the Councils safer recruitment policies.
- The care home has a very good staff induction process.
- The care home had a very thorough induction programme for all new staff.
- Staff progress in the Induction process is assessed at a supervision meeting with Senior Social Care Officers. The assessment identifies competencies achieved and further training and development planned for the near future.

4.4 Evaluation

The Care Commission can apply the following to services:

- Enforcement Action
- Requirements
- Recommendations

Menzieshill House did not receive any enforcement actions or requirements. There was one recommendation for Menzieshill House to include a wider range of day to day practice in the induction process.

4.5 Quality Indicators

Scottish Commission for The regulation of Care reports use a six point scale for reporting performance.

| | |
|---|----------------|
| 6 | Excellent |
| 5 | Very Good |
| 4 | Good |
| 3 | Adequate |
| 2 | Weak |
| 1 | Unsatisfactory |

The following quality statements based on the National Care Standards were evaluated as:

| | | |
|-----|-----------------------------|-------------|
| 1.1 | Quality of Care and Support | 5 Very Good |
| 1.4 | Quality of Care and Support | 5 Very Good |
| 3.1 | Quality of Staffing | 5 Very Good |
| 3.2 | Quality of Staffing | 4 Good |

These grades are then translated into the grade for the Quality Theme and are as follows:

| Quality Theme | Overall Grade |
|-----------------------------|---------------|
| Quality of Care and Support | 5 |
| Quality of Staffing | 4 |

5.0 POLICY IMPLICATIONS

5.1 This report has been screened for any implications in respect of Sustainability, Strategic Environment Assessment, Anti-Poverty and Equality Impact Assessment and Risk Management.

5.2 There are no major issues.

6.0 CONSULTATION

6.1 This report has been subject to consultation with the chief executive Depute Chief executive (Support Services), Deputy Chief Executive (Finance) and Head of Finance.

7.0 BACKGROUND PAPERS

7.1 The following Background papers was relied upon in preparation of this report.

Inspection Report Dundee City Council - Menzieshill House

Alan Baird
Director of Social Work



Inspection report

Menzieshill House Care Home Service Adults

201 Earn Crescent
Menzieshill
Dundee
DD2 4GD
01382 432955

Inspected by: Paul Clemson
(Care Commission officer)

Type of inspection: Unannounced

Inspection completed on: 1 March 2010

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Service provided by:
Dundee City Council

Service provider number:
SP2003004034

Care service number:
CS2003000477

Contact details for the Care Commission officer who inspected this service:

Paul Clemson
Telephone 01382 207200 Lo-Call: 0845 6008331
Email enquiries@carecommission.com



Easy read summary of this inspection report

We grade all the Quality Statements for a service at each inspection. Each grade describes how well we think the service is doing based on what we inspected.

We can choose from six grades:



We gave the service these grades

| | | |
|--------------------------------------|--|-----------|
| Quality of Care and Support |  | Very Good |
| Quality of Environment | | N/A |
| Quality of Staffing |  | Good |
| Quality of Management and Leadership | | N/A |

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

Grades for this care service may change after this inspection due to other regulatory activity; for example, if we have to take enforcement action to improve the service, or if we investigate and agree with a complaint someone makes about the service.

What the service does well

The service involved residents and relatives to a very good level in assessing and improving all parts of the quality of the service. Residents overall had excellent choices in their daily lives and support to maintain their independence. The environment of the care home meant very good outcomes for resident's quality of life.

What the service could do better

The provider should use best practice guidance in falls prevention and falls risk assessments for all residents.

What the service has done since the last inspection

The provider was committed to ongoing service improvement.

The staff team worked hard to ensure a positive atmosphere within the service.

The whole service is open to new ideas about how to make sure that people who live there have a good quality of life.

Conclusion

The home had a very positive and relaxed atmosphere. Residents said they liked living in the care home and were extremely well looked after by the care staff.

Who did this inspection

Lead Care Commission Officer

Paul Clemson

Other Care Commission Officers

Patrick Sweeney

Lay Assessor

Not Applicable

Please read all of this report so that you can understand the full findings of this inspection.

About the Care Commission

We were set up in April 2002 to regulate and improve care services in Scotland.

Regulation involves:

- registering new services
- inspecting services
- investigating complaints
- taking enforcement action, when necessary, to improve care services.

We regulate around 15,000 services each year. Many are childminders, children's daycare services such as nurseries, and care home services. We regulate many other kinds of services, ranging from nurse agencies to independent healthcare such as hospices and private hospitals.

We regulate services for the very young right through to those for the very old. Our work can, therefore, affect the lives of most people in Scotland.

All our work is about improving the quality of care services.

We produce thousands of inspection reports every year; all are published on our website: www.carecommission.com. Reports include any complaints we investigate and improvements that we ask services to make.

The "Care services" area of our website also:

- allows you to search for information, such as reports, about the services we regulate
- has information for the people and organisations who provide care services
- has guidance on looking for and using care services in Scotland.

You can also get in touch with us if you would like more detailed information.

About the National Care Standards

The National Care Standards (NCS) set out the standards that people who use care services in Scotland should expect. The aim is to make sure that you receive the same high quality of service no matter where you live.

Different types of service have different National Care Standards. When we inspect a care service we take into account the National Care Standards that the service should provide.

The Scottish Government publishes copies of the National Care Standards online at: www.scotland.gov.uk

You can get printed copies free from:

Blackwells Bookshop
53-62 South Bridge Edinburgh
EH1 1YS
Telephone: 0131 662 8283
Email: Edinburgh@blackwells.co.uk

What is inspection?

Our inspectors, known as Care Commission Officers (CCOs), check care services regularly to make sure that they are meeting the needs of the people in their care.

One of the ways we check on services is to carry out inspections. We may turn up without telling the service's staff in advance. This is so we can see how good the care is on a normal day. We inspect some types of services more often than others.

When we inspect a service, typically we:

- talk to people who use the service, their carers and families, staff and managers
- talk to individuals and groups
- have a good look around and check what quality of care is being provided
- look at the activities happening on the day
- examine things like records and files, if we need to
- find out if people get choices, such as food, choosing a key worker and controlling their own spending money.

We also use lay assessors during some inspections. These are volunteers who have used care services or have helped to care for someone who has used care services.

We write out an inspection report after gathering the information. The report describes how things are and whether anything needs to change.

Our work must reflect the following laws and guidelines:

- the Regulation of Care (Scotland) Act 2001
- regulations made under this Act
- the National Care Standards, which set out standards of care that people should be able to expect to receive from a care service.

This means that when we register or inspect a service we make sure it meets the requirements of the 2001 Act. We also take into account the National Care Standards that apply to it.

If we find a service is not meeting these standards, the 2001 Act gives us powers that require the service to improve.

Recommendations, requirements and complaints

If we are concerned about some aspect of a service, or think it could do more to improve its service, we may make a requirement or recommendation.

- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement.
- A requirement is a statement which sets out what is required of a care service to comply with the Act and Regulations or Orders made under the Act, or a condition of registration. Where there are breaches of the Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Commission.

Complaints: We have a complaints procedure for dealing with any complaint about a registered care service (or about us). Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

We investigate all complaints. Depending on how complex it is, a complaint may be:

- upheld - where we agree there is a problem to be resolved
- not upheld - where we don't find a problem
- partially upheld - where we agree with some elements of the complaint but not all of them.

How we decided what to inspect

Why we have different levels of inspection

We target our inspections. This means we spend less time with services we are satisfied are working hard to provide consistently high standards of care. We call these low-intensity inspections. Services where there is more concern receive more intense inspections. We call these medium or high intensity inspections.

How we decide the level of inspection

When planning an inspection, our inspectors, or Care Commission Officers (CCOs) carefully assess how intensively each service needs to be inspected. They do this by considering issues such as:

- complaints
- changes to how the service provides care
- any notifications the service has given us, such as the absence of a manager
- what action the service has taken in response to requirements we have made.

The CCO will also consider how the service responded to situations and issues: for example how it deals with complaints, or notifies us about incidents such as the death of someone using the service.

Our inspections take account of:

- areas of care that we are particularly interested in (these are called Inspection Focus Areas)
- the National Care Standards that the service should be providing
- recommendations and requirements that we made in earlier inspections
- any complaints and other regulatory activity, such as enforcement actions we have taken to improve the service.

What is grading?

We grade each service under Quality Themes which for most services are:

- **Quality of Care and support:** how the service meets the needs of each individual in its care
- **Quality of environment:** the environment within the service (for example, is the service clean, is it set out well, is it easy to access by people who use wheelchairs?);
- **Quality of staffing:** the quality of the care staff, including their qualifications and training
- **Quality of management and leadership:** how the service is managed and how it develops to meet the needs of the people it cares for
- **Quality of information:** this is how the service looks after information and manages record keeping safely.

Each of the Quality Themes has a number of Quality Statements in it, which we grade.

We grade each heading as follows:

| | | | | | |
|-----------|-----------|----------|----------|----------|----------------|
| 6 | 5 | 4 | 3 | 2 | 1 |
| excellent | very good | good | adequate | weak | unsatisfactory |

We do not give one overall grade.

How grading works.

Services assess themselves using guidance that we given them. Our inspectors take this into account when they inspect and grade the service. We have the final say on grading.

The Quality Themes for this service type are explained in section 2 The Inspection.

About the service we inspected

Menzieshill House is a care home service for older people provided by Dundee City Council and is located in the Menzieshill area to the west of Dundee. The new, purpose-built accommodation for the home was completed in May 2005 and residents were transferred from the existing building nearby.

The design of the new building incorporates recognised good principles for accommodation suited to the needs of older people and people with dementia. It is divided into four units, each with eight en-suite rooms, a separate kitchen, assisted bathing facilities and direct access to the garden area. In each unit the individual rooms open directly onto a living space with lounge and dining areas. Individual units provide a homely and supportive living environment with well thought out interior decor and furnishings. The home also has extensive communal facilities including a large activities room, tea room/reminiscence room, hairdressers salon and reception area. There is good provision of staff accommodation and a well equipped main kitchen and laundry.

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

| | |
|---|----------------------|
| Quality of Care and Support | 5 - Very Good |
| Quality of Environment | N/A |
| Quality of Staffing | 4 - Good |
| Quality of Management and Leadership | N/A |

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

Grades for this care service may change after this inspection due to other regulatory activity; for example, if we have to take enforcement action to improve the service, or if we investigate and agree with a complaint someone makes about the service.

You can use the "Care services" area of our website (www.carecommission.com) to find the most up-to-date grades for this service.

How we inspected this service

What level of inspection did we make this service

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What activities did we undertake during the inspection

The report was written following an unannounced inspection on 1 March 2010, by Care Commission officers Paul Clemson and Patrick Sweeney.

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

- (i) A review of a range of policies, procedures and records and other documentation including residents and staff records.
- (ii) Examination of the environment, including the premises and equipment used.
- (iii) Observation of interactions between the staff and residents.
- (iv) Interviews with the manager, six staff, five residents and three relatives.

All the above information was taken into account during the inspection process and was used to assess the performance of the service in relation to the Quality Statements, the relevant Inspection Focus Area and associated National Care Standards, recommendations and requirements from previous inspections and complaints or other regulatory activity.

Inspection Focus Areas (IFAs)

Each year we identify an area, or areas, we want to focus on during our inspections. We still inspect all the normal areas of a care service; these are extra checks we make for a specific reason.

For 2009/10 we will focus on:

- Meaningful activity for all adult services
- How care services assess the health of people with learning disabilities
- Involving parents for children's services
- Medication for looked after children for residential accommodation for children
- How care services make sure they have safe recruitment procedures for staff for all services except childminders.

You can find out more about these from our website www.carecommission.com.

Fire safety issues

The Care Commission no longer reports on matters of fire safety as part of its regulatory function. Where significant fire safety issues become apparent, we will alert the relevant

Fire and Rescue service to their existence in order that it may act as it considers appropriate. Care service providers can find more information about their legal responsibilities in this area at: www.infoscotland.com/firelaw

Actions Taken on Recommendations Outstanding

Recommendation 1, Quality of Staffing, Statement 2.

The service's induction and ongoing assessment of staff competence should evaluate a wider range of day to day practice. Standard 5, Management and staffing arrangements.

The service had maintained its already very good practice in inducting new staff. Since the last inspection the service had written a framework to observe the practice of new staff in different roles including; assisting residents, communicating with relatives and providing activities. The framework also linked each of these roles to the National Care Standards and competences in the SVQ in Care. For each role to be assessed there was to be a detailed observation of practice and evaluation of the practice through staff one to one supervision meetings. The service's induction practice will be inspected again at a future inspection.

Recommendation 1, Safer Recruitment - Inspection Focus Area

It is recommended that the provider ensure that a formal application process is followed for each period of employment. Scottish Social Services Council Code of Practice - Employer 'Make sure people are suitable to enter the workplace - 1.1. National Care Standards, Care homes for older people, Standard 5 Management and staffing arrangements.

And

Recommendation 2, Safer Recruitment - Inspection Focus Area

It is recommended that the provider audits the procedures for the recording of staff skills and qualification records. Scottish Social Services Council Code of Practice - Employer 'Make sure people are suitable to enter the workplace - 1.1. Standard 5 Management and staffing arrangements.

The provider's action to meet these two recommendations will be followed up in a separate audit by the Care Commission.

The annual return

We use annual returns (ARs) to:

- make sure we have up-to-date, accurate information about care services; and
- decide how we will inspect services.

By law every registered care service must send us an annual return and provide us with the information we have requested. The relevant law is the Regulation of Care (Scotland) Act 2001, Section 25(1). These forms must be returned to us between 6 January and 28 February 2009.

Annual Return Received

Yes - Electronic

Comments on Self Assessment

We received a fully completed self assessment document from the service. We were satisfied with the way the service had completed this and with the relevant information they had given us for each of the headings that we grade them under.

Taking the views of people using the care service into account

When we interviewed residents they said they liked living in the care home and were well looked after by the care staff. Comments included "I am very happy" and "the staff are very kind."

All residents strongly agreed that they were happy with the quality of care in the home. No one was unhappy with the service. Residents agreed that they could give their views on the quality of the service and the management took these seriously. No one disagreed with this.

Taking carers' views into account

No relatives spoke with Care Commission staff during our inspection visit.

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 5 - Very 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

This service was found to have very good performance in relation to this statement.

The Council had a suitable participation policy for residents and relatives to have a say about the quality of care provided.

A range of methods were used to involve residents and relatives including:

- (i) Questionnaires for residents and relatives
- (ii) Meetings chaired by residents and relatives
- (iii) Six monthly review meetings for each resident with their relatives
- (iv) Informal discussions
- (v) Residents and relatives views were asked for separately, as these can be different
- (vi) Minutes of residents and relatives meetings and the care home's newsletter evidenced that the service had acted on comments it had received.

Regular meetings of the carers group were being held and documentation in the form of minutes provided from the 'carers group' meeting, recorded exchange of information between relatives and care staff. The minutes suggested that the opinions and wishes of the relatives present were being taken into account in directing service users care effectively.

Some examples of this practice were:

- (i) Residents were asked who they wanted to invite to their reviews.
- (ii) Relatives confirmed they were asked for their opinions and they found these were acted on.

This was the continuing practice of the service.

Areas for Improvement

The service should continue the very good practice in this area.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Statement 2

We enable service users to make individual choices and ensure that every service user can be supported to achieve their potential.

Service Strengths

The service had excellent practice in this quality statement.

The sampled personal plans evidenced excellent written documentation that residents independence was promoted in their personal care and daily routines wherever possible. The plans also evidenced how the service promoted residents health and quality of life through meaningful activity and to follow individual interests based upon their personal histories.

The service put on a very good range of activities for residents to join in. For example, an arts and craft group, bingo, chair based exercises, entertainments and social events. The staff in each suite also provided activities for residents in small groups or one to ones including dominoes, cards games, music CDs and DVDs. Residents could choose when they wanted to join in activities. The care home's brochure accurately set out the choices and activities that are available to residents.

The service provided residents with appropriate equipment and facilities to support their independence. Residents had very good access to rehabilitation staff such as physiotherapists and speech and language therapists.

The service used the provider's risk assessments to assess the risk of falls for residents and had put in place appropriate measures for those residents safety.

Staff were seen to be enthusiastic and dedicated to their task. By taking part in a variety of training courses to extend staff skills and knowledge a commitment to professional development successfully enhanced the outcomes for the service users. They worked collaboratively to ensure high quality provision for the residents and continuity of care.

Areas for Improvement

The service should maintain the excellent practice in this area.

The provider should use best practice guidance given during the inspection to develop its falls prevention procedures and falls risk assessments for all residents.

Grade awarded for this statement

6 - Excellent

Number of Requirements

0

Number of Recommendations

0

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 4 - Good

Statement 1

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

Service Strengths

The service had very good involvement of residents and relatives in assessing and improving the quality of the staffing in the care home.

A very good range of methods were used to involve residents and relatives. Residents and relatives made their views known separately. The service had taken action on comments from residents and relatives.

Residents had put forward ten questions to be used by the service when interviewing applicants. Some residents met applicants as part of the interviewing process and gave their views on the suitability of the applicants. Residents had found meeting several applicants to be very tiring. The service was reviewing how best to further involve residents directly in interviewing applicants.

This was the continuing practice of the service.

Areas for Improvement

The service should continue its very good practice.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Statement 2

We are confident that our staff have been recruited, and inducted, in a safe and robust manner to protect service users and staff.

Service Strengths

The service had good practice in this quality statement.

At the last inspection we found:

- (i) the provider had a good safer recruitment practice for employees
- (ii) the service had a very good staff induction process.

Over the first six months of employment the service ensured new staff:

- (i) shadowed senior staff for several shifts
- (ii) were familiar with important policies, such as confidentiality and equal opportunities and procedures regarding moving and handling. A checklist was completed for this.
- (iii) had relevant in-depth training and their competence assessed before they carried out key tasks such as moving and handling or medicines administration. Written records of these assessments were kept.

There were very good records of direct observation and assessment by senior staff of how well new staff carried out a range of care practices and the values and manner they demonstrated when working with residents.

Staff progress in their induction was assessed at a supervision meeting with a senior social care officer. The assessment identified competences achieved and further training and development to be planned in the near future.

Areas for Improvement

The service should continue its good practice.

Grade awarded for this statement

4 - Good

Number of Requirements

0

Number of Recommendations

2

Safer Recruitment - Inspection Focus Area (IFA) outcome

The requirements and/or recommendations below reflect our view of the providers performance in meeting its legal responsibilities when recruiting staff and its compliance with best practice. This is as a result of an audit of the providers recruitment files.

Recommendation

1.

It is recommended that the provider ensure that a formal application process is followed for each period of employment.

Scottish Social Services Council Code of Practice - Employer

'Make sure people are suitable to enter the workplace' - 1.1 National Care Standards Early Education and Childcare up to the age of 16 Standard 12.1 Confidence in Staff.

Recommendation

2.

It is recommended that the provider audits the procedures for the recording of staff skills and qualification records.

Scottish Social Services Council Code of Practice - Employer

'Make sure people are suitable to enter the workplace' - 1.1 National Care Standards Early Education and Childcare up to the age of 16 Standard 12.1 Confidence in Staff

Other Information

Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

Enforcements

We have taken no enforcement action against this care service since the last inspection.

Additional Information

None.

Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in the Care Commission re-grading the Quality Statement within the Management and Leadership Theme as unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).

Summary of Grades

| | |
|--|---------------|
| Quality of Care and Support - 5 - Very Good | |
| Statement 1 | 5 - Very Good |
| Statement 2 | 6 - Excellent |
| Quality of Environment - Not Assessed | |
| Quality of Staffing - 4 - Good | |
| Statement 1 | 5 - Very Good |
| Statement 2 | 4 - Good |
| Quality of Management and Leadership - Not Assessed | |

Inspection and Grading History

| Date | Type | Gradings |
|------------|-------------|---|
| 7 Dec 2009 | Announced | Care and support 5 - Very Good Environment <i>Not Assessed</i> Staffing 4 - Good Management and Leadership <i>Not Assessed</i> |
| 9 Dec 2008 | Unannounced | Care and support 5 - Very Good Environment 5 - Very Good Staffing 5 - Very Good Management and Leadership 5 - Very Good |
| 8 May 2008 | Announced | Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and Leadership 4 - Good |

Terms we use in our report and what they mean

Action Plan - When we inspect a service, or investigate a complaint and the inspection report highlights an area for improvement; either through recommendations or requirements, the action plan sets out the actions the service will take in response.

Best practice statements/guidelines - This describes practices that have been shown to work best and to be achievable in specific areas of care. They are intended to guide practice and promote a consistent and cohesive approach to care.

Care Service - A service that provides care and is registered with us.

Complaints - We have a complaints procedure for dealing with any complaint about a registered care service or about us. Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

We investigate all complaints which can have more than one outcome. Depending on how complex the complaint is, the outcomes can be:

- upheld - where we agree there is a problem to be resolved
- not upheld - where we don't find a problem
- partially upheld - where we agree with some elements of the complaint but not all of them.

Enforcement - To protect people who use care services, the Regulation of Care (Scotland) Act 2001 gives the Care Commission powers to enforce the law. This means we can vary or impose new conditions of registration, which may restrict how a service operates. We can also serve an improvement notice on a service provider to make them improve their service within a set timescale. If they do not make these improvements we could issue a cancellation notice and cancel their registration.

Disclosure Scotland- Disclosure Scotland provides an accurate and responsive disclosure service to enhance security, public safety and protect the vulnerable in society. There are three types or levels of disclosure (i.e. criminal record check) available from Disclosure Scotland; basic, standard and enhanced. An enhanced check is required for people whose work regularly involves caring for, training, supervising or being in sole charge of children or adults at risk; or to register for child minding, day care and to act as foster parents or carers.

Participation - This describes processes that allow individuals and groups to develop and agree programmes, policy and procedures.

Personal Plan - This is a plan of how support and care will be provided. The plan is agreed between the person using the service (or their representative, or both of them) and the service provider. It is sometimes called a care plan mostly by local authorities or health boards when they commission care for people.

How you can use this report

Our inspection reports give care services detailed information about what they are doing well and not so well. We want them to use our reports to improve the services they provide if they need to.

Care services should share our inspection reports with the people who use their service, their families and carers. They can do this in many ways, for example by discussing with them what they plan to do next or by making sure our report is easily available.

People who use care services, their relatives and carers

We encourage you to read this report and hope that you find the information helpful when making a decision on whether or not to use the care service we have inspected. If you, or a family member or friend, are already using a care service, it is important that you know we have inspected that service and what we found. You may find it helpful to read previous inspection reports about his service.

The Care Commission

We use the information we gather from all our inspections to report to Scottish Ministers on how well Scotland's care services are performing. This information helps us to influence important changes they may make about how care services are provided.

Reader Information

This inspection report is published by the Care Commission. It is for use by the general public. You can get more copies of this report and others by downloading it from our website www.carecommission.com or by telephoning 0845 603 0890.

Translations and alternative formats

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Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iarrtas.

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Telephone: 0845 603 0890

Email: enquiries@carecommission.com

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