

DUNDEE CITY COUNCIL

REPORT TO: SCRUTINY COMMITTEE - 20 JANUARY 2010

REPORT ON: ANNOUNCED INSPECTION OF TURRIFF HOUSE CARE HOME FOR OLDER PEOPLE BY THE SCOTTISH COMMISSION FOR THE REGULATION OF CARE

REPORT BY: DIRECTOR OF SOCIAL WORK

REPORT NO: 35-2010

1.0 PURPOSE OF REPORT

1.1 The purpose of this report is to report on the findings of the Inspection of Turriff House Care Home carried out on 9th September 2009.

2.0 RECOMMENDATIONS

2.1 It is recommended that the Scrutiny Committee:

- i) notes the contents of this report; and
- ii) 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 Turriff House was inspected on 9 September 2009 by the Scottish Commission for The Regulation Of Care. A report of the findings was published on 30 September 2009. At the time of the inspection there were 32 older people resident at Turriff House.

4.2 The Care Commission's focus of inspection targeted the following Quality Themes.

- Quality of Care and Support
- Quality of Environment
- Quality of Staffing
- Quality of Management and Leadership.

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

4.3 The Care Commission identified the following strengths at Turriff House Home from the quality themes and statements inspected.

- There was excellent evidence that Service User's and Carers were encouraged to participate in both assessing and improving the quality of

- the service provided by the home. A range of methods were used to involve residents and relatives.
- The service was seen to have introduced a format of gathering information on service users` life histories.
 - The service had a very good involvement of residents and relatives in assessing and improving the quality of the environment in the care home.
 - The good use of space within the Home allowed service users to meet with relatives and other visitors in private. There were additional rooms which could be utilised by visitors or visiting professionals to hold review meetings or private chats.
 - The service had excellent involvement of residents and relatives in assessing and improving the quality of the staffing in the care home. Relatives were asked to contribute questions which could be part of the interview process.
 - The service had a very thorough induction programme for all new staff. The staff induction process was assessed at a supervision meeting with a senior social care officer. This identified competencies achieved and further training and development planned for the future.
 - The service had excellent involvement of residents and relatives in assessing and improving the quality of management and leadership in the care home.
 - The home facilitates regular staff meetings where staff are encouraged to give their views on how the service can be improved on. There was evidence of staff being involved in discussion with service users and their families in determining the effectiveness of the care plan and whether changes were needed to ensure they continued to meet the changing needs of the service user.

4.4 Evaluation

The Care Commission can apply the following to Services:

- Enforcement Action
- Requirements
- Recommendations

Turriff House did not receive any enforcement actions, requirements or recommendations following the Inspection.

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	6 - Excellent
1.3 - Quality of Care and Support	4 - Good
2.1 - Quality of Environment	5 - Very Good
2.4 - Quality of Environment	5 - Very Good
3.1 - Quality of Staffing	6 - Excellent
3.2 - Quality of Staffing	4 - Good
4.1 - Quality of Management and Leadership	6 - Excellent
4.4 - Quality of Management and Leadership	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 environment or information	5
Quality of staffing	5
Quality of management and leadership	5

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), Assistant Chief Executive and Director of Finance.

7.0 BACKGROUND PAPERS

- 7.1 The following Background Paper was relied upon in preparation of this report:
- Inspection Report Dundee City Council - Turriff House.

Alan G Baird
Director of Social Work

30 December 2009



Inspection report

Turriff House Care Home Service Adults

4 Rannoch Road
Dundee
DD3 8RB
01382 436419

Inspected by: (Care Commission officer)	Paul Clemson
Type of inspection:	Announced
Inspection completed on:	9 September 2009

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Service provided by:
Dundee City Council

Service provider number:
SP2003004034

Care service number:
CS2003000479

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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:

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

We gave the service these grades

Quality of Care and Support  **5** Very Good

Quality of Environment  **5** Very Good

Quality of Staffing  **5** Very Good

Quality of Management and Leadership  **5** Very Good

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 very good choices in their daily lives and support to maintain their independence. The environment of the care home meant very good

outcomes for residents' quality of life. There was a very good induction programme for new staff.

What the service could do better

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.

What the service has done since the last inspection

Since the last Care Commission inspection of the home, the manager had made progress in providing opportunities for service users, carers and staff to give their views and ideas to further develop the service provided by the home. The service had initiated some work in the garden, which they hoped to develop further in the coming year.

Conclusion

The home had a very positive and relaxed atmosphere. Residents said they liked living in the care home and were well looked after by the care staff. They said; "I like living here" and "staff are great and very kind." Relatives told us; "They were very happy with the care of their relatives."

Who did this inspection

Lead Care Commission Officer

Paul Clemson

Other Care Commission Officers

Not Applicable

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

Turriff House is a Care Home service run by Dundee City Council's Social Work Department. The home is registered to provide care for 32 older people. It does not provide nursing care. Two of the thirty two beds are used exclusively for respite care.

The accommodation is purpose built, being provided within four individual units, each housing eight residents. All residents have access to a range of communal rooms and facilities. Each unit consists of eight en-suite bedrooms opening onto a lounge and dining area. All units are on ground floor level and have access into the garden grounds, which have been designed with the needs of the residents in mind. The accommodation has been finished to a high standard, with all rooms individually decorated and furnished. The home is warm, light and extremely comfortable.

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	5 - Very Good
Quality of Staffing	5 - Very Good
Quality of Management and Leadership	5 - Very Good

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

This report was written following an announced inspection which took place on 9 September 2009. The inspection was carried out by Care Commission officer Paul Clemson.

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

A review of a range of policies, procedures, records and other documentation including the following:

Certificate of Registration
Service users personal plans
Health & Safety records
Care plans

Discussions with a range of people including:

The manager
Staff on duty
Service users

Information was also gained from:

Observation of staff practices
Examination of the environment

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

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 Act (Scotland) 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

The self assessment was completed to a very good standard and included very good information about what the service thought they did well and areas in which they thought they could improve.

Taking the views of people using the care service into account

Service users who spoke with the Care Commission officer during the inspection appeared very happy with the overall quality of the service.

Taking carers' views into account

There was an opportunity at the inspection to talk with a relative of a service user. The relatives that spoke with the Care Commission officer expressed that she had no concerns about the very good quality of care received from the home and members of staff.

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 excellent performance in relation to this statement.

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

Questionnaires for residents and relatives

Meetings chaired by residents and relatives

Six monthly review meetings for each resident with their relatives

Informal discussions

Residents and relatives views were asked for separately, as these can be different

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.

Superior outcomes for service users included a local retailer setting up a shop within the home selling shoes. Service users if they wished, could buy from a range of shoes displayed by the retailer. Further plans were being considered for a Christmas shop. Other examples included money being raised by the carers group from a 'Bingo' event and a 'Stawberry Fayre'. All proceeds went into the residents comfort fund.

Comments included in Care Commission questionnaires included:

"Turriff House has the most kind, caring and dedicated staff."

"Staff are excellent."

Areas for Improvement

The service should continue the excellent practice in this area.

Grade awarded for this statement

6 - Excellent

Number of Requirements

0

Number of Recommendations

0

Statement 4

We use a range of communication methods to ensure we meet the needs of service users.

Service Strengths

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

The service was seen to have introduced a format for gathering information on service users' life histories and these were included in their files. The manager advised that this was an ongoing process, and that these would be used to help improve the support given to service users.

Two staff members were working with Stirling University to enhance ways of compiling life story record books.

Examination of service users care plans showed that communication assessments were in place, detailing the support service users require to communicate.

Resident meeting minutes and newsletters were seen to be available.

Observations during the inspection showed positive interaction between staff and service users. Carers and relatives spoken with confirmed that staff took the time to talk with them and communication was good.

Areas for Improvement

Inspection of two service users personal records revealed that written records of needs were not being fully updated. Staff were able to give verbal confirmation of specific issues but the records had not been updated to reflect this. After discussion with the manager, it was agreed that they would amend this appropriately and ensure written records accurately reflected service users specific needs. (No requirement or recommendation made)

Grade awarded for this statement

4 - Good

Number of Requirements

0

No of Recommendations

0

Quality Theme 2: Quality of Environment

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 environment within the service.

Service Strengths

The service had very good involvement of residents and relatives in assessing and improving the quality of the environment 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 were consulted when items were bought for their suite and other shared areas.

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 4

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

Service Strengths

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

Service users were assisted to their rooms and doors were closed over when they required assistance with personal care.

The good use of space within the home allowed service users to meet with relatives and other visitors in private. There were additional rooms which could also be utilised by visitors or visiting professionals to hold review meetings or just to chat in private.

Staff were observed to be courteous when entering service users rooms.

Service users and relatives confirmed in discussions with the Care Commission officer that they were able to make telephone calls in private if they wished.

Specific comment made by a respondent to the Care Commission questionnaires included:

"In my opinion, my 'relative' could not receive better care than she does here. "

"The staff are diligent, thoughtful and caring and have a good relationship with my 'relative'.

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

Quality Theme 3: Quality of Staffing

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 staffing in the service.

Service Strengths

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

A superior 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.

Relatives were asked to contribute questions which could be asked as part of the interview process.

Residents had put forward questions to be used by the service when interviewing applicants. Some residents met applicants as part of interviewing process and gave their views on the suitability of the applicants.

Commendably, the service users that spoke with the Care Commission officer expressed they were involved in the selection and recruitment processes of the service and compiled suitable questions to ask of candidates during interviews.

See Theme 1, Quality Statement 1, Service Strengths.

Areas for Improvement

The service should continue its excellent practice.

Grade awarded for this statement

6 - Excellent

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

There were good outcomes from the Council's safer recruitment policies, procedures and practice for all employees and very good outcomes for the staff induction practice in the service. Overall, this resulted in good outcomes for this quality statement.

The service had a very thorough induction programme for all new staff. The service's induction for all new staff covered their first few weeks working in the service. The induction ensured new staff:

- (i) shadowed senior staff for several shifts
- (ii) were familiar with important policies, such as confidentiality, equal opportunities, and moving and handling procedures. 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
- (iv) 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 induction progress 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.

A separate audit of the service's safer recruitment policies and procedures had been carried out by the Care Commission and found to be satisfactory. Generally the provider had taken time to prepare for the visit and files were well organised and presented.

The staff selection procedure was comprehensive and covered a range of issues such as application procedures, checking of fitness and the interview selection process.

There were good systems in place to manage situations where Disclosure Scotland Checks raised issues.

The audit of 100 files indicated that practice within the service ensured that an application form was completed, appropriate references and checks were requested and the aims and values of the service were explained.

There was evidence of very good processes in relation to assessing the medical fitness of prospective employees and the checking of references, particularly from the last employer.

Areas for Improvement

The service was developing an induction process that would test and evidence more areas of staff practice for care officers and senior care officers.

A limited range of practice was evaluated as part of the induction process.

The Council does not currently undertake three yearly Disclosure checks for all employees but is planning to systematically introduce this over a period of time. In some of the files examined, although it was recorded that a Disclosure check had been completed, it was unclear whether the Disclosure check required further action. The Council advised in these circumstances the information was considered by a recruitment panel and a decision was made in relation to the suitability of the applicant.

In some of the files examined there were no Disclosure checks for ancillary staff. The Council advised they had sought guidance from Disclosure Scotland who indicated these were not necessary. However, the decision to obtain enhanced Disclosures rest with the Council who should consider this in relation to the protection of vulnerable adults and children. There was also no evidence of risk assessments for those employees who had not had a Disclosure check.

In some of the staff files examined, identification information such as utility bills and passport information had been unnecessarily retained.

The Council could improve consistency in their practice in relation to evidencing staff skills. For example, some files contained photocopies of qualifications whilst others did not.

There were some examples where staff had not completed additional application forms when moving to other posts within the Council, notably from permanent contracts to supply posts. (Inspection Focus Area Recommendation 1).

There was some evidence that staff skills had been identified for those who had transferred within the organisation. However, the information held was not consistent and in some cases there was no information. (Inspection Focus Area Recommendation 2)

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, Care homes for older people, Standard 5 Management and staffing arrangements.

SSSC Code of Practice - Employer

- Make sure people are suitable to enter the workplace
- 1.1 Using rigorous & thorough recruitment & selection processes etc
- 1.2 Check criminal records & relevant registers
- 1.3 Seeking & providing reliable references

SSSC Code of Practice - Employee

- 2.1 Being honest and trustworthy

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. Standard 5 Management and staffing arrangements.

Quality Theme 4: Quality of Management and Leadership

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 management and leadership of the service.

Service Strengths

The service had excellent involvement of residents and relatives in assessing and improving the quality of the management and leadership of the care home.

A excellent 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. For example, residents interview job applicants and give their views on their suitability.

See Theme 1, 2, 3, Quality Statement 1, 2, 3, Service Strengths.

Areas for Improvement

The service should continue its excellent practice.

Grade awarded for this statement

6 - Excellent

Number of Requirements

0

Number of Recommendations

0

Statement 2

We involve our workforce in determining the direction and future objectives of the service.

Service Strengths

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

The home facilitates regular staff meetings where staff are encouraged to give their views on how the service can be improved upon. These discussions were evidenced in minutes of staff meetings. Staff had also been issued with questionnaires inviting them to give their views on the service provision. Any issues raised from these were discussed at staff meetings.

There was evidence of staff being involved in discussions with service users and their families in determining the effectiveness of the care plan and whether changes were needed to ensure they continued to meet the changing needs of the service user.

Areas for Improvement

Discussion with some staff confirmed they felt the management did not always listen or feel comfortable in putting forward any suggestions/improvements for the service. They felt well supported with regard to their professional development with opportunity for further training to meet individual needs and the service needs. Further discussion with the manager confirmed some issues were brought to her attention through a recent staff questionnaire and through discussion with her line manager, addressing matters and taking forward the issues raised.

Grade awarded for this statement

4 - Good

Number of Requirements

0

Number of Recommendations

0

Other Information

Complaints

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

Enforcements

No enforcement has taken place regarding this service.

Additional Information

The Care Commission now publishes Extended Service Information on the Care Services section of the website. This includes service details, provider details, and easy access to a number of previous inspection reports, brief information about enforcement action and information about upheld or partially upheld complaints. Readers can request more detailed information by contacting the Care Commission.

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	6 - Excellent
Statement 4	4 - Good
Quality of Environment - 5 - Very Good	
Statement 1	5 - Very Good
Statement 4	5 - Very Good
Quality of Staffing - 5 - Very Good	
Statement 1	6 - Excellent
Statement 2	4 - Good
Quality of Management and Leadership - 5 - Very Good	
Statement 1	6 - Excellent
Statement 2	4 - Good

Inspection and Grading History

Date	Type	Gradings
7 Jan 2009	Unannounced	Care and support 5 - Very Good Environment 5 - Very Good Staffing 5 - Very Good Management and Leadership 5 - Very Good
20 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

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Translations and alternative formats

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هه بایتسد یم وونابز رگید روا رولکش رگید رپ شرازگ تعاشا هی

ਬੈਨੜੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

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Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.

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Improving care in Scotland