

Inspection report

Hunterhill Care Home Care Home Service

Blackford Road
Paisley PA2 7EN

Inspected by: Karen Malloch
(Care Commission Officer)

Type of inspection: Announced

Inspection completed on: 22 May 2008

Service Number

CS2006121927

Service name

Hunterhill Care Home

Service addressBlackford Road
Paisley PA2 7EN**Provider Number**

SP2003003388

Provider Name

Renfrewshire Council

Inspected ByKaren Malloch
Care Commission Officer**Inspection Type**

Announced

Inspection Completed

22 May 2008

Period since last inspection

N/A

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Introduction

A key part of Renfrewshire Councils reprovisioning programme, Hunterhill Care Home opened earlier this year. The purpose built unit has been registered with the Care Commission since January 2008 to provide care for a maximum of 60 older people. Located within a residential area close to Paisley town centre, the accommodation is on two levels and provides single occupancy ensuite bedrooms. There are five discreet units which accommodate twelve residents, one unit provides a respite facility while another provides specialist Dementia care. Each unit is self contained and has a lounge/ dining area and a small kitchen, meals are catered for centrally. On the day of inspection there were 56 residents.

The aims of the service include:

"To ensure dignity, privacy, choice and safety are maintained for those who use the service"

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

Quality of Care and Support - Grade 4 – Good

Quality of Environment - Grade 5 – Very Good

Quality of Staffing - Grade 3 – Adequate

Quality of Management and Leadership - Grade 4 - Good

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

Before the Inspection

This report was written following an announced inspection. The inspection process took place over one announced visit on the 22nd May 2008 from 9.30am till 4pm. The inspection was conducted by two Care Commission Officers (CCO) – Karen Malloch and John Browne.

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

Eight residents spoke with the Officers during the course of the inspection. Additionally six questionnaires were completed.

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.

During the inspection process

Staff at inspection

Discussion took place with the Home manager, Depute Manager and 5 members of staff. The Community Care Home Nurse was also consulted. In addition practice was observed.

Evidence

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

Service user's personal plans

Training Information

Service aims and objectives

Risk assessments

Satisfaction Questionnaires

Staff files

Minutes of service user meetings

Minutes of staff meetings

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

This is the first inspection of the service.

Comments on Self Assessment

A fully completed self assessment document was submitted by the service. This was completed to a high standard and gave relevant information about each of the Quality Themes and Statements. The service identified its strengths and areas for future development.

View of Service Users

Eight residents spoke with the Officer during the inspection. Additionally six questionnaires were completed. All stated feeling satisfied with the service provided. Comments included:

" It's lovely to have your own bathroom, lovely here it's all decorated so well and the staff are really nice, we have a garden as well so that's a treat"

" The food is really nice although the meat can be a bit tough, there is always a choice and if you don't fancy it they will make you something else"

"I liked the old home, had been there for years so was feeling a bit mixed at coming here, but I have to say it's lovely its all so new and cheerful, The staff are nice and accommodating. Would like to get out a bit more, but I know that it depends on what staff are on"

"I attend the meetings, it's like an open forum if you have anything to say they will listen. I think that they take it on board. If I am not happy I will go to the office and they will sort me out"

"It's a good laugh, I really enjoy it, I like the company, I am able to dress myself and my sister visits me and takes me out. No complaints"

View of Carers

On the day of inspection the Officer was unable to speak with relatives however seven questionnaires were completed. These reflected overall satisfaction with the service provided. Comments included:

"Hunterhill Care Home is warm and welcoming, as a family we are very much aware of the care and consideration, shown by all staff"

" The admission procedure was excellent, first interview by assistant manager followed by a one day assessment at Hunterhill to establish the homes ability to meet mothers needs, as a previous respite user at Castle House all staff who have known her have taken the time to come and welcome her. This has made her admission a friendlier process"

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

Documentation examined, service users and relatives consulted during the inspection supported that the service performance was good in relation to this statement.

The reprovisioning programme was established following the Best Value Review. There was evidence of an extensive consultation exercise while the home was being built. Residents were kept fully informed of progress and choices of residents in regard to which home they would be moving to were supported as much as possible.

The Community Care Home Nurse post had been introduced, this provides clinical intervention including prescribing, training and advice. The post has been very favourable received and has reduced house calls from GPs by providing a system of Triage. The Nurse has participated in carers and residents meetings to increase awareness. One resident described the support they had received from the Nurse and how valuable this had been.

Each unit had a wealth of information for residents including information on how to complain and how to access advocacy. Good practice guidance was available for all.

Residents consulted commented that they would feel comfortable addressing any issues of concern with staff. Minutes of residents meetings demonstrated a commitment to involvement and participation.

While the service did not have a written participation strategy, service user involvement was fundamental to all policies and procedures.

The service had developed service user questionnaires and these demonstrated high levels of satisfaction with the quality of care.

Staff meeting minutes contained regular discussions on service quality and remedial actions.

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

Quality Statement 1.1 4 - Good

Areas for Development

While the service demonstrates a clear commitment to user consultation the organisation has not developed a participation strategy. (See Recommendation 1)

The Community Care Home Nurse was proving to be a successful development, however there was a lack of public information in relation to the purpose and responsibilities of the post. This should be included in the service information and agreement.

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

1

Statement 4: We use a range of communication methods to ensure we meet the needs of service users.

Service Strengths

Documentation examined, service users and relatives consulted during the inspection supported that the service performance was good in relation to this statement.

There was a range of residents and carer meetings. Minutes from meetings were fully documented and were displayed in all units. These contained discussions about various aspects of the service and served to provide a forum which changes and service developments can be informed.

There was a range of information on display in each unit, this included service information, good practice guidance, policy and advocacy.

Service users consulted felt that they were listened to and that any concerns were addressed quickly. The management team were well thought of and maintained a high profile around the home.

Care plans sampled documented residents particular communication needs.

The review process provided the opportunity for relatives and carers to comment on the quality of care.

The manager planned to ensure that inspection reports were available for service users and relatives, outcomes will be fully discussed at staff, carers and residents meetings.

Some staff had undertaken Dementia Awareness training which included supporting communication.

Notice boards displayed information including details of the inspection, complaints procedure and any events planned.

The complaints procedure was comprehensive, service users and relatives confirmed that they were aware of the complaints procedure and were confident that any issues would be addressed satisfactorily.

While it is early days for the dementia unit there was a commitment by management team to develop a user friendly environment. Memory boxes had been placed outside bedroom doors and the staff were looking at ways in which to use these in a positive way.

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

Quality Statement 1.4 4 - Good

Areas for Development

While it is early days for the dementia unit there was a commitment by management team to develop a user friendly environment. Memory boxes had been placed outside bedrooms and the service planned to look at imaginative ways to use these most effectively.

The organisation plans to introduce new documentation in relation to care plans however the plans sampled on the day of inspection did not demonstrate the health care needs of the resident. The interventions carried out by the nurse were recorded separately and were not reflected in the care plan. (See Recommendation 2)

Care plans sampled did not have appropriate risk assessments in place.
(See Recommendation 3)

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

2

Quality Theme 2: Quality of Environment

Overall CCO Theme Grading: 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

Documentation examined, service users and relatives consulted during the inspection supported that the service performance was very good in relation to this statement.

Prior to the move residents and carers had the opportunity to visit the home.

Consultation had been an integral part to the homes development, residents were involved in choosing colour schemes and in naming the home.

Residents meetings provide opportunity for service users and carers to comment on the environment.

Bedrooms were decorated to a high standard, residents were encouraged to personalise their space with pictures, ornaments and familiar items.

The pictures chosen for the unit were reflective of the resident's interests and age.

Residents and relatives consulted were happy with the environment one described it as "lovely and light"

Residents confirmed that they were able to move around the home as they were able and use whichever sitting room they preferred.

Provision was made for residents who smoked, they felt that this was comfortable and accessible.

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

Quality Statement 2.1 4 - Very Good

Areas for Development

The participation strategy as per recommendation one should include how the quality of the environment will be influenced through consultation.

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Statement 3: The environment allows service users to have as positive a quality of life as possible.

Service Strengths

Documentation examined, service users and relatives consulted during the inspection supported that the service performance was very good in relation to this statement.

The home is a brand new purpose built provision which is barrier free. All bedrooms have ensuite. The home was decorated to a high standard, rooms were colourful and bright. Lounges on the upper floors enjoyed views over the garden and a balcony.

There is a large enclosed landscaped garden to the rear for residents and relatives to enjoy, a gazebo has been built centrally to provide a sheltered seating area.

The home was clean and smelled fresh, residents spoken with described feeling happy and settled. The provision of en-suite was particularly appreciated.

Policies, procedures and good practice guidance in relation to infection control were available, regular health and safety audits were carried out and actions recorded. Staff received training on infection control.

Service users were able to receive visitors when they preferred. They confirmed that visits could be conducted in private.

Respite rooms had televisions for residents who may prefer to spend time alone.

The consultation process had successfully developed links with the local residents association this served to promote the integration of the home into the local community.

Signage around the home was clear and effective.

Relatives and friends consulted commented that the environment was "lovely and spacious"

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

Quality Statement 2.3 5 - Very Good

Areas for Development

The management team were researching ways in which the environment in the dementia unit could be enhanced to be more user friendly.

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

Documentation examined, service users and relatives consulted during the inspection supported that the service performance was good in relation to this statement.

A service user had been involved in staff recruitment and had participated in the interview. Feedback was positive and the manager planned to further involve service users in the future.

Service satisfaction questionnaires asked for feedback on staff, this was very positive. Family members consulted described communication with the staff as good.

Staff meetings were held regularly and gave opportunity for staff to hear feedback about the service from relatives, service users and other agencies.

Service users confirmed that they were aware of the inspection taking place and were encouraged to contribute their views through questionnaires to inform the grading.

Staff had individual training plans and received regular supervision.

Service users and relatives were complimentary about staff and viewed them as appropriately skilled

Residents consulted commented that they would feel comfortable addressing any issues of concern with staff. Minutes of residents meetings demonstrated a commitment to involvement and participation.

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

Quality Statement 3.1 4 - Good

Areas for Development

Recruitment policies did not include service user participation, there was little evidence to support that service users contributed to the supervision or appraisal process. This should be included in the participation strategy refer to recommendation 1.

On the issue of getting out and about one service user commented "I see them downstairs out often would like to get out a bit more, depends on staff I suppose"

CCO Grading

4 - Good

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

Documentation examined, service users and relatives consulted during the inspection supported that the service performance was adequate in relation to this statement.

The Organisation had a process in place to ensure that staff were recruited in line with best practice guidance.

Questionnaires completed by relatives were fully positive in regards to staff communication and attitude.

The service had a suite of policies and procedures which supported staff practice, these included whistleblowing and confidentiality. Staff confirmed knowledge of the policies and procedures.

New staff completed a period of induction.

A range of best practice guidance was available on all units.

Staff attended regular meetings, these included discussion on policies and procedures, any issues about care and also feedback from service users.

Most staff have completed SVQ training, individual training plans were available and these demonstrated a range of training available for staff. Staff confirmed that their training needs were being met.

Staff received regular supervision, the management team was described as supportive, and a member of staff commented " the environment has provided the staff with an excellent place to work"

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

Quality Statement 3.3 3 - Adequate

Areas for Development

All staff had not completed training on the protection of vulnerable adults. (See Recommendation 4)

Staffing ratios in three units were of a 1:8 ratio, as the units had 12 service users this meant that one member of staff would "float" between units often leaving one member of staff alone in a unit. This limited the ability for service users to exercise choice, for example getting out and about one commented on the frequency of service users from the dementia unit getting out and about and felt that there was an inequality and lack of opportunity Activities were

reliant on staffing provision. It was difficult to evidence that the agreed staffing ratio was being consistently adhered to. (See Requirement 1)

CCO Grading

3 - Adequate

Number of Requirements

1

Number of Recommendations

1

Quality Theme 4: Quality of Management and Leadership

Overall CCO Theme Grading: 4 - 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

Documentation examined, service users and relatives consulted during the inspection supported that the service performance was good in relation to this statement.

Hunterhill Care Home has consolidated two care homes and two sets of staff which have in a relatively short time become a single team, clearly the management team provide a cohesive partnership and a style which reflects an ethos of quality and consultation. Staff confirmed they felt valued and supported and were able to make positive contributions in developing the service.

One carer commented "I was impressed by the input of senior management staff explaining areas for development within the homeâ€staff have worked magic inspired by the management team"

The management team maintained a high presence within the service, relatives and service users consulted spoke highly of management and considered them "committed and approachable"

There was evidence of management undertaking extensive consultation with service users, relatives, staff and the wider community in preparation for the move into the home, service users who were involved in the forum confirmed that the experience was positive and fruitful.

Staff monthly meeting minutes contained regular discussions on service quality and new developments.

There was evidence to support that when issues were raised through consultation with service users these were addressed quickly.

The residents meetings gave service users and carers an opportunity to feedback issues to management and to be consulted about service developments.

Service users and relatives were informed about the inspection and encouraged to participate, feedback from satisfaction questionnaires was used to determine gradings.

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

Quality Statement 4.1 4 - Good

Areas for Development

The management should consider involving service users in policy development as part of the participation strategy.

CCO Grading

4 - Good

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; Notifications was considered during this inspection.

Documentation examined, service users and relatives consulted during the inspection supported that the service performance was good in relation to this statement.

The manager was clear in his duty to report incidents concerning staff misconduct and dismissal to the Scottish Social Services Council and the Care Commission.

The Best Value Review undertaken by Renfrewshire Council involved consultation with service users and carers which had informed the development of the reprovisioning programme.

Service users, staff and relatives were positive in their opinions about the management team.

Staff confirmed that their training needs were being met and that they were regularly consulted and valued. Quality of care was discussed at supervision and training needs in relation to practice discussed.

Staff confirmed that the manager kept them fully informed about inspections and outcomes.

The organisation had developed internal auditing procedures.

The manager had established a quality assurance approach which involved questionnaires, audit, reviews and service user forums. The feedback indicated a high level of satisfaction of service users and relatives.

The complaints procedure was widely available, relatives and service users confirmed that they were aware of how to complain.

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

Quality Statement 4.4 4 - Good

Areas for Development

The manager noted that the consultation process had been positive and would be used to inform future planning and development.

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

None

Requirements

1. Staffing provision must be adequate to meet the needs of service users and support their quality of life.

To ensure sufficient staff are on duty the provider must:

review the current staffing provision in units with a 1:8 ratio.

This is in order to comply with SSI 2002/114 Regulation 13(a) - a requirement to ensure that at all times suitably qualified and competent persons are working in the care service in such numbers as are appropriate for the health and welfare of service users.

The staffing review is to be submitted to the Care Commission within 13 weeks of the publication date of this report.

Recommendations

1. The service provider should develop a participation strategy which should provide a clear framework for consultation and how this will influence service development.

NCS Care Homes for Older People, Standard 11: Expressing your views

2. Healthcare needs should be clearly documented in the care plans.

NCS Care Homes for Older People, Standard 6: Support arrangements

3. All residents should have appropriate risk assessments in place in which they should be fully involved, these should be reviewed on a regular basis.

NCS Care Homes for Older People, Standard 9: Feeling safe and secure

4. The organisation should ensure that provision is made for all staff to undertake training in protection of vulnerable adults.

NCS care homes for older people, Standard 5: Management and staffing

Karen Malloch

Care Commission Officer