

# Inspection report

## Hunterhill Care Home Care Home Service

Blackford Road  
Paisley PA2 7EN

**Inspected by:** John Browne  
**(Care Commission Officer)**

**Type of inspection:** Unannounced

**Inspection completed on:** 9 February 2009

**Service Number**

CS2006121927

**Service name**

Hunterhill Care Home

**Service address**Blackford Road  
Paisley PA2 7EN**Provider Number**

SP2003003388

**Provider Name**

Renfrewshire Council

**Inspected By**John Browne  
Care Commission Officer**Inspection Type**

Unannounced

**Inspection Completed**

9 February 2009

**Period since last inspection**

7 Months

**Local Office Address**Central West Region  
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## **Introduction**

A key part of Renfrewshire Councils repositioning programme, Hunterhill Care Home 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 57 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 - 4 - Good

Quality of Environment - 5 - Very Good

Quality of Staffing - 3 - Adequate

Quality of Management and Leadership - 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](http://www.carecommission.com)) for the most up-to-date grades for this service.

## **Basis of Report**

### **Before the Inspection**

The unannounced inspection took place on 9th February 2009 between 9.30hrs and 16.00hrs. This report should be read in conjunction with the report which followed the announced inspection on the 22nd May 2008.

### **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**

The views of service users are recorded in the later section "Views of service users" and in the text of this report.

### **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.

#### LOW

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

This is the second inspection of the service over the year 08/09. This inspection was based upon areas for development made at the last inspection on 22nd May 2008.

During the inspection process

#### Staff at inspection

The inspection was conducted by two Officers from the Care Commission, John Browne and Lynne Thow.

Discussions were conducted with 7 care staff and the Manager and Depute Manager.

#### Evidence

Evidence was gathered from a number of other sources, including:

Observation of the environment

Discussions with 6 service user

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

Staff rosters

Complaint information

Minutes of meetings

Training information and learning & development calendar

#### 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](http://www.infoscotland.com/firelaw)

#### **Action taken on requirements since last Inspection**

There were was one requirement arising from the last inspection.

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.

Progress to date: The service has maintained the agreed staffing level and has provided an additional member of staff on each shift by using sessional workers. This requirement has now been met, however the adequacy of the staff to service ratio will be reviewed at future inspections.

### **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**

Six service users spoke with Officers about their life at the home. Their views are recorded below and in the text of this report:

" The place is great, I'm very happy here".

" They're all very friendly".

" I have no complaints about anything".

" The staff are all very helpful".

### **View of Carers**

Three family members took the opportunity to speak with Officers. Their views are recorded below and in the text of this report.

" The service has been a great help to us all".

" We are very satisfied the care given here".

## **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**

Following consideration of sampled written evidence, and feedback from management, staff, service users and families, this service continues to have a good performance in relation to this statement.

Service users confirmed they were satisfied with the care and support provided. One commented: "I like it very much here, I have got to know the staff."

Families confirmed they were satisfied with the care and support. One said: "Any concerns I might have are always well discussed."

The service has developed a local service user participation policy.

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 has continued to enhance assessment of healthcare needs and improve access to healthcare provision for service users, however as noted in the last report, 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 service users agreement with the provider.

### **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**

Following consideration of sampled written evidence, and feedback from management, staff, service users and families, this service continues to have a good performance in relation to this statement.

Service users were satisfied with communication systems. One commented: "Everyone talks to you here and they try to make you laugh."

Families confirmed they were satisfied with communication systems. One said: "we are regularly consulted on the programme."

Service user meetings continue and a Renfrewshire Care Home Residents Forum meets.

Since the last inspection the Care Home has introduced a new Care Plan system. Considerable effort has been put into this system by both staff and service users and carers. New Healthcare assessment tools and risk management documentation have been introduced. The language, tone and content of the new plan were person centred and demonstrated the involvement of service users in their production.

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

Quality Statement 1.4 4 - Good

### **Areas for Development**

A recommendation was made at the last inspection that all residents should have appropriate risk assessments in place in which they should be fully involved, these should be reviewed on a regular basis. Although the new care plans are a significant improvement there were gaps in risk assessments, in particular the use of equipment which could be considered restraining. (See recommendation two).

### **CCO Grading**

4 - Good

### **Number of Requirements**

0

### **Number of Recommendations**

1

## **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**

Following consideration of sampled written evidence, and feedback from management, staff, service users and families, this service continues to have a very good performance in relation to this statement.

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

Residents and relatives consulted were happy with the environment one described it as "a beautiful home".

Signage in the home has been improved and developments planned for the dementia unit had been implemented.

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 Management Team continue to research methods to enhance the environment in the dementia unit which would assist staff to achieve the treatment aims of the unit.

### **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**

Following consideration of sampled written evidence, and feedback from management, staff, service users and families, this service continues to have a very good performance in relation to this statement.

Service users were satisfied with their quality of life. One commented: "I can't say a bad thing about the place, it's lovely here."

Families were also satisfied. One said: " We were very glad when he got a place here,its so much better than some of the other places we saw."

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 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

## **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**

Following consideration of sampled written evidence, and feedback from management, staff, service users and families, this service continues to have a good performance in relation to this statement.

Service users were complimentary about the quality of staffing. One said: "The staff are great here."

Family members also commented favourably about staff: "Staff are lovely and always want to talk to you."

The Management team indicated that the next scheduled interview for staff will involve a group discussion with service users.

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.

#### **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**

Following consideration of sampled written evidence, and feedback from management, staff, service users and families, this service continues to have an adequate performance in relation to this statement.

The service had implemented changes to the staffing structure since the last report and have increased the number of staff available by one on each shift.

Since the last inspection training opportunities were provided for staff particularly in relation to protection of Vulnerable Adults.

The Provider has introduced an electronic system of training planning and access to Continuous Professional Development for staff.

Staff supervision and appraisal continues to take place.

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

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

Quality Statement 3.3 3 - Adequate

### **Areas for Development**

Although the service has made improvements to the numbers of staff available, this increase is not based on analysis of service user dependency levels. The Provider should consider the introduction of a Dependency tool to ensure that evidence is available to Staff and service users regarding the adequacy of staff support.

The previous Inspection contained a recommendation "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. "As stated previously the service has a programme of training in place regarding it's responsibilities under the Adult Support and Protection Act.

### **CCO Grading**

3 - Adequate

### **Number of Requirements**

0

### **Number of Recommendations**

0

## **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**

Following consideration of sampled written evidence, and feedback from management, staff, service users and families, this service continues to have a good performance in relation to this statement.

Families confirmed good communication links with staff and the Manager. One carer commented " The Management Team are always available and are very approachable."

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 Manager was aware that existing systems of quality assurance which include service user and carers in evaluating the service need to be developed further. For example, by further demonstrating ways which feedback from service users and families influence the service provision.

### **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**

Following consideration of sampled written evidence, and feedback from management, staff, service users and families, this service continues to have a good performance in relation to this statement.

A regular series of Carers Meetings is in operation.

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

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.

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 was aware that existing systems of quality assurance which include service user and carers in evaluating the service need to be developed further. For example, by further demonstrating ways which feedback from service users and families influence the service provision.

### **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**

### **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. Individual risk assessments must be further developed to include all aspects of planned care. The Provider should ensure that all relevant safety advice and the principles of the Mental Welfare Commission for Scotland guidance should be taken into account, particularly in relation to devices which could be considered to be restraining. National Care Standards Care Homes for Older People, Standards 5.1 & 5.11: Management and staffing arrangements.

**John Browne**  
**Care Commission Officer**