

Inspection report

Eastbank Nursing Home Care Home Service

98 Gartocher Road
Shettleston G32 0HA

Inspected by: (Care Commission Officer)	Drew Conlon
Type of inspection:	Announced
Inspection completed on:	25 August 2008

Service Number

CS2003010448

Service name

Eastbank Nursing Home

Service address

98 Gartocher Road
Shettleston G32 0HA

Provider Number

SP2003002353

Provider Name

BUPA Care Homes (Carrick) Limited, a member of
the BUPA Care Homes group of companies

Inspected By

Drew Conlon
Care Commission Officer

Inspection Type

Announced

Inspection Completed

25 August 2008

Period since last inspection

8 months

Local Office Address

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Introduction

Eastbank Care Home offers a 24 hour care service with nursing for up to 70 older people. The service is provided by BUPA. The service has been registered with the Care Commission since April 2002.

The service is spread over two floors with lift access between them. In the upstairs unit there are 35 bedrooms for older people with dementia. Downstairs there are bedrooms for 35 older people some of whom may also have dementia or cognitive impairment.

The home is situated in a residential area in the Shettleston district. There are shops and other facilities nearby. There is a small car park to the front of the home and gardens to the rear.

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

Quality of Care and Support - Grade 3 - Adequate.

Quality of Environment - Grade 4 - Good.

Quality of Staffing - Grade 4 – Good.

Quality of Management and Leadership - Grade 3 - Adequate.

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

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

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

Drew Conlon and Sarah Gill, Care Commission Officers, carried out this present inspection.

The inspection took place from 9:30am to 4:00pm on Monday 25th August and from 9:30am to 4:00pm on Tuesday 26th August. Feedback was given to the manager on the afternoon of Wednesday 26th August

During the course of the inspection, interviews were held with the home manager and the two unit managers. A range of other staff were also interviewed including a staff nurse, a senior carer and five care assistants.

There were also discussions with nine service users and five relatives.

During the inspection, the Care Commission Officers also considered a range of policies, procedures, records and other documentation including:

Care plans.

Recruitment policies and procedures.

Early warning audit tool.

Weekly audit pack.

Minutes of meetings.

Training records

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

There have been no requirements since the last inspection.

Comments on Self Assessment

This was the first time the care service had completed the self-assessment under the new format

View of Service Users

Views of service were favourable. 'I am doing well and can see family when I want'. 'I prefer milk to drink and get it'. 'The new home manager has made a difference'.

View of Carers

Views of relatives and carers were favourable. 'This home has more life about the place than

other homes I visited'. 'We are always made welcome'. 'The care is good and the one issue I had was resolved by management'.

Quality Theme 1: Quality of Care and Support

Overall CCO Theme Grading: 3 - Adequate

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

There are a number of opportunities through structured and unstructured means, for service users and their relatives to comment on care plans and the service provided.

A new system of personal care planning called QUEST was introduced last year. This implementation involved input from service users and carers. The QUEST system has made care planning information clearer and more easily retrievable. There was evidence of management audit of QUEST plans.

The home manager is implementing a local participation strategy.

Service users nutritional preferences were clearly outlined.

At six monthly review time, some use is made of a relatives satisfaction questionnaire.

Areas for Development

The home manager would like to do more detailed work on the best ways to seek involvement of service users with moderate to severe dementia.

The home manager would like to improve the quality of some Essential Lifestyle Plans (ELPs).

It was unclear from records how service users were involved in the review of ELPs. This is the subject of Recommendation 1.

The six monthly review proforma is not part of the QUEST system, It would benefit from revision to allow better recording of the involvement of service users, recording of discussion about any limits to their involvement and how the remit and agenda for the meeting were drawn up. This is the subject of Recommendation 2.

There were service users who had not had a review of their care plan in the last six months. This is the subject of Requirement 1.

CCO Grading

3 - Adequate

Number of Requirements

1

Number of Recommendations

Statement 3: We ensure that service user's health and wellbeing needs are met.

Service Strengths

Within the home, each resident has their own GP and dentist. There are well established links to primary care health services.

There are daily briefing meetings for staff in units and records of these meetings are kept.

There is a full range of risk assessment and health assessment tools in place.

The home has a Dealing with Wandering and Use of Restraint policy and procedure.

Areas for Development

The home wish to increase staff knowledge on the management of life long enduring illness such as the effects of stroke.

The Liverpool Care Pathways model of palliative care is being introduced in partnership with Marie Curie.

Staff need to be fully proactive in responding to any refusal by a service user to take prescribed medication.

The home manager is confirming procedures to ensure that the correct dosage of medicine is dispensed at all times and that any reason for not giving a medicine is recorded. This is the subject of Recommendation 3.

A wound management record had two deficiencies that the home manager agreed to rectify.

CCO Grading

3 - Adequate

Number of Requirements

1

Number of Recommendations

0

Quality Theme 2: Quality of Environment

Overall CCO Theme Grading: 4 - 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 provider has an established refurbishment programme which will seek to refurbish all homes within the next four years. Service users and relatives are involved during refurbishment in the decision making around their rooms and group areas.

The entrance hallway and the main stairs were being painted during this inspection.

An upstairs lounge was being painted prior to its conversion to a sensory room.

There had been repainting and redecoration in some of the bathrooms.

Areas for Development

The home manager wishes to evidence more clearly how service users are involved in the environmental aspects of the home. This should be integrated into the participation plans and is the subject of Recommendation 4.

The corridor banisters were somewhat chipped and are to be repainted.

One of the upstairs lounges has one or two panes of frosted glass which will be taken out as they restrict the view to the outside.

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

1

Statement 2: We make sure that the environment is safe and service users are protected

Service Strengths

There are a range of policies and procedures in place to ensure the safety of the environment and of service users. These include policies on health and safety, safe working practices, risk management and incident reporting.

The home manager has improved security arrangements around the front entrance.

Medication Audits are carried out and here was sampling of a July Audit during this inspection.

Auditing of bathroom and bedrooms includes identification of safety hazards.

The policy on supervision of Visiting Children was viewed during this inspection.

Minutes of the last Health and Safety meeting were viewed.

Areas for Development

The home manager wishes to continue the development of auditing in this area.

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

0

Quality Theme 3: Quality of Staffing

Overall CCO Theme Grading: 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

There is a Personal Best programme which is customer focused.

BUPA has a policy on Involving Residents in the Running of the Care Home

The home manager is implementing a local participation policy.

The home manager is seeking service users and relatives views in relation to recruitment as part of a commitment to participation. The manager is asking what qualities they would like to see in potential applicants and what questions they would like to see asked at interview. Service users and relatives are also being invited to participate in recruitment and induction processes.

Areas for Development

The link between the Personal Best programme and the asking for service users and relatives views on service quality, could be better evidenced,

The home manager is considering how service users and relatives could be involved in staff training.

The Involving Residents policy would benefit from review with a view a more empowering, enabling language and emphasis on rights rather than the giving of information. This is the subject of Recommendation 5.

There is an annual Relative Customer Satisfaction Survey completed. The last report for this home is dated December 2007. The survey went to relatives of service users in the dementia unit. Although the responses were favourable, less than 25% of returns were received. The provider should have a mechanism for reviewing and responding to low rates of return. This is the subject of Recommendation 6.

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

2

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 provider has well established recruitment procedures which meet the requirements of legislation and good practice. These procedures cover arrangements for references to be taken up and Disclosure Scotland checks completed. The policies and procedures reflect equal opportunities and anti-discriminatory practice.

The provider has clearly established induction programmes. Amongst the staff interviewed were recently recruited care assistants. They were able to describe their induction arrangements.

Areas for Development

The home manager wants to involve service users and relatives in recruitment.

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

0

Quality Theme 4: Quality of Management and Leadership

Overall CCO Theme Grading: 3 - Adequate

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 home manager has an open door policy and is available for discussion at any time.

The home manager regularly walks around the home having informal discussions and also operates an open door policy.

There is a complaints and compliments procedure.

The minutes from a Relatives Group meeting from June were seen during the course of this inspection. The minute showed the home manager and ten relatives attended. Comments and pertinent issues were raised and the home manager will communicate action on these at the next meeting.

There is evidence the home manager wishes to take the theme of participation into the mainstream management of the home. As part of the local participation strategy, relatives have been invited to attend the home's health and safety meetings and nutrition group meetings. The minute of a Nutrition Group meeting held this August was seen during this inspection and four relatives attended.

The home manager has also invited service users and relatives to participate in some staff in-house training sessions.

Areas for Development

The local participation strategies have been put in place comparatively recently and they will take time to become established. The aim would then be to evidence how these participation strategies have led to service improvements.

The overall organization would benefit from the drawing up of a formal participation policy which would include the philosophical basis for participation. There should be timescales and mechanisms for regular consultation and the drawing up of action plans where necessary. This is the subject of Recommendation 7.

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

1

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

BUPA has an Early Warning Audit Tool. There was evidence of its use during this inspection. The tool audits a number of health and safety systems and also samples a number of other areas in the fields of medication administration and infection control.

The home manager also employs an additional local audit tool, the Weekly Audit Pack.

The home manager was aware of her responsibility to report incidents to the Scottish Social Services Council (SSSC) and the Care Commission. She was also aware of the need to respond to any requests from the SSSC for information.

Since the last inspection, the Codes of Practice had been distributed in the home. There was evidence from staff interviews of awareness of the Codes.

Areas for Development

Although the views of stakeholders are sought informally, there is no formal participation and feedback mechanism for them. This should be improved and is the subject of Recommendation 8.

CCO Grading

3 - Adequate

Number of Requirements

0

Number of Recommendations

1

Regulations / Principles

National Care Standards

Enforcement

There has been no enforcement action against this service since the last inspection.

Other Information

Requirements

Quality Statement 1.1 Requirement 1. The service provider must ensure that six monthly review meetings are held for all service users. Regulation of Care (Requirements as to Care Services)(Scotland) 2002 Regulation 5(2)(b)(ii).

Timescale: Immediately on finalisation of report.

Recommendations

Quality Statement 1.1 Recommendation 1. The service provider should seek to involve, and record the involvement of, service users in the review of ELPs. National Care Standards: Care Homes for Older People: Care Standard Number 11 - Expressing your views.

Quality Statement 1.1 Recommendation 2. The service provider should seek to improve the six monthly review pro-forma to better record how service user participation is managed and recorded and the background to the review and how the review agenda was established. National Care Standards: Care Homes for Older People: Care Standard Number 6 - Support arrangements.

Quality Statement 1.3. Recommendation 3. The service provider should ensure that NMC Guidelines and BUPA policy on medication is adhered to at all times. National Care Standards: Care Homes for Older People: Care Standard Number 6 - Support arrangements.

Quality Statement 2.1. Recommendation 4. The service provider should integrate service user and relative feedback on all aspects of the environment into the participation structures. National Care Standards: Care Homes for Older People: Care Standard Number 11 - Expressing your views.

Quality Statement 3.1. Recommendation 5. The service provider should review the involving residents policy with a view to a more empowering, enabling language and a focus on rights rather than the giving of information. National Care Standards: Care Homes for Older People: Care Standard Number 11 - Expressing your views.

Quality Statement 3.1. Recommendation 6. The service provider should review the response rate for the Relative Customer Satisfaction Survey process with a view to better response rates. National Care Standards: Care Home for Older People: Care Standard Number 11 - Expressing your views.

Quality Statement 4.1. Recommendation 7. The service provider should draw up a formal participation policy which should include the philosophical basis for participation. There should be timescales and mechanisms for regular consultation with service users, relatives, stakeholders and all interested parties. Records should be kept of these consultations and action plans drawn up in response to consultation issues when required. National Care Standards: Care Homes for Older People: Care Standard Number 11 - Expressing your views.

Quality Statement 4.4 Recommendation 8. The service provider should Include mechanisms in the participation policy for the views of stakeholders to be sought on a cyclical basis and

acted upon where appropriate. National Care Standards: Care Home for Older People:
Standard Number 11 - Expressing your views.

Drew Conlon
Care Commission Officer