

Care service inspection report

An Carina Day Centre

Support Service Without Care at Home

Ennis Park
Polbeth
West Calder
EH55 8TP

Inspected by: Linda Taylor

Type of inspection: Unannounced

Inspection completed on: 1 February 2013



HAPPY TO TRANSLATE

Contents

	Page No
Summary	3
1 About the service we inspected	5
2 How we inspected this service	6
3 The inspection	9
4 Other information	23
5 Summary of grades	24
6 Inspection and grading history	24

Service provided by:

Real Life Options

Service provider number:

SP2003001558

Care service number:

CS2011303451

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Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

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

We gave the service these grades

Quality of Care and Support	4	Good
Quality of Environment	4	Good
Quality of Staffing	4	Good
Quality of Management and Leadership	4	Good

What the service does well

The service provides a good range of activities for people using the service and staff knew people very well. Staff were very motivated and demonstrated good care values.

What the service could do better

The service could look at other ways to involve people who use the service, their relatives and carers. Participation should also include staff, other professionals involved with the service and stakeholders. This will help to improve and develop the service further. Some of the documentation could be adapted to be more suitable for a support service.

What the service has done since the last inspection

This is not applicable as this was the first inspection since Real Life Options took over the service.

Conclusion

An Carina provides a very good service and staff were very good at meeting people's needs. Real life Options have made some notable improvements to the service since they took over as the provider in December 2011.

Who did this inspection

Linda Taylor

1 About the service we inspected

An Carina is a support service for 16 adults with a learning disability, and offers day care from Monday to Friday from 9:00am to 4.30pm. It is situated in Polbeth, West Calder, and is close to shops and other amenities. The provider is Real Life Options who are based in West Yorkshire.

The support service is in a single storey detached building in its own grounds. There is a large garden area, some of which is paved with garden seating, and there is a large grass area to the side of the building. There is also a garden that has been used to grow vegetables and plants. There are a number of rooms within the support service that can be used for various functions for example, a large main hall, an arts and crafts room, lounge area and a snoozelen room. There is a small kitchen area for snacks and drinks and a main kitchen area where lunches are prepared on the premises. A dining room is adjacent to the kitchen. Disabled toilet and a shower are also available.

Real Life Options state that their vision is 'a society in which disabilities are not a barrier to people taking control of their lives'. Their mission is to be 'passionate about delivering high quality personal support to customers who have a disability; have a responsive and flexible approach in all areas of our activities and provide professional, innovative and effective customer focused services'.

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

Quality of Care and Support - Grade 4 - Good

Quality of Environment - Grade 4 - Good

Quality of Staffing - Grade 4 - Good

Quality of Management and Leadership - Grade 4 - Good

This report and grades represent our 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. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0845 600 9527 or visiting one of our offices.

2 How we inspected this service

The level of inspection we carried out

In this service we carried out a medium intensity inspection. We carry out these inspections where we have assessed the service may need a more intense inspection.

What we did during the inspection

We wrote this report after an unannounced inspection, which took place between 9.00am and 6pm on 9 January 2013. The inspection was concluded on 1 February when the final feedback from the inspection was given to the manager via the telephone. The inspection was carried out by Care Inspectorate inspector, Linda Taylor.

As requested, the provider had sent us an annual return. The provider also sent us a self-assessment form.

We issued 11 questionnaires to people using the service prior to the inspection. We received three questionnaires that had been completed by a friend or carer. We also had feedback from four professionals who had a connection with the service.

During this inspection, we gathered evidence from various sources.

We spoke with:

- * the manager
- * deputy manager/supervisor
- * informally to all 10 people who were using the service on the day of the inspection.
- * 6 members of staff.

We looked at:

- * two care files
- * two medication records
- * the questionnaires returned to the Care Inspectorate by relatives or friends
- * staff training records
- * staff rotas
- * certificate of registration
- * certificate of insurance
- * quality assurance information and internal audits
- * the environment including the outside area

We had lunch with some of the people who use the service and observed throughout the inspection how staff cared and supported people.

Grading the service against quality themes and statements

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

Inspection Focus Areas (IFAs)

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

Fire safety issues

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at www.firelawscotland.org

The annual return

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

Annual Return Received: Yes - Electronic

Comments on Self Assessment

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

The Care Inspectorate received a fully completed self-assessment document from the provider. We were satisfied with the way the provider completed this and with the relevant information included for each heading that we grade services under.

Taking the views of people using the care service into account

People who were able to comment said they liked the service.

Taking carers' views into account

We received three questionnaires that had been completed by family members or carers and all agreed that overall they were happy with the service at An Carina. One person commented that they felt training had improved.

3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 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

Based on the evidence found during the inspection we graded the service as good for this statement. We looked at the following evidence to help us conclude our findings; personal plans and files, newsletter, spoke with staff and observed staff interacting with people using the service.

Real Life Options use various methods to obtain the views of people who use the service and their families/carers, for example; they send out questionnaires every six months, and plan to hold annual family forums. The manager informed us that their head office receive and analyse the information from the questionnaires and send general feedback to the service. From the last questionnaire, we were informed by the manager that 60% of people were happy with the overall service.

We found there was a very good review system in place. Two very good examples were seen of how the person was involved. Photographs were taken of the review, a DVD had been produced and played at the review so that people could see what activities the person using the service had been involved in. Professional staff involved with the service told us that they found the reviews to be very positive and very informative for families. This meant there was good involvement in reviewing people's needs and that people's needs were being met.

When we spoke to staff they gave examples of how they involved people. One staff member discussed taking a person on an outing that they had not experienced before and found by the person's reaction that they really enjoyed it.

Another member of staff discussed that they had changed the timetable of activities for one person as they had noticed that they had become more agitated at a certain time in the day. This gives people using the service very positive outcomes because staff are very aware of people's needs.

Areas for improvement

There was some work displayed near the entrance to the service on person centred thinking. This included personal information and photographs about individuals (including staff). It was not clear why such information was on display, or if permission had been sought. This information could be classed as confidential and therefore should not be on display.

The service had organised an open day to involve relatives/carers but this was not successful. The service should look at other options to involve relatives/ carers such as seeking people's views on documents for example reviewing policies (see recommendation 1). The provider sends out questionnaires to people who use the service and their families/carers every six months, but there was no evidence of any detailed feedback or what action was required to improve or develop the service (see recommendation 2).

There were a number of initiatives that were being developed to improve participation, for example;

- * meetings with people who use the service
- * forum meetings for people who use An Carina and other services operated by the provider.
- * weekly key worker meetings and monthly meetings to obtain feedback from people using the service.

Although these were not all in place at the inspection, they should have a positive impact when fully implemented.

The service should continue to develop participation to help further improve the service.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 2

Recommendations

1. The service should look at other ways to involve families and carers in assessing and improving the service.
National Care Standards support services
Standard 12: Expressing your views
2. A detailed action plan should be available following the evaluation of questionnaires, which highlight what the service needs to do to improve and develop.
National Care Standards support services
Standard 12: Expressing your views

Statement 3

We ensure that service users' health and wellbeing needs are met.

Service strengths

The service was very good at meeting people's needs. We looked at personal plans and files, and spoke to staff and other professionals which assisted us to evidence very good care.

Staff we spoke with were very knowledgeable and were able to discuss the needs of people in great detail for example, they had discussed with families/carers about people's likes and dislikes and any special requirements people had when eating and drinking such as equipment, or any risks. Staff had used this information to improve mealtimes for people. Staff had also involved the speech and language therapist in assessing people's needs. This had a very positive outcome for people using the service in that their diet and nutrition improved. The cook had been innovative in adapting food to meet people's needs and improve their diet. Staff and people who use the service were now planning to go shopping for a weekly shop and plan menus together.

When we spoke with the professionals involved with the service they commented on how good staff were at assessing needs and asking for assistance. They also commented on how caring and motivated staff were and that there was good communication. These means that there are good outcomes for people in that their needs are being met.

We found from observing and speaking to staff, and looking at people's files that staff were very aware of people's needs. For example some of the people who attend the service need to have particular items with them or near them at all times for reassurance and we saw evidence of this throughout the day.

We reviewed the medication administration and recording system and a good audit trail was seen. There was very good detailed information in the protocol and care plans used for people who needed 'as required' medication for epilepsy. The care plan included the person's care home/relative, GP signature and a review date. This gave staff detailed information of the action to take should a seizure occur.

There was very detailed information in the individual files of the people using the service. The section on 'How I communicate' was very informative. It was good to see that the support plans related to the National Care Standards (NCS) and that the provider was aiming to meet the standards. Overall, the documentation was very detailed and covered all support needs.

There were good examples of how to support someone when they became upset or angry.

We examined accident/incident reports since January 2012 and found that overall only minor incidents had taken place. There was one incident where the person became agitated. From the notes made, staff demonstrated good practice and handled the situation calmly and sensitively.

There was a range of meaningful activities that people could take part in, including outings. Staff gave us examples of the activities available;

Arts and crafts - we saw a lot of work that had gone into an Egyptian theme

Baking

Swimming

Gardening (weather permitting)

Outings - such as shopping for individual items, groceries, lunches, trips to Edinburgh to the recent Christmas markets, the Scottish Parliament, canal trips.

Staff told us that they had obtained bus passes for some people and were hoping to use these much more in the future rather than use the mini bus.

We saw pictures and a DVD that confirmed people got involved. It was good to see that people were involved in meaningful activities.

Areas for improvement

Staff told us that they were becoming more familiar with Real Life Options documentation and we noted that files are still in transition and some documents are still to be completed. Of the two files we looked at, one was more up to date with review dates than the other. Some signatures and dates were missing. We noted that some files were hand written and some were done on the computer. There were difficulties for staff in using the computer to complete files as there was only one available. Staff are now hand writing information which should help to speed up the completion of the documentation.

There is a lot of information contained in the files. We found that information was duplicated in different documents and some information was more applicable to a 24 hours service, for example, there was a detailed document for when people had to be admitted to hospital. The medication policy and procedure is generic, and should be reviewed to be more specific for the service, for example, the generic procedure details how medication should be ordered, which is not applicable for a support service (see recommendation 3).

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The documentation used in the support service should be reviewed along with policies and procedures to ensure they are appropriate for a support service.
National Care Standards support services
Standard 2: Management and staffing arrangements

Quality Theme 2: Quality of Environment

Grade awarded for this theme: 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

Based on the evidence found during this inspection we graded the service as good for this statement. We came to this conclusion from speaking to staff and observing the environment and staffs interactions with the people using the service.

The information in Statement 1.1 of Quality of Care and Support is also relevant to this statement.

Staff informed us that they consulted with people informally on aspects of the environment, for example choosing colours to paint some of the rooms. Staff had framed people's artwork which was on display; this demonstrates that people's work was valued.

We saw that staff were good at enabling people to use the environment to meet their needs and that choices were given such as using the snoozelen room, doing art work, or going on an outing.

Areas for improvement

Refer to Quality Statement 1.1 under Areas For Improvement and the recommendations

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Statement 2

We make sure that the environment is safe and service users are protected.

Service strengths

We awarded a grade of good for this statement, as there were some good measures in place to make the environment safe and to protect people. We came to this conclusion from observing the environment, speaking to staff and looking at people's files and records for maintenance and health and safety.

Real Life Options (RLO) have had considerable maintenance work carried out to improve the quality and safety of the environment, for example;

- * mixer valves have been fitted
- * the slabs outside the building had been re-laid to make the area even
- * a new boiler and water heater had been installed
- * work had been carried out to improve the heating from the radiators
- * new flooring had been installed in the shower area and the drains had been cleaned.

There were plans to improve the outside/garden area in 2013, for example the picnic area and fencing.

Domestic staff were available from 7-9am before the service opened and we saw evidence of this on the staff rota. We saw that colour coded mops and buckets are in use to help control the spread of infection, and we saw disposable gloves and aprons were available and that staff used these appropriately. Staff were aware of COSHH regulations and we saw that cleaning materials were locked securely.

We spoke with staff about training and viewed a training document, we assessed that staff had a good range of training that would help to keep people safe and protected within the service. Staff had the following training;

- * team teach (how to handle behaviour)
- * medication for people with epilepsy
- * food hygiene
- * moving and handling
- * safeguard (adult support and protection)
- * person centred training
- * communication.

The environment meets people's needs as it was spacious and provided flexibility of room use so people had a choice. Staff had made the lounge and dining areas homely and it was good to see that staff had lunch with the people using the service, creating a homely and relaxed environment.

Areas for improvement

We saw that one member of staff was responsible for checking fire safety and other maintenance and we saw records for this. The manager told us that they carry out health and safety audits. A member of staff and a person using the service undertake this. We looked at the health and safety audit carried out on 1 October 2012. Staff must ensure that the audit is completed accurately as some of the information was out of date, for example, the audit stated that the last service for fire safety equipment was 2011 when equipment had been checked in 2012. Some of the dates did not match, for example the audit was completed in October 2012 but the dates of the last review were dated December 2012. The detail in the audit needs reviewed to ensure that all areas are covered for example, the art room and the large hall. The audit should be specific for the support service as it did not cover some of the equipment used or outings and medication (see recommendation 3).

Risk assessments were in place for people using the service but some were not fully completed. Staff should ensure that all the details are added.

Staff discussed that they wanted to make improvements to the snoozelen room by purchasing more sensory equipment. This would help to improve the facilities already available.

The shower/toilet area had an unpleasant odour. The provider needs to take action to eradicate this.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The health and safety audit should be reviewed to be more service specific and staff should be reminded to complete the audit accurately.
National Care Standards support services
Standard 2: Management and staffing

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 4 - Good

Statement 1

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

Service strengths

Please refer to quality statement 1.1 for information on this statement.

Areas for improvement

The manager informed us that people who use the service and their relative/carer can be involved in the recruitment of staff. The manager acknowledged in the self assessment that they would like to improve the process by asking relatives/carers for a selection of interview questions, and consulting with people who use the service as to their preferred involvement in the interview process. Consideration could be given to extending this process in a more meaningful way, for example relatives/carers could be on the interview panel.

Grade awarded for this statement: 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

We awarded a grade of very good for this statement, as we found that staff were knowledgeable, motivated and very caring. We came to this conclusion from reviewing people's personal files, observing staff interacting with people using the service, from speaking to staff and from looking at records for training and staff rotas.

On speaking with staff, we found them to be very enthusiastic about their work. and they worked well as a team. Their values were very evident, for example, when they spoke about the people using the service they were very respectful and wanted to ensure that people's needs were met by being able to offer them meaningful activities.

Staff were seen to support people very well for example going to the toilet. Staff were observed to be respectful when assisting people in this activity giving them privacy and respecting their dignity.

Staff felt they had good training opportunities and that the training offered met the skills required to support people using the service. We saw from training records that mandatory training takes place and staff confirmed this. Staff were able to demonstrate their knowledge on how to support people who might be agitated and how to report suspected abuse. The majority of staff had a qualification in care and support such as Scottish Vocational Qualification level two and level three.

We examined the staff rotas for three weeks in December and on average 10 members of staff were present, giving people who use the service a one to one ratio.

It was good to see that the National Care Standards were referred to within the support plans and other documentation; this highlights to staff the importance of the standards, and when we spoke to staff they had a good awareness of them. Staff also demonstrated awareness of the Scottish Social Services Council and the Code of Practice.

Staff told us that they had regular supervision, (although the frequency of this varied) and some staff had had an appraisal of their performance. Overall staff felt supported in their work and found that the manager was very good at dealing with any issues very quickly. They felt they could raise issues at staff meetings and the manager listened to their opinions.

We did not look at staff meeting minutes but were informed by the manager that these were recorded. We found evidence from the quality audit that staff minutes were available.

Professional staff whom we contacted about the service, commented that there was good communication with all staff and that staff were good at contacting them for advice. Overall they felt An Carina offered a good service.

Areas for improvement

Not all training had been updated, which was due to staffing issues. The manager informed us that training was being re-scheduled and we saw evidence of this on a training plan.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 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

Please refer to statement 1.1 for information on this statement and recommendations.

Areas for improvement

Areas for Improvement:

We spoke with four professional people who had been involved with the service. One person commented that they were aware of completing a questionnaire and getting feedback from the results. The others were not aware of a questionnaire being issued. It would improve participation if all professional staff involved with the service had the opportunity to make comment about improving and developing the service.

Grade awarded for this statement: 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

Real Life Options (RLO) use quality audits to help them improve their service. We saw evidence of a recent quality improvement report that had taken place. A number of topics were covered, for example; service user involvement and staffing issues such as supervision, training and appraisals. The report identified areas for improvement and the manager shared with us the action plan which was sent to the District Service Manager (DSM). It was good to see that staff and people using the service were involved in the audit process, which included observing staff practice and speaking to individual people who use the service.

We were informed by the manager that the DSM visits the home to offer support monthly. The outcome of the visit is not recorded.

Areas for improvement

We saw the results of a stakeholder satisfaction survey for 2012 which was very positive but there was no action plan available and it was not specific to An Carina. Comments had been collated from questionnaires but these were not specific to the service. RLO could look at other methods of involving its staff, other professionals who visit the service and stakeholders in how it improves and develops its service.

The health and safety audit is covered under quality statement 2.2 about the environment.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

4 Other information

Complaints

No complaints have been upheld, or partially upheld, since registration.

Enforcements

We have taken no enforcement action against this care service since registration.

Additional Information

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 SCSWIS 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).

5 Summary of grades

Quality of Care and Support - 4 - Good	
Statement 1	4 - Good
Statement 3	5 - Very Good
Quality of Environment - 4 - Good	
Statement 1	4 - Good
Statement 2	4 - Good
Quality of Staffing - 4 - Good	
Statement 1	4 - Good
Statement 3	5 - Very Good
Quality of Management and Leadership - 4 - Good	
Statement 1	4 - Good
Statement 4	4 - Good

6 Inspection and grading history

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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