

Inspection report

Orems Care Service Support Service

Units 1/ 2
7 Campsie Road
Kirkintilloch
East Dunbartonshire G66 1SL

Inspected by: Roddy MacInnes
(Care Commission Officer)

Type of inspection: Announced

Inspection completed on: 16 October 2006

Service Number

CS2005102335

Service name

Orems Care Service

Service address

Units 1/ 2
7 Campsie Road
Kirkintilloch
East Dunbartonshire G66 1SL

Provider Number

SP2004005509

Provider Name

Orems Care Services Ltd

Inspected By

Roddy MacInnes
Care Commission Officer

Inspection Type

Announced

Inspection Completed

16 October 2006

Period since last inspection

1st Inspection

Local Office Address

4th Floor
1 Smithhills Street
Paisley
PA1 1EB

Introduction

Orems Care Service has been registered with the Care Commission since 2006. This is a flexible community based care service for a maximum of 15 adults who have been assessed as having Autistic Spectrum Disorders and/or challenging behaviours. Although this is a community based resource there is also accommodation which provides a base for Care Team Leaders, direct support staff and service users. This contains a training suite, small kitchen, toilets and a resource room. The purpose of the service is to offer flexible day care and access to ordinary community based resources. Activities are individually tailored to the person's identified needs. The staffing ratio is a minimum of 1 -1 at all times with ongoing support to carers and service users.

Basis of Report

Before the visit:

The Care Commission Officer contacted the service confirming when the visit would take place.

The inspection process was carried out by One Care Commission officer, Roddy MacInnes over a one day period. The methods of inspection used to gather sufficient evidence included a review of three care plans; observation of practice and brief interviews with three service users, three care staff, the management team and an examination of the premises.

This service was inspected after receiving a Regulation Support Assessment (RSA) to determine what level of support was necessary. The RSA is an assessment undertaken by the CCO which considers: complaints activity, changes in the provision of the service, nature of notifications made to the Care Commission by the service, action taken upon requirement etc.

This service was required to have a medium level of support that resulted in an inspection based on the national inspection themes, the core National Care Standards for the particular service type, any other standards or regulations indicated by the RSA and recommendations and requirements from previous inspections, complaint or other regulatory activity.

The Care Commission Officer also looked at a range of policies, procedures and records including the following:

risk assessment documentation,

servicing records

checks of fire safety alarm and equipment

repairs log,

accident/incident records,

fire safety training records

Activity records

Staff training records

Fire safety policies and procedures

and the national theme of an audit of the services' safer recruitment/SSSC Code of Practice for Employers recruitment policies and procedures

The Inspection focused on the sections of The Regulation of Care (Requirements as to Care Services) (Scotland) Regulations 2002. Statutory Instrument 114 and five of the National Care Standards.

Standard 2- management and staffing arrangements

Standard 5- environment

Standard 9-supporting communication

Standard 12-expressing your views

Standard 15-eating well

Action taken on requirements in last Inspection Report

This is the service's first inspection.

Comments on Self-Evaluation

There was not sufficient time for the provider to complete the annual return and self evaluation form prior to this inspection. However, the provider confirmed that the annual return will be completed as soon as possible and submitted to the Care Commission.

View of Service Users

Consultation was undertaken with three service users in a group setting. Due to communication difficulties interviews were kept brief. The intimacy of the service assisted relationships to be positive, interactions between members of the staff team and service users confirmed this.

View of Carers

There were no carers available to speak with during the inspection.

Regulations / Principles

Regulation :

Strengths

Areas for Development

National Care Standards

National Care Standard Number 2: Support Services - Management and Staffing Arrangements

Strengths

The provider's fire safety procedures were examined. There were regular training opportunities for staff. Records held were clear and up to date. There were weekly fire drills carried out, weekly checks regarding fire points and documentation confirmed that all equipment was regularly serviced.

The staff team had access to training. The staff team were aware of the Scottish Social Services Council - Code of Practice and interviews confirmed that each worker held a copy of the code. All of the care team were forthcoming with their views throughout the inspection process. Through examination of case records it was clear that the service endeavoured to support people sensitively throughout changes in need. Care plans and assessment documents were of a high standard with individual preferences clearly documented.

Areas for Development

Although policies and procedures utilised by the service were clear there was not always a date for when information was to be reviewed. This needed to be actioned (see recommendation 1) While the service was of a high quality, more care and attention needed to be given to the importance of regular staff meetings and frequent planned supervision to have ensured that communication and support were built into the service for all the staff team on a frequent basis, particularly due to the intense 1-1 nature of the service and potential for staff to feel isolated. (See recommendation 2). The national theme of safer recruitment/SSSC Code of Practice for Employers recruitment policies and procedures was undertaken. An audit of three staff files were examined, one did not contain references. The organisation in line with their policies and procedures needed to have employed a system to record that the applicant's skills, experience and qualifications had always been checked.(See requirement 1), (and take into account SSSC Codes of Practice – Employer). The service needed to have developed a recording system to record that the employer had checked professional registers. (See requirement 2)

National Care Standard Number 5: Support Services - Your Environment

Strengths

Due to the relaxed atmosphere, service users were observed to move freely within the support service. There was adequate space to safely move around. The equipment used and furniture was well maintained and appropriate for their intended use.

Areas for Development

All information relating to individuals should have been stored in a discrete manner to enable staff to have easy access while maintaining confidentiality. (see recommendation 3)

National Care Standard Number 9: Support Services - Supporting Communication

Strengths

The staff team were observed to continually build positive relationships where they were in a position to have supported individuals uniquely. The staff team were careful to check that each person was respected as being unique and given appropriate time to have engaged with the group. The staff team were all conscious and respectful around issues of confidentiality and this was clearly reflected in the interactions which took place. People were addressed in a respectful manner. Case records were found to be accurate and factual. Paperwork also confirmed the basic respect which the team had towards the people they were supporting. The service was clearly using the principles of Person Centred Planning (PCP). Communication was observed to be at the individual's pace to have ensured understanding. Staff were sensitive to the significance of regular contact with families and other services to have facilitated viewpoints.

Areas for Development

No areas for development were identified at this inspection.

National Care Standard Number 12: Support Services - Expressing Your Views

Strengths

The staff team confirmed that where possible service users were encouraged to contribute to the care planning process and were supported to meet their own identified goals. Regular reviews took place for all service users. The staff team discussed using community resources on a daily basis. Service users were observed to be supported in activities and were encouraged to engage in the activity or not by making choices in their own time. Risk assessments were examined in care plans and the majority were up-to-date. The staff team were observed to be sensitive to individual needs when supporting people.

Areas for Development

The staff team needed to have ensured that adequate risk assessments and forward planning continued to take place to have ensured the safety of all involved. Although risk assessments were detailed and clear, they all needed to have been up to date to have ensured that changing needs were recorded and relevant levels of support provided. (See recommendation 4).

National Care Standard Number 15: Support Services - Eating Well where the support service provides meals

Strengths

The service had policies regarding eating, drinking, food and nutrition. The care staff were able to explain the daily and weekly planning which took place regarding meal selection, preparation and purchasing of food. Records held clear information regarding individual likes and dislikes. This area had clear involvement and consultation with service users. Personal plans sampled held clear information in relation to health care needs such as nutrition, fluid intakes where needs had been identified and expected outcomes.

Areas for Development

Although the service had a comprehensive variety of policies, nutrition/fluid balance policies should have been further developed to have ensured that service user's needs, (although no needs had been identified with the current service users) were supported by clear management guidelines, for example access to snacks and drinks, special dietary requirements. (See recommendation 5)

Enforcement

There had been no enforcement action taken against the service.

Other Information

All issues were identified within this report.

Requirements

1. The organisation must, in line with their policies and procedures, employ a system to record that the applicant's skills, experience and qualifications have been checked. This is in order to comply with: SSI 2002/114 Regulation 19 (2) (a) – Records, and take into account SSSC Codes of Practice – Employer Timescales for requirement to start on receipt of this report.

2. The organisation must develop a recording system to record that the employer has checked professional registers.

This is in order to comply with: SSI 2002/114 Regulation 9 (2)(c) - Fitness of Employees, Regulation 19 (2)(d) – Records of any registration required to be held by persons in order to undertake their duties, and take into account SSSC Codes of Practice -1.2 Timescales for requirement to start – three months

Recommendations

1. Policies and procedures utilised by the service should have a date for when information is to be reviewed. This should take place annually or sooner if risks or needs change significantly

National Care Standards Support Services Day Care-Adults Standard 2.1

2. More care and attention needs to be given to the importance of regular staff meetings and frequent planned supervision to ensure that communication and support are built into the service for all the staff team on a frequent basis

National Care Standards Support Services Day Care-Adults Standard 2.1

3. All information relating to individuals should be stored in a discrete manner to maintain confidentiality

National Care Standards Support Services Day Care-Adults standard 5.2

4. The staff team need to ensure that adequate risk assessments and forward planning continues to take place to ensure the safety of all involved. Risk assessments all need to be up to date to ensure that changing needs are recorded and relevant levels of support provided. .

National Care Standards Support Services Day Care-Adults Standard 12.4

5. Policies in relation to nutrition could be further developed to ensure that service user's needs are supported by clear management guidelines, for example access to snacks and drinks, special dietary requirements.

National Care Standards Support Services Day Care-Adults Standard 15.10

Roddy MacInnes

Care Commission Officer