

Inspection report

Eildon Housing Craw Wood Care Home Service

92/96 Craw Wood
Tweedbank
Galashiels TD1 3SU

Inspected by: Janette Bishop
(Care Commission Officer)

Type of inspection: Unannounced

Inspection completed on: 22 February 2007

Service Number

CS2003009175

Service name

Eildon Housing Craw Wood

Service address92/96 Craw Wood
Tweedbank
Galashiels TD1 3SU**Provider Number**

SP2003001963

Provider Name

Eildon Housing Association Ltd

Inspected ByJanette Bishop
Care Commission Officer**Inspection Type**

Unannounced

Inspection Completed

22 February 2007

Period since last inspection

5 months

Local Office AddressSouth East Region
Unit 10a Ground Floor
Galabank Business Park
Wilderhaugh
Galashiels
TD1 1PR

Introduction

92-96 Craw Wood is a residential care home which provides residential care for a maximum of 24 older people who have a diagnosis of dementia. The service was registered with the Care Commission on the 1st April 2002. The facility consists of three purpose built houses. The establishment is managed by Eildon Housing Association in partnership with Scottish Borders Council and Borders Health Board. Respite facilities are available.

The service has developed a clear philosophy of care and statement of aims and objectives which emphasise the importance of the "individuality, privacy and dignity of the residents within a setting which the service considers to be their own home".

The service has a full time manager based within the facility. A minimum of two members of staff are on duty in each house during the day and a minimum of three members of staff are on duty during the night.

Basis of Report

The inspection was unannounced and took place over one day on the 22nd February 2007.

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 Officer which considers complaints activity, changes in the provision of the service, the nature of notifications made to the Care Commission by the service, action taken upon requirements etc.

This service was required to have a LOW level of support that resulted in an inspection based on the inspection theme and any recommendations and requirements from previous inspections, complaint or other regulatory activity.

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.

Care Commission Officer, Janette Bishop spoke with the manager, the senior care worker on duty, and three members of the care staff. Time was spent observing the interaction between residents and staff.

One resident was spoken with to find out their opinion of the service provided to them.

The Care Commission Officer also looked at a range of policies, procedures and records including the following-
complaint policy and records, policies and procedures for the prevention, identification and investigation of abuse, residents contracts and finance records held on behalf of the residents.

The Care Commission Officer took all of the above into account and reported on whether the service was operating with respect to the following inspection theme:

Management of residents finances in terms of the Adults with Incapacity Act. Following up

Office of Fair Trading report recommendations about transparency of information contract and complaints systems in care homes.

This theme relates to the following National Care Standards -
Standard 3: Your legal rights

Action taken on requirements in last Inspection Report

One requirement was made at the last inspection in respect of fire safety. This will not be reported on at this inspection. (See basis of report)

Comments on Self-Evaluation

Not applicable at this inspection.

View of Service Users

One service user was spoken with at length. The resident was pleased with her room and described how she planned to personalise it. She also described the activities that she had been involved in and described the staff in positive terms.

View of Carers

There were no family or friends of residents available to speak with at this inspection.

Regulations / Principles

Regulation :

Strengths

Areas for Development

National Care Standards

National Care Standard Number 3: Care Homes for Older People - Your Legal Rights

Strengths

Areas inspected within this standard related to the inspection theme "Managing resident's finances in terms of the Adults with Incapacity Act. Following up Office of Fair Trading report recommendations about transparency of information, contract and complaints systems in care homes".

The cost of residency and details of the services included in that cost were discussed with prospective clients and full details were included in the occupancy agreement.

Service users' representatives were provided with a copy of the contract. Signed copies were available in service user's files.

Written policies and procedures for dealing with complaints and the prevention, identification and investigation of abuse were available.

Discussion about the complaints procedure was part of the induction process for residents and their relatives. The admission checklist recorded that this had taken place.

There was a written procedure for holding service users' valuables. Records were kept of removal and return of service users' valuables from storage.

Service users' ability to manage their own funds was assessed both on admission to the care home and at regular care plan reviews.

The home had an established system for accounting for monies held on behalf of the residents. Monies held were kept to a minimum. Each resident had a separate accounting sheet and all entries were double signed. Entries were reconciled fortnightly and countersigned by different members of staff.

Areas for Development

At the time of the Officer's visit the care home's inspection reports were displayed for staff to read. Families and representatives of prospective residents were able to request a copy. (See recommendation 1)

The current policy on dealing with the protection of vulnerable adults does not make it clear staff's role in investigating abuse.
(See recommendation 2)

Enforcement

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

Other Information

There were no other issues relevant to this inspection.

Requirements

No requirements were made at this inspection.

Recommendations

1. The current inspection report should be prominently displayed in the home and other means of making the reports readily accessible to visitors and prospective resident's families should be explored.

This takes account of the National Care Standard, Care Homes for Older People, Standard 3
- Your legal rights.

2. The manager should review the home's policy and procedures to ensure that the guidance is clear on staffs' role and responsibilities in investigating abuse.

This takes account of the National Care Standard, Care Homes for Older People, Standard 3
- Your legal rights.

Janette Bishop

Care Commission Officer