

DUNDEE CITY COUNCIL

REPORT TO: SCRUTINY COMMITTEE - 9TH SEPTEMBER 2009

REPORT ON: UNANNOUNCED INSPECTION OF DUNDEE CITY COUNCIL-ELMGROVE HOUSE BY THE SCOTTISH COMMISSION FOR THE REGULATION OF CARE

REPORT BY: DIRECTOR OF SOCIAL WORK

REPORT NO: 435 - 2009

1.0 PURPOSE OF REPORT

1.1 The purpose of this report is to report on the findings of the inspection of the Elmgrove House

2.0 RECOMMENDATIONS

2.1 It is recommended that the Scrutiny Committee:

- i) notes the contents of this report
- i) requests that the Director of Social Work monitor the continued progress towards improving this service.

3.0 FINANCIAL IMPLICATIONS

3.1 None

4.0 MAIN TEXT

4.1 Elmgrove House was inspected in March 2009 by the Care Commission. This was an unannounced visit. The report of the findings of this visit was published on the 24th of April 2009. At the time of the inspection there were 10 service users living in Elmgrove.

4.2 The Care Commission's focus of inspection targeted the following Quality Themes.

- o Quality of Care and Support
- o Quality of Environment
- o Quality of Staffing
- o Quality of Management and Leadership.

Each Quality theme is made up of several quality statements and this inspection focussed on eight of these quality statements.

4.3 The Care Commission identified the following key strengths in the areas that were inspected.

- Despite the inability of the service users to be directly involved in evaluating their care, staff appropriately gauged their views through observation of non-verbal signs such as their actions and reactions to offered care and support.
- The service evidenced a good level of consultation with carers (relatives) and advocates about all four quality themes. There were very positive comments from carers about the service under all four themes and the service was highly rated.
- The care home's policies and practice resulted in very good outcomes for service users making individual choices and to realising their potential.

- There was evidence of good consultation with carers (relatives) which provided detailed comments on the on the quality of the environment. There were positive comments from carers.
- Service users had a good quality environment in their bedrooms. Staff had made good effort to make shared bathrooms more attractive.
- There were many positive comments from carers about the skills and attitudes of staff e.g. "All staff are really pleasant and hard working and informed in anything you ask them"
- Carers commented in the consultation meeting that staff respected service users creating a family atmosphere and that they were good communicators and were well trained.
- Staff were happy working in Elmgrove and wanted to stay with the service.

4.4 Evaluation

The Care Commission can apply the following to Services:

- Enforcement Action
- Requirements
- Recommendations

There was no enforcement action and no requirements. The following were identified as areas for improvement.

- Personal plans and reviews should evidence the views of carers, service users, choices and options for realising potential. Who is involved in decisions. Who wrote the plan and when.
- The service should consult with carer's staff and others about staffing levels and staff team required to meet service users needs.

The recommendations that are indicated above are being pursued and all plans now evidence the areas noted.

A staffing review is currently underway in order to ensure that staffing levels are at a level consistent with the needs of the service.

4.5 Quality Indicators

Scottish Commission For The Regulation Of Care reports use a six-point scale for reporting performance:

6	excellent
5	very good
4	good
3	adequate
2	weak
1	unsatisfactory

The grades that were awarded are as follows:

Quality Theme	Overall Grade
Quality of care and support	4
Quality of environment or information	4
Quality of staffing	4
Quality of management and leadership	4

5.0 POLICY IMPLICATIONS

5.1 This report has been screened for any implications in respect of Sustainability, Strategic Environment Assessment, Anti-Poverty and Equality Impact Assessment and Risk Management.

There are no major issues.

6.0 CONSULTATION

6.1 The Chief Executive, Depute Chief Executive (Support Services), Depute Chief Executive (Finance) and Head of Finance have been consulted in preparation of this report.

7.0 BACKGROUND PAPERS

7.1 The following Background Papers were relied upon in preparation of this Report:

- Inspection Report Dundee City Council -Elmgrove House

Alan Baird
Director of Social Work

20th August 2009

Inspection report

Elmgrove House Care Home Service

315 South Road
Dundee DD2 2RT

Inspected by: Patrick Sweeney
(Care Commission Officer)

Type of inspection: Unannounced

Inspection completed on: 30 March 2009

Service Number

CS2003000475

Service name

Elmgrove House

Service address

315 South Road
Dundee DD2 2RT

Provider Number

SP2003004034

Provider Name

Dundee City Council

Inspected By

Patrick Sweeney
Care Commission Officer

Inspection Type

Unannounced

Inspection Completed

30 March 2009

Period since last inspection

Five months - 5 September 2008

Local Office Address

Central East Region
Compass House
11 Riverside Drive
Dundee
DD1 4NY

Introduction

Elmgrove House has been registered by the Care Commission since 1 April 2002 to provide a care home service for 10 adults with learning disabilities who may also present significant challenging behaviours. The care home provides personal care and personal support to its service users. The care home is not registered to provide nursing care.

The care home is provided by Dundee City Council and has seconded nurses from NHS Tayside as part of the staff team.

The care home is situated in the Lochee area of Dundee and is close to local amenities.

The Council plans to replace the present care home with purpose built flats and to continue to provide 24 hour support to meet the needs of the service users.

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 - 4 - Good

Quality of Staffing - 4 - Good

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) for the most up-to-date grades for this service.

Basis of Report

This report was compiled following an unannounced inspection that took place on the 27 March 2009 by Patrick Sweeney, Care Commission Officer. There was telephone to the manager of the service on 30 March 2009.

The focus of this inspection was to determine the service's progress in relation to the recommendations which were made in the last inspection report of 5 September and any improvements which have been made since that time.

This report should be read in conjunction with the last inspection report as this will give full details of the strengths and any areas for improvement identified under the statements and themes.

Before the Inspection

The Annual Return

The service submitted a completed Annual Return as requested by the Care Commission before the last inspection.

The Self-Assessment Form

The service submitted a self-assessment form as requested by the Care Commission before the last inspection.

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 as a result. The inspection was based upon the relevant Inspection Focus Area (IFA) and associated National Care Standards - Support Services, recommendations and requirements from previous inspections and complaints or other regulatory activity.

Views of service users

The communication needs of service users meant that they could not be interviewed.

Staff at inspection

Interviews with two members of staff.

Evidence at inspection

Examination of six personal plans.

Observation of staff interactions with the service users present during the inspection.

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 were no requirements for the service to take action on since the last inspection.

There were four recommendations for the service to take action. How the service had met the recommendations is reported upon under the following Quality Statements; Quality of care and support 1.1, 1.2 and Quality of environment 2.3. The service had met two recommendations fully. The service had met one recommendation partially and had not evidenced action on the fourth recommendation.

Comments on Self Assessment

A self assessment document was submitted by the service before the previous inspection. A further self assessment was not required for this unannounced inspection.

View of Service Users

The communication needs of service users meant that they could not be interviewed. The Care Commission Officer observed attentive, positive and warm interactions between staff and service users.

Most service users had been out during the day at day services or with the support of staff in individually planned activities, such as swimming.

A very good piece of practice was observed when staff held a handover meeting between shifts where all changes to service users' needs and an evaluation of their health and wellbeing that day were discussed in detail. This ensured that staff were aware of any changes since their last duty and that they could respond effectively and consistently to service users. The meeting demonstrated that staff adjusted the service they provided according to users health and wellbeing.

View of Carers

There were no carers present during the unannounced inspection visit.

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

The service was found to have good performance in relation to this statement. The previous inspection report dated 5 September 2009 identified the strengths of this service.

The recommendation made at the last inspection for this Quality Statement and Quality Statement 1.2 was that the service should ensure personal plans and reviews of the plans evidenced;

- a) the views of carers, and other representatives
- b) service users' choices and options for realising potential
- c) who was involved in decisions about service users choices, options for realising potential and reasonable risk
- d) who wrote the plan and when.

Of six care plans examined there was evidence in four that there had been an improvement in the practice of recording carers and professional staff involvement in evaluating the quality of care and support in service user's reviews. There was good evidence that carers' views about the quality of care and support were invited at the review meetings and that there was a full discussion of service users' needs, choices, realising potential and acceptable risks with all those present at the review.

The Care Commission Officer briefly reviewed the grade for this statement and confirmed that the current grading remained appropriate.

Areas for Development

The service should consider how it tells carers about the feedback it has received from all its consultations and how these views will be used in any action plan to improve the service.

The service still needed to ensure that all reviews of service users' care and support met the standard of practice already demonstrated in consulting carers and other stakeholders in the reviews of service users' care plans. The recommendation is made again to be followed up at the next inspection. (Recommendation 1)

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

1

Statement 2: We enable service users to make individual choices and ensure that every service user can be supported to achieve their potential

Service Strengths

The service was found to have good performance in relation to this statement. The previous inspection report dated 5 September 2009 identified the strengths of this service. The Care Commission Officer briefly reviewed the grade for this statement and confirmed that the current grading remained appropriate.

Areas for Development

The recommendation made at the last inspection for this Quality Statement and Quality Statement 1.2 was that the service should ensure personal plans and reviews of the plans evidenced;

- a) the views of carers, and other representatives
- b) service users' choices and options for realising potential
- c) who was involved in decisions about service users choices, options for realising potential and reasonable risk
- d) who wrote the plan and when.

The service still needed to improve its practice of recording in personal plans each part of this recommendation. The recommendation is made again to be followed up at the next inspection. (Recommendation 1)

CCO Grading

4 - Good

Number of Requirements

0

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 service was found to have good performance in relation to this statement. The previous inspection report dated 5 September 2009 identified the strengths of this service. The Care Commission Officer briefly reviewed the grade for this statement and confirmed that the current grading remained appropriate.

Areas for Development

The service should consider how it will provide carers with feedback on the consultations it has done on the care home building and the future accommodation, and how these views will be included in any action plan to improve the service. The service was maintaining current good practice and no requirements or recommendations were made at this inspection.

CCO Grading

4 - 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

The service was found to have good performance in relation to this statement. The previous inspection report dated 5 September 2009 identified the strengths of this service. The Care Commission Officer briefly reviewed the grade for this statement and confirmed that sufficient improvement had been made to increase the grade.

The two recommendations made for this Quality Statement at the last inspection were.
The care home should improve the appearance and value of the public areas for service users, taking into account service users' needs.
The care home should ensure that the odour in the main corridor was eliminated.

The service had redecorated one sitting room in warm bright colours with the addition of mobiles and pictures for visual interest. Pictures had also been put up on the walls of the two other sitting rooms and the dining room. Windows were also now framed with curtains and blinds could be used for privacy at night. The carpet in the hallway had been replaced with

an easy to clean flooring, which had eliminated the odour. The staff commented that they felt the environment was more welcoming and homely.

Areas for Development

The service should keep the Care Commission informed of any instance where service users' needs cannot be met because of identified constraints on the environment. The service was maintaining current good practice and no requirements or recommendations were made at this inspection.

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

The service was found to have good performance in relation to this statement. The previous inspection report dated 5 September 2009 identified the strengths of this service. The Care Commission Officer briefly reviewed the grade for this statement and confirmed that the current grading remained appropriate.

Areas for Development

The service should consider how it will provide carers with feedback on the consultations it has done on the quality of staffing and how these views will be included in any action plan to improve the service. The service was maintaining current good practice and no requirements or recommendations were made at this inspection.

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

0

Statement 4: We ensure that everyone working in the service has an ethos of respect towards service users and each other.

Service Strengths

The service was found to have very good performance in relation to this statement. The previous inspection report dated 5 September 2009 identified the strengths of this service. The Care Commission Officer briefly reviewed the grade for this statement and confirmed that the current grading remained appropriate.

Areas for Development

The service was maintaining current very good practice and no requirements or recommendations were made at this inspection.

CCO Grading

5 - Very Good

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

The service was found to have good performance in relation to this statement. The previous inspection report dated 5 September 2009 identified the strengths of this service. The Care Commission Officer briefly reviewed the grade for this statement and confirmed that the current grading remained appropriate.

Areas for Development

The service should consider how it will provide carers with feedback on the consultations it has done on the quality of management and leadership and how these views will be included in any action plan to improve the service. The service was maintaining current good practice and no requirements or recommendations were made at this inspection.

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

The service was found to have good performance in relation to this statement. The previous inspection report dated 5 September 2009 identified the strengths of this service. The Care Commission Officer briefly reviewed the grade for this statement and confirmed that the current grading remained appropriate.

Areas for Development

The service should consider how it evidences how feedback from supervision meetings and staff meetings contributes to improvements in the service. The service should consider how it informs carers and other stakeholders about the feedback the service has received and how these views are to be used in any action plan to improve the service.

The recommendation for this Quality Statement made at the last inspection was that the service needed to address staff and carers concerns about the level of staffing on duty at any

time, and whether there was a sufficient size of staff team to meet the needs of service users. The service had yet to demonstrate how it was to meet this recommendation. The recommendation is made again to be followed up at the next inspection. (Recommendation 2)

CCO Grading

4 - Good

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

There was no other information to report at this inspection.

Requirements

There were no requirements made at this inspection.

Recommendations**Recommendation 1**

The service should ensure personal plans and reviews of the plans evidence;

- a) the views of carers, and other representatives
- b) service users' choices and options for realising potential
- c) who is involved in decisions about service users choices, options for realising potential and reasonable risk
- d) who wrote the plan and when.

National Care Standards, Support Services, Standard 6, Support arrangements and Standard 8, Making choices and Standard 9, Feeling safe and secure.

Recommendation 2

The service should consult with carers, staff and other stakeholders about the staffing levels and staff team required to meet service users' needs. Standard 5, Management and staffing arrangements.

Patrick Sweeney

Care Commission Officer