Inspection report

McClymont House
Care Home Service
Gallowhill Road
Lanark    ML11 7NZ

Inspected by:    Eleanore Murray
(Care Commission Officer)
Type of inspection:  Unannounced
Inspection completed on:  18 February 2009
<table>
<thead>
<tr>
<th>Service Number</th>
<th>Service name</th>
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<td>CS2003001338</td>
<td>McClymont House</td>
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<th>Service address</th>
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<th>Provider Number</th>
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<tr>
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<td>South Lanarkshire Council</td>
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<td>Care Commission Officer</td>
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<td>18 February 2009</td>
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<td>Princes Gate, 60 Castle Street, hamilton ML3 6BU</td>
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**Introduction**
McClymont House is a purpose built care home, which is owned and managed by South Lanarkshire Council. It has 27 residential places, two of which may be used for respite care.

The service’s aims are to provide a high quality of life for residents, by encouraging them to retain their independence and individuality, in a comfortable and welcoming environment.

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. This report should be read in conjunction with the inspection report of September 2008.

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**

**Before the 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.

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**
The inspection was carried out by Eleanore Murray, Care Commission Officer, on Monday 16 February, between the hours of 14.00 and 19.00. Feedback was given to the Manager on Wednesday 18 February 2009 at 14.30.

**Evidence**

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

- Accident and Incident records
Minutes of meetings for service users, relatives and staff
Complaints procedure and records
Staff training records
A sample of service users’ personal plans, including risk assessments where appropriate

Comments and views about the service were obtained from:

The Manager
Five service users
Three staff
Two relatives

Observation of practice and of the environment also contributed to the findings of this inspection.

The inspection also took account of The Regulation of Care (Requirements as to Care Services) (Scotland) Regulations 2002 (SSI 2002/114)

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 made after the last inspection.

Comments on Self Assessment
A self assessment was not requested prior to this inspection.

View of Service Users
Five service users were spoken with during the visit. All were very positive in their responses. One said that ‘it (living there) was just the same as being at home’. Others said that they ‘thoroughly enjoyed it’, that it was ‘very, very good’ and ‘couldn’t be better’. One said that staff ‘couldn’t do enough for you’ and another thought that they were ‘very nice, very attentive’. All said that staff treated them with respect. Most recalled attending service users’ meetings, and completing questionnaires about the care they received, including the quality of meals. Everyone felt that they could exercise choice in almost all aspects of their lives. One service user felt that staffing levels were sometimes ‘a bit scarce’.
View of Carers
Two relatives were spoken with, both of whom expressed a high level of satisfaction with the service. They described it as being 'very well run', with 'wonderful care' and 'nothing being too much bother for staff'. One said that she was kept very well informed about her relative. Both thought that there were adequate activities, good food and sufficient staff. One said she had never heard any complaints locally about the service.
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 continued to operate at a good level in relation to this Quality statement.

Meetings were carried out at regular intervals for service users. The Care Commission officer attended a unit meeting, which was minuted and the matters arising from previous meetings were also addressed. Staff were observed to encourage service users to contribute to the meeting, and gave them time to do so, or arranged to speak with them later in private.

The service issued a regular newsletter, which provided service users with information about the grading process, the Charter Mark Award and proposals for the gardens. The newsletter also contained a form to be completed if a service users or carer had any suggestions about the service, or if they wished a meeting with the Manager.

Questionnaires were issued to service users about various aspects of home life, and the results were collated and available in the service. They addressed a range of matters which were important to service users and undoubtedly enhanced the quality of their lives. There were examples of changes being made as a result of service users' comments, including how various festivals should be marked, what activities and entertainment were preferred, the purchase of a piano for entertainment evenings and the content of the menus.

Areas for Development

Although there had been extensive consultation on various topics, the information obtained about the day to day care of service users and how they wished it to be delivered to them, was more limited. Information of this type would enhance the consultation process, and would provide a further opportunity for service users and carers to review and assess the quality of care.

There was a 'Friends of McClymont' group of carers and former carers, which met periodically to discuss social and recreational events. This group was not involved in considering aspects of care, or the environment or staffing, but had the potential to provide another source of information and involvement in the assessment and improvement of those aspects of the service.

CCO Grading

4 - Good

Number of Requirements

0
Number of Recommendations

0

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 continued to operate at a good level in relation to this Quality statement.

There continued to be good evidence of service users exercising choice in most aspects of their care. Those spoken with felt that staff would respond to their wishes.

Most of the personal plans which were reviewed, were well completed and current. They included the views and attitudes of service users, and there was evidence of information from reviews being incorporated into personal plans.

Areas for Development

In a small percentage of the personal plans sampled, there were some gaps in information, and particularly in relation to evidencing the frequency with which care elements had been reviewed. It was clear from discussion with staff that they were aware of each service users’ current levels of functioning, but the personal plans in question did not show that some of the information had been reviewed and remained unchanged. (See Recommendation 1)

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

1
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 continued to operate at a good level in relation to this Quality statement.

The steps which the service had already taken, and planned to introduce, and which have contributed to the maintained good grading for this Quality Statement, are described in Quality Statement 1.1.

Service users had been consulted on the selection of colours of redecoration and carpeting for the public areas.

Areas for Development

The areas for improvement in the participation of service users and carers in all aspects of the service, are identified in Quality Statement 1.1. The potential benefits of involving carers in commenting on the service on a more formal basis could also be applied to this Quality Statement.

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 operated at an improved level in relation to this Quality Statement.

As is referred to in the 'Other Issues' section of the report, work on fire safety standards was being carried out during the inspection visit.

Fire doors had been installed to service users’ bedrooms and at the entrance to the units, and corridor doors were being replaced. Key doors could remain open, and closed automatically in the event of fire. This work enabled service users to move more freely about the service. The conservatories were being refurbished, and funds allocated to address the water penetration in them, which was referred to in the previous report. A sophisticated...
smoke extraction system was planned for the smoking area, which would greatly improve the environment around it.

The central garden provided a pleasant focal point and sitting area for service users all year round.

Areas for Development

There were no areas identified for further improvement from the points reviewed at this inspection.

CCO Grading

5 - Very 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 continued to operate at a good level in relation to this Quality statement.

The local authority had tried several ways in which service users and carers could contribute to the recruitment and assessment of staff. Service users had been involved in some central recruitment, but that process was considered to be unsatisfactory. The matter was still under consideration.

The Manager planned to involve service users in interviews which were to be held locally, although dates had not yet been identified. The issue had been discussed with service users, and some were enthusiastic about the process.

Some months ago, service users had completed a questionnaire about the qualities which they would like care staff to have, and, more recently, it had been discussed at a service users' meeting.

Areas for Development

There was no evidence that the information which was obtained from service users about the qualities of care staff, was then used to inform any staff training, or even to be discussed by staff at a staff meeting. (See Recommendation 2)

Carers had not contributed formally to the discussion about staff qualities. (See Recommendation 3)

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

2

Statement 3: We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Service Strengths

The service operated to a very good level in relation to this Quality Statement.
The local authority had a structured training programme, which included opportunities for staff to obtain the qualification required for their registration with the Scottish Social Services Council, ‘core’ training, which included health and safety requirements, and more specialist training, such as working with people who had dementia.

Staff said that they had good training opportunities, and were aware of the process for accessing training. They confirmed that briefings took place to keep them up to date on a range of topics, including National Care Standards.

Formal supervision took place regularly, and was recorded.

**Areas for Development**

There were no areas identified for further improvement from the points reviewed 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 continued to operate at an adequate level in relation to this Quality Statement.

The Manager intended to involve service users and carers in the grading process prior to the next inspection.

There was an invitation at the back of the newsletter for the reader to bring any comments about the service to the Manager or staff.

Areas for Development

As is referred to elsewhere in this report, the views of carers about the service had not been obtained in any structured way.

It was difficult to identify any issues which had been raised as a result of the newsletter, or by any other means, being taken further, or even brought to the attention of staff for discussion and consideration. (See Recommendation 3)

CCO Grading

3 - Adequate

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 continued to operate at a very good level in relation to this Quality Statement.

Work was continuing to retain the Charter Mark Quality Award, which the local authority’s care homes had already been awarded.

A senior staff member had the responsibility of auditing a number of aspects of the service, such as the completion of personal plans and accidents.

Areas for Development
There were no areas identified for further improvement from the points reviewed at this inspection.

**CCO Grading**

5 - Very Good

**Number of Requirements**

0

**Number of Recommendations**

0
Regulations / Principles

National Care Standards
**Enforcement**
There has been no enforcement action against this service since the last inspection.

**Other Information**

1. Specialist communication aids should be available to ensure that the views are obtained of all service users about aspects of their care.

The manager and staff had considered various ways in which communication with service users could be enhanced, including trialling ‘talking mats’. They had concluded that encouraging the key worker relationship, which allowed staff to develop their relationship with service users, and staff being alert to the signs used by service users, had resulted in the most effective forms of communication.

This recommendation had been met.

2. In relation to personal plans, consideration should be given to:
   (a) ways in which the review of aspects of the care, which do not require change, can be confirmed, and
   (b) the completion of the ‘service user’s perspective’ section, which ensures service user’s involvement in discussion of all aspects of their care.

A number of personal plans were reviewed. There was not a great deal of evidence to confirm that part (a) of this recommendation had been fully met, although good progress had been made to address part (b).

This recommendation had been partly met, and the unmet part is repeated in Quality Statement 1.2. (See Recommendation 1)

3. Staff should be aware of room temperatures which are appropriate for service users, who may not be physically active, and confirm routinely that service users are comfortable.

Observations of practice showed staff asking service users about their level of comfort throughout the day. Staff also recorded the apparent comfort of some service users who did not move around.

This recommendation had been met.

4. Impediments to the barrier free nature of the service should be reviewed.

Work in relation to improving fire safety standards was being carried out during the inspection visit. All bedroom and unit doors had automatic fire doors, and corridor doors were being replaced with sectional ones, which could be left open, and closed automatically in the event of fire.

This recommendation had been met.

5. There should be evidence of the actions taken as a result of the opinions expressed by service users.

As is referred to in Quality Statement 1.1, there was evidence of changes occurring, as a result of the views expressed by service users, such as the content of menus, how special occasions were celebrated and the type of activities and entertainment service users preferred.
This recommendation had been met.

6. Proof of staff's qualifications should be available in the service.

A sample of staff training plans confirmed that, on the whole, proof of training was available.

This recommendation had been met.

**Requirements**
None identified at this inspection.

**Recommendations**
1. In relation to personal plans, consideration should be given to ways in which the review of aspects of the care, which do not require change, can be confirmed. (National Care Standards - Care homes for older people; Standard 6 - Support arrangements)

2. Consideration should be given to using the information already obtained from service users about the qualities they would like staff to possess, in a constructive way. (National Care Standards - Care homes for older people; Standard 5 - Management and staffing arrangements)

3. Ways of more formally engaging with carers should be developed, and their views sought and responded to on a more formal basis. (National Care Standards - Care homes for older people; Standard 5 - Management and staffing arrangements)

Eleanore Murray  
Care Commission Officer