

Care service inspection report

West Mainland Day Centre

Support Service Without Care at Home

Stenness

Stromness

KW16 3LB

Telephone: 01856 851435

Type of inspection: Unannounced

Inspection completed on: 14 January 2015



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Service provided by:

Orkney Islands Council

Service provider number:

SP2003001951

Care service number:

CS2003009106

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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	3	Adequate

What the service does well

The West Mainland Day Centre provides a good level of care and support.

Staff are welcoming and friendly. They have developed very good relationships with service users and provide support in a discreet and sensitive manner.

The service provides good food, a choice of activities and much valued opportunities to maintain social contact with people in the local community.

We could see that service users enjoyed their time at the centre and that they hold members of staff in high regard.

What the service could do better

The provider needed to widen the stakeholder involvement in its satisfaction surveys and provide evidence of the outcomes of its process of service user inclusion in evaluating and developing the quality of care and support.

The provider needed to develop individualised risk assessments in each service user's personal support plans.

The provider also needed to implement a quality assurance framework to evaluate the performance of the service.

What the service has done since the last inspection

The service has continued to maintain good standards of care and support. The staff remain committed to delivering a very good quality of day care.

We observed a very good example of Cognitive Stimulation Therapy (CST) which staff used as a tool to stimulate small group discussions with service users. We could see that participants were actively engaged and enjoyed the general knowledge quiz interactions and their time together.

Conclusion

The West Mainland Day Centre provides a much valued day care service which supports attenders to maintain and improve both their physical and mental wellbeing.

The service is an essential local resource and is held in high esteem by both service users and their families.

1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at www.careinspectorate.com

This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

Requirements and recommendations

If we are concerned about some aspect of a service, or think it could do more to improve, we may make a recommendation or requirement.

- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service, but where failure to do so will not directly result in enforcement. Recommendations are based on the National Care Standards, relevant codes of practice and recognised good practice.
- A requirement is a statement which sets out what is required of a care service to comply with the Public Services Reform (Scotland) Act 2010 and Regulations or Orders made under the Act or a condition of registration. Where there are breaches of Regulations, Orders or Conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Inspectorate.

The West Mainland Day Centre is situated in the Old Primary School in Stenness. The premises were refurbished and extended to provide day care for physically and/or mentally frail older people.

The comprehensive brochure, gives the aim of the service as "to support and care for older people, helping them live as independently as possible within their own communities". The service also supports families who care for older people, by allowing them to have a regular break from caring.

West Mainland Day Centre has been registered with the Care Inspectorate since 1 April 2011 to provide a care service to a maximum of 18 older people.

All references in this report will be to the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 ("the Regulations") (SSI 2011/210).

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 3 - Adequate

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 0345 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 low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What we did during the inspection

We wrote this report following an unannounced inspection which took place on 13 and 14 January 2015. We provided feedback to the Senior Day Centre Officer at the end of the inspection visit.

As part of the inspection we took account of the completed annual return and self assessment forms that we asked the provider to complete and submit to us.

We sent nine Care Standards Questionnaires (CSQs) to the manager to distribute to service users. Two sent us completed questionnaires. We also received five CSQs from relatives/carers.

During this inspection process, we gathered evidence from various sources, including the following:

- Personal support plans.
- Individual written agreement.
- Risk assessments.
- Medication check.
- Accident log.
- Complaints book.
- Service questionnaires.
- Observation of the premises.
- Observation of interaction of staff with service users.

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 completed self assessment document from the provider.

The provider identified what it thought the service did well, some areas for development and any changes it had planned. The provider told us how the people who used the care service had taken part in the self assessment process.

Taking the views of people using the care service into account

We received seven Care Standards Questionnaires from service users at the West Mainland Day Centre. The following comments were offered:

"Look forward to meeting staff and people who attend."

"The staff at the day centre give me excellent care and help when required. The staff are all so nice."

"I am answering the question for my brother. He is always full of praise for the kindness and help he is given by the staff. They are all wonderful in every way."

"The staff provide an excellent and caring environment for my mother which gives the support she requires and enables the family to maintain her continued independent way of life at home. The framework and reassurance provided is essential to us and the "extra mile" all the staff are willing to go is much appreciated. It is a jewel on the Orkney Island Council's social work department!"

Taking carers' views into account

There were no carers present at the time of our inspection.

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

We found the service's performance to be good in the areas covered by this quality statement.

We concluded this after we spoke with people using the service, carried out observations in all areas of the home, sampled personal support plans and associated documentation.

The good grade applies to performance characterised by important strengths which have a significant positive impact.

The service continued to have in place arrangements which allowed attenders and carers to participate in assessing the quality of care and support provided. It had a 'participation strategy' which outlined its commitment to involve its stakeholders in contributing suggestions to "enhance the quality of the service".

The service had comprehensive individual personal plans. These were reviewed regularly every six months when family members were invited to attend, as well as the attenders, and all were encouraged to contribute their views.

Each service user had a key worker who was involved in their review, as well as having regular contact with them during their time at the centre.

The service promoted regular discussion forums, led by the day centre staff, which provided feedback to the service.

There were quarterly discussion meetings between the service users and their key worker. The main purpose of these meetings was to gain feedback on the care and support provided.

A complaints book was kept by the service – there were no complaints received since the last inspection. There was also a suggestion box available in the dining room.

The colourful, twice yearly newsletter which was sent out always encouraged suggestions and ideas from the readers, as well as contributions towards the newsletter.

The service had devised a 'development action plan' for 2014 which identified a series of areas of development, how and by whom these were to be taken forward and within what timescales.

Taking all of the above into account we concluded that the provider had good arrangements in place to involve and include its stakeholders in contributing to the ongoing improvement of the service.

Areas for improvement

The provider had devised a day care agreement for each service user. It would benefit from being updated to more clearly specify how often each person's care and support was to be reviewed.

The provider should widen its stakeholder involvement to include a survey of its own staff and allied healthcare professionals. More open-style (rather than closed) questions would more usefully elicit responses from those contributing about ways in which the quality of care and support could be further developed. The provider needed to consider publically displaying 'you said, we did' type feedback posters to demonstrate the effectiveness of its service user engagement arrangements. **(See Recommendation 1)**

Grade awarded for this statement: 4 – Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The provider should widen its stakeholder involvement to include a survey of its own staff and allied healthcare professionals about ways in which the quality of care and support could be further developed.

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

We found the service's performance to be good in the areas covered by this quality statement. We concluded this after we spoke with people using the service, carried out observations, sampled personal support plans and examined relevant documentation.

The good grade applies to performance characterised by important strengths which have a significant positive impact.

We sampled six support plans for service users. We could see that reviews were held on a regular basis and staff ensured that any changes to the planned care were then transferred to the care plan. Where able, service users and relatives were encouraged to sign the support plans following the review.

Staff used communication books which they shared with family members of some service users so that they could be kept up to date with events at the centre and any relevant updates.

Various healthcare professionals were involved when needed such as GP's, community nurses and chiropody. There was a key worker system in place and regular meetings were held with these staff. Minutes were produced and when we looked at these, we could see that the outcome from these meetings directly linked to the development and updating of the support plans.

Within the Care Standards Questionnaires (CSQs) that were returned to us, all agreed that their needs and preferences were detailed in their personal plan.

The provider also had a 100% response from service users saying that the service checked with them regularly to ensure that their needs were being met.

100% of respondents indicated that, overall, they were happy with the quality of care the service provided.

Taking all of the above into account we concluded that the provider had good arrangements in place to ensure the health and wellbeing of service users.

Areas for improvement

We saw an excellent example of a life history within one of the personal support plans. This provided members of staff with a valuable insight into the service user's life story, their family details and their personal interests. We would encourage the service to continue to further develop the life histories of all the service users at the West Mainland Day Centre as a means of facilitating a closer understanding of their

individual circumstances and as a tool for reminiscence and other cognitive stimulation activities.

The personal support plans should, wherever possible, identify where service users have any unmet needs and use this as a means to plan future supports.

The daily recordings in service users' personal support plans would benefit from being further developed to detail more individualised outcomes rather than the current more-generalised and repetitive entries.

The provider needed to review the current limited risk assessment format within the personal support plans and put in place more comprehensive risk management assessments for each individual service user. **(See Recommendation 1)**

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The provider to review the current risk assessment format within the personal support plans and put in place more comprehensive risk management assessments for each individual service user.

National Care Standards, Support Services: Standard 10 - Feeling Safe and Secure.

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

The findings in this section are similar to those reported on in Quality Statement 1.1.

We found the service's performance to be good in the areas covered by this quality statement.

We concluded this after we spoke with people using the service, carried out observations in all areas of the home, sampled personal support plans and associated documentation.

The good grade applies to performance characterised by important strengths which have a significant positive impact.

Areas for improvement

The provider should widen its stakeholder involvement to include a survey of its own staff and allied healthcare professionals.

Stakeholders' views about ways in which the quality of the environment could be further developed should be sought and, where appropriate, action plans drawn up to implement improvements.

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

The service was performing to a good standard in respect of this quality statement.

We concluded this after we spoke with people using the service, carried out observations and examined relevant documentation.

The good grade applies to performance characterised by important strengths which have a significant positive impact.

The physical environment afforded a lot of space and scope for a wide variety of day care activities, including support with personal care. The premises were warm, well-maintained, pleasant and large enough to allow opportunities for group activities as well as space for privacy.

All visitors to the service had to sign a 'visitor's book' to evidence their comings and goings to the facility. This enabled members of staff to fully account for who was in the premises at any given time.

Staff had received training in the Vulnerable Adults Protection policy. They had also undertaken Food Hygiene training. The service had a Food Standards Agency 'pass' certificate.

All electrical equipment had been PAT tested in accordance with the local authority guidance. The service had risk assessments and management policies and procedures.

The service had a Control of Infection policy in place. The premises were clean, hygienic and free from offensive smells.

The service had an appropriate complaints policy & procedure in place. No complaints had been received by the service or the Care Inspectorate.

Appropriate up-to-date insurances - including employers and public liability protection, were in place to protect service users.

Contingency plans had been drawn up in the event of a major incident, poor weather conditions and transport difficulties.

Individual day care agreements had been put in place for each service user which highlighted the provider's commitment to ensure that their views regarding the service would be "actively sought, listened to and acted on where it was possible to do so".

Taking all of the above into account we concluded that the environment was safe and service users were protected.

Areas for improvement

Quality Statement 1.3 of this report raises a recommendation about the need for the provider to better devise individual risk assessments within each service user's personal support plan.

The provider needed to update the service's policies and procedures. We will report on this matter in Quality Statement 4.4 but would note here that outdated guidelines potentially impact on all aspects of the running of the service.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

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

The findings in this section are similar to those reported on in Quality Statement 1.1.

We found the service's performance to be good in the areas covered by this quality statement.

We concluded this after we spoke with people using the service, carried out observations in all areas of the home, sampled personal support plans and associated documentation.

The good grade applies to performance characterised by important strengths which have a significant positive impact.

Areas for improvement

The provider should widen its stakeholder involvement to include a survey of its own staff and allied healthcare professionals.

Stakeholders' views about ways in which the quality of the service's staffing could be further developed should be sought and, where appropriate, action plans drawn up to implement improvements.

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

The service was performing to a good standard in respect of this quality statement.

We concluded this after we spoke with people using the service, carried out observations and examined relevant documentation.

The good grade applies to performance characterised by important strengths which have a significant positive impact.

During the inspection we experienced a friendly and welcoming atmosphere at the West Mainland Day Centre. Staff spoke with service users in a caring and supportive manner. The service users that we spoke with were very happy with all of the staff team.

We observed staff provide support in a respectful, discreet and sensitive manner.

We spoke privately with four members of staff. They described a service committed to deliver quality care. The following comments were offered:

"I think it's a fantastic place to work. Absolutely love it."

"Very good teamwork."

"Morale is very good."

"I have no concerns - we are talking all the time [to deal with any issue]."

Training sessions had continued to be held, covering mandatory as well as complimentary training. Over the past year training had included such areas as:

- * Dementia
- * Grieving & Loss
- * Vulnerable Adults
- * Reablement training

Two out of the four members of staff have achieved SVQ level three and one member of staff has SVQ level three and an HNC in social care.

New staff took part in a planned induction process and this then fed into their professional development plans.

Meetings were held for staff and during these meetings care and support issues were discussed. Staff told us that they found these meetings helpful and that they knew where to look for the minutes, if they were unable to attend. Staff said that management were approachable - their "door was always open", and dealt with issues promptly.

Service users spoke highly about all members of staff. They told us that staff were kind and helpful. We observed positive interactions between staff and service users. It was clear that they had a very good rapport with one another.

Taking all of the above into account we concluded that the quality of the service's staffing was good. We found a motivated workforce which operates to National Care Standards who were aware of their obligations with the Scottish Social Services Council (SSSC).

Areas for improvement

The provider should continue to identify areas for improvement and implement action plans to address these.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 3 - Adequate

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 findings in this section are similar to those reported on in Quality Statement 1.1.

We found the service's performance to be good in the areas covered by this quality statement.

We concluded this after we spoke with people using the service, carried out observations in all areas of the home, sampled personal support plans and associated documentation.

The good grade applies to performance characterised by important strengths which have a significant positive impact.

Areas for improvement

The provider should widen its stakeholder involvement to include a survey of its own staff and allied healthcare professionals.

Stakeholders' views about ways in which the quality of the service's management and leadership could be further developed should be sought and, where appropriate, action plans drawn up to implement improvements.

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

We found the service's performance was adequate in the areas covered by this quality statement.

We concluded this after we spoke with people using the service, carried out observations during the inspection and sampled relevant documentation.

The adequate grade represents a standard where the strengths have a positive impact on the experience of service users.

There was a positive approach to development in the service. Staff did what they could to try to improve the experiences for the service users and their relatives.

We saw examples of ways in which the service engaged with its various stakeholders, inviting their views to improve the quality of the services provided.

Routine arrangements were in place to ensure personal care plans were kept up-to-date and subject to regular review.

Similarly practices to support staff included staff supervision, staff appraisal, induction and ongoing access to training and development.

All seven respondents to the Care Inspectorate's Care Standards Questionnaires (CSQs) confirmed that, overall, they were happy with the quality of the service provided.

Taking all of the above into account we concluded that the service was performing to an adequate standard.

Areas for improvement

The service had a range of policies and procedures, some of which were accessible through the provider's internal IT systems. However we noted that many of the policies and procedures that we requested to examine (in the office manual) were out of date - and in some cases had not been reviewed for some years. The provider needed to make sure that the reference materials that staff routinely accessed were kept up to date and reflected the current practices of the service.

The provider needs to put in place a quality assurance framework - proportionate to the work of the service - which routinely evaluated and audited the practices of the West Mainland Day Centre. The quality assurance framework will be expected to be rigorous in identifying any areas for improvement and implementing actions plans to address these. **(See Recommendation 1)**

The service's own self assessments had identified the need to develop a quality assurance tool and to introduce care plan audits.

Grade awarded for this statement: 3 - Adequate

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The provider to put in place a quality assurance framework which routinely evaluates and audits the practices of the service. The quality assurance framework will be expected to be rigorous in identifying any areas for improvement and implementing actions plans to address these.

National Care Standards, Support Services: Standard 2 - Management and Staffing Arrangements.

4 Other information

Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

Enforcements

We have taken no enforcement action against this care service since the last inspection.

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 the Care Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme being re-graded as unsatisfactory (1).

5 Summary of grades

Quality of Care and Support - 4 - Good	
Statement 1	4 - Good
Statement 3	4 - 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	4 - Good
Quality of Management and Leadership - 3 - Adequate	
Statement 1	4 - Good
Statement 4	3 - Adequate

6 Inspection and grading history

Date	Type	Gradings	
8 Nov 2011	Unannounced	Care and support	5 - Very Good
		Environment	5 - Very Good
		Staffing	Not Assessed
		Management and Leadership	Not Assessed
1 Jul 2010	Announced	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	Not Assessed
		Management and Leadership	4 - Good
8 Jul 2009	Announced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and Leadership	3 - Adequate

Inspection report continued

6 May 2008	Announced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and Leadership 3 - Adequate

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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