

# Care service inspection report

Full inspection

## Hansel Cabin Respite Service Care Home Service

Hansel Village  
Broad Meadows  
Symington  
Kilmarnock



HAPPY TO TRANSLATE

Service provided by: Hansel Alliance

Service provider number: SP2003000261

Care service number: CS2003001302

Inspection Visit Type: Unannounced

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and set out improvements that must be made. We also investigate complaints about care services and take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

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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	5	Very Good
Quality of environment		N/A
Quality of staffing	5	Very Good
Quality of management and leadership		N/A

### What the service does well

The people who use the service and the families that we met during the inspection said that Hansel Cabin Respite was a very good service and that staff were caring and friendly.

During the inspection we observed staff to promote independence and encourage the people being supported to make choices.

### What the service could do better

The service manager and staff must be aware of the Care Inspectorate Notification Guidance and submit information to the Care Inspectorate as required.

The service provider should ensure that all staff receive supervision in order to feel supported in their work.

The service manager should ensure that support plans of those people who have Adults with Incapacity and/or Guardianship in place contain copies of these certificates or documentation to guide staff.

### **What the service has done since the last inspection**

Hansel Cabin Respite Service has continued to work well with the people they support and their family members. The service provided continues to be highly valued by those we consulted with.

### **Conclusion**

We have concluded from our findings that Hansel Cabin Respite Service is highly thought of by those people supported and their families. It continues to deliver a very good quality of care and support by a consistent staff team. The staff team are skilled and experienced and display a good knowledge of people's needs and wishes.

# 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](http://www.careinspectorate.com).

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

Hansel's The Cabin Respite Service is a dedicated unit with seven single rooms, one bedroom has an en-suite toilet and one bedroom has an en-suite toilet and shower.

The Cabin has a large dining kitchen and sitting/TV room. These were seen to be clean, homely and well furnished. There is an easily accessible garden.

The service has two caravans at Craig Tara holiday park that are used from March to November.

## Recommendations

A recommendation is a statement that sets out actions that a care service provider should take to improve or develop the quality of the service, but where failure to do so would not directly result in enforcement.

Recommendations are based on the National Care Standards, SSSC codes of practice and recognised good practice. These must also be outcomes-based and if the provider meets the recommendation this would improve outcomes for people receiving the service.

## Requirements

A requirement is a statement which sets out what a care service must do to improve outcomes for people who use services and must be linked to a breach in the Public Services Reform (Scotland) Act 2010 (the "Act"), its regulations, or orders made under the Act, or a condition of registration. Requirements are enforceable in law.

We make requirements where (a) there is evidence of poor outcomes for people

using the service or (b) there is the potential for poor outcomes which would affect people's health, safety or welfare.

Based on the findings of this inspection this service has been awarded the following grades:

**Quality of care and support - Grade 5 - Very Good**

**Quality of environment - N/A**

**Quality of staffing - Grade 5 - Very Good**

**Quality of management and leadership - N/A**

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](http://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.

The inspection was carried out by one Care Inspectorate Inspector.

The inspection took place on Monday 13 June 2016 between 10am and 4.30pm and Tuesday 14 June 2016 between 10.30am and 5.15pm. We gave feedback to the registered manager on Tuesday 14 June 2016.

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 fifteen care standards questionnaires to the manager to distribute to service users. Eight service users and or carers sent us completed questionnaires.

We also asked the manager to give out ten questionnaires to staff and we received six completed questionnaires. During this inspection process, we gathered evidence from various sources, including the following:

We spoke with:

- The registered manager
- One assistant manager
- One coordinator
- Operations lead manager
- Learning and development coordinator
- Seven support staff
- Six service users
- Six family members.

We looked at:

- The services policies and procedures relevant to the quality statements examined at this inspection.
- Registration and insurance certificates.
- Individual support plans and risk assessments of people who used the service.
- Charter of involvement.
- Information on the 'wish tree'.
- The Cabin newsletter.
- Monday meeting minutes.
- Medication system and records.
- Complaints system and records.
- Accident and incident system and records.
- Financial system and records.
- Minutes of staff meetings.
- 'working together' personal outcomes framework.
- Repairs log and maintenance records.
- Quality assurance systems, reports and audits.

The service used the term 'visitor' rather than service user to refer to the people who accessed the respite service. We will use this throughout the report.

During the inspection we observed interactions between staff and visitors within the Cabin at Hansel Village. We also visited the short breaks caravans at Craig Tara Holiday Park in Ayr. We observed staff supporting visitors; this enabled us to see how staff supported visitor depending on the level of support they required.

### **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.firescotland.gov.uk](http://www.firescotland.gov.uk)

## 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 fully completed self assessment document from the provider. We were satisfied with the way the provider had completed this and with the relevant information included for each heading that we grade services under.

## Taking the views of people using the care service into account

During the inspection people told us:

- 'Staff help me with my money and I have a key for my room to keep things safe'.
- 'Staff are all very kind to me'.
- 'My parents get a holiday planner home with me. We talk about what I have done on holiday'.
- 'I feel very respected as an individual, my life is awesome'.
- 'I can talk to any member of staff at the Cabin, I feel safe talking to a member of staff'.
- 'The staff are very kind and helpful'.
- 'The Cabin is awesome'.

## Taking carers' views into account

During the inspection carers told us:

- 'My son is very happy to go to Hansel Cabin for his holiday and looks forward to going several times per year'.

- 'All staff who work with my son are definitely aware of his needs. I was involved initially in telling the staff what he likes to do, a varied programme is now followed'.
- 'Management and staff at Hansel Cabin are very approachable and always listen to any suggestions that I think would be better followed to make the visit go smoothly'.
- 'If I was unhappy staff would be more than happy to be approached and help to sort any problems out'.
- 'Good programme of activities and events for short stay visitors'.

## 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: 5 - Very Good

#### 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

At this inspection, we found that the performance of the service was very good for this statement. We concluded this after we spoke with visitors, carers and staff, observed practice and examined a range of relevant documentation.

During the inspection we looked at the 'Working Together' Personal Outcomes Framework 2016. This highlighted how people supported would be involved and how they could influence planning and decision-making. One of the quality life themes was 'My Control and Choices'. This focused on people being able to speak up and be heard and being able to learn the skills needed to control and make choices.

At the last inspection we looked at the Cabins new 'wishing tree' which was in the main corridor of the building. Visitors and families made a wish on a piece of card and placed these on the tree. At this inspection we were able to look at the wishes made and the outcomes of these included:

- Choosing the same room for return respite visits.
- Requests made for Wi Fi within the Cabin.
- New items of furniture to improve the environment within the Cabin.

We found visitors to the Cabin and Craig Tara were encouraged and supported to make choices before and during their respite stay. During the inspection we saw examples of this through the 'Welcome to the Cabin' booklet which

enabled visitors to make personal choices and preferences regarding activities and what they wished to achieve during their respite visit. Attending group meetings on a Monday evening enabled visitors to plan group activities and plan a weekly meal menu. This gave everyone the opportunity to voice their opinion.

During the inspection people we spoke with told us:

- 'I choose to come here on holiday'.
- 'We have visitors meetings and choose where we go daily'.
- 'We have a 'wish tree' and can make decisions during the week we are here'.
- 'I chose to come here because I feel very comfortable and safe with the staff. We have a great range of choices that we can make during our holiday'.
- 'We get the choice to choose the activities we want to do'.

The service had a complaints procedure which encouraged anyone who was feeling unsatisfied about any parts of the service being provided to express their concern. Most people we spoke with told us they knew how to make a complaint. Some visitors told us they would ask a staff member to help them do this.

Throughout the inspection we saw that staff promoted independence and choice in all areas.

### Areas for improvement

The service provider should continue to monitor and maintain the very good support people receive to enable them to make individual choices and achieve their potential. The provider should ensure it is rigorous in identifying any areas for improvement and implementing action plans to address these.

### Grade

5 - Very Good

**Number of requirements - 0**

**Number of recommendations - 0**

### Statement 3

“We ensure that service users' health and wellbeing needs are met.”

#### Service Strengths

At this inspection, we found that the performance of the service was very good for this statement. We concluded this after we spoke with visitors, carers and staff, observed practice and examined a range of relevant documentation.

We looked at a sample of support plans for people who accessed respite: we found these to contain the aims and outcomes for the current period of respite. Prior to a respite stay, staff contacted the visitor and or family member to find out if there were any changes or updated information required to be included within the support plan. Staff also requested an update on general health and any medication changes. We saw that staff recorded how the visitor has spent their time during their stay and this information was then shared with family members after the break.

We found support plans to be completed to a good standard and provided information and risk assessments which enabled staff members to provide an appropriate level of support to visitors. We were told that visitors were registered at the local GP Surgery on a temporary basis which allowed them to access the district nurse or GP during their stay. The Cabin worked closely with other health professionals as required. This ensured that health and wellbeing needs were closely monitored and visitors were supported to maintain good health.

During the inspection one carer told us:

- 'Best way to describe Hansel Cabin Respite Service is a 'home from home'. Staff know my son extremely well and I am happy and confident to leave him there knowing he is going to be well looked after'.

We looked at a sample of the providers operational guidance and noted that there were detailed policies and procedures in relation to:

- Management of medication

- Infection control
- Adult support and protection

The provider had in place a Support and Protection from Abuse Statement. This included Adult Support and Protection guidance for staff. Staff were further supported in this area by attending training on Protection of Vulnerable Adults. In discussion with staff we felt they were aware of their responsibilities in relation to adult protection.

The provision of very good support meant that visitors were supported to have a full and active time during their respite stay. We felt confident that members were supported to engage within the community, meet new people and maintain contact with friends they had made during previous respite stays. From observation and speaking with staff we thought there was a good staff team and staff clearly enjoyed their work and doing the best they could for those being supported. This resulted in positive health and wellbeing outcomes for visitors.

### **Areas for improvement**

During the inspection we looked at the Cabins accident and incident records, we noted that most of the entries reported were falls or injuries sustained from falls. During feedback we signposted the manager to the Care Inspectorates Hub and resource tool for Managing Falls and Fractures in Care Homes for Older People.

As mentioned above, we looked at a sample of support plans, these did not contain any information in relation to Adults with Incapacity or who had Welfare Guardianship in place: As a result, staff had no clear indication of who had been given powers to make decisions for visitors who were unable to do this for themselves (see Recommendation 1).

## Grade

5 - Very Good

**Number of requirements - 0**

## Recommendations

**Number of recommendations - 1**

1. The service provider should ensure that support plans contain copies of Adult with Incapacity certificates and information on Welfare Guardianship for visitors covered by this legislation.

National Care Standards, Care at Home, Standard 3 - Your Personal Plan



## Quality Theme 2: Quality of Environment

Quality theme not assessed

## Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 5 - Very Good

### Statement 3

“We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.”

### Service Strengths

To assess this statement, we observed staff practice and interactions with visitors. We looked at recruitment and staff induction procedures, staff training and spoke with staff, carers and visitors. We found that the service was demonstrating very good practice in the areas covered by this quality statement.

Through discussions with staff we found that the service adopted a safer recruitment process. Staff were only employed once all relevant employment checks and references has been received to a satisfactory standard.

Staff completed an in-depth Central Induction Programme when they commenced with Hansel. This included topics such as Core Values, Supporting Challenging Behaviours and Adult Support and Protection. New staff members also completed additional training depending on the needs of those people they were supporting. For example, epilepsy training and administration of Buccal Midazolam. New staff worked alongside experienced staff which helped to build their confidence in the role and ensure their skills and knowledge levels were sufficient to work within the service.

Hansel had a learning and development team who were responsible for overseeing staff training. The staff team were invited to attend Continuous Professional development Training every three years to keep practice up to date. This helped to ensure that support was delivered in a safe way by appropriately trained staff.

Staff applied for places on Hansel's Further Education Programme which included completing Scottish Vocational Qualification (SVQ) so all staff had the opportunity to gain the necessary qualifications required to register with the Scottish Social Services Council (SSSC).

From the staff questionnaires returned and speaking with the staff team during the inspection, most staff told us that they felt they had adequate training, the right skills and knowledge to support people effectively.

### Areas for improvement

As part of the inspection we looked at the service notification history, we found that not all information had been passed to the Care Inspectorate as required within the requested timescale. During feedback we referred the manager to Care Inspectorate Guidance on Notification Reporting.

### Grade

5 - Very 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

At this inspection, we found that the performance of the service was very good for this statement. We concluded this after we spoke with visitors, carers and staff, observed practice and examined a range of relevant documentation.

The Cabin had a number of policies and procedures in place which aimed to support an ethos of respect. These included Equality and Diversity and Whistle Blowing. Each member of staff had access to a copy of the Scottish Social Services Council (SSSC) code of conduct for social care staff and the National Care Standards.

Staff told us they felt supported in their work through team meetings, supervision and training. Staff we spoke to said they were happy to ask for further support and use the 'open door' policy. Staff could discuss areas of concern in confidence when required.

Staff attended regular staff meetings, advanced notice was given and staff were encouraged to contribute to the agenda for discussion. Minutes of staff meetings evidenced issues discussed and any actions taken. Staff unable to attend the meetings were required to read and sign the minutes.

Visitors and staff success was celebrated, we seen this through newsletters and notice boards which contained and displayed events and photographs, recognising achievements within the service.

We observed positive working relationships and a relaxed rapport between people who used the service and staff within the Cabin and caravans at Craig Tara. The staff we spoke with told us they felt morale within the service was good. From speaking with staff and observations we thought there was a good staff team. Relatives we spoke with thought the staff team were helpful and

provided the best support they could. We found the staff to demonstrate a good standard of respect towards visitors and each other.

### **Areas for improvement**

During the inspection we looked at Hansel's Performance Management Policy and Procedure, this did not include staff supervision guidance. We found no record that staff received regular formal supervision. When we spoke with staff we were able to confirm that supervision sessions were not taking place for all staff. This meant staff did not have the opportunity to meet with a senior member of staff routinely to discuss their work practice along with any issues or concerns. Staff supervision should also be used to evaluate training attended and what had been learned and also to review and evaluate staff competencies (see Recommendation 1).

### **Grade**

5 - Very Good

**Number of requirements - 0**

### **Recommendations**

**Number of recommendations - 1**

1. Regular staff supervision should be carried out and the frequency of this should be detailed within the providers own policy and procedure.  
National Care Standard, Care at Home, Standard 4 - Management and Staffing.

## Quality Theme 4: Quality of Management and Leadership

Quality theme not assessed

### 4 What the service has done to meet any requirements we made at our last inspection

#### Previous requirements

There are no outstanding requirements.

### 5 What the service has done to meet any recommendations we made at our last inspection

#### Previous recommendations

There are no outstanding recommendations.

## 6 Complaints

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

## 7 Enforcements

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

## 8 Additional Information

There is no additional information.

## 9 Inspection and grading history

Date	Type	Gradings	
5 Jun 2015	Unannounced	Care and support	5 - Very Good
		Environment	5 - Very Good
		Staffing	5 - Very Good
		Management and Leadership	5 - Very Good
27 Oct 2014	Unannounced	Care and support	6 - Excellent
		Environment	5 - Very Good
		Staffing	5 - Very Good
		Management and Leadership	5 - Very Good
6 Nov 2013	Unannounced	Care and support	5 - Very Good
		Environment	5 - Very Good
		Staffing	5 - Very Good
		Management and Leadership	5 - Very Good
4 Sep 2012	Unannounced	Care and support	5 - Very Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and Leadership	5 - Very Good
16 Nov 2010	Unannounced	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	Not Assessed
		Management and Leadership	Not Assessed
21 Jun 2010	Announced	Care and support	5 - Very Good
		Environment	5 - Very Good
		Staffing	Not Assessed
		Management and Leadership	Not Assessed

2 Mar 2010	Unannounced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed 5 - Very Good Not Assessed
29 May 2009	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed 5 - Very Good Not Assessed
19 Mar 2009		Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed Not Assessed 4 - Good
19 Dec 2008	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good 5 - Very Good 5 - Very Good 4 - Good



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