

Hepburn Court, West Lodge Care Home Service

Blair Avenue
Glenrothes
KY7 4RT

Telephone: 01592 562600

Type of inspection: Unannounced
Inspection completed on: 26 January 2017

Service provided by:
Leonard Cheshire Disability

Service provider number:
SP2003001547

Care service number:
CS2003037897

About the service

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.

Hepburn Court, West Lodge is contained within the Glamis House complex. It is a residential service offering 24 hour care for up to 12 people with a physical and/or sensory disability or a learning disability.

Hepburn Court, West Lodge are two well-appointed, purpose-built premises with their own entrance points and there is opportunity for staff and residents to meet with others, if desired. Both houses are located in pleasant, landscaped grounds and gardens.

Accommodation is provided in spacious single rooms with en-suite facilities, including a shower. Suitable equipment to assist with moving and handling is installed. There is a spacious sitting/dining room with access to a patio and sheltered grounds. The houses have their own small kitchen area, sluice and laundry. Each house has a spacious bathroom and toilet.

What people told us

During this inspection we asked some people to tell us what they thought about the care and support and the service in general. We also received some feedback through care standard questionnaires that people completed prior to our inspection.

Some of the comments we received were;

'Staff don't listen to me - too busy, busy,busy'

'Some of the staff are friendly and talk to me.'

'I feel safe and secure with certain staff members and not so much with others.'

'In general staff treat me well, but again some staff are more considerate than others.'

'New staff bring enthusiasm and new ideas however these are not always welcomed by existing staff or management.'

'I am happy with my support plan.'

'I have my own room and can make changes to the furnishings and decorations if I desire.'

'I am comfortable in my surroundings.'

'I am well looked after by staff.'

'I feel safe.'

'I'm not sure how much social time is given most of the interactions seem procedural.'

'I am very happy with the service - couldn't ask for better.'

'I have regular contact with the staff and the manager - I have no concerns.'

Some people also told us what they thought would help to improve the service;

'Managers presence on some of the evening/night/weekend shifts.'

'Tighter monitoring of procedures.'

'More dynamic/enthusiastic staff who feel valued.'

'In house and activity opportunities.'

'New bathrooms - waited along time.'
'Improved access to and use of the garden.'

We discussed these comments with the manager and we saw how areas for improvement were being addressed.

Self assessment

The Care Inspectorate received a self assessment from the service prior to this inspection. The assessment highlighted areas of strength and areas where the Provider thought they could develop and improve the service.

From this inspection we graded this service as:

Quality of care and support	5 - Very Good
Quality of environment	not assessed
Quality of staffing	not assessed
Quality of management and leadership	5 - Very Good

What the service does well

During this inspection we considered evidence presented in relation to quality theme 1 - the quality of care and support and quality theme 4 - the quality of management and leadership. Overall we evaluated the service as very good.

Some of the evidence to support this included;

Care and support plans included detailed information about the care that had been agreed with people. There were clear links to guidance and advice from other professionals and reports and protocols were easily found within files. The staff we spoke to appeared confident about their roles and demonstrated a good knowledge of the information within plans. Minutes of regular review meetings described how family and other stakeholders were involved and how changes were agreed and what action was taken.

We saw that people's views and preferences were reflected in plans and one person confirmed that they had been fully involved in the planning and review of their support.

Recordings within support files demonstrated that a range of professionals were regularly consulted which helped to ensure that care and support was flexible to meet the needs of the person. Medication had been regularly reviewed by the prescribing doctor and medication administration records were fully completed and in good order.

We saw a range of tools that were consistently used to inform quality assurance processes. The range of audits and checks helped to identify areas for development and improvement which were followed up at the next audit or check. For example, monthly health and safety checks and medication audits. A monthly quality check was also completed to help review the quality of care and support plans and to highlight where improvements could be made.

Staff were supported through regular supervision and appraisals. Team meetings were held regularly and well attended. We saw that feedback from people who used the service, their families and other stakeholders was discussed with staff which demonstrated how people's views helped to develop and improve the service. Staff we spoke to described feeling supported and that the manager encouraged them to develop skills and confidence whilst ensuring they had the support to do so.

What the service could do better

We discussed that it would be beneficial for all staff to update their understanding in order to enhance their awareness of their responsibilities in keeping people safe from harm. We suggested having adult support and protection as a standing agenda item at team meetings. This would help to encourage staff to discuss different scenarios which may constitute harm and to explore their role in preventing and reporting any concerns. At our last inspection we suggested that staff would benefit from some awareness training around tissue viability. This remained outstanding at this inspection and the manager was discussing how this could be addressed with the nurse based in the service.

During this inspection we saw a protocol for the administration of midazolam which was dated as produced in 2011. Although we could see that there was regular consultation with epilepsy specialists, it was not clear that the protocol had been reviewed. This particular protocol was also confusing when referring to the instruction on medication administration records. The manager was addressing this during our inspection.

Support plans could be further improved by ensuring that there was clear information about any legal orders that were in place. It would be good practice for staff to know what powers had been granted to legal guardians or power of attorneys and how this impacts on the planning and reviewing of care and support. Further advice is available in the Mental Welfare Commission publication 'Working with the Adults with Incapacity (Scotland) Act'.

The manager should establish a clearer method of recording how staff support people whose behaviour is perceived as challenging. This could help to evaluate what was working well, what wasn't and also to detect any changes that may require further input from other professionals.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Inspection and grading history

Date	Type	Gradings	
22 Sep 2015	Unannounced	Care and support	4 - Good
		Environment	5 - Very good
		Staffing	4 - Good
		Management and leadership	4 - Good
12 Nov 2014	Unannounced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
26 Nov 2013	Unannounced	Care and support	4 - Good
		Environment	5 - Very good
		Staffing	4 - Good
		Management and leadership	5 - Very good
26 Mar 2013	Unannounced	Care and support	4 - Good
		Environment	5 - Very good
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
4 Oct 2011	Unannounced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	4 - Good
16 Nov 2010	Unannounced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
23 Jun 2010	Announced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	Not assessed
6 Jan 2010	Unannounced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	5 - Very good

Date	Type	Gradings	
		Management and leadership	Not assessed
22 Jun 2009	Announced	Care and support Environment Staffing Management and leadership	5 - Very good 5 - Very good 5 - Very good 5 - Very good
26 Mar 2009	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 4 - Good
24 Jun 2008	Announced	Care and support Environment Staffing Management and leadership	4 - Good 5 - Very good 4 - Good 4 - Good

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