

# Care service inspection report

Full inspection

**with YOU Pleasance Day Centre  
Support Service**

7 West Adam Street  
Edinburgh

Service provided by: with YOU

Service provider number: SP2004005200

Care service number: CS2003055527

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          | 6 | Excellent |
| Quality of environment               | 6 | Excellent |
| Quality of staffing                  | 6 | Excellent |
| Quality of management and leadership | 6 | Excellent |

## What the service does well

The service provides a high level of support and guidance to people who attend the centre. The staff demonstrated by the way they worked that they know the service users very well and we could see that relationships between staff and service users were informal but respectful.

## What the service could do better

The service has continued to seek the views of service users in order to identify areas where improvements might be made. This included current consultations about the way meals are provided in the centre.

The service was taking forward plans to create 'Life Stories' for service users who wished to take part.

The manager also stated that they wish to recruit volunteers to add to the support level.

## What the service has done since the last inspection

The service has developed new support plans which addressed not only current support needs, but also goals and aspirations that service users may have.

There had been a development day where service users and staff met to discuss how the service was working and to ask for suggestions and opinions. There had been some cross-generation work between the service and a service for young people, where service users met to swap skills and knowledge.

### Conclusion

The service was continuing to provide an excellent level of support and was continually re-examining whether or not it was meeting the needs of the people who attend.

# 1 About the service we inspected

The Pleasance Day Centre, run by Places for People Scotland Care and Support Ltd, is a support service for older people which provides support within a Day Centre for up to 12 older people at each session. The service is currently available on Wednesdays, Thursdays and Fridays between 9:00am and 5:00pm.

The Day Centre is situated in the old town of Edinburgh, close to several bus routes as well as local shops and amenities. The premises are comprised of a lounge, dining area, quiet room, kitchen, toilet facilities and an office. Transport to and from the centre is provided where necessary, either by taxi or in the service's passenger vehicle.

The service's Aims and Objectives statement notes that it aims "to provide a person centred approach to support whilst encouraging a sense of achievement, self worth and independence for service users".

Before 1 April 2011 this service was registered with the Care Commission. On this date the new scrutiny body Social Care and Social Work Improvement Scotland (known as the Care Inspectorate) took over the work of the Care Commission, including the registration of care services. This means that from 1 April 2011 this service continued its registration under the new body the Care Inspectorate.

## 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 6 - Excellent**

**Quality of environment - Grade 6 - Excellent**

**Quality of staffing - Grade 6 - Excellent**

**Quality of management and leadership - Grade 6 - Excellent**

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 after an unannounced inspection that took place 5 June 2015. As requested, the care service sent us an annual return. The service also sent us a self assessment form.

In this inspection we gathered evidence from various sources, including the relevant sections of policies, procedures, records and other documents including:

- \*The service's participation strategy
- \*Evidence from the service's most recent self assessment
- \*Support plans of people who use the service
- \*Activity choices sheets
- \*Minutes of service user meetings
- \*Responses to a service user survey

We also spoke with the manager, staff on duty and service users who were in the service on the day of the visit.

We spent some time observing staff working with service users and inspected the premises.

### 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.

We received a fully completed self assessment document from the service provider. We were satisfied with the way the service provider had completed this and with the relevant information they had given us for each of the headings that we grade them under. The service provider identified what they thought they did well, some areas for development and any changes they planned.

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

We spoke to a number of people using the service. Everyone confirmed that they enjoyed attending the centre and felt that they could make their views known and have a say about the service received. Very positive comments were made about the staff and about the value of attending the day centre.

## Taking carers' views into account

We did not meet any carers during this 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: 6 - Excellent

##### 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 that the service was demonstrating excellent practice in areas covered by this quality statement.

We saw minutes of meetings which showed that service users were consulted and kept informed about the service. The service users we spoke with said that they were comfortable to raise issues and make suggestions to the manager or any of the staff members. We saw that this happened during the inspection.

We could see that suggestions from service users and any family carers who were involved, were taken seriously and acted on. This included the type of activities that were being arranged and the quality of the food provision.

The service held a development day in 2014 when service users and staff met together to take part in reviewing the past year and planning for the next year.

We saw from service users' support plans that they had personal choice around their routine when they attended the centre including activities, meals and transport options.

We concluded from observation, records and speaking with service users that people attending the centre were receiving a service which met their individual needs and wishes.

We could see that support plans were reviewed regularly and we saw that people had the opportunity to influence the service they received and agree their own personal goals.

The centre used regular surveys to collect opinions about the service and created action plans to address any issues raised.

### Areas for improvement

The manager and staff were continuing to look for different ways that service users and their carers could be involved in planning how the centre operates.

### Grade

6 - Excellent

**Number of requirements - 0**

**Number of recommendations - 0**

### Statement 3

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

### Service Strengths

We found that the service was demonstrating excellent practice in areas covered by this quality statement.

Service users had support plans which set out the type of support they had requested and how it was to be provided. The support plans set goals and which were discussed with the person and respected their choices and individuality. Support plans were being created in a way that reflected not only current support needs, but also goals and aspirations that each person may have.

We saw that there was an emphasis on promoting physical as well as emotional wellbeing and quality of life.

The service provided information about advocacy services in the area, and staff in the centre also assisted service users to arrange appointments with medical services and Social Work when required.

We could see that the service users had a high level of trust with staff in the centre and were happy to share information about their lives and things they felt they needed help with.

Activities in the centre promoted healthy living. these included exercise sessions, healthy meals and snacks and advice about how people could continue these at home.

The centre had started to use technology as part of promoting healthy lives. The use of physical and seated computer games was helping service users with mobility and concentration.

We saw from support plans that staff were monitoring people's health and were taking appropriate action if there were concerns.

The service offered help to plan medical or Social Work appointments and some of these had taken place within the centre.

### Areas for improvement

The manager told us that the current meals provision was being assessed and may be changed. We will follow this up at the next inspection.

### Grade

6 - Excellent

**Number of requirements - 0**

**Number of recommendations - 0**

## Quality Theme 2: Quality of Environment

Grade awarded for this theme: 6 - Excellent

### Statement 1

"We ensure that service users and carers participate in assessing and improving the quality of the environment within the service."

#### Service Strengths

See Quality Theme 1, Quality Statement 1 for methods used by Pleasance Day Centre to involve service users and carers in assessing and improving all aspects of the service, including the environment.

#### Areas for improvement

Areas for improvement under Quality Theme 1 Quality Statement 1 also apply to this Quality Statement.

#### Grade

6 - Excellent

**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

We found that the service was demonstrating excellent practice in areas covered by this quality statement.

The premises were clean and well maintained. Staff carried out regular checks of the environment to ensure it was safe for service users. This included regular servicing of equipment and electrical appliances.

Cleaning materials were securely stored and staff were knowledgeable about the regulations covering the safe storage of chemicals.

Staff had mandatory training in first aid, moving and positioning, food hygiene and Adult Support and Protection.

There were appropriate risk assessments in place for all health and safety concerns.

The service had aids and adaptations for service users who needed them. These included alarm systems in toilet areas, and toilet doors had been refitted to open outwards to allow easier access by staff in emergency situations.

Food hygiene systems were in place, including temperature checks of food on delivery and before serving. Staff had appropriate training about methods to minimise the risk of spreading infection and the necessary equipment was in place.

The centre had a specially adapted people carrier for collecting service users and returning them home. Staff responsible for driving the transport were MIDAS trained. This is a nationally recognised standard of training for minibus drivers. There were always two staff members in the vehicle when people were being collected or dropped off.

### Areas for improvement

Following two recent minor lapses in storage of washing powder and food in the fridge, the manager told us he was carrying out regular updates with staff about these matters. We were satisfied that there were robust systems in place to monitor these.

### Grade

6 - Excellent

**Number of requirements - 0**

**Number of recommendations - 0**

## Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 6 - Excellent

### Statement 1

"We ensure that service users and carers participate in assessing and improving the quality of staffing in the service."

#### Service Strengths

See Quality Theme 1, Quality Statement 1 for methods used by Pleasance Day Centre to involve service users and carers in assessing and improving all aspects of the service, including the staffing.

#### Areas for improvement

Areas for improvement under Quality Theme 1 Quality Statement 1 also apply to this Quality Statement.

#### Grade

6 - Excellent

**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

We found that the service was demonstrating excellent practice in areas covered by this quality statement.

There was a full range of policies and procedures for the safe recruitment and continuing support for staff. These included an extensive programme of planned training for staff.

The service provider demonstrated that they had a high level of commitment to ensuring that staff were trained to the appropriate level to meet both registration requirements and to provide a high quality of care to service users. The organisation had systems to recognise excellent work by staff members, including awarding excellent practice and holding an award ceremony for staff achieving SVQ qualifications.

There was a range of mandatory and optional training opportunities for all staff including dementia awareness, first aid, food hygiene and moving and positioning. All staff were required to attend training about the quality of service and professionalism. The service provider stated that they wanted staff to be ambassadors for the company and its' aims and objectives. Staff received regular supervision and appraisal and individual records were kept which reflected the training needs that were identified through these discussions.

The staff we spoke with confirmed that they had access to training and were knowledgeable about the policies and procedures operating in the service. We observed staff working with service users and saw that they clearly had extensive knowledge of their support needs.

We found that there were regular staff team meetings and the minutes showed that staff were consulted about the future direction of the service.

All the staff we spoke with were enthusiastic about their work, and we found a number of examples where staff had demonstrated a high level of commitment by providing support outwith the usual remit and normal working hours of the service.

### Areas for improvement

The manager stated that there was a continuing commitment to developing staff skills.

### Grade

6 – Excellent

**Number of requirements – 0**

**Number of recommendations – 0**



## Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 6 - Excellent

### 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

See Quality Theme 1, Quality Statement 1 for methods used by Pleasance Day Centre to involve service users and carers in assessing and improving all aspects of the service, including the management and leadership.

#### Areas for improvement

Areas for improvement under Quality Theme 1 Quality Statement 1 also apply to this Quality Statement.

#### Grade

6 - Excellent

**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 that the service was demonstrating excellent practice in areas covered by this quality statement.

The service provider carried out regular, internal Quality Assurance audits and developed action plans from the outcomes of each assessment. All staff were

involved in discussing the reports and were expected to help maintain high standards of service.

The organisation was creating an Older People's forum which will be chaired by someone who uses one of their services. This is expected to help assess the quality of care provided to older people in all of the organisation's services.

The service used regular surveys and individual meetings and group meetings with service users to gather the views of people using the day centre.

In 2014, the organisation received re-accreditation in Customer Service Excellence. This is an external assessment which demonstrates the achievement of a 'national standard for excellence in customer care'. The assessment involved service users, staff and external agencies.

### **Areas for improvement**

The service should continue with the excellent practice in this area.

## Grade

6 - Excellent

Number of requirements - 0

Number of recommendations - 0

## 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

1. There were no requirements or recommendations made after the last inspection

This recommendation was made on

## 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

## 9 Inspection and grading history

| Date        | Type        | Gradings                  |               |
|-------------|-------------|---------------------------|---------------|
| 29 Sep 2015 | Re-grade    | Care and support          | 6 - Excellent |
|             |             | Environment               | 6 - Excellent |
|             |             | Staffing                  | 6 - Excellent |
|             |             | Management and Leadership | 6 - Excellent |
| 26 Jan 2012 | Unannounced | Care and support          | 6 - Excellent |
|             |             | Environment               | 6 - Excellent |
|             |             | Staffing                  | Not Assessed  |
|             |             | Management and Leadership | Not Assessed  |
| 16 Dec 2010 | Announced   | Care and support          | Not Assessed  |
|             |             | Environment               | Not Assessed  |
|             |             | Staffing                  | Not Assessed  |
|             |             | Management and Leadership | 6 - Excellent |
| 26 Mar 2010 | Announced   | Care and support          | 6 - Excellent |
|             |             | Environment               | Not Assessed  |
|             |             | Staffing                  | 5 - Very Good |
|             |             | Management and Leadership | Not Assessed  |
| 8 Jan 2009  | Announced   | Care and support          | 5 - Very Good |
|             |             | Environment               | 5 - Very Good |
|             |             | Staffing                  | 4 - Good      |
|             |             | Management and Leadership | 4 - Good      |

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