9 Cemetery Road
Blantyre
Glasgow
G72 0HA

Telephone: 01698 826346

Type of inspection: Unannounced

Completed on: 15 May 2018

Service provider by: South Lanarkshire Council

Service no: CS2003001352

Service provider number: SP2003003481
About the service

The Jimmy Swinburne Centre is a purpose-built day centre for 24 older people. It operates seven days a week, between the hours of 8.00 and 17.00 on weekdays and 9.00 and 17.00 at weekends. It provides a support service to 36 service users in total, 13 of whom attended on the day of the inspection visit. The service is owned and managed by South Lanarkshire Council.

Its aims are to provide high standards of care in a homely, safe and secure environment, which does not inhibit service users’ feelings of independence. It supports care in the community and prevents, or postpones, admission to long-term care. It seeks to achieve this by providing services tailored to the needs of service users, and to respond appropriately as they change.

What people told us

For this inspection we received the views of seventeen of the eighteen people using the service. Three people gave their views via the care standard inspectorate questionnaires and we spoke with a further fourteen people using the service.

We received the following comments from people who used the service:

"It's been a great thing", "Friendship", "company's good", "Takes you off the street", "I like the sewing and singing", "We are treated with respect", "Most of the time we are called by our first name", "We are never made to feel intimidated or scared", "It's a friendly warm atmosphere", "We go to the shops, sit and talk", "I would like to see more outings", "There is nothing we are unhappy with", "Very happy", "This has been a life saver", "I like coming here", "Meals are a lot better than they used to be", "Meals are lovely".

We received the following responses/comments from the returned care standard questionnaires:

Three people indicated that they strongly agreed or agreed that they were happy with the quality of care the service provides.

We did not receive any negative responses from the questions asked in the care standard questionnaires returned.

Self assessment

From this inspection we graded this service as:

<table>
<thead>
<tr>
<th>Category</th>
<th>Grade</th>
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<tbody>
<tr>
<td>Quality of care and support</td>
<td>5 - Very Good</td>
</tr>
<tr>
<td>Quality of environment</td>
<td>not assessed</td>
</tr>
<tr>
<td>Quality of staffing</td>
<td>4 - Good</td>
</tr>
<tr>
<td>Quality of management and leadership</td>
<td>not assessed</td>
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</table>

What the service does well
We observed that people who use the service were actively involved in using the service in making decisions which affect their lives such as which activities they may wish to participate in.

We found that staff were very good at supporting people who use the service to attend appointments outwith the service. This helped to reduce people’s anxiety and provided psychological support on what can be an anxious time for people.

We found that staff supported people to eat where necessary during lunch time. People said that the “meals were a lot better than they used to be” and all said that they had no complaints about the food and thought it was good.

Meals are prepared off site and delivered in individual sealed packages they are then heated in the oven, temperature checked and served. This appears to work well although, care should be taken to make sure that meals are always hot prior to being served. Various options were discussed during the inspection on how to achieve this e.g. a hot plate, keeping in the oven to just before service. The manager has agreed to monitor this going forward.

A written menu was on the tables. We suggested introducing a pictorial menu to help that people with a cognitive impairment make an informed choice.

We observed a lot of banter and laughter throughout the inspection this helps to sustain people's psychological well-being.

We saw a range of activities going on such as a sing-song, dancing and quizzes.
We also found that the centre had a ‘sport memories’ group which encourages lots of discussion and the service discovered that one of the service users used to play for St. Mirren football club.

There was also individual activities going on and we observed one service user writing up key points about football players who will taking part in the world cup such as, Messi and another service user was going through pictures of famous people and identifying them.

There was facilities available for people who wanted quiet time and we saw that being used to good effect to reduce a service users anxiety.

We found that staff treated people with dignity and respect and helped people to make their own choices and supported them in those choices.

We heard various outings being discussed such as visiting Edinburgh and Drumpellier Park.
One person said that they would like to have more outings out of the centre and this was shared with staff.

We found that very good work had been done in developing life story work and we found that this being used proactively in discussion with people, to encourage dialogue and engagement.

New streamlined care plans were now in place which were easier to read and understand for staff. This consisted of a one page summary and then a detailed ‘life story’. We found this information was being used to good effect in staffs conversations with people.
A second care plan containing the ‘in house’ documents for reference such as co-produced assessment was also in place.

We found that staff were skilled and knowledgeable about the people they looked after and said they had received appropriate training to do their job.
All had completed the Scottish Government training in ‘Skilled Dementia’ and staff said this had helped them to understand better the effects of dementia and they had used this in their practice e.g. taking their time and giving people time to respond to questions.

Some staff have received ‘stress and distress’ training to support people who are experiencing distressed behaviour and this was being used effectively to support people who use the service, by offering quiet time and recognising the signals when the person is becoming distressed. This has helped to reduce the incidents of people becoming distressed.

Some staff had an SVQ qualification to register with the Scottish Social Services Council (SSSC) and some were waiting to start their training.

The service has developed an E-learning system for staff this includes training in new legislation such as ‘Duty of Candour’ training and it is planned that all staff will have completed this by July 2018.

We found that staff had regular supervision and an annual appraisal. New supervision and appraisal documentation had been introduced since the last inspection and we thought the structure was good.

Accident and incidents were recorded and the service was notifying the Care Inspectorate appropriately.

Appropriate employers liability insurance was in place.

Appropriate maintenance checks were in place such as gas safety and PAT testing. Minor repairs were carried out timeously.

We saw that several South Lanarkshire Council Workmen visited the centre during the inspection to carry out various works e.g. checking emergency lights, checking window checks were operating correctly.

What the service could do better

The registration certificate was not prominently displayed and did not reflect the change of managers surname due to her recent marriage. We advised the service to download a new certificate from the Care Inspectorate website and display prominently.

We discussed staff using phrases such as ‘weather permitting’ for outings and they agreed this should be avoided.

We suggested that more information should be recorded in care plans where the service are providing support to manage distress, continence care and support at meals times. This was acknowledged and accepted by the manager. This will help to ensure that staff have the information they need to deliver care consistently and help maintain quality standards.

We found that the new supervision and appraisal documents were not being completed effectively. We acknowledge that this is a complex process and will take time for staff and management to get familiar with the changes which are now in place.

We emailed two documents which may assist staff and management’s understanding ‘Reflective writing’ and ‘Recording outcomes in Care and Support Planning and Review’ a publication from the Joint Improvement Team.

The manager has agreed to monitor the quality of information recorded in supervision and appraisal going forward to ensure the information is reflective.
We made two recommendations at the last inspection in relation to supervision and appraisal and these will be repeated. (see Recommendations 1 and 2).

**Requirements**

**Number of requirements:** 0

**Recommendations**

**Number of recommendations:** 2

1. The provider should ensure that practice and service user issues are discussed and recorded in supervision and annual appraisal.

(National Care Standards Support Services Standard 2: Management and Staffing Arrangements)

2. The provider should ensure that what has been learned from staff training is discussed at supervision and annual appraisal and is used to evaluate and improve practice.

(National Care Standards Support Services Standard 2: Management and Staffing Arrangements)

**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**

<table>
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<th>Date</th>
<th>Type</th>
<th>Gradings</th>
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<td>5 Jun 2015</td>
<td>Unannounced</td>
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<td>Environment</td>
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<td>3 - Adequate, 4 - Good, 4 - Good, 4 - Good</td>
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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

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