24 Margaret Road
Whitehill
Hamilton
ML3 0LD

Telephone: 01698 281301

Type of inspection: Unannounced

Completed on: 24 July 2018

Service provided by: South Lanarkshire Council

Service no: CS2006114285

Service provider number: SP2003003481
About the service

The service is part of the day care for older adults provided by South Lanarkshire Council Social Work Resources (SLC).

Whitehill Centre is located in the Whitehill area of the town of Hamilton and is part of a cluster of day care services serving a number of nearby communities under a single external manager.

The service operates from 8:30 - 4:30 seven days a week, although weekend service is provided at another of the clusters locations.

There are currently thirty older adults who use the service on a weekly basis. The service provides transport to and from the service using the providers transport arrangements. Service staff accompany the transport and provide assistance on the journey.

Access to the service is via assessment by the social work department or a single shared assessment, from health colleagues.

What people told us

For this inspection we received the views of nine of the twenty-eight people using the service. Four people gave their views via the care standard inspectorate questionnaires and we spoke with a further five people using the service.

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

“Fabulous, couldn’t be better, went to other places but this is the best”.  
“I am very pleased about the service. The staff are wonderful”.  
“I enjoy coming here and the food is good and I am enjoying my lunch”.

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

‘My Mum loves going to day care and speaks highly of the staff. It gives me peace of mind that Mum is safe and well looked after’.

‘Our relative looks forward to going to the centre and we are confident that she will be stimulated and cared for when she is there’.

Four 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>Quality of care and support</th>
<th>5 - Very Good</th>
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<tbody>
<tr>
<td>Quality of environment</td>
<td>not assessed</td>
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<tr>
<td>Quality of staffing</td>
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</tr>
<tr>
<td>Quality of management and leadership</td>
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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 treated people with dignity and respect and helped people to make their own choices and supported them in those choices.
We found that very good work had been done in developing ‘life story’ information 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 staff's conversations with people.

We thought that staff were very skilled and knowledgeable about the people they looked after e.g. The way in which staff prompted and gave clues in quizzes linked to peoples life stories was very good. This practice was very good in supporting peoples psychological well-being, self-worth and maintaining cognitive ability.

We saw that staff linked conversations to peoples life history and got them to talk about happy memories. We observed lots of laughter and banter throughout the inspection this helps to sustain peoples psychological well-being.

We saw a range of activities going on such as quizzes and reminiscing.

It was evident that the service uses good practice material to shape how they deliver support and care to people. e.g. the quiz ball.

It was good to see that the service was using an ‘outcomes achieved’ scoring system in care plans, however, this was not always completed. The manager acknowledged and recognised that staff are not always clear on how to do this and further training has been recommended. We look forward to seeing this at future inspections.

It was very good to see that South Lanarkshire Supervision and appraisal policy includes the importance of ‘reflection’ and the opportunity to ‘reflect’ is also included in the ‘learn on line’ resource.

It was very good to see that the service was using best practice to help reduce service users distress using the ‘stress and distress model’.
We were pleased to hear that the current system to assess dependency levels was currently under review and we look forward to seeing how this helps, to meet the increasing needs of people who use the service going forward.

We observed meal times where we saw that people who use the service were verbally offered a choice. We would suggest that showing people the choice on a plate would help people make an informed choice. We saw that pictorial menus were in place on each table. The service had plans to further improve the pictorial menus.

We found that some staff sat with people at the table and engaged people in conversations, which was good to see. We thought the atmosphere during meal times was friendly and relaxed. We thought that, overall, the food was warm tasty and appetising.

Staff spoken with said they had received appropriate training to do their job.

Some staff 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 overall, was being used effectively, to support people who use the service, by recognising the signals when the person is becoming distressed. This will help to reduce the incidents of people becoming distressed going forward.

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

Plans were in place for staff to start their SVQ qualification.

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 complete this.

We thought the structure of the new supervision and appraisal documentation which had been introduced since the last inspection and was good.

We found that staff had regular supervision and an annual appraisal.

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

Staff said that they were confident in management and said that they thought people were well looked after. Staff were aware of their responsibilities to report any incidents of poor practice and said they would not hesitate to do so.

Staff were aware of the new national care standards and the Scottish Social Services Council (SSSC) codes of practice.

From the information available we were satisfied that appropriate environmental checks were being carried out to keep people safe.
Appropriate employers liability insurance was in place.
Appropriate maintenance checks were in place such as PAT testing. Minor repairs were carried out timeously.
South Lanarkshire Council share the premises with the Owner of the building and we were advised that the Owner is responsible for the maintenance and safety of the building e.g. gas safety checks.
What the service could do better

The manager has agreed to submit a notification to update the registration certificate due to her recent marriage.

The manager has agreed to submit a notification with details of the outcome from a recent accident in the service.

The manager has agreed to address the issue of door closure mechanisms not operating correctly to reduce sudden loud noise in the service.

The manager has agreed to address the issue of gaps in the doors of the communal toilets which could compromise peoples privacy and dignity.

We are satisfied that South Lanarkshire Council has an appropriate policy on the way forward for supervision and appraisal which was reflective and outcome focussed. However, this was still to be embedded into practice. We acknowledge that this involves a change of culture and is a complex process and will take time for staff and management to get familiar with the changes which are now in place.

The service should continue to develop reflective practice.

The manager has agreed to monitor the quality of information recorded in supervision and appraisal going forward, to ensure the information is reflective.

We look forward to seeing how this is developed and this will be reviewed at the next inspection.

We signposted the manager to the latest best practice documents for information.

We suggested at the last inspection that service users be involved in staff supervision and management should set up a system of observation of staff practice to improve and inform practice. We were advised that this was still being developed and this will be reviewed at the next inspection.

The manager should ensure that what is written on menu is what is on offer. We were disappointed to hear staff defending the menus.

We suggested that the service should take minutes of any discussions that they have with the caterers.

We suggested that people are physically shown the choice on a plate of what is on offer from the menu to help then make informed choices and stimulate appetite.

We suggested that one member of staff is designated to monitor people during lunch time to ensure they are always able to summon assistance when this is required.

We discussed the practice of food being taken out of the ‘Bain Marie’ prior to being served. This may lead to food being cold when served

The manager should ensure that food is always warm just before it is served.

The service should ensure that signage is consistent throughout the service.

The manager has agreed to order a new sign for the entrance to the service.

We discussed at some length with the manager and the coordinator the use of ‘ABC charts’ which help to reduce distressed behaviour, however, we thought that there was still work to do in terms of practice and use of language in the documents that we saw e.g.
From the evidence that we saw staff were not supporting a service user who wanted to go out and the language used in the documents was psychologically controlling which could cause further distress to the person.

The manager acknowledged this and staff said the lady was supported to go out however, this was not documented. The manager stated that further ‘stress and distress’ training is planned for staff. The service should address the risk averse culture of some staff.

From the documents presented the care inspector did not feel technically competent to evaluate whether the service was safe from the risk of legionella. The provider should develop evidence which is understandable to the Care Inspectorate, to be able to evaluate whether the service is safe from the risk of legionella.

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

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<th>Type</th>
<th>Gradings</th>
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