Ashley Grant House
Support Service Without Care at Home
Scholars Gate
Whitehills
East Kilbride
Glasgow
G75 9JL
Telephone: 01355 574590

Inspected by: Alan Paterson
Michael Ford

Type of inspection: Unannounced
Inspection completed on: 13 February 2013
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Service provided by:
South Lanarkshire Council

Service provider number:
SP2003003481

Care service number:
CS2003015150

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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

<table>
<thead>
<tr>
<th>Grade Area</th>
<th>Grade</th>
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<tbody>
<tr>
<td>Quality of Care and Support</td>
<td>5</td>
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<tr>
<td>Quality of Environment</td>
<td>5</td>
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<td>Quality of Staffing</td>
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<td>Quality of Management and Leadership</td>
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What the service does well

the service provides a responsive day care service to older adults who are frail and have varying degrees of dementia. Carers we spoke with praised the service for its organisation, speed of response and quality of care provided. Service users were cared for very well and expressed how much they enjoyed coming to the service.

What the service could do better

The service would benefit from overhauling the care plans for the service users, which, although containing all the information required to provide the service suffered from repetition of documents and holding information not required to provide the service.

The service should continue to pursue a better quality provider of lunches.

What the service has done since the last inspection

The service has continues to develop links with the wider care systems of the service users. We also noted that the service continues to develop the width of knowledge and skills of the staff to manage the changing needs of the service users.
Conclusion
We found that the service to provide a safe, protective and reliable service which preserved the dignity of the service users and provided support for service users to maintain their abilities and for carers to continue caring for them at home.

Who did this inspection
Alan Paterson
Michael Ford
1 About the service we inspected

The service is part of the day care for older adults provided by South Lanarkshire Council Social Work Resources (SLC). Ashley Grant is located on the outskirts of a large town and is part of a cluster of day care services under a single external manager.

The service operates from 9:00-5:00 seven days a week, although weekend service is provided at another of the clusters locations.

Up to ten older adults use the service on a daily basis and 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.

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 - Grade 5 - Very Good**
- **Quality of Staffing - Grade 5 - Very Good**
- **Quality of Management and Leadership - Grade 5 - Very Good**

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 or by calling us on 0845 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
The inspection was undertaken by two inspectors. We examined service documentation, looked at the environment the service provided, observed practice, spoke with all levels of staff and spoke with service users.

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.firelawscotland.org
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 an appropriately completed self assessment

Taking the views of people using the care service into account
“I have received the utmost care and consideration sometimes out of working hours”
“I have found in the last year that staff have taken on board issue concerning the quality of our lunches......”

Taking carers' views into account
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 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 concluded that the service was very good in this aspect of the inspection. We reached this conclusion after discussion both the staff of the service, service users and carers. We also observed practice and scrutinised service documentation including personal plans, review recordings, staff meeting minutes and focus group records.

As part of the Local Authority Social Work Resources the service implements the Local Authority policies on participation and consultation. These policies are monitored by the external management of the provider’s organisation. Information is gathered and reported to the eternal manager who monitors and audits the implementation of the policies. These policies insist on the participation of the service user and carer in the development if the service.

We examined the process by which a person accesses the service. We found that after initial assessment by a social worker the service user’s Personal Profiles are put together jointly between the service user and a centre worker or between the service user and their carer. This evidenced good practice in the participation of the service user in the development of their own service.

Individual choices are negotiated between the service user and staff either on a visit to the service or the staff member will visit the prospective service user at home. Independent support and advocacy can be provided (through the user and carers support team). This is a further example of good practice in developing service user led services.
Once the service user begins to use the service a keyworker is appointed and becomes the main person for the service user and carer to contact. The keyworker also takes on roles in maintaining contact with carer and responsibility for maintaining the personal record of the service user up to date.

Keyworkers are supported by Senior staff members and the service management teams. Personal supervision is regular and mandated by the provider. Staff meetings are regular and recorded as we saw evidence that they allowed issues to be raised and action discussed and agreed.

What goes on in the centre is discussed and agreed with the service users committee which is facilitated by the senior care worker. Sensitive and due recognition of the service users ability to participate is made and staff members support the service users in decision making through good communication skills and well developed caring relationships.

As previously stated carers are considered partners in the provision of service and are included in the planning through direct contact, which can be by telephone, home visit or discussion with the workers who accompany the transport which picks up and drops off the service user on the days they attend the service.

Through discussion with managers and staff we are confident that support for carers is of high priority. There is a quarterly carers meeting and, in discussion (by telephone) carers identified that they had received support on their issues from Ashley Grant staff. They also stated that they were very happy with the service from Ashley Grant and felt that Ashley Grant supported them well, keeping them informed of all matters relating to the service user.

We saw evidence that the service also operates as a partner in the holistic care of the service user liaising with other providers of services to the individual service user. Examples of this would be with the case managing social worker, the GP, occupational therapy, community psychiatric service, district nursing. In fulfilling this role the service provides information, supports the service user and carer, carries out reviews and assists in ensuring actions agreed are carried out.

A carer commented that they could not have managed without the support of the service and praised the efficiency and reliability of the support given by the service.

The service ensures that reviews are carried out within the agreed timescales and attends similar meetings called by their care providers. We were able to match agreements made at reviews to changes in the service users personal plan.

Service users expressed satisfaction with the service and that they were confident that if any issue arose they would be listened to and their concerns acted upon. We concluded that the stated activities represented very good practice in promoting...
Areas for improvement
We found the service users personal plans to contain too much information in places and that the service should consider how it is to manage this. An example of this is one service user having numerous social work assessments each one repeating the service users background information some of which is very personal and very little of the information is pertinent to providing the service. This is not good information management practice and potentially can lead to difficulty in maintaining good information up to date. (recommendation 1)

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0
Number of recommendations: 1

Recommendations
1. The provider should examine how information is stored in the service users files to ensure that information is correct, needed for the provision of service and up to date.

   National Care Standards (NCS) 4- support services: Support Arrangements

Statement 3
We ensure that service users’ health and wellbeing needs are met.

Service strengths
We concluded that the service was very good in this aspect of the inspection.

We examined a number of organisational policies (for example falls management, participation, adult protection, moving and handling) relating to the health and wellbeing of the service users. Each policy had training and procedures for implementation.

Staff had training on falls management, managing challenging behaviour, dementia awareness, food hygiene, moving and handling and health and safety. Those with responsibility had training in the management of medication.

Observation of practice and discussion with staff showed examples of the policies in action. An example of this is the staff attentiveness to the service users as part of the falls management and we noted that fortification of foodstuffs was available to the service users at tea time. where toast was available with choices of butter, jam and cheese. We saw that Moving and handling training was evidenced where service users were assisted using appropriate moving and handling techniques. We also saw good
hygiene practice in the serving of meals with temperatures and Personal Protective Equipment being properly used.

Service users files had an appropriate level of detail on the individuals need for support. This included contact details for GP and local district health teams. They also held information on other health needs the service user had, for example physical disabilities and allergies.

Medication files were kept separately and the recording of medication given to the service, storage and dispensing were appropriately recorded.

Accidents and incidents were recorded in the provider mandated format. This ensured incidents were analysed and were learned from. Where appropriate action plans were made.

There is a clear complaints procedure and issues can be taken up through advocacy, service users committee and the area forum.

We are confident that that above evidence shows that the service is effective in ensuring the health and wellbeing needs of the service user are being met.

**Areas for improvement**

We noted that the meals as provided by a local primary school had been discussed with both service users and staff raising concerns over the quality. This had been raised by the service management with the supplier. (recommendation 1)

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 1

**Recommendations**

1. The provider should continue to monitor the quality of food provided to the service and seek alternative supplier if the issue of quality cannot be addressed by the current supplier.

   NCS 15 - Eating Well
Quality Theme 2: Quality of Environment
Grade awarded for this theme: 5 - Very Good

Statement 1
We ensure that service users and carers participate in assessing and improving the quality of the environment within the service.

Service strengths
Please see evidence given in section 1.1 in the context of the environment.

Areas for improvement
please see above

Grade awarded for this statement: 5 - Very Good
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
The service is provided in a modern, purpose built unit which has been designed with the needs of the service user in mind. Entrances had sturdy handrails and there was a controlled entry system which prevented anyone who did not have a reason to be there entering the building.

The unit is small with only one common area and a dining kitchen and a small meeting room. This helps the service users to orientate to the surroundings. The floors and walls are neutrally coloured with some reminiscence materials. This supports service users with dementia by limiting the amount of sensory information they have to process.

The toilets are well appointed and can accommodate those who might need assistance. There is also the capacity to carry out laundry tasks.

The common room area is bright and comfortable and there were a number of activity resources available to the service users.
We observed both the morning tea and midday mealtime experience by sitting with the service users. We found the experience to be pleasant. The tables were well set and in the morning service users were offered hi calorie options which is good practice especially when appetites are impaired. We found this to be a high quality experience with good choices and support for the service users to make them. Service users who required assistance received this. We noted that service users files contained information on dietary and support needs.

We have already commented on the issue with quality of lunches supplied to the service. This aside the lunch experience facilitated by the service staff was very good. The assistance to service users was provided well and the service users were assisted to make choices about their meals. If the person using the service did not like what was on offer staff made them an alternative. This included the offer and provision of choices which the staff made specially.

**Areas for improvement**

We noted that one of the toilets was in disrepair with a support aid off the wall and having taken a number of tiles along with it. The manager told us that the issue was in the fabric of the building which had made it difficult to provide the rigid support the support aid needed. However she was under the impression that workmen had been out to repair it and was surprised it was still not repaired. We noted that this was recorded in the log that the provider uses to inform the appropriate department that a repair was required.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 1

**Number of recommendations:** 0

**Requirements**

1. The provider must ensure that the support Aid and the tiling in the toilet is repaired.
Quality Theme 3: Quality of Staffing
Grade awarded for this theme: 5 - Very Good

Statement 1
We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service strengths
Please see the statements made in 1.1 in the context of staffing

Areas for improvement
Please see above

Grade awarded for this statement: 5 - Very Good

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
The recruitment and retention policies and procedures used by the service are mandated by the provider and controlled, audited and monitored by an external Human Resources (HR) department. This ensured that staff were recruited safely and that the process involved:

- Application
- Competitive Interview
- Equal Opportunities Monitoring
- References required and checked
- Protection of Vulnerable Groups checks undertaken before appointment and regularly updated thereafter
- Induction period with mandatory training
- Regular professional Supervision
- Appraisal
We spoke to staff and found that they demonstrated a good understanding of their work roles, were knowledgeable of the wider care system, how it linked to their service, were respectful towards the services users and enthusiastic about their jobs. We observed strong and motivating relationships between staff and service users.

The provider ensures that all staff complete in comprehensive induction programme and were aware what training opportunities were available to them. Mandatory training and updates are provided on an ongoing basis and recorded in the staff personal plans and by the service manager.

Staff had participated in relevant training to meet the needs of the service user and were able to relate this training to their practice.

Staff were knowledgeable about the needs of the people using the service and the aims and objectives of the organisation for the service. We saw that staff were aware of the national care standards and observed these in the staff’s individual practice.

In line with the Providers policy and procedures the staff receive regular, linked individual supervision sessions and attend staff meetings where practice issues are discussed and decisions made and recorded.

We noted that the service is accessing training specific to the needs of service users who are presenting with needs that are less commonly encountered.

**Areas for improvement**
The service should continue to develop the staff group through accessing training on specific needs that service users present.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 0
Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 5 - Very Good

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
Please see the comments made in section 1.1 in the context of management and leadership.

Areas for improvement
See above

Grade awarded for this statement: 5 - Very Good
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 looked at information used to make decisions about the service from a number of sources (service users, carers, local and service forums, internal and external auditors).

We found that service users, carers and staff were encouraged to provide feedback on the service both formally and informally. The service uses questionnaires and the preparation for reviews as opportunities to record service users views.

Information from the questionnaires was collated and examined and used to inform decisions in different parts of the organisation. Some was used directly in the unit for example feedback from service users and carers on personal needs, health matters, menus and activities. At other times the information went outside the unit i.e. minutes of service users meetings.

The provider operates a quality unit which requires reports on the operation of the unit and the external managers meet regularly with the unit managers to discuss
information, targets and other operational matters.

The provider also supports service user forums at different levels with service user committees in individual services and an area forum.

We are confident that the service performs very well in this section

**Areas for improvement**

The service should continue to develop the service users participation in the development of the service.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 0
4 Other information

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

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

Additional Information

Action Plan
Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in SCSWIS re-grading the Quality Statement within the Management and Leadership Theme as unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).
## 5 Summary of grades

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<thead>
<tr>
<th>Quality of Care and Support - 5 - Very Good</th>
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<td>Statement 1</td>
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<th>Quality of Environment - 5 - Very Good</th>
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<td>Statement 1</td>
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<th>Quality of Staffing - 5 - Very Good</th>
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<tbody>
<tr>
<td>Statement 1</td>
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<td>Statement 4</td>
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## 6 Inspection and grading history

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<tr>
<th>Date</th>
<th>Type</th>
<th>Gradings</th>
</tr>
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<tbody>
<tr>
<td>22 Oct 2010</td>
<td>Announced</td>
<td>Care and support 5 - Very Good, Environment Not Assessed, Staffing Not Assessed, Management and Leadership Not Assessed</td>
</tr>
<tr>
<td>19 Mar 2010</td>
<td>Announced</td>
<td>Care and support 5 - Very Good, Environment Not Assessed, Staffing 5 - Very Good, Management and Leadership 5 - Very Good</td>
</tr>
<tr>
<td>20 May 2008</td>
<td>Announced</td>
<td>Care and support 4 - Good, Environment 5 - Very Good, Staffing 4 - Good, Management and Leadership 5 - Very Good</td>
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</table>
All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.
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Translations and alternative formats
This inspection report is available in other languages and formats on request.

Tha am foilseachadh seo ri fhaighinn ann an cruthannan is cànain eile ma nìthear iarrtas.

Translations:
- معلومات المراجعة متوفرة باللغات الأخرى وформات أخرى.
- 翻訳および代替形式
- この調査報告書は、他言語と形式で提供できます。
- 本出版品有其他格式和其他語言備索。
- Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.

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