

Care service inspection report

Full inspection

Eliburn Day Centre Support Service

Jackson Place
Eliburn East
Livingston

Service provided by: West Lothian Council

Service provider number: SP2003002601

Care service number: CS2003016363

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.

Contact Us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

www.careinspectorate.com

 [@careinspect](https://twitter.com/careinspect)

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	5	Very Good
Quality of environment		N/A
Quality of staffing	5	Very Good
Quality of management and leadership		N/A

What the service does well

The service is a welcoming and friendly place for the people using it to come to. People are treated with dignity and respect. The service is well thought of by families and relatives.

The service makes good use of its resources and provides a range of activities both in the Centre and in the local community.

The service works well with other health care professionals to provide helpful support that is focussed on each individual.

What the service could do better

The service plans to improve the ways people using it make choices and take part in decision making.

What the service has done since the last inspection

The service has improved the decoration and design of some of the rooms, including the nurses and treatment areas.

The raised bed garden is being re-designed to help improve access to it. More plants have been added to the remembrance garden.

The manager of the service has changed, the assistant manager post has disappeared and other staff changes have taken place. There are now two nurses in the centre. This has made it easier for some people to come regularly.

Conclusion

The service provides very good quality of care and support in the areas we looked at. Staff were enthusiastic and motivated to find the best ways to work with people and improve their experience at Eliburn.

1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Before 1 April 2011 this function was carried out by the Care Commission. Information in relation to all care services is available on our website at www.scswis.com

This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

Eliburn Day Centre is operated by West Lothian Council. It can provide a support service - day care for up to 47 adults each day. Adults are aged between 16 and 65 years and have a significant learning disability and complex physical and health care needs. The staff team work alongside health care staff, giving easy access to a range of services including physiotherapy, speech and language therapy and nutrition.

The service is available Monday to Friday except public holidays. The service operates from a building that had been expanded in the past to meet service users' care needs. It is situated close to the centre of Livingston.

The service aims to:

'Assist and enable service users to achieve their potential by remaining as independent as possible for as long as possible. This is done in a person-centred way and involves parents and carers, family members and professionals in supporting the service user within their day-to-day life'.

On the day of the inspection 30 people were using the service.

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 5 - Very Good

Quality of environment - N/A

Quality of staffing - Grade 5 - Very Good

Quality of management and leadership - N/A

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 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

From the 1 April 2016 the way in which we carry out an inspection has changed. We choose which quality themes and statements are inspected for better performing services, to be more proportionate and targeted in our work. In highly performing services, inspections will consider Quality Theme 1: Quality of Care and support, Quality Theme 1, Statement 3 "We ensure that service user's health and well-being needs are met". This statement will be considered during all inspections. We will also look at one other quality theme and two statements.

This service is eligible for this type of inspection and based on our knowledge, experience and intelligence of the service, we have chosen Theme 1 and Theme 3 - Staffing.

We wrote this report following an announced (short notice) inspection. The inspection was carried out by two Care Inspectorate Inspectors. This took place on 10 May 2016 between 9.30 am and 4pm. We told the Manager what we found at the inspection on 10 May 2016.

As requested by us the care service sent us an annual return. The service also completed a self-assessment form.

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

- Sampled support and care plans
- Reviews of support and care plans
- Risk assessments
- Support agreements

- Communication books and diaries
- Team meeting minutes
- Recruitment records
- Training records
- Support and supervision records
- Appraisal records
- Staff training records
- Incident and accidents
- Complaint records
- Quality assurance information
- Adult Support and Protection policy
- Complaints policy
- Surveys of people using the services and their families

Discussions with:

- The Service Manager
- Staff in the centre, including the nurse and the cook.

We spent some time throughout the day observing and talking with staff as they carried out different activities and exercises with people.

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

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. They gave us good examples of how staff had worked with people, families and other health professionals to improve the service they received.

Taking the views of people using the care service into account

We met with a number of people using the day centre during the inspection. They seemed to be enjoying different activities and lunch.

Three Care Inspectorate Care Standard Questionnaires were returned to us where carers in other support services helped complete the form.

All three said they were happy with the quality of care and support the service provided.

Comments included:

'Staff have my best interests in mind'.

'Staff on hand to care for my needs'.

Taking carers' views into account

We sent out thirty care Inspectorate Care Standard Questionnaires before the inspection and six were returned to us by families or carers in support services.

Everyone said they were happy or very happy with the quality of care.

Comments included:

'The staff are very understanding and aware of all the needs of my daughter. They also provide information and support when asked for. A very good service'.

'My daughter...has always enjoyed the many different activities and looks forward every morning for the bus to take her to the centre. Every attempt is made to cater for her needs'.

Other comments can be found in the relevant quality statements.

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 3

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

Service Strengths

The service was providing very good levels of care to the people using it.

Each person using the service had a personal care plan. We found detailed information about each person's needs and clear directions about how to meet these. Individual service user profiles were kept with each person, in the part of the service where they were that day. This meant staff could refer to them when necessary. We saw very good information was recorded about the person, their likes and dislikes in relation to, For example, food and activities. This helped staff and service users make choices about the food they wanted to eat that day and how it was to be prepared.

Some people required lot of physical care and support. We found that care plans had precise instructions about how these should be met. Staff told us how they worked to ensure personal care, For example, was managed and that peoples' privacy and dignity were maintained. There was a good range of equipment available to help people manage tasks they could not do at home.

People using the service were well supported by a range of health care professionals and services. These included physiotherapists, dietician, speech and language therapists and community learning disability nurses.

A number of specialist clinics, in epilepsy and special needs, were also available. This meant people using the service were able to get the health care they needed at Eliburn.

There had been a number of improvements to the ways the building was laid out and used. We saw that the nurses rooms and treatment rooms were in a quieter, more private area in Eliburn. One nurse told us this helped them give better care and they could carry out nursing tasks more easily. The changes also meant that people coming in for clinics did not interrupt the other activities in the centre.

There were now two nurses at Eliburn, more than at the last inspection. This meant they were available to help assess people who appeared unwell. They were also able to provide advice and support to care staff when concerns arose and were able to help deal with emergency issues.

Staff we spoke with said they were very familiar with the health needs of people using the service. We saw, in the groups and at meal times, good rapport was observed between staff and people using the service. Staff were able to discuss health issues that had affected people using the service and how they had dealt with these.

Where specific health needs were identified, training had been brought in to ensure staff had the knowledge and skills to deal with the needs people had. Some staff were to about to receive a session on dysphagia, which is to do with the difficulty in swallowing and how to manage this.

The families and carers we spoke with said they thought staff understood their relatives' health and wellbeing needs well and supported them to have these met. They talked very positively about Eliburn and made the following comments:

- 'happy place forto be. A good humoured place. The Manager and staff are very good'
- 'service excellent'

- 'we have found Eliburn to have a very welcoming and happy atmosphere. Our son enjoys going there. We are impressed by the range and variety of activities and we know our son really enjoys taking part'.

Medication policies and procedures were in place and all staff had training in medication. The medication given was recorded by two staff on Medication Administration Records (MAR) forms. We looked at a small sample of records and saw these had been completed.

Peoples' well-being needs were also considered. People were able to choose from a range of activities to meet their individual needs. Efforts were made to ensure staffing levels were adequate to provide a range of activities. Further staff also asked parents and carers peoples' likes and interests.

Staff were given training about safeguarding and adult support and protection and how to report concerns. Some of this was carried out by e-learning as well as in group training. West Lothian Council had policies and procedures to follow. They said they would feel able to report any concerns or poor practice. The Manager gave us examples of where this had happened, how this had been reported and the steps taken to ensure the safety of the person. The service had also notified the Care inspectorate.

Areas for improvement

The service should continue to develop their very good work and promote peoples' health and well-being.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

Statement 5

“We respond to service users' care and support needs using person centered values.”

Service Strengths

We saw that Eliburn was an important part of many peoples' lives. Peoples' families were welcomed into the service so that they could see how it worked with and supported their relative. Where families wanted it, there could be a lot of contact. This helped to ensure that the care people were receiving was benefitting them and matching families' expectations.

Because the service was a daily part of many peoples' lives the loss of family and friends could be very hard. We thought that the remembrance garden helped to give everyone a quiet outside space to think about people who had been in their lives. This space, and the friendship tree, helped people and families keep connections and to some degree manage their grief. This seemed to be important for families, they could come to use the garden at any time.

The service kept in contact with families and relatives in many ways. These included:

- an annual questionnaire following the reviews of a person's care
- reviews of the care plan at least every six months
- relatives and friends meetings
- individual discussions with relatives
- the newsletter.

This meant that, where people wanted it, there could be a lot of ways families could inform and shape the work.

We saw that people using the service and families/carers contributed to developing the care plans. Parents often wrote specific instructions for the staff to follow and these were included in the plans.

We saw that staff had developed good understanding of peoples' needs and the ways in which they communicated these. We saw that staff knew how to interpret different facial expressions, movements and noises and how these related to wants, happiness or if the person was in pain. This helped to ensure people received good support or healthcare when they needed but were not able to make their needs known verbally.

We also saw that communication aids such as 'talking mats' were used and helping people use interactive screens were being introduced. This increased peoples' opportunities to be able to say how they felt or make their needs known. This supported them to become more independent.

The service used a diary to communicate directly with parents and carers (if they wanted this) on a daily basis. This let parents know what activities the person using the service had taken part in, what they had eaten for lunch and other relevant information. Carers were able to tell staff about issues or concerns they had. This meant the service could be adjusted for each person daily.

We looked at the most recent survey of families and relatives. Overall people were very happy with the ways the service worked with them as individuals. Some of the comments included:

'I think the service offered is absolutely brilliant'

'staff are friendly and committed and enthusiastic. (family member) has an individual care plan - ensuring all his needs are being met. Really enjoys participating in the wide range of activities and outings provided'

'every effort is taken to make our family member happy and secure at all times'.

People using the service knew about the complaints procedure and were clear how to contact the Manager or key worker if required. The service kept a record of complaints. There had been few complaints made and we saw how the Manager had agreed where mistakes had been made how the service would try to avoid these in future.

The service wanted to ensure peoples' views about their experiences at Eliburn were heard. Sometimes staff acted as advocates for people they worked with. If people had difficulty making their views known staff encouraged people using the service to make use of advocates. An advocate is independent of the service and helps a person make their wishes clear. The service had links with the local advocacy service.

Areas for improvement

The service plans to develop ways to help service users make choices and take part in decision making. This will include use of interactive communication methods as well as talking mats and using symbols. The service sees this as important work to more fully involve people using the service. We look forward to seeing how this progresses.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

Quality Theme 2: Quality of Environment

Quality theme not assessed

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 5 - Very Good

Statement 3

"We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice."

Service Strengths

The service had a comprehensive range of policies and procedures in place to support staff and practice. These included recruitment, protection of vulnerable adults, whistle-blowing and confidentiality. Policies could be discussed in team meetings and one to one supervision meetings when necessary.

West Lothian Council provided staff with an induction when they began work. Training included principles of care in practice, personal care, food hygiene, manual handling and health and safety. Staff we spoke with told us how they supported new staff and students when they started at Eliburn, to settle into the work and get to know the people using it. This included shadowing experienced workers to learn about the best ways to communicate with service users.

Staff we spoke to said they could ask for relevant training to support them to meet the particular needs of the people they worked with. The Manager and senior told us that they ensured staff attended mandatory and refresher training and that staff were trained, to meet the needs of the people they were working with. We saw the service had a record of training completed by staff. This helped identify training needs and when to apply for refresher training. Where possible the service would try to access other relevant training.

One of the nurses told us how they were involved in staff training.

This may be related to the physical needs some people had. It also included helping staff manage the control of infection and developing procedures specific to their work. We were also told about oral healthcare training for staff and the Caring Smiles programme. This aims to ensure staff know how to help people look after their mouths, teeth and gums, helping prevent discomfort and pain.

Staff we saw and spoke with were very motivated in their work. They demonstrated very good knowledge of the needs of the people they worked with. Staff worked in small teams and this helped to ensure people using the service had good continuity of care.

We looked at a sample of support and supervision notes. Support and supervision is where staff meet with their Manager or senior in a one to one session to discuss work, performance and training needs. We saw that these sessions were held every three months and were recorded. One session each year was used for an appraisal and to set individual objectives for the coming year.

The Manager told us that group supervision meetings were used by some of the small teams. This meant staff could discuss the work done with each service user and reach agreement about how to carry out the work. This session was recorded for each staff member along with individual feedback.

Staff told us senior workers and the Manager were very supportive and available for help and advice. Staff said they found support and supervision helpful.

Team meetings were held every two weeks. The minutes showed a range of topics were discussed. Staff seemed to find the meetings useful. They said they could raise issues at meetings and were listened to by colleagues and the Manager. The service was trying to plan the meeting on a day when most time was available, to give more opportunities for staff training and development.

We also saw that staff took part in a number of working groups - the garden, kitchen and menu planning, activities - that gave them more say in the running of the service and its direction. This helped staff, For example, re-design the garden's raised bed area, to improve access for service users.

Fifteen Care Inspectorate staff questionnaires were returned to us before the inspection. Staff said that they did not have training needs, had opportunities to meet with each other and discuss their work and were regularly supervised.

Areas for improvement

At feedback we made some suggestions about how support and supervision notes are recorded. We said that staff should be encouraged to reflect on their work practices to identify strengths and learning needs. This should be recorded in ways that supports staff learning and development.

We also suggested that a specific question was asked in supervision about whether staff had concerns about the safety of anyone they were working with, to help ensure any adult protection concerns were not missed.

E-learning is used for some of the training. This can be an effective way to keep staff up to date with good practice. However this method does not suit everyone's individual learning style. The service should ensure that training is effective and meets staff's needs. We would also suggest that supervision can be used to discuss what staff are learning from any other training and how they are applying new skills. This would help senior staff evidence how the team is developing or identify gaps knowledge.

Since the last inspection the manager and the management of the service has changed. The post of assistant manager has disappeared. This has meant the team leaders have taken on more responsibility for the day-to-day running of the service. It is important that staff have the most appropriate level of qualification for the post they are in, to ensure they are properly qualified, able to register with SSSC and apply for manager posts should they choose. We would suggest that the provider supports senior staff in Eliburn who want to undertake SVQ4. This could be seen as staff development in line with the SSSC 'Step into Leadership' programme.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

Statement 4

"We ensure that everyone working in the service has an ethos of respect towards service users and each other."

Service Strengths

We saw that a number of service users had died in the last year. We heard that this had been a great loss for everyone and had quite an effect on staff. People had been service users for many years. Staff seemed to be a good support to each other and formal counselling sessions were arranged for anyone who wished this. A series of informal support sessions facilitated by an external professional also helped support staff.

Families were also invited to come together to celebrate their relatives' lives and make changes to the gardens. This was an important thing to do for everyone, recognising the importance of remembering lost ones and the effect this has on those who knew them.

West Lothian Council had a range of policies to support an ethos of respect. These include whistleblowing, codes of conduct, positive interventions and adult support and protection. We saw that staff knew about the Scottish Social Services Council Code of Conduct for Social Care Staff and the National care Standards. Leaflets were available telling residents and their families what they should expect from staff. Staff also agree to the Council's Code of Conduct and Confidentiality policies.

We saw that people were treated well and that staff took time with each person, working at their pace. For example, we saw that staff were aware of peoples' disabilities and how that affected communication. This meant they had to find ways to encourage people in everyday activities, recognising this would take time, consistency and patience.

We spoke with members of staff for some time. They told us that they enjoyed working in the service and that they wanted to do the best for each person using the service. They told us that they worked well in their small teams. This helped provide good consistency of support.

As fewer people were using the service one team was no longer needed. Rather than just moving these staff to other teams the opportunity was used to move a staff member from each of the teams. This helped create fresh beginnings and offered staff the chance to gain wider experiences working with different service users. The moves seemed to have benefit everyone.

All the service user, family and staff questionnaires returned to us said that people thought they were treated with respect. This matched what we found on the day of the inspection.

Areas for improvement

The service should continue to develop the ethos of respect in Eliburn.

We saw that a complaint had been made recently. This was about how accurate information had not been passed on. We looked at how the service had managed this, reminding staff of the need to provide specific feedback to other services or families who needed to know what had happened and how they needed to respond.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

Quality Theme 4: Quality of Management and Leadership

Quality theme not assessed

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. The service should ensure that it is staffed in ways that meet the needs and aspirations of the people using it.

National Care Standards, Support Services, Standard 4 - Management and staffing and Standard 8 - Making choices.

This recommendation was made on 06 June 2014

The Manager told us that Eliburn was fully staffed at this time. Staff had also moved between teams to improve support and widen staff experience and ability to work with different people. There were now two nurses that helped ensure people with complex physical needs who required nursing care, could attend all of the time. This

was very positive and it is now important that staffing is maintained to ensure the best service for people. The recommendation has been met.

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

There is no additional information.

9 Inspection and grading history

Date	Type	Gradings	
1 May 2013	Unannounced	Care and support	5 - Very Good
		Environment	5 - Very Good
		Staffing	4 - Good
		Management and Leadership	4 - Good
21 Apr 2010	Announced	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	5 - Very Good
		Management and Leadership	Not Assessed
23 Jun 2009	Announced	Care and support	4 - Good
		Environment	5 - Very Good

		Staffing Management and Leadership	5 - Very Good 5 - Very Good
18 Jun 2008	Announced	Care and support Environment Staffing Management and Leadership	4 - Good 4 - Good 4 - Good 4 - Good

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

You can also read more about our work online.

Contact Us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

www.careinspectorate.com

 @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is c?nain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

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.