

Hepburn Court, West Lodge Care Home Service

Blair Avenue
Glenrothes
KY7 4RT

Telephone: 01592 562600

Type of inspection:

Unannounced

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Service provided by:

Leonard Cheshire Disability

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About the service

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at www.careinspectorate.com.

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

Hepburn Court, West Lodge is contained within the Glamis House complex. It is a residential service offering 24 hour care for up to 12 people with a physical and/or sensory disability or a learning disability.

Hepburn Court, West Lodge are two well-appointed, purpose-built premises with their own entrance points and there is opportunity for staff and residents to meet with others, if desired. Both houses are located in pleasant, landscaped grounds and gardens.

Accommodation is provided in spacious single rooms with en-suite facilities, including a shower. Suitable equipment to assist with moving and handling is installed. There is a spacious sitting/dining room with access to a patio and sheltered grounds. The houses have their own small kitchen area, sluice and laundry. Each house has a spacious bathroom and toilet.

What people told us

Prior to the inspection we received seven completed Care Standards Questionnaires (CSQs) from people using the service and their families, of these three indicated that they were overall very happy with the care and support provided by the service, the other four indicated they were happy.

Comments included:

"Care and welfare have improved over the years and I have to recognize this, there's a way to go in certain areas."

"Individual staff and their personalities (or lack of) can make or break the day for service users. Some staff are happy to do as little as possible to get through a shift, others go the extra mile."

"Big turnover in staff recently has led to x being unsettled again and x's staff have no control over these decisions often made by management without explanations to back up changes."

"I'm very happy with everything and I've got a great relationship with the staff."

"My brother, its his forever home, I feel he feels very happy"

"Overall I am happy but concerned about the inconsistent level of care given by staff. Management need to ensure a high level of care is given and more robust quality assurance procedures are implemented."

During the inspection we spoke with five people using the service and seven relatives to seek their views on the quality of care and support, they told us:

"I'm happy. X's happy so that's what matters."

"He has a good time there."

"Always talking about different ones (staff)."

"Overall I am happy."

"Some minor communication issues." (in relation to not knowing about appts until after the event)

"We haven't had a review for a while now."

"We are as happy with the support as we can be."

"We are kept well informed."

"Very good care and support."

"In general its very good."

"All the staff seem to be very good."

"Usually has a review once a year."

"I miss my house but I'm settled here."

"I can't complain, the staff are all very good to me."

"I'm not happy here."

"I'm doing fine."

"I still help running errands to the local shop."

"I am at one here."

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	4 - Good
How good is our leadership?	not assessed
How good is our staffing?	not assessed
How good is our setting?	not assessed
How well is our care and support planned?	3 - Adequate

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

4 - Good

People could be confident that their needs would be fully met as agreed in their personal plan and that their wishes and choices would be respected. We saw that person centred plans (PCPs) had been completed. We saw that the information contained in these were set out well and accessible. Information covered aspects of people's support needs and how these were to be met. There was also other important information about people's health needs, what was important to them and how they wished the support to be provided. Staff should ensure that these plans include information about possible triggers, signs and symptoms that indicate a deterioration in someone's health and wellbeing are clearly recorded.

There was clear reference to advice and guidance from other professionals and where additional guidelines or protocols had been provided these were easy to find which would help to ensure that people received the support they required. During this inspection we highlighted examples where staff had not recorded their actions in relation to people complaining of feeling unwell. It also wasn't evident in one file we looked at that staff had followed GP advice for someone. The manager agreed that this was a training issue for staff. We were also concerned that there were no recordings for one individual so we could not see how staff have supported this person as agreed. This had been picked up by an audit previously but no action taken. The manager took immediate action to address this during our inspection.

People should be recognised as an expert in their own experiences, needs and wishes. A method of gathering this information and discussing it with people is through formal reviews. It was disappointing to find that half of the people who used the service had not had regular opportunities to discuss their support over the past twelve months. See Key question 5 for further detail.

During the inspection we witnessed warm, freindly, professional and supportive interactions between staff and the people they were supporting. Staff took the time to listen and where necessary act upon what the person was asking. Clearly peoples views wishes and concerns were dealt with respectfully.

Some people had enjoyed holidays and activities in their local communities. People were supported by volunteers to get out and about and one person had used the time with their volunteer to find their own volunteer placement which they enjoyed.

How good is our leadership?

This key question was not assessed.

How good is our staff team?

This key question was not assessed.

How good is our setting?

This key question was not assessed.

How well is our care and support planned?

3 - Adequate

People should expect that there care and support plans are right for them, that they set out how their needs will be met as well as their wishes and choices. We found that support plans had been developed in a person centred manner and did contain a range of information that would help guide staff to support people in the way that they wanted.

We looked at peoples finance records during the inspection, we found that these were not as robust as they should be and we discussed these with the manager during the inspection and to ensure that there are robust safeguards in place for people using the service then finance checks and audits should include any receipts, transactions and reconciliation with bank statements.

The service was using diaries to record daily care and activities such as diet, medication, family visits and health concerns, however the diaries we looked at did not always evidence how support was provided in line with the persons support plans, or how health concerns were evaluated and followed up. One person did not have a diary therefore there were no records of the daily support which meant that staff had no information to use to help them evaluate how effective the care and support was, or if any issues required to be addressed. The manager took immediate steps to re-introduce daily recording sheets for this person. We have again made this an area for improvement and restated the recommendatioon made at the last inspection (see recommendation 1) .

We saw that people had access to reviews which are a very important format in which people can give their views, evaluate the support provided, discuss issues and make plans for the future, however six of the 12 people who were being supported at the time of the inspection had not had these within appropriate timescales. The manager did not have an overview of when these were due, or whether they had or had not been held. The manager should develop and introduce a tool which would allow them to monitor if reviews were being held appropriately and to take action where they were not.

People using the service should have confidence in the staff because they are trained, competent, skilled, are able to reflect upon practice, and follow their professional and organisational codes. At our last inspection we suggested that staff would benefit from further training around learning disabilities, mental health and positive behaviour support. This remained outstanding at this inspection (see recommendation 2).

The manager has been supporting another part of the service, and this has had a negative impact on the quality assurance audits and these were not as effective as they should be at identifying and addressing issues such as the ones discussed in this report. It is hoped the manager will return to manage the service full time in the near future and that this will have a positive effect on ensuring that audits and checks are robust and effective and provide important safeguards for people using the service.

Areas for improvement

1. The manager should ensure that staff record information that describes how they have followed the care plan and relevant guidance or protocols.

This is to ensure that care and support reflects the Health and Social care Standards which state: 'My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected.' (HSCS 1.23).

2. In order to meet and plan for the needs of people being supported the Provider and Manager should review the training available to staff and ensure they have access to training in the following areas, Mental Health, Positive Behaviour support, Learning Disabilities and effective recording.

This is to ensure that care and support reflects the Health and Social care Standards which state: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes.' (HSCS 3.14).

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	4 - Good
1.3 People's health benefits from their care and support	4 - Good

How well is our care and support planned?	3 - Adequate
5.1 Assessment and care planning reflects people's planning needs and wishes	3 - Adequate

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