# WEST DUNBARTONSHIRE COUNCIL

# Report by the Director of Community Health & Care Partnership

# Community Health and Care Partnership Committee: 2<sup>nd</sup> February 2011

Subject: Care Commission Inspection Reports for West Dunbartonshire Council's Older People's Residential Services.

#### 1. Purpose

**1.1** To provide Members with information regarding the most recent Care Commission inspection reports received for each of the seven Older People's Residential Services operated by West Dunbartonshire Council. The report also highlights forthcoming changes to our external regulatory arrangements.

#### 2. Background

- 2.1 At the January 2010 meeting of the Social Work and Health Improvement Committee, Members agreed that reports on the outcome of Care Commission inspections for every service would be made on an annual basis unless that service achieved a grade of less than 3 in any of the thematic areas.
- **2.2** The Care Commission inspections continue to focus on any combination of four thematic areas; quality of care and support, environment, staffing and management & leadership.

### 3. Main Issues

- **3.1** Copies of the inspection reports for all services covered in this Committee report can be accessed on the Care Commission web-site; <a href="https://www.carecommission.com/index.php?option=com\_content&task=view&id=24&ltemid=45">www.carecommission.com/index.php?option=com\_content&task=view&id=24&ltemid=45</a>.
- **3.2** The Older People's Residential Services covered by this report are Boquhanran House, Dalreoch House, Frank Downie House, Langcraigs Centre, Mount Pleasant House, Willox Park and West Dunbartonshire Council Sheltered Housing.
- **3.3** Since last reported to Members, three services have been inspected twice by the Care Commission; Boquhanran House, Dalreoch House, and Mount Pleasant House, while Frank Downie House, Langcraigs Centre, and Willox Park have been inspected three times.

- **3.4** In each of the reports a number of positive statements were made. In particular, they referred to the views expressed by service users in relation to the support they receive and the staff.
- **3.5** The reports for the seven services were largely positive, with grades of adequate (3) to very good (5) being awarded.
- **3.6** The January inspection report for Dalreoch House contained one requirement;
  - To update its risk assessment for the building and perimeter to ensure the risk of a service user leaving unsupported is minimised. Timescale for completion was 4 weeks. This was completed and the requirement removed for the July inspection report.
- **3.7** The March 2009 and January 2010 reports, for Frank Downie House each contained two requirements. The requirements in the March 2009 inspection report were;
  - To ensure that adequate staff time was allocated to the provision and/or support to people who use services to enable engagement in a range of activities. The service increased staffing levels to allow more person centred activities to take place and reviewed how staff were allocated time to enable them to support service users in more individual activities. Timescale for completion was 3 months. This was completed and the requirement removed for the January inspection report.
  - To ensure that the sluice room conformed to best practice guidelines in infection control. Timescale for completion was 4 weeks. This was completed and the requirement removed for the January inspection report.
- **3.8** The two requirements in the January 2010 inspection report were;
  - To supply a training plan specifying how and when they would provide training to staff on responding to challenging behaviour including physically challenging behaviour. Timescale for completion was 4 weeks. The service arranged for staff to be sent on refresher training on dealing with aggression and was in discussions with outside agencies regarding behaviour management training for staff. The requirement was carried forward to the June inspection.
  - Update its risk assessment for the building and perimeter to ensure the risk of a service user leaving unsupported is minimised. Timescale for completion was 4 weeks. This was completed and the requirement removed for the June inspection report.
- **3.9** The June inspection report for Frank Downie House had one requirement which had been carried forward from the January inspection report;

- To provide staff training on challenging behaviour including physically challenging behaviour. Timescale for completion was 8 weeks. A training provider has been identified and there is a rolling programme for all staff to attend the course
- **3.10** The table below details the number of requirements, inspection dates and grades achieved during the most recent inspections that have taken place for all the services being reported;

	GRADINGS					
Service	Quality of Care and Support	Quality of Environm ent	Quality of Staffing	Quality of Management and Leadership	Inspection Date	Requirements
Boquhanran House	4	n/a	4	n/a	06.07.10	0
Boquhanran House	4	n/a	4	n/a	02.02.10	0
Dalreoch House	4	3	n/a	n/a	20.07.10	0
Dalreoch House	3	n/a	4	n/a	26.01.10	1
Frank Downie House	4	n/a	n/a	3	17.06.10	1
Frank Downie House	3	4	4	n/a	29.01.10	2
Frank Downie House	3	4	4	4	18.03.09	2
Langcraigs Centre	4	n/a	n/a	n/a	24.12.10	0
Langcraigs Centre	4	n/a	4	n/a	19.05.10	0
Langcraigs Centre	4	n/a	4	n/a	20.01.10	0
Mt. Pleasant House	3	n/a	3	n/a	05.07.10	0
Mt. Pleasant House	3	n/a	3	n/a	08.03.10	0
Willox Park	4	n/a	n/a	n/a	28.10.10	0
Willox Park	4	n/a	4	n/a	20.05.10	0
Willox Park	4	4	4	4	21.12.09	0
WDC Sheltered Housing	5	n/a	n/a	5	02.09.10	0

- **3.11** Social Care and Social Work Improvement Scotland (SCSWIS) will come into being in April 2011. It will be a new single, unified scrutiny and improvement body created by the merging of the Care Commission and the Social Work Inspection Agency. It is designed to provide the public with assurance about the quality of care services and social work. It is also charged with providing more streamlined and better co-ordinated scrutiny of service quality. This will be achieved by regulating and inspecting, assessing risk, providing guidance and advice, influencing policy and standards, supporting improvement and reporting publicly.
- **3.12** SCSWIS will be changing the manner in which they inspect all registered services. Inspections will be less frequent, more proportionate, risk based and less intensive. Other scrutiny and improvement activities will be more proportionate and in addition there will be less frequent and intensive inspections for well performing services, and greater use of unannounced inspections.

### 4. **People Implications**

**4.1** Officers from the relevant client sections continue to monitor their services.

**4.2** There were no additional personnel implications associated with addressing the requirement in the Frank Downie House inspection report to ensure there was adequate staff time allocated to the provision and/or support to people who use services to enable engagement in a range of activities.

### 5. Financial Implications

- **5.1** There have been financial implications to the Council in identifying an external agency to provide training to the staff at Frank Downie House in relation to the training of staff in dealing with challenging behaviour. The total cost of this will be no more than £5,000.00.
- **5.2** There were also financial implications in the cost of upgrading the sluice room at Frank Downie House to conform to best practice guidelines in infection control.

## 6. Risk Analysis

**6.1** For any service inspected, failure to meet requirements within the time-scales set out could result in a reduction in grading or enforcement action which could have an impact on our ability to continue delivering the service.

## 7. Equalities Impact

**7.1** No significant issues were identified in a screening for potential equality impact of these reports.

### 8. Conclusions and Recommendation

- **8.1** The most recent Inspection Reports for these seven West Dunbartonshire Council services were positive and complimentary. In many instances it shows aspects of the services to be considered as very good.
- **8.2** Members are asked to note the outcome of these Care Commission inspection reports and the impending changes to the regulatory arrangements.

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Director of the Community Health & Care Partnership	
Date:	

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Appendices: Nil.

Background Papers:	The information provided in Care Commission Inspection Reports Web-site address: - <u>http://www.carecommission.com/index.php?option=com_c</u> <u>ontent&amp;task=view&amp;id=24&amp;Itemid=45</u> .

Wards Affected: All.