#### WEST DUNBARTONSHIRE COUNCIL

## Report by the Director of Community Health & Care Partnership

Community Health & Care Partnership Committee: 22 August 2012

Subject: Care Inspectorate Inspection Reports for Older People Residential Services Operated by West Dunbartonshire Council.

### 1 Purpose

**1.1** To provide Members with information regarding the two most recent inspections of the Council's own care home provision.

#### 2 Recommendations

2.1 The CHCP Committee is asked to note content of this report and that work which is ongoing or completed continues to ensure that the grades awarded to the older peoples' residential services within West Dunbartonshire will be increased to the quality levels expected by the Council.

### 3 Background

3.1 The Care Inspectorate inspections continue to focus on any combination of the four thematic areas; quality of care and support, environment, staffing and management & leadership.

#### 4 Main Issues

- **4.1** Copies of the inspection reports for all services can be accessed on the Care Inspectorate web-site; <a href="www.scswis.com">www.scswis.com</a>.
- **4.2** The CHCP Care Homes covered in this Committee report are Frank Downie House and Dalreoch House.
- **4.3** All grades relating to direct care arrangements are now graded at 3 adequate or better
- **4.4** It remains a management priority to have all the grades relating to all factors improved further.

### 5 Care Inspectorate Inspections

Frank Downie House was inspected on 30<sup>th</sup> May 2012 and the final inspection report was issued on 27<sup>th</sup> June 2012. Their inspection looked at the three themes of care & support, environment and staffing. The grade awarded for care & support was 3 – adequate, the same grade awarded in their previous inspection of January 2012 and reported to committee in June of this year. For the theme of environment they were also awarded a 3 – adequate. This is

a reduction from the 4 – good awarded the last time this theme was inspected in January 2010. For the theme of staffing the service was awarded a 4 – good, the same grade awarded when the theme was last inspected in the inspection of January 2010.

- **5.2** Included in their inspection report were 5 requirements that had to be addressed:
  - Ensure that personal plans which set out how service user's health, welfare and safety needs are to be met are devised and maintained. This was a requirement in the previous inspection report and inspectors viewed it as only partially met. Care plans have been transferred over to the new format and included more detail, however because the requirement was not fully met they reiterated it in this inspection outcome. At present work continues on the care plans, 75% have been audited and all issues actioned. The service is on target to have the work completed before the end of the three month period stipulated by the Care Inspectorate.
  - The home to ensure that repairs are carried out in a timeous manner: Outstanding repairs at that time were:
    - Carpets requiring replacement the service is choosing the carpets and awaiting a date for fitting;
    - Bathrooms require upgrading met with HEEDS on 30/7/12 to organise work:
    - 2 broken windows now replaced;
    - Wall lights requiring fixed awaiting repair; and
    - A heater required to be replaced replacement ordered awaiting delivery.
  - The Home must carry out regular audited checks on the building to ensure doors to rooms with harmful substances are kept locked and ensure that communal areas are not used for storage. This was to be completed within 24 hours of the receipt of the report. An audit checklist was devised immediately and the checks are carried out by senior staff on each shift and recorded.
  - Ensure that staff wear Personal Protective Equipment (PPE, aprons and gloves) in line with infection control guidelines. This was completed within 24 hours of the receipt of the report.
    - Staff were instructed by the Unit Manager to ensure PPE worn at all times.
    - Staff presently attending a programme of refresher Infection Control briefing sessions.
  - The Home needs to ensure that service users have the opportunity to take
    part in regular meaningful activities. The service needs to evidence that these
    are happening and review the effectiveness of changes to the way shifts are
    organised in accomplishing more meaningful activities. This is to be
    completed within 8 weeks of receipt of this report.
    - Rotas have been re-organised to ensure care workers have designated time to carry out activities
    - A meaningful activities programme is currently being devised

- **5.3** The report for Dalreoch House detailed 4 requirements that had to be addressed:
  - Ensure that personal plans which set out how service user's health, welfare
    and safety needs are maintained and updated as regularly as stipulated within
    the individual care plan. This is to be completed within two months from the
    publication of the report.
    - The manager has audited 50% of the care plans and has given staff deadlines for reviewing and updating where required. Auditing of the remaining care plans has commenced and will be completed shortly.
  - Existing sluice facilities to be ventilated to prevent malodours, toilets and bathrooms should also have their ventilation/extractor systems checked to ensure they are working effectively to reduce malodours. This is to be completed within one month from the publication of the report.
    - A contractor has been identified by HEEDS, currently waiting on visit to check ventilation system.
  - All bathrooms and toilets to have emergency pull cords in them. This was completed within one week from the publication of the report.
  - To make proper provision for social events, entertainment and activities which
    meet the assessed need and choice of people who use the service and are in
    line with good practice. West Dunbartonshire CHCP must ensure that suitable
    skilled and experienced staff are working in the care service in such numbers
    as are appropriate to the range of duties which care staff are expected to
    perform. This was to commence within twenty four hours and completed
    within eight weeks of the report being issued.
    - The rotas have been reorganised to ensure designated time being allocated to care staff to carry out meaningful activities.
    - A weekly programmed of activities has been devised and will be reviewed in one month with staff and service users.
- **5.4** The table below sets out the movement in grades for the units over the last two inspections:

Home	Previous Grades					<b>Current Grades</b>					
	1	2	3	4	5	1	2	3	4	5	
			05.11		0011						
		25 November 2011					30 May 2012				
Frank Downie House											
Care & Support			$\checkmark$					<b>V</b>			
<ul> <li>Environment</li> </ul>								<b>√</b>			
Staffing									$\checkmark$		
Management & Leadership			<b>√</b>								
	30 January 2012					31 May 2012					
Dalreoch House											
Care & Support			$\checkmark$					$\checkmark$			
Environment		$\checkmark$					$\checkmark$				
Staffing											
Management & Leader									<b>√</b>		

## 6 Update on Quality Improvement

- **6.1** All homes have introduced new care plans and these are being completed for all residents.
- **6.2** A standardised review process has been put in place for all residents.
- **6.3** A staffing review has been undertaken and shared with the Care Inspectorate.
- 6.4 All Homes have developed a Continuous Quality Improvement Programme which was completed by the end of June 2012.
- 6.5 A recruitment process to fill all vacancies has taken place with only catering vacancies to be filled.
- The Managers of each home have identified outstanding repairs and are in the process of agreeing a maintenance programme with HEEDS.
- **6.7** Staffing schedules are being reviewed
- **6.8** A review of policies and procedures is underway.
- **6.9** Additional IT has been procured to improve opportunities for on-line learning for staff.
- 6.10 Future work will include a learning and development plan for staff, a review of activities for residents and improvements in communication with residents and families.

## 7 People Implications

- **7.1** There are personnel implications for CHCP managed care homes in addressing requirements in the inspection reports.
- 7.2 This is where the services need to look at how daily shift patterns are organised so that staff are allocated the task of organising meaningful activities for residents so that they see an increase in the amount of activities taking place within the home.
- **7.3** Staff from the Quality Assurance Section monitors the independent sector care homes and this section will now provide this service to Council run homes in the future.

### 8 Financial Implications

8.1 There are financial implications for the CHCP in addressing the requirements to ensuring premises and facilities are maintained in a good state of repair internally and externally

8.2 For Frank Downie a programme of planned maintenance is required. In addition we anticipate the requirements to improve bathing facilities and ventilation at Dalreoch House will incur expenditure. However the whole estate requires considerable investment in order to deliver services which meet modern standards for the care of vulnerable older people.

## 9 Risk Analysis

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

## 10 Equalities Impact Assessment (EIA)

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

# 11 Strategic Assessment

- 11.1 Grades awarded to a service after a Care Inspectorate inspection are an important performance indicator for registered services. This is a key element in achieving progress in benchmarking against similar services.
- 11.2 Addressing the requirements contained in reports in a timely fashion can lead to improved grades being awarded in subsequent inspections for services, such as with Dalreoch House. This will reflect positively in meeting key performance indicators and ensuring that our care homes are fit for purpose.

Keith Redpath

Director of the Community Health & Care Partnership

Date: 30 July 2012

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**Appendices:** None

**Background Papers:** The information provided in Care Inspectorate Inspection

Reports Web-site address: -

http://www.scswis.com/index.php?option=com\_content&ta

sk=view&id=7909&Itemid=727

Wards Affected: All.