

Care service inspection report

East Kilbride & District Dementia Carers' Group

Support Service Without Care at Home

169 Pine Crescent
Greenhills
East Kilbride
Glasgow
G75 9HJ

Inspected by: Alison Iles

Type of inspection: Unannounced

Inspection completed on: 21 March 2012



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Service provided by:

East Kilbride & District Dementia Carers' Group

Service provider number:

SP2010011344

Care service number:

CS2010272692

Contact details for the inspector who inspected this service:

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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

Quality of Care and Support	5	Very Good
Quality of Environment	5	Very Good
Quality of Staffing	5	Very Good
Quality of Management and Leadership	5	Very Good

What the service does well

East Kilbride and District Dementia Group provide a centre based support service for up to 6 adults at any one time with a diagnosis of dementia. The service has a clear set of aims and objectives which, from the findings of this inspection, they were clearly achieving. This included clearly involving people who use the service and their carers in determining how the service operated and what their expectations were from attending.

They ensure that those who use the service are provided with a wide range of opportunities to meet their care and support needs both in a group and 1:1 basis.

What the service could do better

The service should continue to keep up the work they are currently undertaking to ensure it is fully established and embedded in the service

What the service has done since the last inspection

This is the first inspection of this service.

Conclusion

This is a quality service which provides high standards of support for people with dementia and their carers.

The service is committed to continually reviewing and improving practices to ensure that it continues to meet peoples needs in a person centred way. This is clearly documented within individuals personal support plans.

Who did this inspection

Alison Iles

1 About the service we inspected

The Care Inspectorate is the new regulatory body for care services in Scotland. It will award grades for services based on the findings of inspections. This service was registered with The Care Inspectorate on 1 April 2011.

East Kilbride and District Dementia was registered in March 2011. The service was registered to provide day care to a maximum of 6 older people with a diagnosis of dementia. The service operates Monday to Saturday from 9am to 4.30pm. At the time of the inspection 18 people were accessing the service over a week and 5 people were in attendance on the day of the inspection.

The service is based in a terraced house in the Greenhills area of East Kilbride. Transport is provided by the service to transport people to and from the base as well as to assist with outings.

The aims and objectives of the service were last reviewed in October 2011 and state that they aim to:

- * provide a service to benefit people with dementia and their carers
- * to continually strive to improve quality of care, support opportunities given to service users and carers
- * maximise service user and carer involvement in Inclusion and Participation
- * work in partnership with other Groups and Organisations for the benefit of people with dementia and carers

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.scswis.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

We compiled this report following an unannounced inspection. The inspection was carried out by Alison Iles, Inspectors for the Care Inspectorate. The inspection took place on the 21 March 2012 from 9am to 5.15pm Feedback was provided to the management on the day of the inspection.

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

- * observing how staff work
- * personal plans of people who use the service
- * training records
- * meeting minutes for those who use the service, their relatives and staff
- * accident and incident records
- * discussions with various people, including:
 - the manager
 - care staff
 - the people who use the service
- * examining equipment and the environment

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.

A comprehensive self evaluation was completed and submitted by the service prior to this inspection. This clearly reflected how the service involved people in all aspects of service delivery.

Taking the views of people using the care service into account

Those using the service on the day of the inspection highlighted that they really enjoyed attending the service and the range of opportunities provided to them while there.

One person was able to state that they had spoken to staff about going shopping in the town centre as they had not been able to do this for some time. They advised that this was accommodated by the service and that they had had a great day out with a 1:1 basis with staff.

People spoke highly of the meals they received while in attendance and very positive relationships were evident with staff and each other.

Taking carers' views into account

No carers were spoken with as part of this inspection. However, we were presented with a 'Carers Testimony' that had been written in August 2011. This clearly reflected on the very good work that the person felt that the service did particularly in relation to their relative. They talk about care their relative receives and the positive friendships that they have been able to build up while attending.

They talk about the 'fabulous' food and staff and the fact that the service provides people with dementia with 'their only chance of retaining at least some sort of normality, dignity and fun in their life.'

They also comment on the strong support that they as a relative receive from staff and the carers group

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

Taking in to account the evidence gathered prior to and at the inspection the service was performing at a very good level in relation to this quality statement.

The service had a detailed participation strategy in place. This clearly reflected the ways in which those who used the service and their carers could have a say on how the service operated

The Service had developed a number of strategies to ensure that service users and their carers views were sought regarding service provision. This included questionnaires, service user and carer meetings and forums. There was evidence that where issues had been raised the service had responded appropriately.

Service users were able to comment on the service provision when personal plans are devised, implemented and reviewed. Individuals indicated that they felt that their views were taken into account and acted upon by staff.

A four weekly service user's forum is in place. These meetings rotate to different days on the week to ensure that all those accessing the service have an opportunity to contribute to what is happening in the service. They are used to allow people to discuss what activities and outings they would like to take part in as well seeking peoples view on the overall service provided. These meetings are minuted and the minutes of these are made readily available to service users and their carers.

There are regular meetings with carers. This includes a monthly carer support group where people are provided with opportunities to discuss or highlight any changes they would like to see to the service. The group provides direct support to carers of those using the service as well as arranging regular guest speakers to speak about topics people may find beneficial.

A management committee have the overall management responsibility for the whole service. There is a standing agenda item at their monthly meetings that allows the manager of the service to feedback service users and carer's comments on the service provided. The management committee have close relationships with the service and regularly attend key events and celebrations.

The service has a web site and uses social media, Facebook, as a way to keep people up-to-date with what is happening in the service

A bi-monthly newsletter, which people are encouraged to contribute, to is also produced. This not only highlights what is happening in the service but other key events in the local community such as the dates and times of the Dementia Café meetings.

The service had a detailed and accountable complaints procedure in place and service users were provided with information on how to use this.

Information on advocacy services was available for service users if they had the need to access such a service. There was evidence that staff would support service users in this area.

All the above ensure that service users and their carers have a clear voice in determining how the service is delivered around their needs and wishes.

Areas for improvement

The service are aware of the need to continually review they ways in which they consult with service users and their carers with regard to the care and support provided. The management continually reviewed the approaches used to try to encourage people to be more critical of the service provided but to date advised that this had not been successful. We will monitor how well the service continues to engage with people at future inspections.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 2

We enable service users to make individual choices and ensure that every service user can be supported to achieve their potential.

Service strengths

Taking in to account the evidence gathered prior to and at the inspection the service was performing at an excellent level in relation to this quality statement.

From discussion with service users, staff and examination of service users' personal plans there was clear evidence that service users' views were sought and used to inform the care and support provided. Service users were able to exercise choice in all areas of their care.

Individuals personal plans were reviewed within set timescales. There was evidence of a pre review meeting taking place, which allowed service users to raise any issues they may have at the review meeting as well as ensuring that service users have all the relevant information relating to the service they receive. These meetings were recorded.

Detailed life histories were completed on service users and were used by all staff as a way to get to know people and their histories.

A key worker system was in operation and staff had a good knowledge of service users' preferences. Service users were encouraged to choose their own key workers and this could be reviewed over time.

Service users were encouraged to participate in a range of activities both in the service and local community. There was clear evidence that although staff would plan activities that they were also very reactive to the wishes of the service users on the day. This resulted in staff consulting with service users on a daily basis and providing activities that were clearly dictated by the individuals attending. Where service users did not wish to participate in a certain activity they would be supported by staff to explore other options.

Service users spoken with commented very positively on the opportunities made available to them and this included both group and individual opportunities. People were able to comment on where they had made requests to go on outings either individually or in groups that the service had accommodated this. One service user, during the inspection, was able to comment on a recent shopping trip that had been arranged by the service to meet her request and the benefits she had got from this.

The service made good use photographs in evidencing the range of opportunities that service users can take part in. They now ensure that family members can have access and copies of these photographs and this helps to encourage discussion with the service user when at home.

Birthdays, and other important occasions, were marked according to the wishes of the service users.

Service users were provided with a range of snacks and a main meal when they were at the service. The service had a new cook and those using the service had been asked to comment on how they felt the cook was settling in to the service as well as

commenting on quality of food provided. Service users were actively encouraged at the time of each meal to express their views on the food provided. During the inspection the cook had introduced a new meal and comments from users were favourable.

Areas for improvement

The service should continue with the excellent work already established which shows how service users are fully encouraged and supported to make choices and supported to achieve their potential. This includes integration in to peoples local communities.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

Number of recommendations: 0

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

Taking in to account the evidence gathered prior to and at the inspection the service was performing at a very good level in relation to this quality statement.

See Quality Statement 1.1 for detail on participation.

From evidence presented at the inspection it was very clear that where changes were being made to the accommodation service users were encouraged to take part and make choices. This ranged to colours for the walls to choosing furnishings for all areas of the accommodation they accessed.

Areas for improvement

As referred to in Quality Statement 1.1.

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

Taking in to account the evidence gathered prior to and at the inspection the service was performing at an excellent level in relation to this quality statement.

The service took every opportunity to ensure that the environment was safe and service users protected.

The service is situated with in a mid terrace property in the Greenhills area of East Kilbride. The accommodation consists of a lounge, small conservatory used as a dining and activity area and down stairs bathroom. A kitchen is available for staff to prepare snacks and a cooked lunch. Service users also had access to secure well maintained outdoor space.

Regular checks were carried out on the accommodation to ensure its safety and

environmental risk assessments were available and regularly reviewed and updated as necessary. Contracts for the maintenance of equipment were in place to ensure that equipment was safe and in working condition.

Robust and accountable recruitment procedures were in place for the recruitment of staff and volunteers. Staff were kept informed of any changes within the Service that had any impact on their work.

Staff had access to a range of training relevant for ensuring the safety of service users. This included moving and handling, first aid adult support and protection and crisis prevention intervention (restraint). Where needed this training was regularly updated.

Individuals' personal plans contained risk assessments relating to the needs of service users. These were regularly reviewed and up dated.

The service regularly audited accident and incident records and where possible action was taken to reduce the possible risk of these re occurring.

All service users were provided with relevant information in relation to the relevant regulations that covered the service. This included information on health and safety and the insurance cover for the service.

The service had a range of policies and procedures which were relevant for the service they provided There was clear evidence that these were continually being reviewed and updated taking in to account current best practice.

Areas for improvement

None identified at this inspection.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

Number of recommendations: 0

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

Taking in to account the evidence gathered prior to and at the inspection the service was performing at a very good level in relation to this quality statement.

See Quality Statement 1.1 for detail on participation.

Service users have been asked about their view of the staff at staff appraisals. These comments are then used by the service to inform staff practice and give first hand assessments of the care provided to those using the service.

Service users had ample opportunity to discuss their level of staff support with staff and management on a daily basis and during review meetings.

Areas for improvement

As referred to in Quality Statement 1.1.

As an area for improvement the service should review their recruitment policies and procedures to ensure that these clearly reflect how service users and their carers will be involved in the recruitment of future staff.

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

Taking in to account the evidence gathered prior to and at the inspection the service was performing at an excellent level in relation to this quality statement.

The Service had a clear process in place to identify and access training relevant to both individuals and groups of staff. Individual training records were retained on all staff members which clearly identified training undertaken.

East Kilbride and District Dementia have a small core group of staff who have been employed in the service for a number of years. Staff had good access to training opportunities both external and in-house. The training programmes took account of the need for all staff to register in due course with the SSSC. There was evidence of staff having access to both mandatory and non-mandatory training which was relevant in meeting the service users' needs. The majority of staff employed in the service held a relevant social care qualification.

The effectiveness of training was evaluated by the use of questionnaires, individual supervision, appraisals and was discussed at continuous professional development reviews.

Staff achievements are recognised by the Management Committee. Service users and their carers were encouraged to feedback directly to staff during their appraisals. The service found that his encouraged staff to reflect on there practices.

All staff were familiar with the SSSC Codes of Conduct and the National Care Standards relevant to the service. The service uses these documents to clearly influence staff practice and the way the service operates and engages with service users and carers.

The Service had relevant polices and procedures in relation to adult support and protection and staff had received relevant training regarding their responsibilities in this area.

Areas for improvement

The service should continue to review and support staff training opportunities to ensure that they continue to have a professional, trained and motivated work force.

Grade awarded for this statement: 6 - Excellent

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

Taking in to account the evidence gathered prior to and at the inspection the service was performing at a very good level in relation to this quality statement.

See Quality statement 1.1 for details on participation.

Service user and their carers are provided with a range of opportunities to feedback on staff and management and leadership of the service.

People who use the service and their carers have direct access to the services management committee and are able to directly feedback to the committee their views of the service and how it is managed.

Currently a member of the services Carer Support Group sits on the Staff Supervisory Group, which line manages the service co-ordinator and senior staff member.

Areas for improvement

See Quality Statement 1.1 for detail.

Although there is clear evidence that the views of service users and their carers are taken to the management committee for discussion currently the service do not directly feedback the outcomes of the management committee meetings and changes agreed as routine to service users and carers. The service should consider introducing this as a standard item to agenda of service user and carers meetings to ensure a flow of information both up the way and directly back to those who use the service and their careers. This will help to improve communication and also allow people to have a say on decisions made by the Committee

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 2

We involve our workforce in determining the direction and future objectives of the service.

Service strengths

Taking in to account the evidence gathered prior to and at the inspection the service was performing at a very good level in relation to this quality statement.

Management of the service was effective. Regular minuted staff meetings were held where staff were encouraged to express their views on how the service could be improved or discuss any issues that may have arisen. The minutes of these meetings were shared with the Management Committee which ensured staff views were known and taken into account. Staff and volunteers were also encouraged to attend the regular Management Committee meetings to express their views and take part in discussions.

As stated under Quality Statement 3.3 staff had excellent training and development opportunities. Appropriate supervision and appraisal systems were in place to support and encourage staff to express their views openly on any areas of the service. Where issues or suggestions had been raised we were able to see how these had been progressed by the management.

The service had an annual development day planned where staff and the Committee will get together to review the care provision and agree the future aims and objectives of the service.

All the above ensure that this is a staff team who are clearly involved in making decisions around how the service operates as well as setting out its future objectives.

Areas for improvement

The service should continue with the very good work already in place that clearly demonstrates people's involvement in determining the direction and development of the service. We will review how well the outcomes of the planned development day impacts on the overall service at the next inspection.

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

Quality of Care and Support - 5 - Very Good	
Statement 1	5 - Very Good
Statement 2	6 - Excellent
Quality of Environment - 5 - Very Good	
Statement 1	5 - Very Good
Statement 2	6 - Excellent
Quality of Staffing - 5 - Very Good	
Statement 1	5 - Very Good
Statement 3	6 - Excellent
Quality of Management and Leadership - 5 - Very Good	
Statement 1	5 - Very Good
Statement 2	5 - Very Good

6 Inspection and grading history

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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Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iarrtas.

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本出版品有其他格式和其他語言備索。

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