

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

Type of inspection: Unannounced

Inspection completed on: 6 March 2015



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Service provided by:

East Kilbride & District Dementia Carers' Group

Service provider number:

SP2010011344

Care service number:

CS2010272692

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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	6	Excellent
Quality of Staffing	5	Very Good
Quality of Management and Leadership	6	Excellent

What the service does well

The service clearly meet the needs of those who attend the service and their families.

The service continues to involve those who use the service and their carers in determining how the service operated and what their expectations were from attending.

We continued to find that the service provides people with a high level of support that where possible is tailed to meet the needs of the individual. People who use the service continue to be provided with a wide range of support and opportunities to meet their emotional and social needs both in the local community as well as in the centre.

Families were also provided with a high level of support through the Carers Support Programme.

What the service could do better

The service continually strives to improve where possible by keeping up to date with current best practice in Dementia care and ensuring it has a very motivated and trained staff group.

What the service has done since the last inspection

The service had continued to keep up with best practice guidelines in terms of care and support for those people living with dementia.

The service has continued to evolve and develop to meet the needs of those who attend the service and their families.

Conclusion

Once again our findings are that this is a very good service that provides very high standards of care and support for those who use the service and their families.

The service remains committed to reviewing and improving practices to ensure that it meet people's needs in the best possible way with a well-trained and motivated staff group.

1 About the service we inspected

East Kilbride and District Dementia was registered in March 2011. The service was registered to provide day care to a maximum of six older people with a diagnosis of dementia. The service operates Monday to Saturday from 9am to 4.30pm. At the time of the inspection twenty three people were accessing the service over a week and six people were in attendance on the day of the inspection. The majority of people attend the service one or two days a week.

As a result of a waiting list the service had submitted an application to operate the service on a Sunday. It was hoped that this variation would be granted in April 15 to allow the service to address this.

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.

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 6 - Excellent

Quality of Staffing - Grade 5 - Very Good

Quality of Management and Leadership - Grade 6 - Excellent

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

We compiled this report following an unannounced inspection. The inspection was carried out on the 6 March 2014 from 9am to 5.30pm 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

What the service has done to meet any recommendations we made at our last inspection

No requirements or recommendations were made at the last inspection.

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-assessment had been completed by the service prior to this inspection. There was evidence that staff, service users and families had contributed to this.

This highlighted what the service thought it did well and highlighted what improvements they planned to make.

Taking the views of people using the care service into account

We spoke to the 6 people attending the service on the day of the inspection. All spoken with commented very highly on the service they received and the opportunities made available to them. They spoke about the range of activities and outings they could take part in and advised that they were always consulted on anything happening in the service, that included what they would do on the days they attended. They spoke about the flexibility of the service and the ability to head away for the day if the weather was nice.

A meeting took place during the inspection where people were asked what qualities they would like to see in any new staff appointed to the service. This led on to an impromptu discussion about what people thought of the existing staff. They said any new staff should just be like the ones already employed they spoke highly of the relationships they had with staff and the care and support they received. The open

and warm relationships between staff and service users were evident during the inspection.

People were not aware of their personal plans but this was related to their memory.

Taking carers' views into account

We did not speak to any carers at the time of the Inspection.

The following comments have been made by relatives of those who attend the service over the past year.

- High quality of leadership provided leads to positive service.
- Homely atmosphere ensures clients need can be swiftly identified and high standard of personal care provided.
- Regular outings lead to contented clients.
- All staff are kind friendly and patient but most importantly are good natured and happy in their role All are respectful to clients.
- Regular asses meetings allow carers and client to comment or make suggestions which allows the service to be personalised.
- I congratulate the management team on the efficiency of their service all of which is providing a much needed care service and respite for carers.
- My sister is a fairly recent service user. She was a bit uncertain at first and reluctant to return but Donna spent time talking to her and myself and brother to get to the bottom of her concerns. It was suggested she attend a different day of the week and she is now settled in really well. She is so animated and tells us all about her day and is always full of praise for all the staff and thoroughly enjoys the lunch provided. She looks forward to her day.
- When my father first started the club he was withdrawn and very reluctant to get out his bed. Since starting the club his outlook has improved greatly and is now happy to get up in the mornings on the day of the club. The other days he is now getting up.
- I can only thank everyone at pine as they have greatly improved the quality of my fathers' life and I know he really enjoys his time with you.
- All staff provided us with the appropriate information and answered questions we had. This made us feel at ease and helped us to make an informed decisions to use the service.
- All staff are person centred focused and support each individual according to their level of need. All my mums needs have increased this service has adapted to meet these.
- This is an excellent service and I would recommend anyone who has family/friend with dementia to access it. Also support given to carers and other family members is of a high standard. My mum appears to enjoy here

time whilst there.

- At start of placement was given a pack which fully outlined the services of the centre policy statements care standards and various leaflets including complaint which were very informative and excellent reference.
- Mum was given a personal diary which is brought home and let's me have a flavour of what she did and if she participated. I can then ask mum questions on her day based on the information given.
- I am informed of regular meetings where I can get additional feedback give my input and meet others in the same position. I have also been informed of training for carers which I have signed up to.
- Care provided to my mother is first class. She is stimulated by visits that good food and care specifically tailored to her needs I receive photos of her outings and activities.
- Kept well up to date by text e-mail photos telephone calls.
- All staff treat my mum with respect care and fun. There are smiling faces from pick up to drop off.
- When new people start they are introduced.
- The six monthly assessments are well structured and interactive with client and carer. Offers of additional help are made and actioned.
- Members of staff are always enthusiastic helpful and professional
- The whole service instills confidence for both mum and myself.
- This is a priceless service for both of us.

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 an excellent level in relation to this quality statement.

We acknowledge that the service continues to review and develop new ways in which to seek the views of those who use the service and their families in relation to the quality of care provided.

The Service reviews its participation strategy on a regular basis to ensure it reflects the ways in which it involves those using the service and their representatives in influencing the way the service is provided. This included meetings, questionnaires, 1:1 discussions and use of communication aids such as "emotions" cards..

The service can demonstrate that it attempts to involve those who use the service, their representatives and staff in discussions about the service and how the outcomes can be improved for those using it.

Regular meetings take place with families and include a monthly carer support group where people were 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 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.

Management were proactive in evaluating and reviewing the systems in place to ensure they are effective and where possible improve upon them.

Changes made as a result of consultation were clearly fed back to all parties.

The service makes very good use of its website and social media as a way to keep people up-to-date with what is happening in the service as well as fundraising events.

Individuals personal care plans continued to show that those using the service and their families had contributed to the development and ongoing review of these. This was confirmed by those using the service and from written comments received by the service from families.

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 continues to ensure that those who use the service and their families have a clear voice in determining how the service was delivered around their needs and wishes.

Areas for improvement

The service should continue with the excellent work it already undertakes to ensure that especially those using the service clearly influence how the service operates and how their care and support needs are addressed.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

Number of recommendations: 0

Statement 3

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

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 ensured that it assisted people who attended the service to ensure that their health and well-being needs were being addressed. This was evident in personal care plans, and was confirmed in our discussions with those using the service and through observations. Overall the personal plans seen contained very good information relating to how the persons care and support needs should be met in a person centred way while attending the service. This included any risk assessments being completed and updated as necessary.

The service has appropriate procedures to manage people's medication. At the time of this inspection there was no one needing assistance from staff in this area.

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. This information was also used to inform activities.

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.

Staff complete a monitoring sheet for every individual after each visit which considers the following areas: orientation, mobility, concentration, interaction, participation, memory, enjoyment. This allows staff to monitor these key areas and ensure that where changes are noted these are fed back to families and if need be the service adjusted to meet the persons changing needs.

Service users continued to be 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 commented positively on the meals provided. Those using the service were still to express their views on the food provided after each meal.

A number of service users had daily diaries which staff completed at the end of each visit. These included information on what the person had done that day as well as information around whether they had eaten and drank well. These were then taken

home by the individual and could be used by families to discuss what happened that day. During our visit service users asked staff to complete these for them and advised us that their family members liked to be able to read what they had done that day. It also acted as a memory prompt for the individual.

People who attended the service were provided with a wide range of opportunities both in and out with the services accommodation. Recent outings included visits to Burns Cottage, Callander House, Clyde Valley garden centres and the local shopping centre. There were also a range of activities available in-house many of which were used to continue to stimulate people's memories.

The service made good use of local resources and had teamed up with Alzheimer Scotland, NHS Community Mental Health Team and the Social Work Department to open East Kilbride's first Memory Café which met monthly and was attended by those using the service.

The service continued to make very good use photographs in evidencing the range of opportunities that service users took part in. Families were provided with these photographs and this, along with the daily diaries, helped to encourage discussion with the service user when at home. Families had also commented favourably on receiving these photographs.

Areas for improvement

Although some six monthly reviews of personal care plans had not been carried out management were aware of this and were addressing.

Although review minutes were available these were not kept with the persons personal plan as an area of improvement we would suggest that all documentation relating to the individual be kept together. This will help to ensure that if any actions are agreed at the review these can be taken forward and plans altered as necessary

Some residents had been attending for a number of years and some information had not been updated since they started in the service. It may be beneficial for the service to revisit this especially the Getting to Know You and your likes and dislikes to ensure these were still reflective of the individual.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 2: Quality of Environment

Grade awarded for this theme: 6 - Excellent

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 presented we found that the service was now performing at an excellent level in relation to this Quality Statement.

See Quality Statement 1.1 regarding Participation.

Management were able to show that they continued to consult with those using the service about the accommodation and any changes made to this.

Areas for improvement

See Quality Statement 1.1 for detail on participation.

Grade awarded for this statement: 6 - Excellent

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 is situated 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. The upper floor of the building is mainly used for staff although service users can access the upstairs bathroom Service users also had access to secure well maintained outdoor garden space.

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.

Accountable recruitment procedures were in place for the appointment of staff and volunteers. We saw that areas of the accommodation were welcoming and clean and fresh. Very good attention was paid to any potential infection control issues

People we spoke to confirmed that they felt very safe in the service.

Two staff had qualifications covering health and safety. Risk assessments were carried out in relation to the accommodation as well as regular audits that included physical checks on the accommodation.

There were a range of policies and procedures in place to ensure that the environment was safe and service users protected. There was evidence that management regularly reviewed and updated these as needed.

Repairs and maintenance were carried out quickly. Maintenance contracts were in place for equipment and regular checks were being carried out on this equipment. This included electrical equipment.

Appropriate checks were carried out on the services mini bus this included routine servicing.

There was evidence that where other agencies such as Environmental Services had visited and where required action to be taken this was done.

Areas for improvement

Management were aware of the need to continually keep the environment under review to ensure it remained safe for residents.

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 presented we found that the service continued to perform at a very good level in relation to this Quality Statement.

See Quality Statement 1.1 regarding Participation.

The service continued to seek the views of those who used the service and their carers in relation to staffing.

This was done in a range of ways including at recruitment, via staff appraisals and discussions at care reviews.

These comments can be used to inform staff practice and give first hand assessments of the care provided to those using the service.

The service was about to recruit additional support staff due to plans to open the service on a Sunday. At the time of the inspection those using the service had been asked about what qualities they would like to see in any new staff appointed.

Areas for improvement

See Quality Statement 1.1 for detail on participation.

Management were aware that this was an area that needed further development and that the processes in place remained under review. We will continue to monitor this at future inspections.

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 still performing at an excellent level in relation to this quality statement.

A well trained and motivated work force was in place. All support staff had been in post for a significant number of years and held relevant qualifications in care as well as well as attended more specific learning opportunities related to the support needs of those they provided support to.

A training programme was in place. This reflected all planned training and was being added to as additional training needs came to light. This included in house training as well as training provided by external bodies such as NHS.

Since the last inspection staff had undertaken a wide range of training and conferences that included: moving and handling, Best Practice in Dementia Care, emergency first aid, cognitive stimulation therapy, making dementia connections and adult support and protection. All staff were currently under taking a course on understanding the care and management of diabetes.

Staff spoken with confirmed that they had access to a wide range of training that they were supported to attend.

They felt that the training provided was relevant to their roles and responsibilities and influenced their practice.

They also advised that they were given sufficient time to undertake this training and they evaluated all training.

The service had policies in relation to staff appraisals and supervision, which set out how often these should take place. Individual staff supervision sessions were in place. This allowed management to monitor staff practice and ensure that any staff development needs were identified and actioned quickly. Staff were able to set their own training and development needs which management helped people to achieve.

When staff meetings took place, staff stated that they could discuss any issues they had about the service at this time. Staff advised that communication between all staff was very good and they were kept well informed and involved in any changes being made to the service.

The service was able to clearly show how it involved staff in looking at the self-assessment submitted to us prior to the inspection.

In line with past findings the management committee continue to recognise and acknowledge staff achievements.

Staff were aware of the Scottish Social Services Council (SSSC) Codes of Conduct and the National Care Standards relevant to the service. The service continues to use these documents to influence staff practice and the way the service operates and engages with service users and carers.

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: 6 - Excellent

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 presented we found that the service was performing at an excellent level in relation to this Quality Statement.

See the comments made under Quality of Care and Support 1:1 in relation to participation.

The management team continues to have a very good presence in the service. Staff were encouraged to feedback on the service at meetings and service evaluations.

Questionnaires completed by service users and/or their families continue to indicate that they were extremely happy with the management of the service (some of these comments can be found under the Taking carers' views into account section of this report).

The service could clearly show that people who use the service, their families and staff had been involved in the completion of the self-assessment submitted to us prior to the inspection. We were able to see that all parties views were represented in the document.

The service had a statement of aims and objectives which were included in the services brochure. This detailed what the service planned to provide for people and set out how this would be achieved.

Areas for improvement

See the comments made under Quality of Care and Support 1:1 in relation to participation.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

Number of recommendations: 0

Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide

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 was aware of their responsibilities to notify the Care Inspectorate, Scottish Social Services Council and Nursing and Midwifery Council regarding any notifiable incidents. This included any onto ward incidents in the home as well as issues of staff practice.

There was a complaints procedure in place.

The service submitted its self-assessment and annual return to us when requested.

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

The management committee have the overall management responsibility for the service. The manager attends their monthly meetings and provides updates on the service at these times. This includes feedback from service users and families.

The management team have a good presence in the service. There are plans to introduce Step in to Leadership strategy as devised by the SSSC. The purpose of the Strategy was to build leadership capacity in Scotland's social services so to improve outcomes for individuals, families and communities by supporting the development of leadership capabilities at all levels of the workforce and with the people the workforce supports.

Management were reviewing how it could use this tool to help improve its own workforce and encourage all grades of staff to develop and grow to improve the outcomes for those using the service. We will monitor how the service takes these initiatives forward at future inspections.

The manager carried out a range of audits as part of their Quality Assurance processes.

Evaluation reports are carried out annually by an external company as part of the

services quality assurance systems. This report makes recommendations to the management committee to take forward.

Areas for improvement

The provider should continue to review and monitor the quality assurance systems in place to ensure they remain rigorous in identifying any areas for improvement and implementing action plans to address these.

Grade awarded for this statement: 6 - Excellent

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 the Care Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme being re-graded as unsatisfactory (1).

5 Summary of grades

Quality of Care and Support - 5 - Very Good	
Statement 1	6 - Excellent
Statement 3	5 - Very Good
Quality of Environment - 6 - Excellent	
Statement 1	6 - Excellent
Statement 2	6 - Excellent
Quality of Staffing - 5 - Very Good	
Statement 1	5 - Very Good
Statement 3	6 - Excellent
Quality of Management and Leadership - 6 - Excellent	
Statement 1	6 - Excellent
Statement 4	6 - Excellent

6 Inspection and grading history

Date	Type	Gradings
21 Mar 2012	Unannounced	Care and support 5 - Very Good Environment 5 - Very Good Staffing 5 - Very Good Management and Leadership 5 - Very Good

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 cànanan eile ma nithear iarrrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

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本出版品有其他格式和其他語言備索。

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