

Inspection report

Montrose Day Centre Support Service

Heriot Avenue
PAISLEY PA2 0DN

Inspected by: John Browne
(Care Commission Officer)

Type of inspection: Announced

Inspection completed on: 21 April 2008

Service Number

CS2006118237

Service name

Montrose Day Centre

Service addressHeriot Avenue
PAISLEY PA2 ODN**Provider Number**

SP2003003388

Provider Name

Renfrewshire Council

Inspected ByJohn Browne
Care Commission Officer**Inspection Type**

Announced

Inspection Completed

21 April 2008

Period since last inspection

9 months

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Introduction

Montrose Day Centre is owned and managed by Renfrewshire Council and is situated within a residential area of Paisley. It was first registered with the Care Commission in March 2007. The service provides day care for a maximum of 40 older people. It operates seven days per week and attendance by service users varies from one day to four days per week.

The centre is adjacent to Montrose Care Home and is located on one level. It comprises: two activity rooms, dining room, lounge area, shop area, servery, treatment room for visiting staff, six toilets, one bathroom and staff accommodation including offices areas, toilet and rest area. The Day Centre is furnished to a high standard; the garden area is enclosed and outdoor seating areas are provided on a patio area. Access to the premises is facilitated by a ramp.

The aims of the centre include: "To provide an individual development programme to service users which would maximise their current abilities, preferences and quality of life."

Based on the findings of this inspection the service has been awarded the following grades:

Quality of Care and Support – grade 3, adequate.

Quality of Environment – grade 4, good.

Quality of Staffing – grade 4, good.

Quality of Leadership and Management – grade 4, good.

This inspection report and grades represent the Care Commission's 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. Please refer to the care services register on the Care Commission's website (www.carecommission.com) for the most up-to-date grades for this service.

Basis of Report

The announced inspection took place on 21 April 2008 between 10.00hrs and 16.00hrs.

Before the Inspection

The Annual Return

The service submitted a completed Annual Return as requested by the Care Commission.

The Self-Evaluation Form

The Manager returned a self-assessment in respect of how well the service felt it was meeting the four Quality Themes. This provided some evidence of the service's strengths.

Views of Service Users

Questionnaires were not issued before the inspection.

Regulation Support Assessment

The inspection plan for this service was decided after a Regulation Support Assessment (RSA) was carried out to determine the intensity of inspection necessary. The RSA is an assessment undertaken by the Care Commission Officer (CCO) which considers complaints activity, changes in the provision of the service, nature of notifications made to the Care Commission by the service (such as absence of a manager) and action taken upon

requirements. The CCO will also have considered how the service responded to situations and issues as part of the RSA.

This assessment resulted in this service receiving a low RSA score and so a low intensity inspection was required. The inspection was based on the relevant inspection Focus Area and associated National Care Standards, recommendations and requirements from previous inspections, complaints or other regulatory activity. This will include a sample/grade of a service user quality statement from each Quality Theme and a sample/grade of Inspection Focus Areas or an additional Quality Statement (chosen by the CCO) in each Theme.

This inspection was based upon the recommendations made at the last inspection on 20 August 2007/08

During the inspection process

Staff at inspection

The inspection was conducted by two Officers from the Care Commission John Browne and Marie McKerry.

Discussions were conducted with 4 Day Care Officers and the Manager.

Evidence

Evidence was gathered from a number of other sources, including:

Observation of the environment

Discussions with 22 service users

Discussions with 1 family carer

Discussions conducted 4 staff

Staff practices & mealtime were observed.

A range of records and other documentation including:

Transport protocol

Operation plan

Service user care plans

Risk assessments

Minutes of carers meeting

Newsletter

Service user and carer surveys

Complaint log and other information

Staff training and induction information

Policies and procedures including: whistleblowing, infection control and child protection.

Inspection Focus Areas and links to Quality Themes and Statements for 2008/2009

The Care Commission has developed four Quality Themes to divide service quality into issues that concern service users and carers:

1. Quality of Care and Support
2. Quality of Environment
3. Quality of Staffing
4. Quality of Management and Leadership

Each Quality Theme is made up of a number of Quality Statements and both the themes and statements reflect the National Care Standards which lie at the heart. For this service the relevant National Care Standards are Support Services. The inspection Focus Area for this inspection was Notifications to the Scottish Social Services Council (SSSC).

Fire Safety Issues

The Fire (Scotland) Act 2005 introduced new regulatory arrangements in respect of fire safety, on 1 October 2006. In terms of those arrangements, responsibility for enforcing the statutory provisions in relation to fire safety now lies with the Fire and Rescue service for the area in which a care service is located. Accordingly, the Care Commission will no longer report on matters of fire safety as part of its regulatory function, but, where significant fire safety issues become apparent, will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Further advice on your responsibilities is available at www.infoscotland.com/firelaw

Action taken on requirements since last Inspection

The Care Commission received an action plan from the service detailing how it would meet the recommendations arising from the last inspection.

Comments on Self Assessment

The Manager completed a self-assessment with identifying evidence against each Quality Statement and Quality Theme. This information was sampled and used during the inspection process.

The service identified strengths and some areas of development. The service was aware of the need to further develop its approach to involving service users and carers in the self-assessment process for inspection purposes. The CCO's are confident that such a development would easily fit into the current philosophy of the service.

View of Service Users

Twenty two service user's spoke with Officers and commented favourably about many aspects of the service.

" The staff are very good. "

" It gets you out of the house."

" The atmosphere and the companionship are excellent."

" The food is mostly nice. "

" I like sitting doing crosswords, its a wee change, company for me because I'm on my own."

" I prefer where we came from there was more activity, a bit more to do.It's much the same over and over again.They say " tell us what you want " but it doesn't happen."

" We don't do much. They make up their mind what they are going to give you."

View of Carers

The service was aware of the need to further develop its approach to involving family carers in evaluation and the inspection process. Officers are confident that such a development would easily fit into the current philosophy of the service.

One family member spoke to Officers and was very complimentary about the service provided:

Quality Theme 1: Quality of Care and Support

Overall CCO Theme Grading: 3 - Adequate

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

There was evidence to demonstrate that staff aimed to promote a person centred approach to support and care of service users.

Informal communication systems were evident.

Service users confirmed that they were consulted about their individual support and care choices.

The service intends to produce a Service Delivery Policy and formalise its Quality of Service Pledge.

The service has quality assurance systems in place. These include service user and carer surveys and questionnaires; a comments and suggestion scheme; client representative meetings; a quarterly Focus Group Meeting which is facilitated by Support Staff; links to external management who monitor aspects of the service.

Staff meet as a group to keep the team informed about support and care needs.

The provider distributes a Newsletter.

Carers confirmed that the service had informed them about the inspection and encouraged their participation.

Service users and Carers were able to identify Keyworkers; keyworker time for service users to discuss their choices is ensured.

Based on the findings of this inspection, the service has been awarded the following grade: Quality Statement 1.1 3 - Adequate.

Areas for Development

The Manager was aware that existing systems of quality assurance which include service user and carer participation in evaluating the service need to be developed further.

A strategy to facilitate service user and family involvement was not available.

Service user reviews reflect the involvement of service users and carers, however the service has not completed reviews for every service user. (See recommendation 1).

Feedback from service users and at the Consultative Meetings indicated that the service Provider did not consult service users and was slow to give information related to changes in the cost of the service. (See recommendation 2).

CCO Grading

3 - Adequate

Number of Requirements

0

Number of Recommendations

2

Statement 4: We use a range of communication methods to ensure we meet the needs of service users.

Service Strengths

Service users confirmed that they were encouraged to express their views.
The provider has established a Focus Group to encourage communication.
An information leaflet and welcome pack provided good information for new service users.
Personal plans were comprehensive, well organised and included communication needs.
One of the stated Aims of the service is to " provide optimism and inspire "
A range of photographs and pictorial information was available and was used to help people communicate.
The Care Commission Inspection Report was on display.
There was evidence of staff, service user and carer meetings.
A Newsletter was provided.
A range of information was displayed.
Home visits were made by Centre staff when people were deciding about using the service.
Visits to the Centre were arranged for potential service users or their family.
Based on the findings of this inspection, the service has been awarded the following grade:
Quality Statement 1.4 4 - Good

Areas for Development

The Manager was aware that ways to take account of the views of service users with limited communication skills need to be developed.
The home displayed information about advocacy however no service user was using advocacy services.

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

0

Quality Theme 2: Quality of Environment

Overall CCO Theme Grading: 4 - 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

Service users confirmed satisfaction with the environment and confirmed that their opinions were sought. One service user commented: " It's a very nice atmosphere, the building is very airy."

Personal plans included individual risk assessments, where necessary these assessments took account of the effect of the environment upon individuals. General risk assessments were also completed regarding the environment.

The service displayed information about advocacy services.

Environmental concerns raised by service users at the previous Inspection have been addressed.

Service users confirmed that they feel safe and secure. Visitors were signed in.

Informal communication systems were evident.

Based on the findings of this inspection, the service has been awarded the following grade: Quality Statement 2.1 4 - Good

Areas for Development

The Manager was aware that existing systems and Policies to involve service users and carers in decisions about the way the service is run need to be further developed.

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

0

Statement 3: The environment allows service users to have as positive a quality of life as possible.

Service Strengths

Families and service users confirmed satisfaction with the quality of the environment. One service user commented: "It's lovely to look at, the building is nice."

The Centre was purpose built with level access to all areas.

The premises were barrier free.

There was ample space for small group activities.

There is a sensory room which services users use to aid relaxation and communication.

An infection control policy was in place.

Risk assessments recognising environmental factors have been carried out in consultation with service users and their representatives.

Based on the findings of this inspection, the service has been awarded the following grade:
Quality Statement 2.3 5 - Very good

Areas for Development

The Manager was aware that existing systems and Policies to involve service users and carers in decisions about the way the service is run need to be further developed.

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Quality Theme 3: Quality of Staffing

Overall CCO Theme Grading: 4 - Good

Statement 1: We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service Strengths

Service users and their families were complimentary about the quality of staffing. Staff were described by service users: "The staff do a great job." "The staff are great." "Staff are very nice, they are very good to us." "The staff are all excellent."

Staff were observed to conducted themselves in a suitable manner and demonstrated a clear understanding of their role.

Staff were noted to be busy in their work environment and spent time with service users in group activities.

There were records of staff, service user and carer meetings.

Service user and carer questionnaires provided people with a way of assessing the quality of staffing.

Based on the findings of this inspection, the service has been awarded the following grade:
Quality Statement 3.1 4 - Good

Areas for Development

The Manager was considering ways in which the existing systems of quality assurance could be enhanced to further evidence service user and carer participation in the quality of staffing. For example introducing discussion about the quality of staffing in Forums and Survey Questionnaires.

Service users and staff commented that the use of Day Centre staff as Bus Escorts restricts the service as Staff spend a high proportion of their day as Escorts. One service user commented: "They have cut the bus times... Now we don't get lifted till 10.30 and you have your coat on again at 2.30." The Provider should review the suitability of this arrangement and include service users in any such review. (See recommendation 3).

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

1

Statement 3: We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Service Strengths

The organisation has a process to ensure that staff were recruited in line with best practice

guidance.

Staff had statutory training opportunities and most have completed SVQ training.

Staff have regular supervision.

The provider had a Learning and Development plan. Each staff member has an individual development plan.

There was evidence to indicate that staff use care methods and practice which reflect current knowledge and best-practice.

New staff received induction training.

There was a staff code of discipline in place. Information about the Scottish Social Services Council Codes of Practice was available in the workplace.

Some policies and procedures were available to guide staff. These include infection control, whistleblowing and adult protection procedure.

Based on the findings of this inspection, the service has been awarded the following grade:

Quality Statement 3.3 4 - Good

Areas for Development

Staff records include information about professional development and training.

The service should secure training for all staff in Protection of Vulnerable Adults. (See recommendation 4).

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

1

Quality Theme 4: Quality of Management and Leadership

Overall CCO Theme Grading: 4 - 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

The Manager presented as knowledgeable and supportive of the staff team. This was confirmed by comments from staff, service users and family carers.

The Manager has a high profile in the service and families confirmed that she has good links with them.

Quality assurance systems were in place which involved service users and carers. Service users and family carers confirmed that the Manager had encouraged their participation in the inspection process.

There was a range of experience and skills within the staff and management team.

The manager was undertaking SVQ 4 equivalent training.

Staff members felt that they were supported in the workplace.

Staff confirmed that supervision takes place.

Based on the findings of this inspection, the service has been awarded the following grade:
Quality Statement 4.1 - Good

Areas for Development

A strategy to facilitate service user and family involvement was not available.

CCO Grading

4 - 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

Quality assurance systems include surveys, mini questionnaires about aspects of the service, a comments and suggestion scheme and external management monitor aspects of the service. .

The Manager was aware of her responsibility to provide appropriate information and report relevant incidents to the Scottish Social Services Council.

The Manager was aware of her responsibility to provide appropriate information and report relevant incidents to the Care Commission.

The Centre will be seeking a Charter Mark Award.

Based on the findings of this inspection, the service has been awarded the following grade:
Quality Statement 4.2 4 - Good

Areas for Development

Policies and procedures were not reviewed or updated regularly. (See recommendation 5).

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

1

Regulations / Principles

National Care Standards

Enforcement

There has been no enforcement action against this service since the last inspection.

Other Information

None.

Requirements

None.

Recommendations

1. The service must ensure that Service User Reviews are carried out inline with National Care Standards and the Providers own Policy. National Care Standards Support Services, Standard 2.4: Management and staffing arrangements.
2. Changes to the Terms and Conditions of The written agreement should be communicated to service users prior to their implementation. The written agreement must clearly define the support service to be provided. This must include information about the basic cost of the service; the days of attendance and the transport arrangements. National Care Standards Support Services, Standard 3: Your legal rights.
3. The Provider should review the current use of staff as Bus Escorts to ensure that service Aims and Objectives are being met. National Care Standards Support Services, Standard 2.4: Management and staffing arrangements.
4. All staff must receive training related to adult protection. National Care Standards Support Services, Standard 2.3: Management and staffing arrangements.
5. The provider should develop a comprehensive set of corporate policies and procedures, which all services should be able to access. National Care Standards Support Services, Standard 2: Management and staffing arrangements.

John Browne
Care Commission Officer