

# **SOCIAL WORK INSPECTION UNIT**

## **INSPECTION REPORT**

**NAZARETH HOUSE  
23 HILL STREET  
KILMARNOCK KA3 1HG**

**Managing Organisation  
Sisters of Nazareth**

**Inspection Date 20 July 2001  
Follow-up 25 July 2001**

**Type of Inspection: Unannounced Night  
with Day-time announced follow-up**

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## INSPECTION INFORMATION

<b>Registration Category:</b>	Elderly persons
<b>Registered Capacity:</b>	Residential: 47      Single rooms 15: single with ensuite 4: Day Care: nil      Double rooms 15: double with ensuite 0
<b>Number At time of inspection</b>	46 Day Care: nil
<b>Type of inspection</b>	Unannounced night time with day time follow-up
<b>Inspector(s):</b>	Isoel Dawson & Mina Cassidy
<b>Date of last inspection:</b>	22 May 2001
<b>For further information on this establishment contact</b>	Sister Cabrini - Unit Manager Mrs Claire Powers - Administrator tel: 01563 522835

## Description of establishment, services and facilities.

This inspection was a follow up night time Inspection to the full Inspection carried out on 22 May 2001 and this report should be read in conjunction with that report. The main areas considered during the inspection were rotas and staffing levels, training and supervision, security and staff meetings for night staff.

The management take their responsibilities for the safety and security of the residents and staff seriously. The external areas of the unit are widely covered by security cameras and all external doors are secured at night with entry being accessed through a member of staff. Following a very recent attempted break-in the management have arranged to have all fire doors alarmed.

The unit is presently covered by three members of staff with a minimum of two managers on call during the night. The Inspectors are of the opinion that a fourth member of staff is required to act as a floater between the three floors. At present the call system rings on individual floors leaving users vulnerable if a floor is left unattended. It is suggested that if a senior member of staff were to be appointed on night duty they would then be able to take on the responsibility of supervision, staff meetings and a training input for night staff.

**INSPECTOR:**  
**SIGNATURE:** \_\_\_\_\_

**Date** \_\_\_\_\_

**HEAD OF UNIT:**  
**SIGNATURE:** \_\_\_\_\_

**Date** \_\_\_\_\_

In this section the inspectors set out their findings on the quality of life the establishment is achieving for service users. Each heading is followed by a short statement setting out the standard that is expected to be achieved. This is followed by comments from the inspector giving their view as to whether the standard has been met.

**1. Privacy - *"The individual has his/her privacy protected and maintained in the home, in his her living areas and in relation to belongings, personal and financial affairs."***

See report of 22<sup>nd</sup> May 2001

**2. Dignity health and well being - *"the individuals health and well being is promoted and their assessed care needs met without risk to their dignity"***

Records indicate that there is appropriate input of a range of health professionals to advise and manage users physical and mental health needs. There is a range of continence aids and individual management programmes for users. The Units' training programme includes a range of subjects that relate to the promotion of residents' dignity, health and well being, including moving and handling, medication and fire training. However, in order to ensure the continued health and safety of residents and staff, all staff must participate in the full range of training and these must be regularly updated.

**3. Social and emotional well being - *"The individual feels valued contented and fulfilled and can pursue social and leisure activities of their choice"***

See report of 22<sup>nd</sup> May 2001

**4. Security and safety - *" The individual lives in a safe and secure home. Any limitations of rights or restriction of movement must be based on an informed risk assessment and be regularly and formally reviewed."***

See report of 22<sup>nd</sup> May 2001

The organisation takes their responsibility for the safety and security of staff and residents seriously. Throughout the grounds there are security cameras that are managed by the on-site maintenance engineer. All external doors apart from fire doors, are locked at night, entry can only be gained when a member of staff attends. The front door which opens onto large grassed areas is not used at night, although a key is readily available to staff. There are two entrances at the rear of the building with doorbells. However, night staff should have appropriate fire safety training and opportunities to be involved in fire safety procedures. In addition the Management are asked to review their night staffing levels so that at no time is a floor left unattended.

**5. Independence and choice - *"The individual shall be assisted to achieve a level of independence and choice compatible with his/her wishes and abilities"***

See report of 22<sup>nd</sup> May 2001

**6. Participation - *"The individual has the right to maintain a fulfilling and interesting life style within and outwith the home."***

See report of 22<sup>nd</sup> May 2001

**7. Culture and Belief - *"The individual has the right to expect that his/her cultural beliefs will be respected."***

See report of 22<sup>nd</sup> May 2001

## Standard of Records & Procedures

	Date Checked	Standard Acceptable?	Findings at current Inspection
Clear Aims & Objectives?	22.5.01	yes	
Brochure	22.5.01	yes	
Admission/discharge record	22.5.01	yes	
Medication	25.7.01	In part	A monitored dosage system is in place. At the time of the last inspection medication records and storage were found to be managed appropriately. However, night staff do not appear to have received the same standard of medication training as day staff.
Accidents	22.5.01	yes	
Incident/violent incident	22.5.01	yes	
Fire safety and checks	22.5.01	yes	Training records show that day staff have regular fire safety training. However, night staff <b>must receive the same standard of Fire Safety training and participate in fire drills.</b>
Risk assessments	22.5.01	yes	
(moving/handling)	22.5.01	in part	See report of 22.5.01. In addition all night staff must complete moving and handling training.
(COSSH)	22.5.01	yes	
Restraint (if applicable)	22.5.01	yes	
Complaints	22.5.01	yes	
Users financial records	22.5.01	yes	

### Comments:

### Requirements:

1. All staff involved in the administration of medication should have access to appropriate training in the management of medication.
2. It is reported that not all night staff have received moving and handling training. It is imperative that arrangements are made for this to be completed as soon as possible.
3. All night staff must receive appropriate Fire Safety Training and participate in fire drills.

### Recommendations:

## Management and Staffing Standards

	Date Checked	Standard Acceptable?	Findings at current Inspection
<b>Recruitment practices</b>	22.5.01	yes	
<b>Staff meetings</b>	25.7.01	yes	<b>Records indicate that night staff seldom attend the regular staff meetings. Recent arrangements have been made to meet with night staff in the evening and it is hoped to encourage more involvement.</b>
<b>Shift handover</b>	22.5.01	yes	
<b>Staff supervision</b>	25.7.01	in part	In addition to day to day supervision, day staff are involved in a regular appraisal system. However, neither of these are available to night staff.
<b>Training records</b>	25.7.01	in part	Individual training records are maintained. It would be helpful to include details of the in-service bi-monthly training programme in these records. It is noted that night staff seldom attend training sessions.
<b>Rotas</b>	22.5.01	In part	Management are asked to review their night staffing level arrangements so that at no time is a floor left unattended.
<b>Contracts of employment</b>	22.5.01	yes	
<b>Job descriptions</b>	22.5.01	yes	
<b>Absence levels/ monitoring</b>	22.5.01	yes	
<b>Staff Turnover</b>	22.5.01	yes	
<b>Bank Staffing</b>	22.5.01	yes	

### Comments:

It is noted that recent efforts have again been made to involve night staff in the in-service training programme.

Owing to the layout of this building, present overnight staffing levels can result in one floor being left unattended and outwith the hearing of the call system if a member of staff is called to support a member of staff on another floor.

### Requirements:

1. Night staff have the same training requirements as day staff and should continue to be encouraged to attend staff meetings and development meetings.
2. A formal supervision programme should be in place for night staff.

### Recommendations:

1. Night staffing levels should be reviewed. The appointment of a Senior Care Officer on night duty would both offer training and supervision to night staff in addition to offering additional cover.

## Physical / Environment Standards

	Date Checked	Standard Acceptable?	Findings at current Inspection
Room sizes	22.5.01	in part	
Double/Single Ratio	22.5.01	No	
Ambient Temp	20.7.01	yes	The Unit was warm and comfortable throughout.
Hot Water temp control	22.5.01	yes	<b>Following the previous inspection it was confirmed that thermostatic controls are fitted in all areas accessed by users.</b>
Hygiene/cleanliness	20.7.01	yes	The areas seen showed a high level of hygiene and cleanliness.
Safety of environment	25.7.01	yes	
Fabric/Decor	22.5.01	yes	
Building maintenance	22.5.01	yes	
Garden Areas	22.5.01	yes	
Furnishing; Comfort/quality	22.5.01	yes	
Security of establishment	25.7.01	yes	A number of security cameras are in place which, were all operating at the time of this unannounced inspection.
Privacy	22.5.01	yes	

**Comments:**

Following a recent attempted break-in the Management responded immediately to advice and are having all fire doors alarmed.

**Requirements:**

**Recommendations:**

**Commendations:**

## Care Standards

### Care Planning and Review

	Date Checked	Standard Acceptable?	Findings at current Inspection
Assessment	22.5.01	yes	
Care Plans	22.5.01	yes	
Reviews	22.5.01	yes	
KeyWorker/ Named worker	22.5.01	yes	
Daily notes	22.5.01	yes	
User involvement - care planning and review	22.5.01	in part	
User contracts	22.5.01	yes	
Residents information directory	22.5.01	yes	

### Menus and Catering

	Date Checked	Standard Acceptable?	Findings at current Inspection
Menus - choice & quality	22.5.01	yes	
Environmental Health Report issues	22.5.01	yes	
Catering equipment and practices	22.5.01	yes	

### Activity programmes

	Date Checked	Standard Acceptable?	Findings at current Inspection
Displayed Programme	22.5.01	yes	
Internal activities	22.5.01	yes	
External activities	22.5.01	yes	
Transport arrangements	22.5.01	yes	