



**East Ayrshire**  
COUNCIL

## **SOCIAL WORK INSPECTION UNIT**

### **INSPECTION REPORT**

**Woodside House  
Mauchline  
Mr & Mrs Morris, Woodside House,  
Mauchline**

**20<sup>th</sup> April 2001**

**Unannounced**

W.J. Duncan  
Head of Inspection, Registration and Complaints Unit  
East Ayrshire Council  
Social Work Department  
Council Offices  
Lugar  
CUMNOCK KA18 3JQ

## 1 - INSPECTION INFORMATION

<b>Registration Category:</b>	Elderly Male and Female
<b>Registered Capacity:</b>	Residential: 19 (3 doubles to 13 single rooms) Day:
<b>Number At time of inspection</b>	Residential: 18 Day:
<b>Type of inspection</b>	Unannounced WOOD-01-01/2
<b>Inspector(s):</b>	George Stewart
<b>Date of last inspection:</b>	17 <sup>th</sup> October 2000
<b>For further information on this establishment contact</b>	Mrs.E. Morris - 01290 550633

## 2- Description of establishment, services and facilities.

Woodside House is a traditional, red sandstone 19<sup>th</sup> century house set in landscaped gardens. It is situated on the edge of Mauchline within easy reach of the shops, community facilities and public transport. The original house is on two levels with stair lift access to the upper floor. The purpose built extension provides single bedrooms with ensuite accommodation. All public rooms are on the ground floor.

Building development within the grounds includes a recently completed house. This does not impinge on residents' privacy or garden space.

The unit is currently entering a transition phase with the owner/manager entering into retirement and her daughter in law taking over responsibility. This will ensure the maintenance of the family connection.

**Inspector:** \_\_\_\_\_

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

Head of IRC Unit: \_\_\_\_\_

Date \_\_\_\_\_

### 3 - QUALITY OF LIFE SUMMARY

In this section the inspectors set out their views on the quality of life the establishment is achieving for service users. A short statement setting out the standard that is expected to be achieved follows each heading. This is followed by comments from the inspector giving their view of performance on this standard

**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."***

There are plans being explored to reduce the double to single ratio of rooms. This currently stands at 3:13. Residents and their families are encouraged to manage their own finances where possible with appropriate arrangements made for those who cannot.

Although Woodside is a relatively small unit residents can and do choose to spend time in their rooms, a comfortable lounge, a conservatory and the separate dining area.

**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"***

Residents are cared for by a small staff team who familiarise themselves with all aspects of their changing care needs before each shift. This includes personal and domestic checks, a record of health checks and separate residents accident book.

The inspector spoke with a number of residents on an informed basis and residents kindly completed a number of confidential questionnaires.

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

Assessment and care planning have improved significantly in recent months. Each individual has recorded identified needs and prescribed action to meet those needs. There is evidence of internal activities, however, there is a need to provide clear evidence of those activities undertaken by residents outwith the unit.

**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."***

The unit has an alarm on the door to ensure that staff are alerted to anyone leaving or entering the unit.

There are currently basic risk assessments housed in individual files. A more detailed system is covering a wider range of activities and products (COSSH) is being explored at this time. It is hoped that this new system will add to the safety and security of residents.

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

Residents are given a significant level of choice in relation to the management of finance, medication, menus and activities. They are encouraged to attend their own reviews and the manager states that they contribute to their own care plans.

It is the manager's intention to provide evidence that residents contribute to their care plans on a regular basis.

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

As stated in sections 3 and 5 efforts are made in the areas of activities, menus, reviews etc. to encourage the full participation of residents

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

There are regular visits by religious personnel to ensure that residents' pastoral needs are met.

A social history is held in each case file.

**4 - Records & Procedures Standards**

	Date Checked	Standard Acceptable?	Findings at current Inspection
<b>Clear Aims &amp; Objectives?</b>	20/4/01	yes	There is evidence of aims & objectives although the content, layout and format require improvement.
<b>Brochure</b>	20/4/01	yes	
<b>Admission/ discharge record</b>	20/4/01	yes	The previous recommendation regarding additional information has been actioned.
<b>Medication</b>	17/10/00		
<b>Accidents</b>	20/4/01	yes	
<b>Incident/violent incident</b>	20/4/01	yes	The manager stated that this is a very rare occurrence with none in recent times. Her explanation of the recorded information been held in the residents personnel file was acceptable.
<b>Fire safety and checks</b>	20/4/01	yes	
<b>Risk assessments</b>	20/4/01	yes	All residents have a basic risk assessment. It is the managers stated intention to develop this further.
<b>(moving/ handling)</b>	20/4/01	Yes	<b>See risk assessments above.</b>
<b>(COSSH)</b>	20/4/01	No	It is the managers' intention to ensure this is included in the overhaul of risk assessments currently taking place.
<b>Restraint (if applic)</b>	N/A		
<b>Complaints</b>	20/4/01	yes	The procedure is clearly outlined in the brochure. The format is acceptable
<b>Users financial records</b>	20/4/01	yes	The unit manages the finances for 1 resident. The arrangements in place are acceptable.

**Comments:**

**Requirements:**

The unit is required to introduce a full range of COSHH assessments at the earliest opportunity.

**Recommendations:****Commendations:****5 - Management and Staffing Standards**

	Date Checked	Standard Acceptable?	Findings at current Inspection
<b>Recruitment practices</b>	20/4/01	Yes	The unit should ensure a job description accompanies all letters that invite candidates for interview. A copy of all references must be held on file within the unit.
<b>Staff meetings</b>	20/4/01	No	There is a significant improvement in the range of discussion taking place within the staff group. The organisation and management of meetings has also significantly improved. There is a need to increase the level of meetings to 1 per month.
<b>Shift handover</b>	20/4/01	Yes	
<b>Staff supervision</b>	20/4/01	No	There is a staff appraisal system that operates every 6 months. The range of issues reviewed must be increased to include an ongoing element of personal development. The frequency should be increased to a minimum of once every two months.
<b>Training records</b>	20/4/01	Yes	There are records kept detailing training undertaken by staff. This should be linked to the appraisal/supervision system to form an integrated training plan for the whole unit.
<b>Rotas</b>	20/4/01	Yes	Appropriate staffing levels appear to be in place throughout a 24hr period.
<b>Contracts of employment</b>	20/4/01	Yes	
<b>Job descriptions</b>	20/4/01	Yes	
<b>Absence levels/ monitoring</b>	20/4/01	Yes	
<b>Staff Turnover</b>	20/4/01	Yes	Five staff have moved on in the last twelve months.
<b>Bank Staffing</b>	20/4/01	Yes	The unit does not operate a system that uses bank staff. The inspector entered into some discussion about how bank staff might be best used if required.

**Comments:**

The manager recognises that in the areas of recruitment practices, staff supervision and training development work is required.

**Requirements:**

The unit is required to have a staff meeting at least every two months.

**Recommendations:**

1. Staff supervision should be developed to include more emphasis on personal development. The frequency should be approximately every two months.

2. Training undertaken by staff should be planned on the basis of information gathered at individual supervision and as part of a strategic overview of the unit's needs.

### Commendations:

## 6 - Physical / Environment Standards

	Date Checked	Standard Acceptable?	Findings at current Inspection
<b>Room sizes</b>			<b>Not examined.</b>
<b>Double/Single Ratio</b>	20/4/01	No	There are currently 13 single and 3 double rooms. The manager recognises that this ratio has to be improved. There are tentative plans in place but the unit is not able to commit to a timescale at this time.
<b>Ambient Temp</b>	20/4/01	Yes	
<b>Hot Water temp control</b>	20/4/01	No	Although not tested the manager indicated her intent to cost and implement a programme of fitting individual thermostat controls to all water points. This will ensure the standard is met.
<b>Hygiene/cleanliness</b>		Yes	
<b>Safety of environment</b>	20/4/01	No	20/4/01
<b>Fabric/Decor</b>	20/4/01	Yes	The kitchen is in need of upgrading. The proposed timescale for the completion of this work should be forwarded to the IRC Unit as part of the Action Plan.
<b>Building maintenance</b>	20/4/01	No	Although there is no evidence that the current arrangements do not work effectively the manager recognises the need to introduce an effective building maintenance system.
<b>Garden Areas</b>	17/10/00	Yes	Garden areas are well maintained.
<b>Furnishing; Comfort/quality</b>	20/4/01	Yes	The public areas and the newer extension are furnished to a high standard.
<b>Security of establishment</b>	20/4/01	Yes	
<b>Privacy</b>	20/4/01	In part	Work has been carried out in recent years to reduce the single to double ratio. Residents have free access to their own mail.

### Comments:

### Requirements:

1. The unit is required to fit radiator covers on all radiators within an agreed timescale.
2. The unit is required to fit fly screens to the kitchen window.
3. It is required that the number of double rooms be reduced to improve the single to double ratio.

### Recommendations:

1. It is recommended that the kitchen area be upgraded as a matter of priority.

**Commendations:**

**7 - Care Standards**

**Care Planning and Review**

	<b>Date Checked</b>	<b>Standard Acceptable?</b>	<b>Findings at current Inspection</b>
<b>Assessment</b>	20/4/01	Yes	
<b>Care Plans</b>	20/4/01	Yes	There is a significant improvement in care plans since the last inspection.
<b>Reviews</b>	20/4/01	Yes	
<b>Keyworker/ Named worker</b>	20/4/01	No	There is no evidence that the absence of a key worker system has any detrimental effect on the care of residents. However it is the managers intention to move to a key workers system in the near future.
<b>Daily notes</b>	20/4/01	Yes	The format could be improved to make access to information easier.
<b>User involvement - care planning and review</b>	20/4/01	In part	Residents do attend their reviews. The current system of care planning does not allow residents to sign to confirm their participation.
<b>User contracts</b>	20/4/01	Yes	
<b>Residents information directory</b>	20/4/01	Yes	

**Menus and Catering**

	<b>Date Checked</b>	<b>Standard Acceptable?</b>	<b>Findings at current Inspection</b>
<b>Menus - choice &amp; quality</b>	20/4/01	Yes	There are at least 4 choices of main courses on offer every lunchtime.
<b>Environmental Health Report issues</b>	30/11/00	Yes	
<b>Catering equipment and practices</b>	20/4/01	Yes	See Safety of the Environment and Fabric and Décor for improvements required

**Activity programmes**

	<b>Date Checked</b>	<b>Standard Acceptable?</b>	<b>Findings at current Inspection</b>
<b>Displayed Program?</b>			Not examined.
<b>Internal activities</b>	20/4/01	Yes	
<b>External activities</b>	20/4/01	No	The unit must develop a system that evidences their attempts to encourage residents to participate in external activities.
<b>Transport arrangements</b>	20/4/01	Yes	

**Comments:****Requirements:**

Care plans must include a section that indicates that residents and all their family have had the opportunity to participate in the process.

**Recommendations:**

It is recommended that the activity programme details all internal and external activities.

**Commendations:**

The unit is commended for its efforts to ensure residents get a wider varied choice of food throughout the day.

**8 - Inspectors findings on other views****User/Carer views**

Five residents kindly took the time to complete confidential questionnaires. All commented favourably on the quality of care they receive at Woodside. Most commented that they would prefer still to be at home however Woodside represents an acceptable alternative.

The inspector also had the opportunity to speak informally with residents during the visit. All expressed great satisfaction about a range of issues including the choice of food and the staff team.

**Staff views**

Five staff kindly returned questionnaires. All expressed general satisfaction about their work at the unit. The only issue of concern appears to be around the domestic duties and the cleanliness of the unit that in the opinion of some staff members could be better at times.

**Relatives/Carer Views**

Questionnaires returned by relatives expressed a range of interesting views. There was agreement that the general level of care was good. Issues of privacy are managed well and the food is to their relative's satisfaction. There was concern expressed that there are not enough staff per shift to meet the needs of the resident group. This in turn means that certain hobbies or interest appear not to be open to individual residents.

**External professionals views**

The external professionals who kindly took the time to return their questionnaires all expressed satisfaction with the standard of care on offer at the unit.

**AGENDA**