

# **SOCIAL WORK INSPECTION UNIT**

## **INSPECTION REPORT AND SUMMARY REPORT**

**Name of Unit  
DUNSELMA**

**Date of Inspection: 8 March 2001**

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

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## INSPECTION INFORMATION

**NAME OF ESTABLISHMENT:** DUNSELMA

**LOCATION OF ESTABLISHMENT:** 55 MAIN ROAD FENWICK  
Ayrshire KA3 6DR

**MANAGING ORGANISATION:** Board of Social Responsibility  
Church of Scotland, Charis House,  
47 Milton Road East  
Edinburgh EH15 2SR

**CATEGORY (as per Registration):** Elderly - residential & Day care

**MAXIMUM NUMBER OF RESIDENTS  
TO BE ACCOMMODATED (as per Registration):** 27

**NUMBER RESIDENTS/ATTENDING  
AT TIME OF VISIT:** 25

**NATURE OF INSPECTION** Full Announced

**INSPECTOR(S) PARTICIPATING:** Mrs Isobel M Dawson  
Mrs Mina Cassidy

**DATE(S) OF INSPECTION:** 7 March 2001

**DATE OF LAST INSPECTION REPORT:** 7 September 2000

**FOR FURTHER INFORMATION ON  
THIS ESTABLISHMENT CONTACT** Miss Agnes Neil Unit Manager  
Dunselma  
Tel: 01560 600218

## QUALITY OF RECORDS

### 1. Sampled Case Files

#### (a) Recommendations in last report

Residents files should be organised and updated as a matter of priority

#### (b) Progress and observations at this Inspection

A new residents profile has been developed in the form of a front sheet to the daily notes; this provides good general information covering such areas as next of kin, general practitioner, disabilities, hobbies/interests, particular likes and dislikes and important values and beliefs. This presents a useful pen picture of a user. It would be helpful to include the date of admission and the source of referral in this document.

In addition, the daily report sheet evidences that care is offered in response to resident's stated needs and choices.

The content of the daily notes, weekly summaries and regular reviews are of a good standard. Records seen indicate that staff actively seek resident's views regarding their care, and the language used in the files is sensitive and appropriate.

As discussed, it would be useful to review the content of individual files. It would be helpful to have the working files more durable and partitioned in a way that is orderly and allows for easy reference.

The second file containing other personal information, mainly of a financial nature, could continue to be held quite separately with access given only to service users and appropriate personnel.

### 2. Sampled Financial Records

#### (a) Recommendations in last report

The present system for recording residents' finances should be reviewed.

#### (b) Progress and additional observations at this Inspection

The records were found to be well managed, clearly laid out and easy to follow. Two members of staff sign details of expenditure and balance.

It is acknowledged that two members of staff sign for any transactions. The possibility of residents signing their own personal record card should continue to be considered as part of the assessment and care planning process.

### 3. Other records including specific comment on Fire Safety records and Medication records

#### (a) Recommendations in last report

None. Records examined were found to detailed and up-to-date.

#### (b) Progress and additional observations at this Inspection

**Medication records** are completed appropriately. No resident self medicates at this time.

**Accident Books** are maintained for both staff and users. It is suggested that a regular audit of accidents is carried out looking particularly at the where, when how of incidents. Care must also be taken to correlate the information between the accident book and the users daily notes.

## QUALITY OF MANAGEMENT AND STAFFING

### 1. Communication systems within the staff group

**(a) Recommendations in last report**

None made.

**(b) Progress and additional observations at this Inspection**

Staff receives verbal reports at shift changeovers with the expectation that they will appraise themselves of the written daily notes in individual files.

All staff are rostered to attend staff meetings and residents take the opportunity to invite members of staff to their meetings to discuss particular issues.

### 2. Staffing Levels

**(a) Recommendations in last report**

None made.

**(b) Progress and additional observations at this Inspection**

Rotas indicate that there is sufficient staff on duty to meet the needs of the resident group throughout the 24-hour period. It was noted that on occasion a resident's key worker was able to accompany her to a community club to offer support.

Staffing levels are maintained during holidays and sickness by a named group of bank staff who are known to the service users.

During the waking day a designated senior member of staff is on duty; in addition a senior member of staff provides "sleep-over cover" to be on call for the waking members of staff.

**The unit is commended for staffing levels that take account of service users physical, emotional and social needs.**

### 3. Staff Training and Qualifications

**(a) Recommendations in last report**

None made.

**(b) Progress and additional Inspectors observations at this Inspection**

**Number of days training since previous Inspection**

	Management	Care Staff	Domestic staff
Induction	2	3	2
Moving & Handling		2	2
Fire safety	2		
Food handling	In service for all	staff March/April	2001
SVQ	1 level 4	2 level 3	
Key workers training		All - Nov/Dec 2000	

## QUALITY OF PHYSICAL ENVIRONMENT

### 1. Compliance with space standards

**(a) Recommendations in last report**

None made.

**(b) Progress and additional Inspectors observations at this Inspection**

The home is a large former mansion house that sits on a hill within Fenwick Village and with extended views across the countryside. Many of the original features still exist, these seem to be appreciated by the service users.

Each service user has their own bedroom; there are a number of sitting rooms, a pleasant dining room and spacious halls and corridors. Service users are encouraged to personalise their own rooms, the rooms seen today were comfortable and homely and clearly service users had been encouraged to bring in personal items of furniture, pictures and ornaments.

The main criticisms of the facilities are the lack of ensuite facilities, and the design of the bathrooms and toilet facilities. On the whole, toilets are cubicle in design

and clearly do not afford users the expected level of privacy and dignity. It is understood that the Board of Social Responsibility of the Church of Scotland has recently undertaken a feasibility study, which included looking at these specific issues.

**Confirmation is required regarding the proposals to upgrade the toilets and bathrooms.**

## **2. Heating levels (including water temperature control)**

### **(a) Recommendations in last report**

The remaining radiators and vertical pipes should be fitted with suitable guards as a matter of priority.

### **(b) Progress and additional observations at this Inspection**

See 4©

The unit was found to be warm and comfortable throughout.

## **3. Hygiene and cleanliness**

### **(a) Recommendations in last report**

None made.

### **(b) Progress and additional Inspectors observations at this Inspection**

A high standard of hygiene and cleanliness was noted throughout the unit.

## **4. Safety of the environment**

### **(a) Recommendations in last report**

It is recommended that the remaining radiators are fitted with suitable guards and the vertical heating pipes leading to radiators in the ground floor corridor are fitted with suitable heat resistant covers.

### **(b) Progress and additional observations at this Inspection**

All radiators have been fitted with suitable protective coverings.

The unit is commended for the quality of the radiator covers fitted. Some minor work is outstanding on the vertical heating pipes on the ground floor corridor.

## **5. Fabric and decor standards**

### **(a) Recommendations in last report**

Within the limitations of the design of the bathrooms and toilets, they are decorated to the best possible standard. However, upgrading is required.

**(b) Progress and additional observations at this Inspection**

Unchanged. See Quality of Environment 1©

**6. Standards of building maintenance**

**(a) Recommendations in last report**

None made.

**(b) Progress and additional observations at this Inspection**

Although not examined in detail, no outstanding repairs were noted during this inspection.

**QUALITY OF CARE ARRANGEMENTS**

**1. Care System: Methods for Individual Care Planning and Review**

**(a) Recommendations in last report**

Wherever possible the resident and their representative or keyworker should sign all reviews.

**(b) Progress and additional observations at this Inspection**

Staff continue to maintain daily notes, weekly summaries and regular reviews. However, no care plans are in place which identify goals, targets to be achieved and the roles of all parties involved.

It is reported that the Board of Social Responsibility of the Church of Scotland has consulted widely and are now producing a new care plan format which will be in place shortly.

**Care plans should be in place which aims to match services to the assessed needs of service users and to which they contribute to the fullest possible extent.**

**2. Quality of Menus and Catering arrangements**

**(a) Recommendations in last report**

None made.

**(b) Progress and additional observations at this Inspection**

The Inspectors joined the residents for lunch. A choice of main course was available and it was noted that as Haggis was on the menu a small glass of whisky was offered with this meal. Residents clearly enjoyed their lunch and spoke highly of the quality and choice of food available. The cook was invited to the last residents' meeting to discuss menus and took the opportunity to ask users for suggestions for future menus.

Menus indicate that a varied nutritious diet is available. Users spoke about the quality of service, tableware and fresh flowers on the tables.

### **3. Quality of activity programmes**

**(a) Recommendations in last report**

None made.

**(b) Progress and additional observations at this Inspection**

Although the activities programme was not examined in detail, discussions with users indicate that a variety of social activities, entertainment and outings are available. Users are encouraged to maintain links with the local community through clubs, churches and sustaining previous contacts. The unit has its own adapted transport.

A list of daily activities appears on the notice board.

## **INSPECTORS FINDINGS ON OTHER VIEWS**

### **1. Staff views expressed**

**(a) Recommendations in last report**

None made.

**(b) Progress and additional Inspectors observations at this Inspection**

### **2. User/Carer views**

**(a) Recommendations in last report**

None made

**(b) Findings at this Inspection - Progress**

**(c) Additional Inspectors observations at this Inspection**

**EAST AYRSHIRE COUNCIL - SOCIAL WORK INSPECTION UNIT**

**SUMMARY INSPECTION REPORT**

**DUNSELMA  
8 March 2001**

**Summary of Inspection**

**Previous recommendations carried forward:**

**Further recommendations**

- 1. Care plans should be in place which aims to match services to the assessed needs of service users and to which they contribute to the fullest possible extent.**
- 2. Confirmation is required regarding the proposals to upgrade the toilets and bathrooms**

**Commendations**

Staff are commended for the discreet way in which they support residents recognises their right to dignity and respect.

The unit is commended for staffing levels that take account of service users physical, emotional and social needs.

**LEAD INSPECTOR:**

**SIGNATURE:** \_\_\_\_\_ **Date** \_\_\_\_\_

**COUNTERSIGNED BY HEAD OF UNIT: W J Duncan**

**SIGNATURE:** \_\_\_\_\_ **Date** \_\_\_\_\_

**AGENDA**