

# **SOCIAL WORK INSPECTION UNIT**

## **INSPECTION REPORT AND SUMMARY REPORT**

### **DUNSELMA**

**Date of Inspection: 2 March 00**

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

**Tel: 01563 555342 Fax: 01563 555400**

## INSPECTION INFORMATION

**NAME OF ESTABLISHMENT:** Dunselma

**Location of Establishment**  
Main Street Fenwick

**MANAGING ORGANISATION:** Church of Scotland  
Board of Responsibility  
47 Milton Road East  
Edinburgh

**CATEGORY (as per Registration):** Elderly, residential & day care

**MAXIMUM NUMBER OF RESIDENTS  
TO BE ACCOMMODATED (as per Registration):** 27 Residential 6 Day care

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

**NATURE OF INSPECTION** Unannounced, short, focused  
Inspection

**INSPECTOR(S) PARTICIPATING:** Mrs Isobel M Dawson  
Mr George Stewart

**DATE(S) OF INSPECTION:**  
**DATE OF LAST INSPECTION REPORT:** 14 April 99

**FOR FURTHER INFORMATION ON  
THIS ESTABLISHMENT CONTACT** Miss Agnes Neil  
01560 600218

## QUALITY OF RECORDS

### 1. Sampled Case Files

**(a) Recommendations in last report**

None made

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

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

User's files continue to be maintained to a good standard. In the records examined the front sheet and review information are found to be informative. Continuation sheets are updated regularly and Inspectors found the weekly summaries particularly useful.

The tone of recording is good; notes are insightful and holistic. Wishes and preferences are noted.

### 2. Sampled Financial Records

**(a) Recommendations in last report**

None made

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

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

Not inspected during this short, focused inspection

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

**(a) Recommendations in last report**

It was recommended that COSHH assessments be carried out to the standard required by the COSHH regulations 1994.

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

This recommendation has been acted on and assessments are now in place.

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

Staff must continue to be vigilant in completing codes when medication is being distributed.

## QUALITY OF MANAGEMENT AND STAFFING

### 1. Communication systems within the staff group

**(a) Recommendations in last report**

None made; procedures for communicating throughout the staff group were acceptable.

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

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

Not inspected during this short focused inspection.

### 2. Staffing Levels

**(a) Recommendations in last report**

None made

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

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

Rotas indicated that acceptable staffing levels are maintained.

Of the three team leaders posts one is covered temporarily while the permanent post holder is seconded to a training post. Unfortunately a second team leader has recently reported sick, and the remaining job-shared team leaders post has one half of the job-share going on Maternity leave.

These posts have been filled by unit staff acting-up with appropriate training being provided. The posts temporarily vacated by staff have been filled.

It is recognised that such major changes in managerial staff have implications for the whole staff group and the situation should continue to be monitored.

### 3. Staff Training and Qualifications

**(a) Recommendations in last report**

None made. The unit was commended for the variety of training opportunities to which staff has access.

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

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

The Organisations Training Manual is circulated to all staff who are then encouraged to make choices through support and consultation with their line managers. A good range of relevant training is accessible to all staff.

It was noted that training is carried out countrywide thereby allowing staff to integrate with colleagues throughout the organisation.

## QUALITY OF PHYSICAL ENVIRONMENT

### 1. Compliance with space standards

**(a) Recommendations in last report**

None made

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

No detailed inspection carried out during this short focused inspection.

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

None

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

**(a) Recommendations in last report**

It was recommended that steps were taken to ensure that residents are not put at any unacceptable risk from the radiators through the provision of suitable radiator guards.

It was recommended that the unit address the issue of ventilation of the kitchen.

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

Appropriate radiator guards were ordered following the last Inspection and are due to be fitted next week.

Major work has been completed in the kitchen; this has overcome the previous problems with ventilation.

**Both these recommendations have been addressed satisfactorily.**

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

None

### 3. Hygiene and cleanliness

**(a) Recommendations in last report**

None made

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

The unit appeared clean and hygienic throughout the areas seen.

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

None

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

**(a) Recommendations in last report**

None made

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

As stated in “2b” arrangements are in hand for the fitting of radiator covers.

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

None

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

**(a) Recommendations in last report**

Bathrooms and toilets continue to be decorated to the best possible standard within the limitations of the overall design. It was stated that a fuller upgrading of these was in the early stages of being planned.

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

No major upgrading has taken place in the bathrooms and toilets. The Organisation is encouraged to continue with the planned upgrading as soon as is possible.

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

None

#### **6. Standards of building maintenance**

**(a) Recommendations in last report**

None made

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

Not inspected during this short, focused Inspection.

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

None

## QUALITY OF CARE ARRANGEMENTS

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

**(a) Recommendations in last report**

None made. The unit was again commended for the organisation of the reviews.

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

No detailed inspection was carried out. However, it is noted that regular well-documented reviews are in place and appropriate care plans maintained.

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

None

### 2. Quality of Menus and Catering arrangements

**(a) Recommendations in last report**

None made

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

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

On the day of Inspection the lunchtime menu provide a choice for each of the two courses. This food was well presented and of good quality. Residents referred to the excellent abilities of the cooks in providing meals and home baking that they enjoy.

### 3. Quality of activity programmes

**(a) Recommendations in last report**

None made

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

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

The planned programme of activities included outings recommended or requested by users. It is noted that a wide variety of interests are covered by the plan and include visits to theatres, canal barge sailing, mini bus drives with fish and chips at the destination, clubs, safari parks and concerts. In addition there is a regular programme of in-house activities.

**The unit is commended for the quality and variety of their social activity programme**

## INSPECTORS FINDINGS ON OTHER VIEWS

### 1. Staff views expressed

**(a) Recommendations in last report**

None made

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

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

Three members of staff were seen. All reported that they felt valued, were able to offer users appropriate levels of care in response to their stated choices and had opportunities to work individually with them.

In particular staff felt supported and affirmed the importance of being able to access a wide range of training opportunities.

### 2. User/Carer views

**(a) Recommendations in last report**

It is recommended that the unit management review their arrangements for drawing Inspection reports to the attention of carers.

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

Inspection reports are clearly displayed on the user's notice board, are available at reviews and are circulated at relatives support groups.

This recommendation has been satisfactorily acted on.

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

None



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

## **SUMMARY INSPECTION REPORT**

**DUNSELMA**

**Date of Inspection 2 March 00**

### **Summary of Inspection**

Dunselma is located in a large, attractive stone building on two floors set in its own grounds in the conservation village of Fenwick. There is easy access to the village and its amenities, with public transport stopping at the entrance. The unit has its own mini bus that is in regular use.

In addition to residential care for a maximum of 28 elderly users, the unit provides services for 6 day care clients, home care, meals on wheels and a small lunch club. The unit continues to be well managed and staffed by a team of managers, carers cooks and domestic staff who continue to demonstrate a high level of commitment to their users.

This short, focused inspection looked mainly at the recommendations contained in the previous inspection report.

Inspectors found case files and most other records well formatted and maintained appropriately. Staffing levels meet with Registration requirements and there is a continued commitment to staff development and training.

Considerable upgrading has taken place in the kitchen and a rolling programme of redecoration continues. The unit is comfortable and warm throughout. There are a number of sitting, dining and activities areas throughout thereby allowing residents to choose how to spend their day. A well planned and interesting programme of outings and social activities is available. Regular acts of worship take place within the unit.

It is noted that the upgrading of bathrooms and toilets continues to be part of the planned upgrading programme.

**Further recommendations**

None

**Previous recommendations carried forward:**

There are no outstanding recommendations. However, the planned programme of upgrading for bathrooms, and in the longer term en-suite facilities, should not be lost sight of.

**Commendations**

The unit is commended for the quality and variety of their social activity programmes.

**LEAD INSPECTOR: Mrs Isobel M Dawson**

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

**Date 11<sup>th</sup> May 2000**

**COUNTERSIGNED BY HEAD OF UNIT:** \_\_\_\_\_

**AGENDA**