



East Ayrshire
COUNCIL

SOCIAL WORK INSPECTION UNIT

INSPECTION REPORT AND SUMMARY REPORT

HALLHOUSE

Date of Inspection:

3RD October 2000

W.J. Duncan
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East Ayrshire Council
Social Work Department
Council Offices
Lugar
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INSPECTION INFORMATION

NAME OF ESTABLISHMENT:	Hallhouse
LOCATION OF ESTABLISHMENT:	Main Road Fenwick Tel 01560 600910
MANAGING ORGANISATION:	Tamaris
CATEGORY (as per Registration):	Elderly male and female persons
MAXIMUM NUMBER OF RESIDENTS TO BE ACCOMMODATED (as per Registration):	13
NUMBER RESIDENTS/ATTENDING AT TIME OF VISIT:	12
NATURE OF INSPECTION	Unannounced
INSPECTOR(S) PARTICIPATING:	Mina Cassidy Isobel Dawson
DATE(S) OF INSPECTION:	3 rd October 2000
DATE OF LAST INSPECTION REPORT:	9 th February 2000
FOR FURTHER INFORMATION ON THIS ESTABLISHMENT CONTACT	Mrs Mary Easterbrook – Manager Mrs E Lauder – Care Manager

QUALITY OF RECORDS

1. Sampled Case Files

(a) Recommendations in last report

It is recommended that the content of all case files be reviewed. In addition staff require urgent training to ensure they fully understand the importance of regularly recording and updating information.

Findings at this Inspection – Progress

The layout and quality of the content of residents' files has improved since the previous inspection. The information contained in each resident's file is well organised and includes:-

Profile/assessment - Gives quick reference information such as next of kin and G.P. Also includes an assessment of the residents' activities of daily living.

Care plan - (see section Quality of care arrangements 1a.)

Medical referral form - Recording all medical and paramedical referrals, visits and outcomes.

Life summary - Gives details of the residents' personal background history.

Social activities plan - Provides a daily record of the activities participated in by the resident.

Relatives communication record - Records all visits and communications by relatives.

Exclusive Reporting - Records more personal details regarding the residents care needs on a particular day.

Assessment Handling Plan - Gives details and instructions for the movement and handling of the resident.

Pressure sore risk assessment - completed on a monthly basis.

Also included are a weight chart and a bathing record.

(b) Additional Inspectors observations at this Inspection

It is noted that residents' care plans do not accurately reflect the holistic needs outlined in the profile/assessment. (see Quality of Care Arrangements 1c)

2. Sampled Financial Records

1. Recommendations in last report

It is recommended that all transactions be accounted for by two signatures. Where possible, residents should be encouraged to participate in this process.

(b) Findings at this Inspection - Progress

Two signatures now account for all transactions in relation to residents' finances. However, it is noted that in most cases this does not include the signature of any of the residents, therefore continued efforts should be made to include the residents in this process.

(c) Additional Inspectors observations at this Inspection

The system in use for recording all transactions is clear and easy to follow.

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

(a) Recommendations in last report

It is recommended that an appropriate code be used when administering medication. Where there is a need for further explanation the existing paperwork allows such entries and should be used.

(b) Findings at this Inspection - Progress

Medication records show that all entries are recorded as required with appropriate codes and signatures in place.

(c) Additional Inspectors observations at this Inspection

The local General Practitioners in Fenwick and Boots Pharmacy in Kilmarnock supply medication to the Unit. The Boots 'Medication Administration Record' system has been adapted by staff to include all medications from the local doctor which ensures continuity in the recording of medications administered to residents.

It is also noted by inspectors that one resident is being supported in managing a partial self-medication programme.

Fire Records - Fire records show that all staff have received fire training and have watched the fire prevention video. It is also noted that a full fire drill took place on 18.7.00 involving all staff and residents who were on the premises at that time.

Training Records - The Unit holds a general training record, which details the external and internal training available to staff and the names of those staff who participated in this training. This record also contains details of a rolling programme of training with at least three subject areas being covered each month however, it is difficult to confirm from records whether all of this training has actually taken place

The information contained in this record, although relevant, is not well organised and therefore difficult to follow. It is suggested that the list, which details the rolling programme of training, is developed into a spread sheet to include the proposed training, actual dates it took place and the staff who attended. The individual training records were clearly linked to an individual training needs analysis through the staff appraisal system. This tool if completed would be an excellent reference document.

It is recommended that the useful staff training records are completed and fully utilised.

QUALITY OF MANAGEMENT AND STAFFING

1. Communication systems within the staff group

(a) Recommendations in last report

The importance of a robust communication system must be impressed upon the whole staff team. This should be complimented by appropriate support systems and training opportunities.

(b) Findings at this Inspection - Progress

Progress has been made in the development of good written and verbal communication systems which enable staff to be fully informed of all that is happening in the Unit and the changing needs of residents. Although there is an overall improvement in the quality of written information some inconsistency in the standard of recording remains.

(c) Additional Inspectors observations at this Inspection

There is a programmed overlap of 15 minutes between the night shift and early shift that allows important information to be exchanged. This is in addition to a 45 minute overlap programmed between early shift and late shift which gives staff the opportunity to meet more formally and keep required records up to date.

2. Staffing Levels

(a) Recommendations in last report

It is recommended that the day to day manager has some space to undertake quality assurance and development work.

(b) Findings at this Inspection - Progress

The Inspectors are informed that the day to day manager is now allocated 4 hours per week specifically to undertake quality assurance and development work.

(b) Additional Inspectors observations at this Inspection

Rotas show that all shifts have at least two members of staff on duty, which includes a senior member of staff. It is also noted that an additional member of staff is made available when residents require to be escorted, e.g. to hospital appointments.

3. Staff Training and Qualifications

(a) Recommendations in last report

It is essential that all staff undertake induction and lifting and handling training as a matter of priority.

It is recommended that consultation takes place with the Registration Officer to identify other training priorities.

(b) Findings at this Inspection - Progress

Records examined during this inspection show that some staff have undertaken induction and lifting and handling training. This programme of training should continue to ensure that all staff the appropriate.

The above recommendation is therefore reiterated.

(c) Additional Inspectors observations at this Inspection

See also Quality of Records (Section 3c)

	Management	Care Staff	Domestic staff
Induction		2	
Lifting/Handling		3	
Fire Safety	1	9	

QUALITY OF PHYSICAL ENVIRONMENT

1. Compliance with space standards

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(c) Additional Inspectors observations at this Inspection

All areas of the building comply with registration standards. It is noted that in addition to the joint laundry unit, a domestic type washing machine has been installed in the unit to launder small personal items.

2. Heating levels (including water temperature control)

(a) Recommendations in last report

It is recommended that all radiators currently without appropriate guards are fitted with them as a matter of urgency.

It is recommended that water temperature is brought within an acceptable range as a matter of urgency.

(b) Findings at this Inspection - Progress

It is noted that some radiators, which could pose a risk to residents, remain uncovered. It is also noted that when inspectors tested the water temperature in a resident's bedroom the water temperature became scalding very quickly.

The above recommendations are therefore reiterated. Timescales for the completion of these recommendations should be included in the action plan.

(c) Additional Inspectors observations at this Inspection

Inspectors found the Unit to be comfortable and warm throughout.

3. Hygiene and cleanliness

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(b) Additional Inspectors observations at this Inspection

The standard of hygiene and cleanliness throughout the Unit is very high.

Domestic staff and care staff are commended for the standards of cleanliness throughout the Unit.

4. Safety of the environment

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(c) Additional Inspectors observations at this Inspection

See Quality of physical environment (Section 2b and 5c)

5. Fabric and decor standards

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(c) Additional Inspectors observations at this Inspection

Inspectors note that the carpets in several areas throughout the Unit are showing signs of fraying and wear. If left to deteriorate further this could prove hazardous to residents in addition to detracting from the Units overall excellent standards of fabric and décor.

It is recommended that the damaged carpets are repaired or replaced

6. Standards of building maintenance

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(d) Additional Inspectors observations at this Inspection

There are no outstanding maintenance issues.

QUALITY OF CARE ARRANGEMENTS

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

(a) Recommendations in last report

It is recommended that the care plan pro forma refer to areas of “need” as opposed to “problems”.

(b) Findings at this Inspection – Progress

Care plans still make reference to ‘problem’ and not need.

(c) Additional Inspectors observations at this Inspection

Residents’ care plans are very limited and do not reflect their holistic needs. The Units’ profile/assessment documentation could provide the required information for compiling an initial care plan, which should then be developed and reviewed regularly. The Manager informed inspectors that care planning has been identified as a training need and external training is scheduled for the very near future.

It is recommended that the proposed training in the development and maintenance of care plans should go ahead as soon as possible, with all appropriate staff attending.

2. Quality of Menus and Catering arrangements

(c) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(c) Additional Inspectors observations at this Inspection

Menus show that residents receive a nutritional and well balanced diet. Breakfast is not included in the menus and should be added. It is noted that the Unit receives a regular delivery of a wide selection of fresh fruit and vegetables, which are fully utilised within the menus. In addition tea, coffee and fresh fruit is available to residents all day.

The Unit is commended for providing a tea bar and an upstairs domestic kitchen, which are readily available to residents and visitors.

3. Quality of activity programmes

(a) **Recommendations in last report**

None

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

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

The activities programme was found to offer a wide range of activities. These included the opportunity for residents to attend a variety of clubs and groups both in the local and wider community. The residents are considered very much part of the local community and have particular strong links with the local school.

Management and staff are commended for developing and maintaining strong links with the local community.

The managing organisation provide a social and welfare budget for the benefit of residents which is used to provide in house entertainment, social outings, snacks and treats whilst on outings, in addition to birthday and Christmas gifts for residents. The Unit fully utilises the mini bus which, is shared with the Company's Nursing Home adjacent to the Unit.

The unit has recently developed an E mail facility for residents following a gift from a relative. Staff and residents are being afforded training in its use.

INSPECTORS FINDINGS ON OTHER VIEWS

1. Staff views expressed

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(c) Additional Inspectors observations at this Inspection

The comments contained in the questionnaires completed by staff were positive. They each stated that they were able to access appropriate training and felt valued and that their views and opinions were listened to. Some made reference to the advantage of being employed in a small Unit where they felt able to build closer relationships with all of the residents and their families.

2. User/Carer views

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(c) Additional Inspectors observations at this Inspection

The comments contained in the questionnaires completed by residents were on the whole positive. They all stated that they were made to feel welcome when they arrived and they felt able to speak to any staff member about any concerns they may have. Particular reference was made to the comfortable surroundings and the warmth of staff. Two residents stated that they did not have a private lockable space in their room however, three stated that they did. Another two residents stated that they were not sure if they could lock their room door although three stated that they could.

The comments contained in the questionnaires completed by relatives were very positive they each made particular reference to the high quality of care provided by staff. One relative considered every aspect of the Unit to be 'excellent' and another praised staff for the way in which care was provided in a manner which ensured that the residents' dignity was maintained at all times

EAST AYRSHIRE COUNCIL - SOCIAL WORK INSPECTION UNIT

SUMMARY INSPECTION REPORT

**Hallhouse
3rd October 2000**

Summary of Inspection

Hallhouse is a two storey stone building situated in pleasant secluded grounds on the edge of the town of Fenwick. It is adjacent to Hallhouse Nursing Home with whom it shares some facilities.

The building was designed to be used as a hotel and as such the standard of fabric and décor is very high although some of the carpets within the Unit are beginning to show some signs of wear. All but one of the rooms has an En-suite bath/shower/room.

The recording systems adopted by the unit are now well organised and contain relevant information which is recorded on a regular basis. However, further work is required through staff training to ensure that this information is utilised in a more constructive way to inform the care-planning process.

Residents and their relatives express a high level of satisfaction with the quality of care provided in the Unit. Management and care staff ensure that relatives are facilitated to maintain close links with the residents. The Unit provides residents with an extensive and varied activity programme which includes regular outings and the involvement of residents in local groups in the local and wider community.

Previous recommendations carried forward:

2. It is essential that all staff undertake induction and lifting and handling training as a matter of priority.
3. It is recommended that all radiators currently without appropriate guards are fitted with them as a matter of urgency.
4. It is recommended that water temperature is brought within an acceptable range as a matter of urgency.

Further recommendations

1. The useful staff training records should be completed and fully utilised.
2. The damaged carpets throughout the Unit should be repaired or replaced
3. The proposed training in the development and maintenance of care plans should go ahead as soon as possible, with all appropriate staff attending.

Commendations

1. The Unit is commended for the standard of fabric and decor.
2. Domestic and care staff are commended for the standards of cleanliness throughout the Unit.
3. Management and staff are commended for developing and maintaining strong links with the local community.

LEAD INSPECTOR: Mina Cassidy

SIGNATURE: _____ **Date** _____

COUNTERSIGNED BY HEAD OF UNIT: W J Duncan

SIGNATURE: _____ **Date** _____