



**East Ayrshire**  
COUNCIL

## **SOCIAL WORK INSPECTION UNIT**

### **INSPECTION REPORT AND SUMMARY REPORT**

**Kirklea**

**9<sup>th</sup> November 2000**

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

**Tel: 01563 555343 Fax: 01563 555400**

## INSPECTION INFORMATION

<b>NAME OF ESTABLISHMENT:</b>	Kirklea
<b>LOCATION OF ESTABLISHMENT:</b>	3 Dundonald Road Kilmarnock KA1 1E
<b>MANAGING ORGANISATION:</b>	Kirklea Residential Home
<b>CATEGORY (as per Registration):</b>	Adults with learning disabilities, who may also have physical disabilities which do not restrict their mobility.
<b>MAXIMUM NUMBER OF RESIDENTS TO BE ACCOMMODATED (as per Registration):</b>	20
<b>NUMBER RESIDENTS/ATTENDING AT TIME OF VISIT:</b>	20
<b>NATURE OF INSPECTION</b>	Full announced
<b>INSPECTOR(S) PARTICIPATING:</b>	Mina Cassidy Isobel Dawson
<b>DATE(S) OF INSPECTION:</b>	9 <sup>th</sup> November 2000
<b>DATE OF LAST INSPECTION REPORT:</b>	4 <sup>th</sup> February 2000
<b>FOR FURTHER INFORMATION ON THIS ESTABLISHMENT CONTACT</b>	Mrs M Alexander 01563 53901

## QUALITY OF RECORDS

### 1. Sampled Case Files

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(c) Additional Inspectors observations at this Inspection

Six service users' files were examined during this inspection one of which was of the most recent admission. The information contained within each file is well ordered. However, the standard of recording is inconsistent and the content limited. The information contained in the residents' progress notes does not relate to the areas of need detailed in the care plans, nor does it demonstrate how these needs are being addressed.

**It is recommended that future staff training and development programmes should address the areas of care planning, record keeping and reviews.**

### 2. Sampled Financial Records

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(c) Additional Inspectors observations at this Inspection

Residents' financial records are well maintained and show details of all income and expenditure. The system used to record transactions is clear and easy to follow and includes double signatures and whenever possible are accompanied by receipts.

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

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(c) Additional Inspectors observations at this Inspection

**Fire Records** show that weekly checks are carried out and recorded appropriately. Two fire drills with evacuation has taken place this year. Records show that the fire alarm system, emergency lighting, extinguishers and the intruder alarm were serviced by the contractor in June 2000. However, it is noted that individual fire extinguishers are signed as being checked in December 1999 and not in June 2000 as recorded in the log. The Manager should ensure that the contractor records the extinguisher checks both in the maintenance log and on the individual extinguishers.

**Medication Records** are well maintained and include the appropriate codes and signatures

**Health and Safety** policy is in place and includes risk assessments.

**Policy Documents** and guidelines available within the Unit are comprehensive and include; complaints procedure, admission/discharge procedures, contracts of employment, job descriptions, fire instructions, medication, lifting and handling and Makaton Signing.

## QUALITY OF MANAGEMENT AND STAFFING

### 1. Communication systems within the staff group

**(a) Recommendations in last report**

None

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

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

A Diary is used to note appointments, pre-arranged visits to/from relatives, social activities arranged for individual residents outwith the Unit and notes from night shift staff. It is noted that staff meetings are held very infrequently and the agenda and topics discussed are limited.

There is an overall lack of appropriate communication systems to ensure that individuals changing needs are recognised and met on a daily basis. In addition there should be regular opportunities for staff development and the dissemination of relevant information.

**It is recommended that formal written and verbal communication systems be established. Regular staff meetings should be formalised, with staff given the opportunity to contribute to the agenda and to access the minutes.**

### 2. Staffing Levels

**(a) Recommendations in last report**

None

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

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

The rota shows that there are an appropriate number of staff on duty over the 24-hour period.

### 3. Staff Training and Qualifications

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(c) Additional Inspectors observations at this Inspection

Training during the past twelve months

	Management	Care Staff	Domestic Staff
Induction		1	
Lifting & Handling		17	
Food Handling		3	
Fire Safety		On going	
Diabetes		4	
Autism		4	
Pain Management		3	
Health & Safety		5	
Infection Prevention		5	
Medication		1	

Each member of staff has an individual training record that is very detailed. However the format concentrates on training relating to the physical aspects of care and does not include wider areas such as promoting independence, or the provision of emotional, spiritual, or social care.

**It is recommended that the Unit's training programme should be developed to include areas of care that would address residents' holistic needs.**

## 1. Compliance with space standards

### (a) Recommendations in last report

It is recommended that the Unit should continue to attempt to identify means of reducing the proportion of double rooms.

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

The high ratio of double rooms remains unchanged. There are eight double bedrooms and two single rooms in the main house; the recommended ratio is one double to eight single rooms. In addition there are two single rooms in the cottage located within the rear Garden.

The Unit should continue to identify ways of reducing the proportion of double rooms to single rooms. The Manager is aware that, as there is no passenger lift, all residents accommodated on the upper floor of the house must be able to use the stairs without difficulty.

**This recommendation is reiterated.**

### (b) Additional Inspectors observations at this Inspection

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

### (a) Recommendations in last report

None

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

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

As the Inspection progressed, Inspectors found the Unit to be uncomfortably cold. The Manager reported that a resident had adjusted the main thermostatic control. Although residents should be able to adjust the temperature in their own bedrooms, all shared space should be maintained at a comfortable temperature throughout the waking day.

**It is recommended that a comfortable temperature is maintained in all shared space throughout the waking day.**

## 3. Hygiene and cleanliness

### (a) Recommendations in last report

None

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

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

The Unit was clean and fresh throughout with an acceptable level of housekeeping.

## 4. Safety of the environment

**(a) Recommendations in last report**

None

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

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

The assisted bath, in the ground floor bathroom, has a worn and discoloured surface and should be upgraded. The damaged flooring in this bathroom should be replaced with a impervious surface.

**It is recommended that the assisted bath should be upgraded and the flooring replaced with a impervious surface.**

The radiators seen during this inspection were either of a low surface temperature type or appropriately covered.

<b>5. Fabric and decor standards</b>
--------------------------------------

**(a) Recommendations in last report**

It is recommended that the bathroom and shower room, on the upper floor, are upgraded.

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

Decorative work, together with some maintenance to the flooring, has been carried out. This has made some improvement to the comfort and décor of the bathroom and shower room.

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

The Inspectors found that the fabric and décor throughout the Unit is in need of up grading. The internal and external paint work is chipped and discoloured and floor coverings are showing signs of wear.

**It is recommended that a general upgrade of décor is carried out throughout the unit.**

It is noted that one bedroom on the ground floor has a half-glazed door with a 'net curtain' which does not provide privacy to the occupants. In addition this room is stark with little evidence that efforts have been made to introduce comfortable and homely accessories, tailored to the residents' tastes and needs.

**It is recommended that all residents are afforded privacy in an environment which is homely and comfortable and tailored to the individuals tastes and needs.**

A range of unacceptable paper signs is noted throughout the Unit. In order to maintain a non-institutional environment, signs should only be used when essential for the safety and guidance of residents.

**It is recommended that if signs are required they should be appropriate and attractively framed.**

<b>6. Standards of building maintenance</b>
---

**(a) Recommendations in last report**

None

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

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

Not examined in detail during this inspection.

The recommendations in 5(b) Fabric and Décor standards are reiterated.

## QUALITY OF CARE ARRANGEMENTS

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

**(a) Recommendations in last report**

None

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

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

Inspectors found that individual care plans contain basic information but do not reflect the holistic needs of the residents. There is no evidence of care plans being reviewed or up-dated. Future staff training and development programmes should address the areas of care planning, record keeping and reviews.

**It is recommended that care plans are developed to reflect residents' holistic needs and that these should be appropriately reviewed and up-dated.**

### 2. Quality of Menus and Catering arrangements

**(a) Recommendations in last report**

None

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

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

The menu on the day of inspection included

<b>Breakfast</b>	<b>Lunch</b>	<b>Eve Meal</b>	<b>Supper</b>	<b>Late snack</b>
Fruit juice, cereal, toast, jam, marmalade, various cooked eggs	Beans on toast, Pancakes	Macaroni & Chips, Salad & Chips, Angel Delight, Fruit or Yoghurt	Sandwiches, Toast, cereal, yoghurt choice of hot drink	Choice of hot drinks and biscuits.

When preparing menus account should be taken of not only the resident's choice, but also the requirement for nutritional and balanced diets. It would be useful to seek the advice of a dietician.

### 3. Quality of activity programmes

**(a) Recommendations in last report**

None

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

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

Residents have access to a range of activities which are recorded in the residents' individual record sheet or the daily notes. The residents continue to speak enthusiastically, to inspectors, about the variety of activities available to them.

**The Unit Manager and staff are commended for ensuring that residents' have access to a wide range of social and leisure activities.**

## **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**

Five staff completed confidential questionnaires, all of which were generally positive. Staff consider themselves to be valued and that their views and opinions are listened to. Particular positive comments were made about job satisfaction.

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

**(a) Recommendations in last report**

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

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

The service users seen during the inspection spoke positively about their life in the Unit and made particular comments about the range of activities available to them. Two relatives returned the confidential questionnaire. Comments were positive and expressed particular appreciation for the support received from the staff in the unit.

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

**SUMMARY INSPECTION REPORT**

**Kirklea**  
**9<sup>th</sup> November 2000**

**Summary of Inspection**

Kirklea is a large Victorian house near to the centre of Kilmarnock, which is registered to provide residential accommodation for male and female adults with learning disabilities. It was first registered in 1987 and has been managed by one of the owners since registration.

Residents' accommodation is on two floors with all public rooms and some bedrooms on the ground floor. The house is not adapted for wheel chair users or individuals with severe mobility difficulties. Of the twenty registered places, within the main house eight places are in double rooms. Two residents can live more independently in a converted cottage in the rear of the garden, where each has their own bedroom. It is noted during this inspection that a number of areas require to be upgraded.

The Unit is within easy access to shops, pubs, cafes and entertainment. A number of residents in Kirklea have access to services provided by East Ayrshire Council including Day Centres, Colleges and other placements. East Ayrshire Council has a Leisure centre nearby which residents have access to swimming, sports and the fitness clubs. The Unit has its own mini bus which is well utilised and a caravan on the Ayrshire Coast used to provide holidays and short breaks for residents.

Links with families are maintained and some residents have overnight stays or spend weekends with their families.

During this inspection records were found to be well maintained and organised. However, further work is required to develop care plans to ensure that they reflect the holistic needs of residents and these are appropriately reviewed on a regular basis. It is anticipated that future-training programmes will address these issues.

**Previous recommendations carried forward:**

- 1. It is recommended that the Unit should continue to attempt to identify means of reducing the proportion of double rooms.**

**Further recommendations**

**It is recommended that future staff training and development programmes should address the areas of care planning, record keeping and reviews.**

**It is recommended that formal written and verbal communication systems are established. Regular staff meetings should be formalised, with staff given the opportunity to contribute to the agenda and to access the minutes.**

**It is recommended that the Unit's training programme be developed to enable staff to identify and address the holistic needs of residents.**

**It is recommended that the issues detailed in Quality of Physical Environment be addressed.**

**It is recommended that care plans are developed to reflect residents' holistic needs and that these should be appropriately reviewed and updated.**

<b>Commendations</b>
----------------------

**The Unit Manager and staff are commended for ensuring that residents' have access to a wide range of social and leisure activities.**

**LEAD INSPECTOR:**

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

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

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

<b>AGENDA</b>
---------------