



East Ayrshire
COUNCIL

SOCIAL WORK INSPECTION UNIT

INSPECTION REPORT AND SUMMARY REPORT

Woodside House

17th October 2000

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

NAME OF ESTABLISHMENT: Woodside House

LOCATION OF ESTABLISHMENT: Mauchline

MANAGING ORGANISATION: Mr & Mrs J Morris

CATEGORY (as per Registration): Elderly Male and Female

**MAXIMUM NUMBER OF RESIDENTS
TO BE ACCOMMODATED (as per Registration):** 19

**NUMBER RESIDENTS/ATTENDING
AT TIME OF VISIT:** 19

NATURE OF INSPECTION Announced

INSPECTOR(S) PARTICIPATING: Mina Cassidy
Isobel Dawson

DATE(S) OF INSPECTION: 17th October 2000

DATE OF LAST INSPECTION REPORT:

**FOR FURTHER INFORMATION ON
THIS ESTABLISHMENT CONTACT** Mrs E Morris
Tel. 01290 55

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

Inspectors found residents' files in a state of disarray, very poorly managed and containing inadequate information. Many documents are filed out of sequential order or lying loose within the folder. The information contained in the residents' 'front sheets' is incomplete with many not showing an address for the next of kin. Although this may be available in other records held in the Unit it should be entered in the file which would be considered the most obvious place to be.

It is recommended that the layout and content of residents' files be reviewed.

See also Quality of Care Arrangements 1 c

2. Sampled Financial Records

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(c) Additional Inspectors observations at this Inspection

Not examined as part of this inspection

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 – Fire records show that all tests are carried out as required. It is noted that there is no record of a fire drill having taken place this year.

It is recommended that a fire drill involving residents and staff take place as a matter of priority.

Admission/Discharge Book – The information, although adequate, is very basic. It is suggested that the format is reviewed to include additional information such as where the resident was admitted from and, when appropriate, the social worker involved.

Accident Book – A separate system is in place for recording accidents of residents and staff.

Certificate of Employers Liability – The certificate is valid until June 2001.

Maintenance Contracts – Records show that appropriate maintenance contracts are in place for The Stair Lift and the Gas Cooker.

Medication Records – Medication is stored in a locked cupboard within the office. The medication is dispensed by the local pharmacist in sealed 'bubble packs'. However, this medication is removed from the bubble packs by staff prior to administering to the residents, and placed in small plastic containers with lids. The medication is then administered to the residents from these containers. This practice should be stopped immediately and medication administered to residents directly from the bubble pack.

It is recommended that medication should be administered directly from the sealed blister pack.

It is noted that there are some code and signature omissions in the Monitored Dosage System proforma, at the time of administration. In addition, the section for checking in medications is not complete and the columns giving the date of administration is also incomplete.

It is recommended that all sections of the Medication records be completed in full.

Employee Files – These files include a record of staff appraisals which includes a pre-appraisal proforma inviting employees to indicate their perceived strengths and areas which they feel they would benefit from more information or training. Some specific areas of concern were raised by staff members which in the Inspectors opinion could have been more appropriately addressed by the management team accessing external professional training, e.g the Community Nursing Staff.

Job Schedule Folder details a four weekly programme of tasks required to be carried out by night shift staff. This includes a number of domestic tasks in addition to care responsibilities.

Night Shift Report Book gives details of the residents care needs throughout the night. This includes the name of the resident requiring and/or requesting assistance, the type of assistance required and the time assistance was given.

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

The minutes of staff meetings reflect that meetings are used as a forum for managers to raise issues of concern regarding staff practice. Although there is a place for these types of issues being raised meetings should also be used to share information and to encourage discussion and development. Staff should be encouraged and supported by managers to add items of interest or concern to the agenda.

The Change over Book provides information relating to specific residents such as observations and change of needs, hospital appointments, doctors' visits and visits from relatives and friends. This is in the form of a loose-leaf folder and contains records going back to 1998. It is suggested that this folder is re-organised and contains only the information relating to the previous three months with older records being archived.

2. Staffing Levels

(a) Recommendations in last report

It is recommended that overnight staffing levels be reviewed. As a further inspection is due, Inspectors will examine the issue further in discussion with the owner

(b) Findings at this Inspection - Progress

Inspectors note that there is now two waking night staff on duty.

(c) Additional Inspectors observations at this Inspection

Rotas show that there are adequate staffing levels on all shifts over the 24-hour period.

The Owner/Manager has informed the Inspectors that on her impending retirement the present depute manager will be proposed as manager of the unit.

3. Staff Training and Qualifications

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(c) Additional Inspectors observations at this Inspection

	Management	Care Staff	Domestic Staff
Induction		16	
Lifting & Handling	2	9	
Food handling		5	
HNC	1		
SVQ Level 2	3	1	
Fire Safety		11	1
Contenance Care	1	1	
Elder Abuse	1	1	
D32	1		

In addition to the statutory requirements such as Fire Training and Moving and Handling the content of the Unit's training programme should be tailored to the training needs of staff identified through the staff appraisal system. In addition, the content of the Staff Induction Training should be outlined in the Units training file. This should include specific training in relation to hygiene and the necessary precautions to be taken when required to carry out a range of different tasks in the duration of a shift i.e.domestic, catering and care tasks.

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
Not examined as part of 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
The Unit is warm and comfortable throughout.

3. Hygiene and cleanliness

- (a) Recommendations in last report
None
- (b) Findings at this Inspection - Progress

(c) Additional Inspectors observations at this Inspection

In the areas seen the unit appeared clean and fresh.

4. Safety of the environment

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(c) Additional Inspectors observations at this Inspection

It is noted by Inspectors that a number of recommendations were made following a Health & Safety Inspection carried out by East Ayrshire Department of Community Services (Environmental) on 24.8.00.

The Proposed Manager should confirm in writing to the Inspection Unit when the above recommendations have been completed. In addition fly screens should be fitted on all kitchen windows

5. Fabric and decor standards

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(c) Additional Inspectors observations at this Inspection

The Unit is well furnished and comfortable. It is also noted that the main lounge, hall and dining room have been fitted with new, good quality carpets.

6. Standards of building maintenance

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(c) Additional Inspectors observations at this Inspection

No outstanding maintenance issues were noted.

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

The majority of care plans do not reflect the holistic needs of residents nor are they of an acceptable overall standard. It is recognised that the proposed manager is presently reviewing the format and content of care plans, however this is at an early stage and should be developed further. The Registration Officer has agreed to assist in this.

It is recommended that the content, of care plans continue to be reviewed.

2. Quality of Menus and Catering arrangements

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(c) Additional Inspectors observations at this Inspection

	Sunday	
Breakfast	Lunch	Dinner
Toast, cereals, fruit, jams & marmalades and residents choice	Meat pie Scrambled eggs on toast Roasted Cheese Salmon	Roast beef Cauliflower au gratin Rhubarb tart & custard Biscuits, cheese and fresh fruit
	Monday	
As above	Soup Shepherds pie Poached egg on toast Sardines on toast Roast beef sandwiches	Link sausage casserole Creamed potatoes Rice creamola & peaches Biscuits and cheese

3. Quality of activity programmes

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(c) Additional Inspectors observations at this Inspection

The activities programme seen is very limited and repetitive. Most activities take place in house with very little opportunity for integration with the local community, external activities or outings. However, it is noted that the Unit has employed an Activity Officer for one session per fortnight and a member of staff has been given specific responsibility for the organising future events and activities.

It is recommended that the recently appointed organiser reviews the present programme of activities taking account of residents' interests and abilities. In addition, efforts should be made to integrate the Unit with the local community whenever possible.

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

Confidential questionnaires were sent to all members of staff of which 50% were returned. The comments made were generally positive. Staff felt that they were valued and that their views were listened to. However, 50% of those who responded stated that there were occasions when household chores was given priority over spending time with residents. It was not clear from this response whether this related to any particular part of the day.

2. User/Carer views

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(c) Additional Inspectors observations at this Inspection

The Inspectors took the opportunity to speak to seven residents on the day of the inspection. They all stated their satisfaction with the standard of care provided, their level of involvement in making decisions about their own care and the general day to day operation of the Unit. They all stated that they could choose when to rise in the morning and go to bed at night and that meals could be served either in the dining room or in their own room at a time they chose. One resident hoped to be given more opportunity to take part in social events and outings outwith the Unit.

EAST AYRSHIRE COUNCIL - SOCIAL WORK INSPECTION UNIT

SUMMARY INSPECTION REPORT

Woodside House

Date of Inspection 17 October 2000

Summary of Inspection

Woodside House is a traditional, red sandstone, 19th 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 with plans for another one to be built in the near future. This building does not impinge on the residents privacy or garden space.

Woodside House is owned by Mr James & Mrs Jessie Morris. Mrs Morris presently holds management responsibility although she is planning to retire in the near future. Mrs Elizabeth Morris is being proposed as the new Manager.

During this Inspection it was found that the format and layout of case files required to be reviewed. In addition care plans required to be developed to reflect residents holistic needs. The Inspectors noted that an Activity Organiser had recently been employed to widen the range of activities available.

Residents and relatives speak highly of the quality of care offered by Woodside, One resident referred to the support and consideration he receives from staff. All had positive views on the surroundings, food and daily living programmes available.

Previous recommendations carried forward:

None

Further recommendations

1. The layout and content of residents' files and care plans should be reviewed.
2. A fire drill involving residents and staff should take place as a matter of priority.
3. Medication should be administered directly from the sealed blister pack and not re-potted prior to administering and all sections of the Medication records be completed in full.
4. The Proposed Manager should confirm in writing to the Inspection Unit when the recommendations detailed in the recent Health & Safety report have been completed. In addition fly screens should be fitted on all kitchen windows
5. It is recommended that the activities programme continue to be reviewed taking account of residents' interests and abilities. In addition, efforts should be made to integrate the Unit with the local community whenever possible.

Commendations

The Management are commended for appointing a person to extend and develop the programme of activities available to residents.

LEAD INSPECTOR:

SIGNATURE: _____ **Date** _____

COUNTERSIGNED BY HEAD OF UNIT: W J Duncan

SIGNATURE: _____ **Date** _____