



East Ayrshire
COUNCIL

SOCIAL WORK INSPECTION UNIT

INSPECTION REPORT

**BUTE HOUSE
BARRHILL TERRACE
CUMNOCK
Wood Road Care Ltd**

**Inspection Date(s)
3rd May 2001**

Announced Inspection

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

INSPECTION INFORMATION

Registration Category:	Elderly Male and Female
Registered Capacity:	Residential: 10 Day: 0
Number At time of inspection	Residential: 10 Day: 0
Type of inspection	Announced
Inspector(s):	Mina Cassidy
Date of last inspection:	21 st February 2001
For further information on this establishment contact	Mrs M Kerr (Matron) 01290 426311

Description of establishment, services and facilities.

Bute House was purpose built as a Nursing Home in 1994 and was Registered with East Ayrshire Council in September 1998 for a maximum of 10 residential clients, having been previously Registered as a Nursing Home with Ayrshire & Arran Health Authority. The Unit is now jointly Registered for a maximum of 29 residents, which includes the 10 residential places.

The unit is situated on the edge of Cumnock town. The design of the building allows for all public rooms to have views on to the open countryside. All residential service users are accommodated in rooms with en-suite facilities.

INSPECTOR:
SIGNATURE: _____

Date _____

HEAD OF UNIT:
SIGNATURE: _____

Date _____

QUALITY OF LIFE SUMMARY

In this section the inspectors set out their views on the quality of life the establishment is achieving for service users.

Each heading is followed by a short statement setting out the standard that is expected to be achieved. This is followed by comments from the inspector giving their findings.

1. Privacy - *"The individual has his/her privacy protected and maintained in the home, in his her living areas and in relation to belongings, personal and financial affairs."*

All bedroom doors are fitted with appropriate locks. Residents can see their visitors in private and can make and receive telephone calls in private.

2. Dignity health and well being - *"the individuals health and well being is promoted and their assessed care needs met without risk to their dignity"*

Residents' care plans identify individuals' needs including the promotion of health and well being. Inspectors observed that staff meet the needs of residents in a way that respects the dignity of individuals.

3. Social and emotional well being - *"The individual feels valued contented and fulfilled and can pursue social and leisure activities of their choice"*

Residents have the opportunity to participate in internal and external activities. Staff encourage residents to maintain and develop relationships both within and outwith the Unit.

4. Security and safety - *" The individual lives in a safe and secure home. Any limitations of rights or restriction of movement must be based on an informed risk assessment and be regularly and formally reviewed."*

Regular fire safety checks and drills take place at the required intervals.

5. Independence and choice - *"The individual shall be assisted to achieve a level of independence and choice compatible with his/her wishes and abilities"*

Residents are encouraged to achieve and maintain their independence and to make choices, which are compatible with their wishes and abilities.

6. Participation - *"The individual has the right to maintain a fulfilling and interesting life style within and outwith the home."*

Residents have the opportunity to participate in a range of external and internal activities. They are also encouraged to maintain and develop relationships and interests.

7. Culture and Belief - *"The individual has the right to expect that his/her cultural beliefs will be respected."*

Individual care plans acknowledge and address cultural needs. Residents are supported to attend local churches and also receive visits from local clergy.

Standard of Records & Procedures

	Date Checked	Standard Acceptable?	Findings at current Inspection
Clear Aims & Objectives?	3.5.01	Yes	Contained within the Staff Information folder
Brochure	3.5.01	Yes	.
Admission/ discharge record	3.5.01	Yes	
Medication Management	26.9.00	Yes	
Accidents	3.5.01	Yes	Separate records are maintained for residents and staff which is well managed and detailed
Incident/violent incident	3.5.01	Yes	Violent incidents policy is contained within the staff information folder outlining the procedures to be followed and documentation required.
Fire safety and checks	3.5.01	Yes	
Risk assessments	3.5.01	Yes	A record of general risk assessments are maintained and reviewed appropriately.
(moving/ handling)	3.5.01	Yes	.
(COSHH)	3.5.01	Yes	
Restraint (if applic)			The Units policy on restraint is contained within the Staff Information Folder.
Complaints	3.5.01	Yes	
Users financial records	3.5.01	Yes	

Comments:

Requirements:

Recommendations:

Management and Staffing Standards

	Date Checked	Standard Acceptable?	Findings at current Inspection
Recruitment practices	3.5.01	Yes	References are pursued before staff appointments are made.
Staff meetings	3.5.01	Yes	
Shift handover	26.9.00	Yes	
Staff supervision	3.5.01	Partially	Staff appraisals take place at approximately 18-month intervals.
Training records	3.5.01	Yes	A central training record is maintained which details all training provided and the staff members who participated. It would be useful for reference and supervision/appraisal purposes if an individual staff training record was maintained for each member of staff,
Training Provided in the Past Year	3.5.01	Partially	Induction, Fire Safety, Food Handling, Huntington' Disease, Parkinsons' Disease, Nutrition, Anaphylaxis, Prevention of pressure sores, MRSA, Promotion of Continence, SVQ level 3.
Rotas	3.5.01	Yes	
Contracts of employment	3.5.01	Yes	.
Job descriptions	3.5.01	Yes	An example of the job descriptions for each designation is held in the Units' policy document.
Absence levels/ monitoring	3.5.01	Yes	
Staff Turnover	3.5.01	Yes	The Unit has a night shift vacancy for an RGN for which the recruitment process is underway. The Units' qualified staff are covering the required extra hours until the post is filled.
Bank Staffing	3.5.01	Yes	The Unit has a small number of bank staff who are used to cover holidays and other absences when required. These staff members are clearly indicated on the rota.

Comments:

Requirements:

Recommendations:

It is recommended that a regular programme of individual staff supervision be established which will support the current appraisal system.

Physical / Environment Standards

	Date Checked	Standard Acceptable?	Findings at current Inspection
Room sizes	3.5.01	Yes	
Double/Single Ratio	3.5.01	Yes	
Ambient Temp	3.5.01	Yes	
Hot Water temp control	3.5.01	Yes	
Hygiene/cleanliness	3.5.01	Yes	
Safety of environment	3.5.01	In part	Recommendations made in previous Inspection Reports regarding the need for appropriate hair washing equipment and the need to change the ground floor toilet door have been carried out. Work is scheduled for week beginning 7.5.01 to provide a safe enclosed garden area.
Fabric/Decor	3.5.01	Yes	The three sitting rooms have recently been re-decorated and fitted with new carpets.
Building maintenance	3.5.01	In part	The recommendation in the previous report regarding the need to ensure that the sign at the entrance to the Unit contains the required information has been carried out. The work to complete the resurfacing of the driveway is scheduled to begin in June 2001. However, Inspectors feel that the flooring on the upper floor remains noisy. (see comments)
Garden Areas	3.5.01	Yes	Gardens are attractive and well maintained. Staff members informed the inspector of plans to purchase additional garden furniture on completion of the enclosed garden.
Furnishing; Comfort/quality	3.5.01	Yes	The quality and comfort of furnishings is of an adequate standard.
Security of establishment	3.5.01	Yes	
Privacy	3.5.01	Yes	Residents can receive visits from friends and family in the privacy of their own room. There are a choice of sitting areas available and residents are able to make and receive telephone calls in private.

Comments:

Inspectors note that there remains a difference of opinion between themselves and the operator regarding the level and impact of the alleged 'noisy' upper floor. A meeting on-site will be arranged with the operator to clarify the extent of the problem (if any)

Requirements:

Recommendations:

Care Standards

Care Planning and Review

	Date Checked	Standard Acceptable?	Findings at current Inspection
Assessment	3.5.01	Yes	.
Care Plans	3.5.01	Yes	
Reviews	3.5.01	Yes	Reviews take place at appropriate intervals
KeyWorker/ Named worker	3.5.01	Yes	
Daily notes	3.5.01	Yes	
User involvement - care planning and review	3.5.01	Yes	Residents sign their care plans and also attend review meetings.
User contracts	3.5.01	Yes	
Residents information directory	3.5.01	No	Following discussions with the Unit Manager it was agreed that an Information directory would be established to inform residents of the services available within the Unit and the services, amenities and places of interest in the local area.

Menus and Catering

	Date Checked	Standard Acceptable?	Findings at current Inspection
Menus - choice & quality	3.5.01	Yes	Menus appear to be nutritional and appetising and offer a range of choices to residents.
Environmental Health Report issues	3.5.01	Yes	Recommendations made in the Environmental health Report of 6.10.00 have been addressed.
Catering equipment and practices	3.5.01	Yes	

Activity programmes

	Date Checked	Standard Acceptable?	Findings at current Inspection
Displayed Program?	3.5.01	Yes	
Internal activities	3.5.01	Yes	There is at least one organised activity each day.
External activities	3.5.01	Yes	

Transport arrangements	3.5.01	Yes	The Unit has its own mini bus, which is frequently utilised to take groups and individual residents on outings.
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Comments:

Requirements:

Recommendations:

Inspectors findings on other views

User/Carer views

Five questionnaires were distributed to residents all of which were returned. The comments made were generally positive. The residents stated that they were made welcome on arrival at the Unit and feel that they are treated as individuals. All of the residents found the Unit to be clean, warm and comfortable at all times. They all stated that they were able to make choices about their daily routines and that meal times were flexible. Specific comments were made about the enjoying the good food and the company of other residents.

Four questionnaires were sent to relatives of which two were returned. Particular comments were made about the good standard of care and the helpfulness and friendliness of staff that contributed to the happy atmosphere. However, one respondent commented that their relative complained of the days being long and boring.

Staff views

Five questionnaires were distributed to staff all of which were returned. The comments made were generally positive. All respondents stated that they were kept informed with what was happening in the Unit. They stated that they felt valued and that their views and opinions were listened to. They also stated that they had the opportunity to undertake relevant training.

Others Views

The Inspector wrote to two professionals who have some contact with the Unit. One responded stating that the staff group were always found to be helpful and residents and families had always reported high levels of satisfaction with the standard of care provided.

AGENDA