



East Ayrshire
COUNCIL

SOCIAL WORK INSPECTION UNIT

INSPECTION REPORT

NAZARETH HOUSE
23 Hill Street
Kilmarnock
KA31HG

MANAGING ORGANISATION
Sisters of Nazareth

22nd May 2001

Announced

W.J. Duncan
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East Ayrshire Council
Social Work Department
Council Offices
Lugar
CUMNOCK KA18 3JQ

1 - INSPECTION INFORMATION

Registration Category:	Elderly Persons
Registered Capacity:	Residential: 47 Single rooms: 15 Single with ensuite: 4 Day: Nil Double rooms: 16 Double with ensuite 0
Number At time of inspection	Residential: 45 Day: Nil
Type of inspection	Announced
Inspector(s):	Mina Cassidy George Stewart
Date of last inspection:	15.2.01
For further information on this establishment contact	Sister Cabrini 01563 522835

2- Description of establishment, services and facilities.

Nazareth House is a large Victorian building near to the centre of Kilmarnock. Over its 100-year history the establishment has moved from an institution with a large number of residents to an elderly care establishment with 47 residents.

Nazareth house is managed by the Sisters of Nazareth, the unit manager is from this order and is on site 24 hours a day; the remainder of the staff are employed and work normal shift patterns.

The Unit is situated within large extensive gardens which are maintained to a very high standard which offer residents and visitors a number of sitting areas around colourful flower beds, water features and some religious statues and grottoes.

Accommodation is on three floors, all of which is accessible by lift. Efforts have been made to create a homely, user-friendly environment within this large building. The three floors offer quite distinct living areas with bedrooms, sitting rooms, dining room with small kitchen and ancillary accommodation. In addition, a conservatory has been added to each floor thereby providing additional bright sitting areas with an open outlook. All bedrooms have individualised colour co-ordinated fabrics, décor and furniture. The unit is warm and comfortable throughout.

Inspector: _____

Date _____

Head of IRC Unit: _____

Date _____

3 - 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."

Residents' rooms are fitted with appropriate locks and each resident has a lockable drawer or cupboard. Residents' records including care plans, correspondence and financial records are appropriately maintained and secured and only accessed by those involved in the direct care of the resident. Every effort is made to ensure the privacy of residents however, the physical privacy of residents is difficult to achieve where residents share a double room.

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 and the observations of inspectors confirm that individual residents' health and well being is promoted at all times and their care needs are met without risk to their dignity.

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

The Inspectors spoke to a number of residents on the day of the inspection, they each spoke highly of the quality of care they received and the warmth and friendliness of the staff. They spoke about the companionship of other residents and the friendships they have developed with particular residents. Some also commented about the activities and outings they have the opportunity to participate in, if they wished.

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."

Measures are taken to ensure that residents live in a safe and secure environment. This includes the installation of appropriate security devices such as security cameras and an electronic gate. In addition there is a call alarm system in operation in the Unit where residents are able to call for the assistance of staff from a large number of accessible points throughout the Unit. However, the Units presents system of individual risk assessment requires to be developed and linked to individual residents 'assessments, care plans and reviews.

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' care plans show that the promotion of independence and the wishes and preferences of individuals are taken into account. However, this will be developed further with the introduction of individual risk assessments.

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

Residents are encouraged to maintain relationships with families, friend and previous neighbours and to maintain links with their local community. Particular reference is made in care plans of significant people in their lives and places and activities of interest. The Unit has its own mini bus which is frequently utilised for individuals and small groups of residents.

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

The cultural and religious beliefs of individuals are fully respected and ministers of all denominations are encouraged to visit their parishioners at any time.

4 - Records & Procedures Standards			
	Date Checked	Standard Acceptable?	Findings at current Inspection
Clear Aims & Objectives?	22.5.01	Yes	
Brochure	22.5.01	Yes	Colourful and well laid out brochure providing a good description of accommodation and services.
Admission/ discharge record	22.5.01	Yes	
Medication Management	22.5.01	Yes	Records maintained to a good standard and medications stored appropriately.
Accidents	22.5.01	Yes	
Incident/violent incident	22.5.01	In part	Records show that there has only been one violent incident, which was recorded in the staff accident records. It is recommended that a separate system for recording violent incidents is established
Fire safety and checks	22.5.01	Yes	
Risk assessments	22.5.01	In part	It is noted that some care plans contain a brief general risk assessment, which incorporates assessed moving and handling risks and the assessed level of risk involved in maintaining and encouraging individuals' independence. These risk assessments require to be recorded separately and developed to offer more detailed information including appropriate review dates.
(moving/ handling)	22.5.01	In part	
(COSHH)	22.5.01	No	COSHH assessments require to be carried out and a record maintained which is appropriately reviewed and updated.
Restraint (if appliqué)	22.5.01	Yes	An appropriate policy is in place which clearly outlines the assessment, review and documentation procedure required for any intervention which may be construed as a potential restraint such as specialist seating or the use of harnesses.
Complaints	22.5.01	In part	The Units' complaints' policy is displayed in several areas throughout the Unit. However, the format of the proforma used to record complaints does not provide the complainant with any confidentiality .
Users financial records	22.5.01	Yes	Maintained to a high standard clear, easy to follow with appropriate cross checks in place.

Comments:

Requirements:

1. The present method used for recording complaints should be reviewed to ensure confidentiality.

Recommendations:

1. It is recommended that a system for recording violent incidents be established.
2. It is recommended that separate documentation be established for recording the assessment, reviewing and up-dating of residents' individual moving and handling risk assessments and generic risk assessments which should be included as an integral part of the care planning process.

Commendations

The Unit is commended for the high standard of residents' financial records.

5 - Management and Staffing Standards

	Date Checked	Standard Acceptable?	Findings at current Inspection
Recruitment practices	22.5.01	Yes	References are taken up and police checks are carried out.
Staff meetings	22.5.01	Yes	General staff and senior staff meetings take place on a regular basis.
Shift handover	22.5.01	Yes	Senior staff member have a half hour shift overlap to provide verbal and written shift hand-over information
Staff supervision	22.5.01	In part	A 6-monthly staff appraisal system is presently in place. However, it is suggested that additional interim development/supervision meetings be arranged to provide more frequent ongoing monitoring and development.
Training records	15.2.01	Yes	
Training during last year	22.5.01	Yes	Induction, Lifting and Handling, Fire Safety, Food Handling, SVQ. 2 and 3. In addition, staff meetings also include an additional developmental and/or speaker on a bi-monthly basis.
Rotas	22.5.01	Yes	
Contracts of employment	22.5.01	Yes	
Job descriptions	22.5.01	Yes	
Absence levels/ monitoring	22.5.01	Yes	
Staff Turnover	22.5.01	Yes	Five members of staff have recently retired. Some of these posts have been filled with further recruitment expected in the near future
Bank Staffing	22.5.01	Yes	The Unit have recruited their own small group of sessional/bank staff who are used to cover staff holidays or other short time absences.

Comments:

Requirements:

Recommendations:

1. It is recommended that an individual programme of staff supervision/development be established which will ensure ongoing monitoring and development and support the present 6 monthly system of appraisal.

6 - Physical / Environment Standards

	Date Checked	Standard Acceptable?	Findings at current Inspection
Room sizes	22.5.01	In part	As stated in previous inspection reports there are some bathrooms and toilets, which are below minimum size requirements. In addition, some toilets and bathrooms are not conveniently situated in relation to residents rooms and some toilets remain of a cubicle style which is not acceptable. These issues require to be addressed as part of the overall future development plans for the Unit.
Double/Single Ratio	22.5.01	No	The present ratio of double to single bedrooms remains higher than the recommended 8 single to 1 double ratio. However, the Inspectors were informed that the managing organisation has recently commissioned a feasibility study and structural survey to ascertain the future development potential of the Unit which will address the issue of the single/double ratio in addition to providing additional ensuite accommodation. It is the expectation that the managing organisation will discuss any proposed future developments with the IRC Unit before any work commences.
Ambient Temp	22.5.01	Yes	
Hot Water temp control	22.5.01	No	The water temperature in some areas was found to be very hot. The manager should confirm in the action plan if individual thermostatic control valves are fitted in all areas where residents have access to hot water in addition to the arrangements for the monitoring of water temperatures.
Hygiene/cleanliness	22.5.01	Yes	
Safety of environment	22.5.01	Yes	
Fabric/Decor	22.5.01	Yes	There is an ongoing programme of refurbishment and décor, which includes the recent addition of ensuite facilities to 3 single bedrooms.
Building maintenance	22.5.01	Yes	
Garden Areas	22.5.01	Yes	The Unit is set within extensive grounds, which are maintained to a very high standard. The gardens provide a number of very pleasant sitting areas and an ornamental pool.
Furnishing; Comfort/quality	22.5.01	Yes	The comfort and quality of furnishing is of a high standard.
Security of establishment	22.5.01	Yes	A number of security measures are in place including an electronic gate to the rear of the

			building which is closed in the evenings and external security cameras strategically placed around the building and grounds.
Privacy	22.5.01	Yes	Residents have locks fitted to their bedroom doors. They are small sitting rooms available on the ground floor where residents are able to meet with their visitors in private if they wish. There is a trolley telephone available to enable residents to make and receive telephone calls in private. However, the high ratio of double to single rooms limits the degree of privacy residents can have in their own rooms. Although each bed area has appropriate screening available this is not considered ideal.

Comments:

Requirements:

1. Plans for the ongoing reduction of the number of double rooms should continue with some indication given of the proposed time-scale.
2. Bathrooms, shower rooms and toilets should meet minimum size requirements, be conveniently situated and accessible. Toilets should not be of a cubicle style.
3. The Manager should confirm if thermostatic temperature control valves are fitted in all areas where residents have access to hot water and what the present arrangements are for monitoring water temperatures

Recommendations:

Commendations:

Management are commended for the on going commitment to reducing the number of double rooms and the recent addition of ensuite facilities to a further three rooms.

7 - Care Standards

Care Planning and Review

	Date Checked	Standard Acceptable?	Findings at current Inspection
Assessment	22.5.01	Yes	The quality of assessment and care planning is acceptable. However, the standard of recording varies in each file. Therefore, assessment, care planning and recording requires to be continually addressed in the Unit's staff training programme.
Care Plans	22.5.01	Yes	
Reviews	22.5.01	Yes	
KeyWorker/ Named worker	22.5.01	Yes	
Daily notes	22.5.01	Yes	Varies in quality and content. See notes re. Assessment and Care planning
User involvement - care planning and review	22.5.01	In part	Residents attend their reviews where ever possible. However, service users' involvement can be demonstrated further by including their written views/comments on care plans and reviews and, where ever possible, they or their representative sign reviews and care plans.
User contracts	22.5.01	Yes	
Residents information directory	22.5.01	In part	

Menus and Catering

	Date Checked	Standard Acceptable?	Findings at current Inspection
Menus - choice & quality	22.5.01	Yes	Menus are varied and offer a range of choices, which appear nourishing and well balanced.
Environmental Health Report issues	22.5.01	Yes	
Catering equipment and practices	22.5.01	Yes	Catering equipment and practices is of a very high standard.

Activity programmes

	Date Checked	Standard Acceptable?	Findings at current Inspection
Displayed Program?	22.5.01	Yes	
Internal activities	22.5.01	Yes	
External activities	22.5.01	Yes	
Transport arrangements	22.5.01	Yes	

Comments:

Requirements:

Recommendations:

Commendations:

The Unit including the Cook and kitchen staff are commended for the high standard of catering practices, equipment and cleanliness observed by the inspectors.

8 - Inspectors findings on other views

User views

The Inspectors spoke to a number of residents on the day of the inspection. All stated that they were happy with the care they received in Nazareth House. One resident described the Unit as very peaceful and offered good company. Another talked about the attractive bedrooms and the 'nice' sitting rooms. Two of the residents who presently share a room stated that they were very comfortable in their bedrooms but would prefer to be in single accommodation.

Staff views

Five questionnaires were distributed to staff of which three were returned. Two of the three respondents stated that they felt valued and that the views and opinions were listened to. They all considered that they were given the opportunity to participate in relevant training. Two of the respondents made particular comments about the amount of domestic duties they had to carry out and also commented that there were occasions when cleaning and domestic duties come before spending time with residents. They each commented that the Unit had very fixed routines. One made particular reference to the fixed meal times.

Relatives/Carer Views

Five questionnaires were sent to relatives of residents of which one was returned. The respondent stated that staff took the time to speak to him/her that they were able to speak to a particular member of staff if required. It was also stated that the resident was able to personalise their own room with pictures, ornaments and small items of furniture. Particular reference was made about the high standard of cleanliness of the Unit and the positive remarks made by the residents about the quality of food.

AGENDA