

Care service inspection report

Sir Gabriel Woods, Mariners Home

Care Home Service Adults

67 Newark Street Greenock PA16 7TO

Telephone: 01475 720908

Inspected by: Gerry Tonner

Type of inspection: Unannounced

Inspection completed on: 21 August 2012



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Service provided by:

Sir Gabriel Woods, Mariners Home

Service provider number:

SP2003000213

Care service number:

CS2003001088

Contact details for the inspector who inspected this service:

Gerry Tonner Telephone 0141 843 6840 Email enquiries@careinspectorate.com

Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

We gave the service these grades

Quality of Care and Support 5 Very Good

Quality of Environment 4 Good

Quality of Staffing 5 Very Good

Quality of Management and Leadership 4 Good

What the service does well

We found that care and support is provided by an experienced group of staff. We saw that there was good continuity of care and noted that there is no agency use. We thought that there were very good opportunities for service users to go on many outings and continue to be involved in local community activities.

We noted that the service has created individual interest bearing bank accounts for service users.

The Home is surrounded by very attractive and well maintained gardens which are used by service users.

What the service could do better

We checked policies and procedures and noted that some of these need to be amended.

We identified that there needs to be some improvements made with the storage of continence aids, audits of the environment (hot water supplies and window restrictors), introduction of written medication audits and assessment prior to the use of equipment such as sensory pads.

What the service has done since the last inspection

The Home has introduced a newsletter which provides valuable information about the ongoing development of the service.

The service continues to respond appropriately to the needs of each individual service user.

Conclusion

The service continues to provide very good standards of care and support to service users in a relaxed environment.

Who did this inspection

Gerry Tonner

1 About the service we inspected

Social Care and Social Work Improvement Scotland (SCSWIS) regulates care services in Scotland. It awards grades for services based on the findings of inspections. These grades, including any that services were previously awarded by the Care Commission, are available on www.scswis.com.

Before 1 April 2011 this service was registered with the Care Commission. On this date the new scrutiny body Social Care and Social Work Improvement Scotland (SCSWIS) took over the work of the Care Commission including the registration of care services. This means that from 1 April 2011, this service continued its registration under the new body SCSWIS.

Sir Gabriel Woods Mariners' Home has been registered with the Care Commission since April 2002 to provide a care home service to a maximum of 35 older people and 12 adults with a diagnosis of Korsakoffs Syndrome. The care home is situated in a residential area of Greenock.

The stated aims of the service are:

- * to provide a supportive, comfortable and caring environment
- * to enhance the quality and enjoyment of life for each resident
- * to meet the changing physical, emotional and spiritual needs of individual residents
- * to provide a trained and caring staff which offers the necessary friendship and support
- * to respect the privacy of each resident, ensuring dignity and freedom of choice.

Based on the findings of this inspection this service has been awarded the following grades:

Quality of Care and Support - Grade 5 - Very Good Quality of Environment - Grade 4 - Good Quality of Staffing - Grade 5 - Very Good Quality of Management and Leadership - Grade 4 - Good

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0845 600 9527 or visiting one of our offices.

2 How we inspected this service

The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What we did during the inspection

An unannounced inspection was carried out over 20th and 21st August 2012 by Inspector Gerry Tonner. The following activities were carried out during the inspection:-

- Interview with 3 service users
- Interview with a visiting relative
- Interview with the Manager, Care Co-ordinator, 2 Senior Carers, 2 Carers, Activities Co-ordinator, Handy person and Cook
- · Observation of practice
- Environmental check
- Reading the content of a range of documents including minutes of meetings,
 3 staff files, policies and procedures, audit records, Environmental Health
 Report, refurbishment programme and training records.

Feedback was given to the Manager at the end of the inspection where the findings and grades awarded were agreed as being reflective of current performance.

Grading the service against quality themes and statements

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

Inspection Focus Areas (IFAs)

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects

Inspection report continued

of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

Fire safety issues

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at www.firelawscotland.org

What the service has done to meet any recommendations we made at our last inspection

There was one recommendation made at the last inspection: -

Action should be taken to address the areas of improvement identified in relation to residents' personal plans and six monthly review records. National Care Standards - Care Homes for Older People, Standard 5; Management and Staffing Arrangements; Standard 6; Support Arrangements; Standard 14; Keeping Well - Healthcare.

Appropriate action has been taken to meet the recommendation.

The annual return

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

Annual Return Received: Yes - Electronic

Comments on Self Assessment

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

The Care Inspectorate received a fully completed self assessment document from the service provider. We were satisfied with the way the service provider had completed this and with the relevant information they had given us for each heading that we grade them under.

Taking the views of people using the care service into account

These are reflected throughout the quality statements.

Taking carers' views into account

These are reflected throughout the quality statements.

3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service strengths

Our examination of records, discussion with service users, staff and the manager supported that the service continues to perform at a very good level in this quality statement.

We found that the service has produced a newsletter and this gives very useful information on the range of activities, outings, entertainments, funding and brief details on refurbishment being carried out within the Home.

There were a number of very positive comments received directly from service users we spoke with about living within the Home:-

"The staff are wonderful, they are first class. They deserve better pay".

"I like it here, you can sit in the big lounge or go to your room if you want a bit of space from others."

"I was at the keep fit group this morning, I enjoyed this."

"We go out regularly. We are going to 'The Point' tomorrow; we also get entertainment and other visitors to the Home."

"It is very good here, I wouldn't change anything."

"The food is very good here, there is always a choice. We also go out for coffee and for lunch."

A visiting relative also made a number of positive comments about the Home; - "My relative gets on well with the staff."

"I thought that he (relative) looks well today; I believe that he has put on more weight recently."

"I have no complaints about the Home."

We saw that there were complaint slips positioned near the main entrance of the Home. We also checked the complaints folder and noted that there had been no complaints received since the last inspection.

We noted that review meetings are planned and carried out at regular intervals. We thought that it was good that these are used to check a number of areas with each service user and hear if they have any concerns or wish for any changes to be made to the support and care offered.

We noted that relatives are regularly invited to attend review meetings.

We observed service users and staff during the inspection. We noted that service users appeared relaxed and content.

Areas for improvement

We shared some comments that had been received from a service user and their relative about having a fully functional mobile phone with the Manager. We were satisfied that actions were being taken to resolve the difficulties the service user had been experiencing.

We noted that the service uses a number of ways to gain feedback from service users, however, at the point of inspection the service did not have a participation strategy or policy which captures the methods that are used. The service should consider developing this and detail which other groups will be consulted, e.g. relatives and professionals.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Statement 3

We ensure that service users' health and wellbeing needs are met.

Service strengths

Our examination of records, discussion with service users, staff and the manager supported that the service continues to perform at a very good level in this quality statement.

We found that the service was very good at offering a wide range of activities and outings. We thought that it was a real strength that regular physical activities are carried out and there are strong community links.

On the first day of inspection there was a religious service and there are regular visits to the Home by a Eucharistic Minister to support service users to maintain their spiritual needs.

We observed the lunch time experience for service users within one of the dining rooms. We noted that there was a menu on display which detailed the food options that are available to service users. We noted that home made soup and two choices of main course were offered. We thought that it was good practice that a variety of drinks were offered including milk, fruit juice and water with the meal. Specialist equipment such as plate guards are used to encourage service users to remain independent with feeding.

We noted that there was fresh fruit and cold drinks readily available in each of the communal lounges.

Accidents and incidents are recorded and a monthly analysis of this is carried out. We thought that the system for reporting to relatives could be improved - see areas of improvement below.

We sampled the content of 3 care plans and associated assessments and records. We thought that it was good practice that section 47 certificates are in place for service users who lack the capacity to make decisions about their ongoing health and treatment needs.

We noted that each service user's weight and BMI is recorded, reviews were recorded and there was good evidence that staff initiate referrals to professionals such as dietitians and G.P.'s when they have concerns.

We noted that there are a comprehensive range of policies and procedures in place; however, we thought that these could be further improved. See areas of improvement below.

We sampled records of 2 service users in relation to the handling of their finances. We thought that it was very good that each individual has an interest bearing account and there are systems in place for to account for the use of monies (this includes double signatures from the service user and staff member).

Areas for improvement

We thought that the reporting system used to inform the relatives of service users about any incidents or accidents could be improved on. The current policy does not make it clear when relatives should be contacted and under what circumstances. Through discussion with the Manager it was agreed that the service would revisit the front contact sheet held in each service user's file and reflect who should be contacted, when and in what circumstances. This shall be revisited at the next inspection.

We looked at a range of policies and procedures and saw that many made reference to English legislation and regulators. These should be amended.

The policy and procedure relating to adult support and protection should be aligned to the West of Scotland Practice Guidance and should detail specific contacts within key organisations including social work and police. A recommendation shall be made in connection with the same.

We noted that the service uses equipment such as alert mats in order that the safety of service users is maintained. However, when we checked the corresponding file we noted that there was no assessment or consent achieved prior to the use of this equipment. We would expect to see this as this is aligned to good practice as per the Mental Welfare Commission's guidance; "Rights, Risks and Limits to Freedom". A recommendation shall be made in connection with the same.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 2

Recommendations

- 1. The policy and procedure relating to adult support and protection should be aligned to the West of Scotland Practice Guidance and should detail specific contacts within key organisations including social work and police. This is to adhere to NCS; Care Homes for Older People, Standard 5.1 and 5.2.
- 2. Assessment and consent should be carried out prior to the use if equipment which could be regarded as being potentially restraining. This is to adhere to NCS; Care Homes for Older People, Standard 5.1.

Quality Theme 2: Quality of Environment

Grade awarded for this theme: 4 - Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the environment within the service.

Service strengths

Our examination of records, discussion with service users, staff and the manager supported that the service continues to perform at a good level in this quality statement.

See comments under strengths in Quality Statement 1.1.

Service users communicated that they are happy living in the Home. The Home is surrounded by very attractive and well maintained gardens which are used by service users when the weather permits.

We checked a number of bedrooms and noted that they contained personal effects and were individually furnished and decorated. We thought that it was good that the Home has a number of communal areas and smaller areas for service users to use. At the point of the inspection none of the double rooms were being shared by service users.

We noted that there have been some improvements with the environment. New equipment has been purchased for the kitchen including shelving and new flooring has been laid. We were informed that new equipment has been purchased for the laundry.

The service has Property Committee Meetings and we sampled minutes of these meetings. We noted that these detail work in progress and proposed works.

We checked visitor's report sheets. These detail audits which are carried out to the environment; we thought that it was good that the checks are carried out on a monthly basis. We also noted that the Manager carries out environmental audits on the kitchen. This audit includes checks on delivery, storage, preparation, cooking and hot storage.

Inspection report continued

Areas for improvement

See areas of improvement in Quality Statement 1.1.

Grade awarded for this statement: 4 - Good

Statement 2

We make sure that the environment is safe and service users are protected.

Service strengths

Our examination of records, discussion with service users, staff and the manager supported that the service continues to perform at a good level in this quality statement.

We noted that the Home uses a secure entry system. External doors are alarmed and secured. There are CCTV cameras in use externally.

We interviewed the cook and noted that there were good systems in place aligned to HACCP (hazard and critical control points). We found that fresh, chilled and dried foods were stored appropriately in the kitchen.

The areas requiring improvement within the environmental health report have been carried out.

We carried out an environmental check and noted that the overall standard of cleanliness was satisfactory and that there have been areas decorated throughout the Home. We saw that bath hoists and mobile hoists are being serviced in line with L.O.L.E.R. (Lifting Operations Lifting Equipment Regulations) legislation.

We noted that there is a refurbishment plan in place and comments from interviews with staff indicated that progress is being made with the plan.

The Manager and staff interviewed shared that new staff uniforms are being purchased.

An evac chair has been purchased for the safe emergency evacuation of service users who are unable to safely manage the internal stairs.

We saw that there is a system in place to regularly check on service users who smoke to ensure that they are safe and not putting others at risk.

Areas for improvement

We noted that continence aids were not being stored appropriately. These should be stored in line with good infection control practices including being kept in the original packaging and avoiding moist environments such as communal bathrooms. We shall make a recommendation in connection with this.

We checked records held by the handy person in relation to using external contractors for repairs and maintenance. We thought that these could be improved by detailing the date when works were completed or detailing if further works were necessary and

who would carry this out. We shall check this at the next inspection.

We noted that the service has thermostatic valves have been installed at hot water outlets. We had difficulty however in seeing records which revealed that hot water temperatures are being routinely checked and recorded. We want this to be carried out.

Similarly we noted that window restrictors which are being checked are not being routinely recorded. We were given assurances by the manager that this would be prioritised and associated training and records would be provided. We shall make a recommendation that this is fully carried out.

We noted that some of the non slip mats within communal bathrooms need replaced.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 2

Recommendations

- 1. Continence aids should be stored in line with good infection control practices. This is to adhere to NCS Care Homes for Older People; Standard 5.2 Management and Staffing.
- 2. A robust system should be adopted to demonstrate that there are regular checks carried out on hot water temperatures and window restrictors. This is to adhere to NCS Care Homes for Older People; Standard 4.2 Your Environment.

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service Strengths

Our examination of records, discussion with service users, staff and the manager supported that the service continues to perform at a very good level in this quality statement.

See strengths in Quality Statement 1.1.

The service has a range of policies and procedures including a policy on staff recruitment. We read this and thought that it could be developed further; see areas of improvement.

The service uses a keyworker system. There were positive comments received from service users in relation to staff and from the relative interviewed.

Staff interviewed demonstrated a good level of knowledge in relation to the needs of each service user.

Supervision sessions are used to discuss each service user's current needs.

We noted that review meetings offer each service user an opportunity to comment on the support offered by staff.

We thought that it was good that no agency staff had been used by the organisation and continuity of care had been maintained.

Areas for improvement

We noted that there is a recruitment policy however this could be further improved by detailing how service users and other key people could become involved in assessing the quality staff. The legislation referred to should be reflective of Scottish legislation.

The service should consider using a staff survey to gain important feedback and this should be considered as part of the participation strategy or policy.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Statement 3

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Service strengths

Our examination of records, discussion with service users, staff and the manager supported that the service continues to perform at a very good level in this quality statement.

We noted that there are regular staff meetings and these are used to cover a number of important areas including; - training, developments, refurbishment and staff. Staff interviewed commented on the usefulness of these meetings.

We thought the service was making good progress with SVQ training, at the point of inspection 89% of staff had achieved SVQ's. It was communicated that 3 staff were due to undertake SVQ III from September 2012 and 2 staff were due to undertake part of SVQ IV.

We interviewed 2 Senior Care Workers, 2 Care Assistants, Cook and Handy person. Feedback from interviews indicated that staff morale was very good and that staff were supported to fulfil their roles.

2 staff files were sampled. We noted that there were details in relation to training undertaken, supervision sessions, qualifications achieved and ongoing development needs were recorded. We thought the files were well structured.

We noted that there are planned supervision sessions, these were well structured and details progress with individual service users, records and training/development needs are discussed.

We noted that there is a training plan in place and training offered is relevant to the work undertaken by staff. We also thought the system used for identifying training and outstanding training was overall very good although there was an odd area missed. See area of improvement.

Areas for improvement

We tracked records of individual staff. We saw occasional gaps between identifying training needed and being nominated for the relevant course, e.g. challenging behaviour. We shared an example at feedback and recommended that this should be monitored.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 4 - Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Service strengths

Our examination of records, discussion with service users, staff and the manager supported that the service continues to perform at a good level in this quality statement.

See comments in strengths in Quality Statement 1.1.

We observed interactions between service users and the Manager and senior staff. We saw that there were positive relationships and service users appeared comfortable in speaking with the Manager and staff.

We interviewed the Manager and noted that he was familiar with the current needs and preferences of individual service users.

It was apparent that the Manager operates an "open door" approach for service users and relatives to discuss any concerns or issues.

Areas for improvement

See comments in Quality Statement 1.1.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide.

Service strengths

Our examination of records, discussion with service users, staff and the manager supported that the service continues to perform at a good level in this quality statement.

We noted that there are systems in place for monitoring complaint activity, accidents and incidents. We thought that it was good that these are in place.

We saw that there are a number of audits used for kitchen, care plans, training and staff supervision.

We checked the care plan audits and noted this covers admission forms, review forms; care plans daily reports & goals and risk assessments and weights. We thought that the audit was good for detailing further actions to be taken. Daily records are monitored and feedback has been provided to individual staff to ensure standards are maintained.

Informal methods are used to gain feedback on the quality of management and service; see comments in Quality Statements 1.3, 2.3 and 3.3.

Areas for improvement

We noted that there were no written records to support that medication audits are being carried out. The service should ensure that these are carried out regularly and recorded. A recommendation shall be made in connection with this.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The service should introduce written medication audits and detail any actions to address any deficits. This is to adhere to NCS Care Homes for Older People; Standard 5.2 Management and Staffing and 15.6 Keeping Well - Medication.

4 Other information

Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

Enforcements

We have taken no enforcement action against this care service since the last inspection.

Additional Information

Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in SCSWIS re-grading the Quality Statement within the Management and Leadership Theme as unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).

5 Summary of grades

Quality of Care and Support - 5 - Very Good				
Statement 1	5 - Very Good			
Statement 3	5 - Very Good			
Quality of Environment - 4 - Good				
Statement 1	4 - Good			
Statement 2	4 - Good			
Quality of Staffing - 5 - Very Good				
Statement 1	5 - Very Good			
Statement 3	5 - Very Good			
Quality of Management and Leadership - 4 - Good				
Statement 1	4 - Good			
Statement 4	4 - Good			

6 Inspection and grading history

Date	Туре	Gradings	
3 Dec 2010	Unannounced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed Not Assessed Not Assessed
27 Jul 2010	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed 4 - Good Not Assessed
23 Feb 2010	Unannounced	Care and support Environment Staffing Management and Leadership	5 - Very Good 4 - Good 4 - Good 5 - Very Good

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22 Sep 2009	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good 4 - Good 4 - Good 4 - Good
23 Sep 2008	Announced	Care and support Environment Staffing Management and Leadership	4 - Good 4 - Good 4 - Good 4 - Good
19 Mar 2009	Unannounced	Care and support Environment Staffing Management and Leadership	4 - Good 4 - Good 4 - Good 4 - Good

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

- که بای تسود رسیم رون ابز رگید روا رولکش رگید رپ شرازگ تعاشا می

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

عرخاً تاغلبو تاقيسنتب بلطلا دنع رفاوتم روشنملا اذه

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Telephone: 0845 600 9527

Email: enquiries@careinspectorate.com

Web: www.careinspectorate.com