scottish commission for the regulation of care

Inspection report

Clinton House Nursing Home
Care Home Service

Ayr Road
Shawsburn
Larkhall ML9 3AD

Inspected by: Jim McNally
(Care Commission Officer)

Type of inspection: Announced

Inspection completed on: 30 November 2006

Improving care in Scotland

Service Number

CS2003010566

Service name

Clinton House Nursing Home

Service address

Ayr Road
Shawsburn
Larkhall ML9 3AD

Provider Number

SP2003002417

Provider Name

Clinton House Nursing Home

Inspected By

Jim McNally
Care Commission Officer

Inspection Type

Announced

Inspection Completed

30 November 2006

Period since last inspection

10 months

Local Office Address

Princes Gate
Castle Street
Hamilton
ML3 6BU

Introduction
Clinton House provides accommodation for up to 30 people on two floors. The Home provides 24 hour care to young physically disabled, frail elderly, elderly with mild mental illness and terminally ill. The service aims to offer care in a professional manner, adopting a holistic approach, whilst affording dignity and respect to each individual resident. The Home is situated in its own grounds on the outskirts of Larkhall. There is a car park at the rear of the building and public transport provision available. There are no local amenities within walking distance from the Home. The Service has been registered with the Care Commission since 1 April 2002.

Basis of Report
This service was inspected after receiving a Regulation Support Assessment (RSA) to determine what level of support was necessary. The RSA is an assessment undertaken by the Care Commission Officer which considers: complaints activity, changes in the provision of the service, nature of notifications made to the Care Commission by the service, action taken upon requirements, etc.

This service was required to have a high level of support that resulted in an inspection based on the national inspection themes, the core National Care Standards for the particular service type, any other standards or regulations indicated by the RSA and any recommendations and requirements from previous inspections, complaint or other regulatory activity. The national inspection themes examined at this inspection were:

· Safer recruitment and Scottish Social Services Council Codes of Practice
· Improving nutrition in care homes
· Access to single rooms.

Before the visit:

· The Care Commission Officer wrote to the service telling them when the visit would take place.
· The service provided an Annual Return containing information about the service.
· The service also sent in a self evaluation document .

During the visit, which took place between 09.00 hours and 16.30 hours on Thursday 30 November 2006, the Care Commission Officer spoke with:

· The Service Manager
· The Provider
· Six service users
· Four members of staff.

The Care Commission Officer also looked at a range of policies, procedures and records including the following:

· Personal plans
· Staff Training records
· Nutritional and Dietary information
· Fire evacuation and emergency procedures, records of fire alarm tests
· Recruitment and selection procedures.

and spent time observing how staff members worked with people who used the service. An examination of the premises was also carried out.

The Care Commission Officer took all of the above into account and reported on whether the service was meeting the following National Care Standards for Older People.

· Standard 2: Before Moving In : Trial Visits
· Standard 4: Your Environment
· Standard 5: Management and Staffing Arrangements
· Standard 13:Day-to-Day Life: Eating Well.

Action taken on requirements in last Inspection Report
There was one Requirement in the last inspection report which has been addressed.

Comments on Self-Evaluation
A self-evaluation was received from the Manager prior to the date of inspection. The self-evaluation provided a fair assessment of the strengths of the service although some areas for development had limited details provided.

View of Service Users
Six residents were interviewed and spoke favourably about the overall care they received. Comments included "I have lived in the home a wee while now and like it here"; "staff are alright" and "the food is good but a bit limited if you're a diabetic".

View of Carers
The inspecting officer met with three relatives/carers who spoke positively about the home. They indicated that they had opportunities to visit the home before making a decision about their relatives moving in. Relatives/carers also said that they had read the latest Care Commission inspection report prior to making a final decision.

Regulations / Principles

Regulation :

Strengths

Areas for Development

National Care Standards

National Care Standard Number 2: Care Homes for Older People - Trial Visits

Strengths

Prospective service users had good opportunities to visit the home, meet with staff and other residents to help them make a decision about moving him. Service users and their families could access and read the current Care Commission inspection report about the home.

There were good arrangements in place to allow staff, family, friends or other independent representatives to be involved in visits to the home to support individuals who were considering moving in to the home. These arrangements included key staff meeting clients in their own environment before visiting the home.

Areas for Development

None identified at this inspection

National Care Standard Number 4: Care Homes for Older People - Your Environment

Strengths

Service users were able to move around easily in the home and it's surrounding grounds. Internal corridors were sufficiently wide to allow wheelchair access. There was a passenger lift and ample stairwells allowing people to move easily between the ground floor and first floor of the home. The home had disabled access to the front and rear of the building.

The communal areas of the home were clean and tidy on the day of inspection. They were also brightly decorated. There was good evidence that Service Users had personalised their bedrooms with items of furniture, photographs and other personal items. All bedrooms had a window with a view outside although some windows were roof windows which meant the view was limited.

The national inspection theme relating to access to single rooms by 2007 was examined as part of this National Care Standard.

There were 18 single rooms and six double rooms available at Clinton House. 16 of the

single rooms had ensuite facilities as did five of the double rooms. There were no multiple occupancy rooms.

Areas for Development

There was evidence of a strong malodour on entering the home and also in one of the upstairs bedrooms. Attempts had been made to minimise the odour with ozone and air purifying equipment but this had a minimal effect. (see Recommendation 1).

Bedroom doors had locks installed which did not allow them to be opened easily by Service Users, from the inside. Four service users interviewed did not have keys for their bedrooms. Some bedrooms did not have locks on the door. (see Recommendation 2).

Some of the furniture in the communal areas of the home was worn. Examples included armchairs and tables where the fabric and/or wood finish had worn away from the arms and legs of the furniture. (see Recommendation 3).

Discussion with the Provider indicated that there were no plans to change the existing accommodation and no discussions had taken place with families/carers regarding how the service will meet the National Care Standard offering a single room to any service user who wishes it from April 2007. (see Recommendation 4).

Shower facilities that were located within upstairs bedrooms were being used by other Service Users as there were no shower facilities downstairs. This compromised the privacy for the person using the shower and also for the person who resided in the room that had the shower facilities. (see Recommendation 5).

National Care Standard Number 5: Care Homes for Older People - Management and Staffing Arrangements

Strengths

There were appropriate policies and procedures in place covering the following legal requirements:
staffing and training, health and safety, whistle blowing and environmental health.

The service had a fire risk assessment in place which was completed by the manager in November 2006. There were procedures in place for emergency evacuation of the home in the event of a fire (including post evacuation procedures). Fire action plans were posted on the walls of the home.

Staff received initial fire safety training and had annual training thereafter. Fire drills were being scheduled with staff at least twice a year. There were good housekeeping and storage arrangements in place to reduce hazards and minimise the risk of fire starting.

Fire logs evidenced that regular checks, periodic servicing and maintenance of the fire alarm system, fire doors and fire extinguishers was being carried out. A full annual check of portable electrical appliances was conducted by the handyman and recorded for March

2006.

There were written policies and procedures in place for recruitment and selection of staff. The process for recruitment of managers, staff and volunteers included consideration of equal opportunities, Disclosure Scotland checks, taking up references and, where appropriate, cross reference to professional organisations such as the Nursing and Midwifery Council (NMC).

The service kept appropriate records in relation to accidents, complaints and incidents. There were clear policy statements in place to support legislation for equal opportunities and anti-discrimination.

There were good procedures in place for ensuring that staff were provided with copies of the Scottish Social Services Council (SSSC) Codes of Practice.

Staff training was organised in a clear and structured way and staff indicated they had good training opportunities. Approximately 50% of staff had achieved or were working towards Scottish Vocational Qualifications Level 2 (SVQ2) or above.

Discussion took place with staff regarding the practice and management of urinary catheter care, as this issue had been raised with the Care Commission prior to the inspection. The Care Commission Officer was satisfied that staff interviewed had a clear understanding of good practice in this area.

There was a clear policy and procedure in place detailing the conditions in which restraint is used. This was supported by training from a Community Psychiatric Nurse.

Where possible and in keeping with the provisions of equal opportunities legislation, the staff group contained people of the same social and cultural background.

The number of staff in place complied with levels agreed between the Care Commission and the Provider.

The elements of this care standard relating to organisation of medicines and financial transactions were not examined at this inspection.

Areas for Development

The record of staff attendance at fire training indicated that not all staff were able to attend. (see Recommendation 6)

Although staff had access to the SSSC Codes of Practice, staff interviewed had limited awareness of the role of Scottish Social Services Council and the SSSC Employer's Code of Practice. (see Recommendation 7)

Written references were not always obtained prior to employees starting employment. (see Requirement 1)

The written record of criminal record checks (carried out via Disclosure Scotland) and checks carried out on registered nurses (via the Nursing and Midwifery Council) was not recorded in a consistent way or always carried out in a timely manner. (see Requirement 2)

The use of "portable" Disclosure Scotland records being used at recruitment was evident. (see Requirement 3)

Not all staff employed since April 2002 had an enhanced Disclosure Scotland check carried out by the Provider. (see Requirement 4)

National Care Standard Number 13: Care Homes for Older People - Eating well

Strengths

Eating well and nutrition for the residents of Clinton House was examined in detail at the last inspection by the inspecting Care Commission Officer and the Care Commission Professional Adviser(Nutrition).

The focus of the current inspection of this standard was based on the previous requirements and recommendations made following the last inspection.

Individual risk assessments had been carried out with each resident by an Occupational Therapist and care staff to determine the potential for service users to prepare their own food and drinks if they wished to. None of the residents were assessed as being able to prepare their own food or drinks. However, facilities were available on the day of inspection, to allow service users to assist themselves to hot drinks and biscuits, though most residents preferred staff to assist them in this area.

There was evidence that clear policies and procedures had been put in place by the Manager and staff, related to best practice guidance on nutritional care planning, menu planning and monitoring food and fluid intake of older or vulnerable people. Relevant training in this area had been scheduled for the home's cook but had yet to take place.

The home had adopted one nutritional screening tool to evaluate service users risk of under nutrition. There was good evidence of regular monitoring of weight, Body Mass Index and nutritional assessment in individual personal plans that were examined by the inspecting officer.

Meals were well presented in the dining room or in residents bedrooms, if that was their choice. Good food handling practices were observed. There was a choice of meals available and this was detailed on the menus. Menus had been revised to include a good nutritional balance to meet service users dietary needs. There was a folder available to the cook and kitchen staff which detailed service users dietary needs, personal preferences and any special assistance required. There was evidence of appropriate use of adapted cutlery and plateguards at lunchtime.

Areas for Development

None identified at this inspection

Enforcement
There has been no enforcement action taken against this service since the last inspection.

Other Information
The introduction of Part 3 of the Fire (Scotland) Act 2005 on 1 October 2006 transferred the responsibility for enforcing fire safety in all Non Domestic care settings to the Fire and Rescue Services. The Care Commission will no longer impose requirements in regard to fire safety. The Care Commission will now make recommendations in relation to fire safety and a covering letter highlighting these will be forwarded to the local Fire Officer for consideration and follow up action as required. The recommendation numbered 6 below is made in relation to fire safety issues.

Requirements

1. The procedure for requesting references should comply with good practice. References should be requested and received prior to applicants commencing employment and should always include a reference from a suitable person in the applicant's previous place of employment. (See www.acas.org.uk - recruitment and induction, May 2006)

This is in order to comply with:

SSI 2002/114 Regulation 9(1) and 9(2)(a,b,c) - requirements that a provider shall not employ any person in the provision of a care service unless that person is fit to be so employed and defining persons that are unfit to be employed in a care service.

and

Scottish Social Services Council - Code of Practice for Employers 1.1 and 1.3. "As a social service employer you must make sure people are suitable to enter the social service workforce and understand their roles and responsibilities."

Timescale for implementation: within 24 hours of publication of this report.

2. The written record of criminal record checks (carried out via Disclosure Scotland) and checks carried out on registered nurses (via the Nursing and Midwifery Council) must be recorded in a consistent way that can be easily checked by the Care Commission and carried out in a timely manner.

This is in order to comply with:

SSI 2002/114 Regulation 9(1) and 9(2)(a,b,c) - requirements that a provider shall not employ any person in the provision of a care service unless that person is fit to be so employed and defining persons that are unfit to be employed in a care service.

and

Scottish Social Services Council - Code of Practice for Employers 1.1, 1.2 and 1.3. "As a social service employer you must make sure people are suitable to enter the social service workforce and understand their roles and responsibilities."

Timescale for implementation: within 24 hours of publication of this report.

3.The use of "portable" Disclosure Scotland records being used at recruitment must be discontinued and the Provider must request new Disclosures when recruiting new employees. (See Disclosure Scotland, Explanatory Guide on Code of Practice accessed from http://www.disclosurescotland.co.uk/publications.htm).

This is in order to comply with:

SSI 2002/114 Regulation 9(1) and 9(2)(a,b,c) - requirements that a provider shall not employ any person in the provision of a care service unless that person is fit to be so employed and defining persons that are unfit to be employed in a care service.

and

Scottish Social Services Council - Code of Practice for Employers 1.1, 1.2 and 1.3. "As a social service employer you must make sure people are suitable to enter the social service workforce and understand their roles and responsibilities."

Timescale for implementation: within 24 hours of publication of this report.

4. All staff employed since April 2002 must have an enhanced Disclosure Scotland check carried out by the Provider. (See Disclosure Scotland, Explanatory Guide on Code of Practice accessed from http://www.disclosurescotland.co.uk/publications.htm)

This is in order to comply with:

SSI 2002/114 Regulation 9(1) and 9(2)(a,b,c) - requirements that a provider shall not employ any person in the provision of a care service unless that person is fit to be so employed and defining persons that are unfit to be employed in a care service.

and

Scottish Social Services Council - Code of Practice for Employers 1.1 and 1.2

Timescale for implementation: within six weeks of publication of this report.

Recommendations

1. The provider should take further action to eradicate the strong odour that was evident on entering the home and also present in one of the upstairs bedrooms. Consideration should be made to changing the type of floorcovering used in these areas.

National Care Standards Care Homes for Older People, Standard 4: Your Environment.

2. Bedroom doors should have locks in place that can be easily opened by Service Users, from the inside. Individual Service Users who wish to have a key for their bedroom should be provided with one unless there is a risk assessment recorded in their personal plan detailing why this is not appropriate. All bedrooms should have locks on the door.

National Care Standards Care Homes for Older People, Standard 4: Your Environment.

3. The Provider should develop and begin a programme of refurbishment to replace the furniture in the communal areas of the home that was worn.

National Care Standards Care Homes for Older People, Standard 4: Your Environment.

4. The Provider should provide the Care Commission with an action plan detailing how the service will meet the National Care Standard offering a single room to any service user who wishes it from April 2007.

National Care Standards Care Homes for Older People, Standard 4: Your Environment.

5. The Provider should install shower facilities on the ground floor of the home so that the privacy of all Service Users is not compromised and so that there are shower facilities on both floors of the home. This would also improve the choice of washing/bathing facilities for all Service Users.

National Care Standards Care Homes for Older People, Standard 4: Your Environment.

6. The Provider should ensure that all staff attend regular fire training sessions based on current best practice guidance. (see www.infoscotland.com/firelaw - specific care sector guidance).

National Care Standards Care Homes for Older People, Standard 5: Management and Staffing Arrangements.

7. Staff awareness of the role of Scottish Social Services Council and the SSSC Employer's Code of Practice should continue to be reinforced by the Provider and Manager of the service.

National Care Standards Care Homes for Older People, Standard 5: Management and Staffing Arrangements.

Jim McNally
Care Commission Officer