



Inspection report

Grange Hall Care Home Service Adults

Drygrange
Melrose
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Inspected by: Andrea Herkes
(Care Commission officer)

Type of inspection: Announced

Inspection completed on: 21 October 2009

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Service provided by:
Grange Hall (Scotland) Ltd

Service provider number:
SP2003001966

Care service number:
CS2003009179

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Easy read summary of this inspection report

We grade all the Quality Statements for a service at each inspection. Each grade describes how well we think the service is doing based on what we inspected.


We can choose from six grades:

 **6**  **5**  **4**  **3**  **2**  **1**
excellent very good good adequate weak unsatisfactory

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 N/A

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

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

What the service does well

Residents and relatives/carers report that the service provides a high standard of nursing care from a well informed and motivated staff team.

There was a very good range of activities and the activity programme took account of meaningful activity and activity to promote health and well being.

Staff reported good training being provided and all spoke highly of the support in their training and development and their day to day work in the home. Staff met were knowledgeable about residents' needs and about how these needs were to be met.

What the service could do better

The documentation and record keeping systems would be improved if all aspects of residents' care were included in the overall care plan. For example the care plan should include information and action plans as a result of pre-assessment or review information. Also the activity plans and reviews of activities should be included in care planning. In reviewing this, consideration should be given as to how previous likes and dislikes and individual life histories contribute to preparation of care plans.

What the service has done since the last inspection

The participation strategy has been further developed to encourage residents and relatives/carers to give their views on all aspects of the service provided.

Conclusion

The Manager said that the owner of the service was committed to ensuring a high standard of resident care. The efforts to ensure up to date staff practice and training, and, the methods to involve residents and relatives/ carers in assessing and improving all aspects of the service would support this commitment.

Who did this inspection

Lead Care Commission Officer

Andrea Herkes

Other Care Commission Officers

Jan Ferguson

Lay Assessor

n/a

Please read all of this report so that you can understand the full findings of this inspection.

About the Care Commission

We were set up in April 2002 to regulate and improve care services in Scotland.

Regulation involves:

- registering new services
- inspecting services
- investigating complaints
- taking enforcement action, when necessary, to improve care services.

We regulate around 15,000 services each year. Many are childminders, children's daycare services such as nurseries, and care home services. We regulate many other kinds of services, ranging from nurse agencies to independent healthcare such as hospices and private hospitals.

We regulate services for the very young right through to those for the very old. Our work can, therefore, affect the lives of most people in Scotland.

All our work is about improving the quality of care services.

We produce thousands of inspection reports every year; all are published on our website: www.carecommission.com. Reports include any complaints we investigate and improvements that we ask services to make.

The "Care services" area of our website also:

- allows you to search for information, such as reports, about the services we regulate
- has information for the people and organisations who provide care services
- has guidance on looking for and using care services in Scotland.

You can also get in touch with us if you would like more detailed information.

About the National Care Standards

The National Care Standards (NCS) set out the standards that people who use care services in Scotland should expect. The aim is to make sure that you receive the same high quality of service no matter where you live.

Different types of service have different National Care Standards. When we inspect a care service we take into account the National Care Standards that the service should provide.

The Scottish Government publishes copies of the National Care Standards online at: www.scotland.gov.uk

You can get printed copies free from:

Blackwells Bookshop
53-62 South Bridge Edinburgh
EH1 1YS
Telephone: 0131 662 8283
Email: Edinburgh@blackwells.co.uk

What is inspection?

Our inspectors, known as Care Commission Officers (CCOs), check care services regularly to make sure that they are meeting the needs of the people in their care.

One of the ways we check on services is to carry out inspections. We may turn up without telling the service's staff in advance. This is so we can see how good the care is on a normal day. We inspect some types of services more often than others.

When we inspect a service, typically we:

- talk to people who use the service, their carers and families, staff and managers
- talk to individuals and groups
- have a good look around and check what quality of care is being provided
- look at the activities happening on the day
- examine things like records and files, if we need to
- find out if people get choices, such as food, choosing a key worker and controlling their own spending money.

We also use lay assessors during some inspections. These are volunteers who have used care services or have helped to care for someone who has used care services.

We write out an inspection report after gathering the information. The report describes how things are and whether anything needs to change.

Our work must reflect the following laws and guidelines:

- the Regulation of Care (Scotland) Act 2001
- regulations made under this Act
- the National Care Standards, which set out standards of care that people should be able to expect to receive from a care service.

This means that when we register or inspect a service we make sure it meets the requirements of the 2001 Act. We also take into account the National Care Standards that apply to it.

If we find a service is not meeting these standards, the 2001 Act gives us powers that require the service to improve.

Recommendations, requirements and complaints

If we are concerned about some aspect of a service, or think it could do more to improve its service, we may make a requirement or recommendation.

- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement.
- A requirement is a statement which sets out what is required of a care service to comply with the Act and Regulations or Orders made under the Act, or a condition of registration. Where there are breaches of the Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Commission.

Complaints: We have a complaints procedure for dealing with any complaint about a registered care service (or about us). Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

We investigate all complaints. Depending on how complex it is, a complaint may be:

- upheld - where we agree there is a problem to be resolved
- not upheld - where we don't find a problem
- partially upheld - where we agree with some elements of the complaint but not all of them.

How we decided what to inspect

Why we have different levels of inspection

We target our inspections. This means we spend less time with services we are satisfied are working hard to provide consistently high standards of care. We call these low-intensity inspections. Services where there is more concern receive more intense inspections. We call these medium or high intensity inspections.

How we decide the level of inspection

When planning an inspection, our inspectors, or Care Commission Officers (CCOs) carefully assess how intensively each service needs to be inspected. They do this by considering issues such as:

- complaints
- changes to how the service provides care
- any notifications the service has given us, such as the absence of a manager
- what action the service has taken in response to requirements we have made.

The CCO will also consider how the service responded to situations and issues: for example how it deals with complaints, or notifies us about incidents such as the death of someone using the service.

Our inspections take account of:

- areas of care that we are particularly interested in (these are called Inspection Focus Areas)
- the National Care Standards that the service should be providing
- recommendations and requirements that we made in earlier inspections
- any complaints and other regulatory activity, such as enforcement actions we have taken to improve the service.

What is grading?

We grade each service under Quality Themes which for most services are:

- **Quality of Care and support:** how the service meets the needs of each individual in its care
- **Quality of environment:** the environment within the service (for example, is the service clean, is it set out well, is it easy to access by people who use wheelchairs?);
- **Quality of staffing:** the quality of the care staff, including their qualifications and training
- **Quality of management and leadership:** how the service is managed and how it develops to meet the needs of the people it cares for
- **Quality of information:** this is how the service looks after information and manages record keeping safely.

Each of the Quality Themes has a number of Quality Statements in it, which we grade.

We grade each heading as follows:

6	5	4	3	2	1
excellent	very good	good	adequate	weak	unsatisfactory

We do not give one overall grade.

How grading works.

Services assess themselves using guidance that we given them. Our inspectors take this into account when they inspect and grade the service. We have the final say on grading.

The Quality Themes for this service type are explained in section 2 The Inspection.

About the service we inspected

Grange Hall is registered to provide care and accommodation for up to 49 older people. The home is able to offer both long term care and respite care.

Grange Hall was built in the 1800's as a large private house and was converted into a care home in the 1980's. The home is set in extensive private grounds with its own parking. The home is situated between the Scottish Border towns of Earlston and Melrose.

Residents' accommodation is provided over four floors with access to each floor provided by stairs and a lift. All residents' bedrooms are single rooms. Appropriate bathing and toilet facilities are available on each floor. There are separate kitchen, laundry and staff facilities in the home.

The home has been registered with the Care Commission since 1 April 2002.

The philosophy of care and residents charter within Grange Hall states that "the company seeks to deliver the highest standards of care in a professional manner, within a safe, caring and homely environment within reach of the community".

Based on the findings of this inspection this service has been awarded the following 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	N/A

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

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

You can use the "Care services" area of our website (www.carecommission.com) to find the most up-to-date grades for this service.

How we inspected this service

What level of inspection did we make this service

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 activities did we undertake during the inspection

The Care Commission Officers met residents and relatives/carers in the home and discussion took place about their views of the care provided.

Discussion also took place with a range of care staff including:

- the Manager
- Registered Nursing and care staff on duty
- Activity staff
- the Chef
- The administrator

Staff practice and observation of the environment was also considered at the inspection.

This report was compiled following an announced inspection.

Prior to the inspection the Manager completed an annual return and self evaluation. The information in these documents also contributed to the inspection and some of the information was discussed at the time of inspection.

The inspection was carried out by Care Commission Officer Andrea Herkes and Jan Ferguson over one day between 10am and 7 pm on 21 October 2009.

In the inspection we gathered information from various sources, including the relevant sections of policies, procedures, records and other documents including:

- supporting evidence from the up to date self assessment
 - information about the service
 - content of 19 (of 20 sent) questionnaires sent to relatives/carers
 - content of 8 (of 20 sent) questionnaires sent to residents
 - aims and objectives of the service
 - samples of care plans and care plan reviews
 - complaints policy and procedure
 - records of accidents, incidents and complaints
 - staff records including qualification and training records
 - samples of staff personnel records
-
- Protection of Vulnerable Adults policy, including restraint policy

- whistle blowing policy
- abuse policy
- the Certificate of Registration
- insurance details

Before the inspection a CCO was also contacted by phone and e-mail by relatives who wished to share their views of the service. The GP visiting the home on the day of inspection also gave views on the quality of care provided in the home.

The above information was taken into account during the inspection process.

Inspection Focus Areas (IFAs)

Each year we identify an area, or areas, we want to focus on during our inspections. We still inspect all the normal areas of a care service; these are extra checks we make for a specific reason.

For 2009/10 we will focus on:

- Meaningful activity for all adult services
- How care services assess the health of people with learning disabilities
- Involving parents for children's services
- Medication for looked after children for residential accommodation for children
- How care services make sure they have safe recruitment procedures for staff for all services except childminders.

You can find out more about these from our website www.carecommission.com.

Fire safety issues

The Care Commission no longer reports on matters of fire safety as part of its regulatory function. Where significant fire safety issues become apparent, we will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Care service providers can find more information about their legal responsibilities in this area at: www.infoscotland.com/firelaw

Actions Taken on Recommendations Outstanding

The previous recommendation was being progressed through recording in the sleeping/night care part of the care plan.

The annual return

We use annual returns (ARs) to:

- make sure we have up-to-date, accurate information about care services; and
- decide how we will inspect services.

By law every registered care service must send us an annual return and provide us with the information we have requested. The relevant law is the Regulation of Care Act (Scotland) 2001, Section 25(1). These forms must be returned to us between 6 January and 28 February 2009.

Annual Return Received

Yes - Electronic

Comments on Self Assessment

A fully completed self assessment document was submitted by the service. This was completed to a satisfactory standard and gave relevant information on each of the quality themes and statements. The service identified its strengths and some areas for future development and gave good examples of service users involvement and how they planned to implement changes.

Taking the views of people using the care service into account

The views of residents were obtained through questionnaires returned to the Care Commission prior to the inspection and meeting residents on the day of inspection.

Residents spoke highly of the care and support provided by the staff team. Individual members of staff were also praised for their particular caring and attentive manner.

Positive comments were made about the comfort of the accommodation the variety and style of bedrooms, views from the public rooms and some of the bedrooms, the quality and variety of catering and the variety of activities and events.

Although residents and relatives/carers were positive about the quality of the environment some residents said that they were restricted in getting around the home as they needed to use the lift to access the different floors and to get into the garden.

Some of the comments made by residents were as follows:

"My room is lovely and I really enjoy the views."

"I like to be involved in things in the home, I've helped to choose new carpets and furnishings and I enjoy the residents and relatives meetings."

"The menu is always very good and there is always something I like."

"My room is comfortable and I have my own things, it's nice to be able to have your own personal belongings."

"It is a lovely place here, I'm very well looked after."

"I have no complaints about the care here but it would be nice if I could go outside without always having to ask staff to help."

Taking carers' views into account

Relatives spoke very highly about the quality of care provided. Relatives also said that they appreciated the efforts put in place to support relatives to be involved in, and give their views, of the service.

Some relatives commented on the need to use the lift at all times to get to the garden but did say that their relatives would need staff to assistance or supervision when in the garden.

One relative said that the person who arrived in the care home (resident) was now a different person having thrived on the good food, the staff interaction and the general good care.

Some of the comments made by relatives/carers were as follows:

"My relative is still settling into the home but everything I have seen so far has been up to expectations."

"My relative is blind and not all of the staff stop and explain what they are going to do before they touch him."

"We now class the staff at the home as extended family. They are professional, caring and attentive. We can not fault them in any way."

"My plea would be that carers/staff be more aware of a residents' hearing disability and make extraordinary efforts to ensure that the resident hears/understands what is being done. Not just get the service done as quickly as possible after nominally speaking to the resident."

"I'm very happy with the care provide."

"The staff are very attentive, they treat us like family and don't exclude you."

"We are quite happy with the care, a care review is due soon and we can raise anything we would want to discuss at that time."

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

There was a participation strategy in place which outlines some of the very good methods in place to involve residents and relatives/carers in assessing and improving the quality of the care and support provided.

The methods in place included:

- care planning and reviews
- resident meetings
- relatives group facilitated by an external agency
- quality assurance system

A comments and complaints policy and procedure was also available for residents and relatives/carers. In addition, the Manager and staff said that the regular contact with residents and relatives/carers also enabled them to make comment on the quality of service at any time.

There was also examples of unsolicited feedback to the home in the form of letters and cards.

The views in pre-inspection questionnaires from residents and relatives/carers were positive overall about the quality of care in the home and most said that they were asked their views on the service provided.

Residents said that they were asked their views about aspects of the service such as the meals, the decor and furnishings. They also said that they were offered choices in their day to day life in the home, for example, time of rising and going to bed, meals, privacy and activities.

A suggestions box was available and a complaints policy and procedure was also in place.

Areas for Improvement

Information in the pre-inspection questionnaires indicated that residents and relatives/carers had differing experiences about being asked their opinions on the service provided.

The Manager said that there had been difficulty in coordinating care plan reviews with Social Workers. This has resulted in delays with reviews which has then delayed the in-house reviews. The Manager was aware of the need for reviews to take place at least once within a six month period and the review timetable has now been planned to accommodate this. Progress will be monitored at the next inspection.

Some of the care plans for residents with memory problems or dementia did not always refer to known likes and dislikes as a means to offer meaningful choices.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

2

Recommendations

1.

The Manager should continue to progress the participation strategy and the progress the outcomes from reviews to further evidence how residents and relatives/carers are involved in assessing and improving the quality of care. This is in order to meet The National Care Standards - care homes for older people, Standard 11 Expressing your views.

2.

The Manager should continue to develop care plans for those residents with memory problems or dementia to ensure that staff are aware of known likes and dislikes when offering choices in their day to day life in the home. This is in order to meet The National Care Standards - care homes for older people, Standard 11 Expressing your views

Statement 2

We enable service users to make individual choices and ensure that every service user can be supported to achieve their potential.

Service Strengths

Care plans were the main means of recording residents' individual choices and how these were to be met in all aspects of their care. In addition to personal care needs the care plan format included working and playing, activities of daily living and a life history.

An individual profile was in place for resident preferences and choices in activities and interests. Some of these were informed by pre-admission assessment or care planning and review. The daily records of activities included resident attendance and levels of participation.

These were both very good methods to record residents being supported to achieve their potential.

Two Activity Coordinators plan and manage the activities. The content of the activity plan included group and individual sessions which promoted health and well being: arts and crafts, sensory activities, outings, games, gardening, housekeeping and fashion. We saw some of the activities which took place and saw examples of residents being supported to maintain their independence in everyday living skills.

Although there was a planned programme of activities, this took into account known preferences for the timing of these. Residents said they could choose the timing of some of the individual activities.

The minutes of residents' meetings and the newsletter for the home also made reference to activities.

Residents met spoke highly of the activities which took place and the range of activities available. There was a comprehensive selection of activity equipment available for residents use and rooms for group and individual activities. The sensory room was reported to be very popular. There was ample space for the storage of activity equipment .

Residents said that they were encouraged to make choices about their day to day care in the home, such as preferences of personal care, privacy, meals and menu planning and levels of participation.

Relative/carers spoke very highly of the activities and events planned in the home and of the efforts of activity staff to find things to interest residents.

There was evidence of links with community groups to promote community contact. There was also separate social centre which was used both by the home and by external

groups. This venue was regularly used for concerts, a cinema club and large entertainment events. The social centre was also used for any residents' special occasions, for example birthdays and wedding anniversaries.

The information brochure for the home directed residents and relative/carers to the activity programme posted on a notice board. The website for the home also gives examples of the activities provided.

The activity staff spoke knowledgeably about residents' needs and of how some activities and interests contributed to residents' overall health and well being.

There was good photographic information about some of the events and activities provided by the service.

Areas for Improvement

Although there was a wide variety of activities on offer these did not always relate to residents' likes and dislikes, pastimes prior to admission or a personal profile for activities.

Also it was not always clear how the activity care plan linked to residents' general care plans or how information was evaluated between the Activity staff and care staff .

Records relevant to resident care and support including care plan files, activity records, pre-admission assessment and reviews were all kept separately. This was discussed with the Manager.

The Manager agreed to review the records and documentation systems in place and to ensure that all the relevant records relating to the care and support of each resident was easily accessible and available. Progress will be monitored at the next inspection.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

2

Recommendation

1.

Each activity profile could be further developed to evidence a person centred approach to the activities and interests provided. This is in order to meet National Care Home Standards - care homes for older people Standard 6 - Support arrangements and Standard 8 - Making choices.

2.

A method should be developed to evaluate the effectiveness of activities provided in the home including the link to care planning and risk assessment. This is in order to meet National Care Home Standards - care homes for older people Standard 6 - Support arrangements.

Statement 3

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

Service Strengths

Not all aspects of this statement were examined at this inspection and the grade given at the last inspection was not reassessed.

Individual care plans were used to assess plan and review health care needs.

Staff training included the needs of residents who may be blind or deaf. There was some specialist equipment in place to assist residents who may be blind or deaf.

Areas for Improvement

In a pre-inspection questionnaire a relative/carer commented that staff need to be "more deaf aware" while another relative/carer commented that staff needed to be aware to the needs of those who are blind.

The communication care plan for the resident who is deaf did not include any needs associated with being deaf. There was no details about the resident who was blind to check the information in the care plan. However, the needs assessments in care plans examined did not include needs in relation to hearing or sight. This was brought to the attention of the Manager.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

1

Recommendations

1. Each care plan should be reviewed and updated to include any needs related to hearing or sight impairment and how these individual needs are to be managed, including any equipment necessary. This is in order to meet National Care Home Standards, care homes for older people Standard 6 - Support arrangements

Quality Theme 2: Quality of Environment

Grade awarded for this theme: 4 - Good

Statement 3

The environment allows service users to have as positive a quality of life as possible.

Service Strengths

Not all aspects of this statement were examined at this inspection and the grade given at the last inspection was not reassessed.

Although there was capacity for shared rooms, all the rooms were being used for single occupancy at the time of inspection. The bedrooms seen were individually furnished and decorated. Residents said that they were free to bring personal items to furnish and decorate their room.

Areas for Improvement

A relative/carer commented about the size and quality of a bedroom which was in the basement and was described as being small and dark with inadequate space for personal belongings. This room was seen and was dark, although there was a window, this looked on to the car park at road level. The Manager said that this was not the best room but the resident and relative/carer had been told that the resident would move to another room as soon as one became available.

During discussion the Manager said that she was considering not using this room in the future and agreed to confirm in writing to the Care Commission the decision about discontinuing its use.

Grade awarded for this statement

4 - Good

Number of Requirements

0

Number of Recommendations

1

Recommendations

1.

The Manager should ensure that all accommodation for residents' use will enhance their quality of life and be a pleasant place to live. This is in order to meet National Care Home Standards - care homes for older people Standard 4 -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

The comments made in Quality Theme 1 Statement 1 also apply to this statement.

There were several very good methods used to encourage residents and relatives/carers to participate in improving the quality of staffing in the service.

These included:

- care planning and reviews
- residents and relatives/carers meetings
- the home survey report which included responses from relatives/carers and visitors to the home about the quality of staffing
- the complaints procedure
- relatives participation in staff recruitment and selection

All of the residents and relatives/carers spoke highly of the staff team and of the staff meeting individual care needs.

Areas for Improvement

Information in the pre-inspection questionnaires indicated that residents and relatives/carers had differing experiences about being asked their opinions on the service provided.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

1

Recommendations

1.

The Manager should continue to progress the participation strategy and the progress the outcomes from reviews to further evidence how residents and

relatives/carers are involved in assessing and improving the quality of staffing in the service. This is in order to meet The National Care Standards - care homes for older people, Standard 11 Expressing your views.

Statement 2

We are confident that our staff have been recruited, and inducted, in a safe and robust manner to protect service users and staff.

Service Strengths

There was a recruitment policy and procedure in place for staff guidance.

The policy included making application, seeking and obtaining two references, identifying that staff had the necessary skills for the post applied for and a system for Disclosure Scotland checks. The Disclosure information was kept securely.

Six staff files were examined and some included a health declaration form while others asked about absence from work over the previous two years.

Systems were in place to check that Nurses were registered with Nursing and Midwifery Council (NMC).

There was evidence of induction training for new staff thereafter a training programme was in place for all staff.

Staff met said that there were very good induction and ongoing staff training events provided.

The areas for improvement and recommendations from the safer recruitment inspection focus area were discussed at feedback to the Manager. The Manager said that immediate arrangements would be put in place to update the policies and practices relating to safer recruitment as outlined below.

Areas for Improvement

The recruitment policy and procedure needed to be updated to reflect the practices in the home.

For example, although the practice was to obtain two references, one of which was from the immediate previous employer this was not included in the recruitment policy and procedure. Also the recruitment selection policy and procedure did not include reference to relatives/carers perhaps being part of the interview panel.

Potential staff were made aware of the aims and objectives of the service once employed.

The change to how staff are asked about being physically and mentally fit did not cover the comprehensive health information as previously included in the recruitment selection process.

The checks on the Nursing and Midwifery Council (NMC) registrations were up to date for Nursing staff employed in the home. However, this was reliant on Registered Nursing staff providing their NMC registration card.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

1

Recommendations

1.

The recruitment selection policy and procedure should be reviewed, updated and endorsed by the provider once concluded. This should take account of the Scottish Social Services Council (SSSC) Code of Practice - Employer and the good practice guidance, Safer Recruitment through Better Recruitment - Scottish Executive (2007).

The policy should should include:

- seeking two references, one of which, must be from the immediate previous employer
- reference to relatives/carers perhaps being part of the interview panel
- making potential staff aware of the aims and objectives of the service
- ensuring a written declaration of physical and mental fitness for each applicant
- ensuring regular checks and a recording system for checking professional registers.

This is also in order to meet The National Care Standards - care homes for older people, Standard 5 - Management and staffing arrangements.

Other Information

Complaints

There have been no complaints about this service since the last inspection.

Enforcements

There have been no enforcement in this service since the last inspection.

Additional Information

It was noted that the duty rota had been completed in pencil. This was discussed with the manager who will now ensure that the duty rota is completed in ink and will include any changes and amendments.

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 the Care Commission 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).

Summary of Grades

Quality of Care and Support - 5 - Very Good	
Statement 1	5 - Very Good
Statement 2	5 - Very Good
Statement 3	5 - Very Good
Quality of Environment - 4 - Good	
Statement 3	4 - Good
Quality of Staffing - 5 - Very Good	
Statement 1	5 - Very Good
Statement 2	5 - Very Good
Quality of Management and Leadership - Not Assessed	

Inspection and Grading History

Date	Type	Gradings								
23 Mar 2009	Unannounced	<table> <tr> <td>Care and support</td> <td>5 - Very Good</td> </tr> <tr> <td>Environment</td> <td>4 - Good</td> </tr> <tr> <td>Staffing</td> <td>5 - Very Good</td> </tr> <tr> <td>Management and Leadership</td> <td>5 - Very Good</td> </tr> </table>	Care and support	5 - Very Good	Environment	4 - Good	Staffing	5 - Very Good	Management and Leadership	5 - Very Good
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Terms we use in our report and what they mean

Action Plan - When we inspect a service, or investigate a complaint and the inspection report highlights an area for improvement; either through recommendations or requirements, the action plan sets out the actions the service will take in response.

Best practice statements/guidelines - This describes practices that have been shown to work best and to be achievable in specific areas of care. They are intended to guide practice and promote a consistent and cohesive approach to care.

Care Service - A service that provides care and is registered with us.

Complaints - We have a complaints procedure for dealing with any complaint about a registered care service or about us. Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

We investigate all complaints which can have more than one outcome. Depending on how complex the complaint is, the outcomes can be:

- upheld - where we agree there is a problem to be resolved
- not upheld - where we don't find a problem
- partially upheld - where we agree with some elements of the complaint but not all of them.

Enforcement - To protect people who use care services, the Regulation of Care (Scotland) Act 2001 gives the Care Commission powers to enforce the law. This means we can vary or impose new conditions of registration, which may restrict how a service operates. We can also serve an improvement notice on a service provider to make them improve their service within a set timescale. If they do not make these improvements we could issue a cancellation notice and cancel their registration.

Disclosure Scotland- Disclosure Scotland provides an accurate and responsive disclosure service to enhance security, public safety and protect the vulnerable in society. There are three types or levels of disclosure (i.e. criminal record check) available from Disclosure Scotland; basic, standard and enhanced. An enhanced check is required for people whose work regularly involves caring for, training, supervising or being in sole charge of children or adults at risk; or to register for child minding, day care and to act as foster parents or carers.

Participation - This describes processes that allow individuals and groups to develop and agree programmes, policy and procedures.

Personal Plan - This is a plan of how support and care will be provided. The plan is agreed between the person using the service (or their representative, or both of them) and the service provider. It is sometimes called a care plan mostly by local authorities or health boards when they commission care for people.

How you can use this report

Our inspection reports give care services detailed information about what they are doing well and not so well. We want them to use our reports to improve the services they provide if they need to.

Care services should share our inspection reports with the people who use their service, their families and carers. They can do this in many ways, for example by discussing with them what they plan to do next or by making sure our report is easily available.

People who use care services, their relatives and carers

We encourage you to read this report and hope that you find the information helpful when making a decision on whether or not to use the care service we have inspected. If you, or a family member or friend, are already using a care service, it is important that you know we have inspected that service and what we found. You may find it helpful to read previous inspection reports about his service.

The Care Commission

We use the information we gather from all our inspections to report to Scottish Ministers on how well Scotland's care services are performing. This information helps us to influence important changes they may make about how care services are provided.

Reader Information

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Translations and alternative formats

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هه بايتسد سيم وونابز رگيد روا رولکش رگيد رپ شرازگ تعاشا هي

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

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本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.

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Improving care in Scotland