

Care service inspection report

Full inspection

Community Care Assynt Ltd Support Service

Assynt Centre
1 Kirk Road
Lochinver
Lairg



HAPPY TO TRANSLATE

Service provided by: Community Care Assynt Ltd a company limited by guarantee

Service provider number: SP2014012288

Care service number: CS2014325186

Inspection Visit Type: Unannounced

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and set out improvements that must be made. We also investigate complaints about care services and take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

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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	5	Very Good

What the service does well

Staff provide a warm, friendly, caring and sociable environment for people who attend the service.

The service has well established links with other health and social care professionals involved in the care and support of people using the service.

What the service could do better

This was the first inspection of this service.

What the service has done since the last inspection

n/a

Conclusion

Community Care Assynt Ltd is a valued and well used community resource. The service provides a warm, friendly, caring and sociable environment for people

who attend the service. People are encouraged to be involved with the service and to comment and suggest ways it could improve.

1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Prior to 1 April 2011, this function was carried out by the Care Commission. Information in relation to all care services is available on our website at www.careinspectorate.com.

This service registered with the Care Inspectorate on 15 May 2014.

Community Care Assynt Ltd is registered to provide a day care service to a maximum of 5 older people.

Community Care Assynt is a single storey facility with dedicated communal areas and rooms specifically for the use of service users. The building is situated within a sheltered housing scheme in the village of Lochinver.

The service is provided by Community Care Assynt Ltd.

The aims of Community Care Assynt Ltd are to;-

- Provide a flexible, professional service
- Promote an inclusive approach within the company
- Maintain privacy and confidentiality, respecting rights and promoting equality of all service users.

Recommendations

A recommendation is a statement that sets out actions that a care service provider should take to improve or develop the quality of the service, but where failure to do so would not directly result in enforcement.

Recommendations are based on the National Care Standards, SSSC codes of practice and recognised good practice. These must also be outcomes-based and if the provider meets the recommendation this would improve outcomes for people receiving the service.

Requirements

A requirement is a statement which sets out what a care service must do to improve outcomes for people who use services and must be linked to a breach

in the Public Services Reform (Scotland) Act 2010 (the "Act"), its regulations, or orders made under the Act, or a condition of registration. Requirements are enforceable in law.

We make requirements where (a) there is evidence of poor outcomes for people using the service or (b) there is the potential for poor outcomes which would affect people's health, safety or welfare.

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 5 - Very 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 0345 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

We wrote this report following an unannounced inspection. This was carried out by one inspector. The inspection took place on 03 June 2015 between the hours of 10am and 4pm. We gave feedback to the manager and one of the directors on 09 July 2015.

As part of the inspection, we took account of the completed annual return forms that we asked the provider to complete and submit to us.

We sent six care standard questionnaires to the manager of the service to distribute to service users. We received four completed questionnaire back.

During the inspection process we gathered evidence from various sources, including the following:

We spoke with:

- The service manager
- Two carers
- The cook
- The driver.

We also spoke with six service users and one relative/carer.

We looked at:

- Minutes of meetings
- Information about the service
- Sample of staff files

- Training records
- A sample of care plans and personal care records
- Menus
- Accidents and incident records
- Maintenance records
- Staff rotas
- Cleaning schedules.

We toured the premises and made observations in different areas of the home.

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 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.firescotland.gov.uk

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 self assessment was completed by the manager and contained good detail of the service strengths and also highlighted areas where the service could improve.

Taking the views of people using the care service into account

We spoke with six service users during the inspection. We also joined a participation meeting during the inspection. Some of the comments from our discussions were.

"This is a very good service, I enjoy coming here. The food is very nice"

"We go out on trips locally and have a cup of tea"

"The staff are all friendly and very kind"

"I don't know what I would do without this place"

"Coming here gets me out of my house and gives me some company. I look forward to coming"

"The manager is excellent, she is doing very well here"

"I can't speak highly enough of the service and the staff"

We received four Care Standard Questionnaires prior to the inspection. One of the comments from these was:-

"It makes a big difference to me being here and getting help with dressing etc., and having lunches."

Taking carers' views into account

We spoke with one relative/carer during the inspection. They spoke very positively about the service provided by Community Care Assynt Ltd. They told us that the manager was excellent and had worked with them to ensure that the service provided to their family member was person centred and supported their changing needs.

One comment from the Care Standard Questionnaire received prior to the inspection was:-

"I feel that this is a remote area and a small overnight unit would serve the ageing community in a respite capacity."

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

At this inspection, we found that the performance of the service was very good.

We examined a sample of care records and review notes, minutes of service user meetings, information about the service, newsletters and questionnaire responses. We also spoke directly with some people who were attending the support service.

People who attended the support service, and their carers where applicable, were provided with a comprehensive service user guide. This included information about their aims and objectives and principles of the service. There was detailed information about how services were allocated, charges and review where changes to the service were necessary.

Service users were also given information about how to make comments or complaints.

The service had a participation strategy, which outlined ways in which service users could be involved in making suggestions on how the service could improve.

There were regular participation/feedback meetings held in the centre. We joined on of these meetings on the day of inspection. Service users were being encouraged to make their views on all aspects of the service for example, transport, activities, menus, outings etc. There was evidence to support that where suggestions had been made previously that these had been followed up and actions taken.

There was a regular newsletter developed and this contained details of previous and planned activities, speakers who came to the centre, raffle winners and some links to community services.

The manager had issued a survey questionnaires to service users. An evaluation of these had been carried out. There was evidence to support that the information gathered had been used to make improvements to the service.

There was a service user group which had nine members. This group was involved in the recruitment of any new staff, making suggestions on how the environment of the service could be improved and fundraising. These meetings were chaired by one of the volunteer directors. Minutes were available from these meetings.

There was a suggestion box located at the front reception area of the centre.

Areas for improvement

The service should continue to develop ways they involve people who attend the support service, and their carers, to give their views and suggestions about the service.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

Statement 3

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

Service Strengths

At this inspection, we found the service's performance was very good in the areas covered by this quality statement. We examined a sample of care plans and associated care documentation, review notes, minutes of meetings, policies and information about the service.

There was a support plan and associated care records for each person using the service. These documents provided the information staff needed about each person's care and support needs while they were attending the support service. In the sample we looked at the support plans had been reviewed with the involvement of the person, or their representative, and any relevant changes had been made. (See areas for improvement)

Measures were in place to minimise risk in terms of mobility and falls. Most days there was an activity in the afternoon, which was open to all those attending the support service. These included quiz, crafting, information sessions, various talks and pampering. There was a monthly activity planner and this was displayed on the notice board in the main area of the centre.

The staff and cook were aware of any specific dietary preferences people might have. There was a good choice of healthy balanced meals prepared by the cook who also took account of any specific dietary requirements. People we spoke to who attended the service spoke highly of the food they received. The meal times were observed to be a social occasion where the dining experience was pleasant. At lunchtime the tables were set in the dining area with condiments and water or juice was available. The day's menu was on a board in the dining area.

The service had good working relationships and links with other health professionals involved in the care and support of people using the service. These included for example GPs, community nursing staff, occupational therapist, care managers and psychiatrists. Staff were able to ask for advice or

discuss any concerns they had about people using the support service, where this was appropriate.

Areas for improvement

Each service user had a care plan in place, however it appeared that the manager took full responsibility for developing, updating reviewing and auditing these documents. Care plans should be working documents, which all care staff are familiar and involved with. The manager was working on delegating some of the care planning responsibilities to care workers where this had been identified as part of their role. Progress will be monitored on this at the next inspection.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

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

Strengths identified under Quality Theme 1, Quality Statement 1 apply to this statement.

Areas for improvement

See Quality Theme 1, Quality Statement 1.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

Statement 2

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

Service Strengths

We found this service was performing well in the areas covered by this quality statement. We concluded this after we spoke to the management and staff, looked at maintenance records and risk assessments and toured the premises.

The support service had arrangements for maintenance and repairs. These were satisfactory. Staff were aware of the systems in place to report faults and repairs.

External contracts were in place to ensure equipment and systems were maintained satisfactorily and were fit for use.

There were health and safety policies, procedures and arrangements in place aimed at ensuring the safety of people using the service, staff and visitors. Accident and incident reporting systems were in place and identified where follow-up action should be taken to reduce any risk identified. There were good arrangements in place to ensure the environment was kept clean and hygienic. There were aprons, gloves available and liquid soap and disposable towels at hand washing facilities. During the inspection we observed the premises to be clean and free from any unpleasant odours.

There were appropriate child protection arrangements in place. A signing in book for visitors was in use at the main entrance door to monitor who was in the building.

The centre had a laundry facility and this was shared with the tenants from the sheltered housing. (See areas for improvement)

The manager and staff demonstrated a very good awareness of health and safety issues within this service. We were satisfied there were good systems in place that made sure that the environment was as safe and people were protected.

Areas for improvement

There was a shared laundry facility in the centre. Staff did not have access to alginate bags for the washing of soiled linen, therefore, there may have been occasions where soiled clothing was being rinsed out in the laundry sink. This sink was also used for staff to wash their hands. The provider should develop a risk assessment for this and take appropriate action to ensure the safety of all who use the service. (see recommendation 1)

Grade

4 - Good

Number of requirements - 0

Recommendations

Number of recommendations - 1

1. The provider should ensure they carry out an infection control, risk assessment, which includes the laundry facility. Where any risks are identified appropriate action should be taken to ensure the safety of all who use the service.

National Care Standards Support Services. Standard 5: 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

Strengths identified under Quality Theme 1, Quality Statement 1 apply to this statement.

Areas for improvement

See Quality Theme 1, Quality Statement 1.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

Statement 3

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

Service Strengths

We found the service's performance for this statement to be very good. We concluded this after we spoke with management, staff, took account of questionnaire responses, observed staff and resident interactions, and looked at staff files, training records and care documentation.

There were care staff and volunteer staff working in the centre. All staff received an interview and went through an induction programme.

There was a programme of training and this included both mandatory and some non mandatory training. (See areas for improvement)

Discussion with staff, questionnaires and the sample of staff records we looked at supported that training, supervision and appraisals were carried out. Consequently regular opportunities to discuss individual practice issues, training needs and staff development were taking place.

There was evidence to support that regular staff meetings were held within the home, which were used to share and discuss information and staff found these to be beneficial.

There were policies and procedures in place for staff to use as guidance and for service provision.

Throughout the inspection staff and volunteers were noted to be kind and caring towards service users.

Areas for improvement

There was a training programme in place for staff, however, we noted that most staff were in need of moving and handling training. Although the layout of the centre did not lend itself to the use of moving and handling equipment, staff had to support some service users who had mobility issues. It would be beneficial for all staff, who have not had any moving and handling training, to have access to this prior to starting in the centre. For those staff whose training is out of date, a refresher course should be accessed. (see recommendation 1)

Grade

5 - Very Good

Number of requirements - 0

Recommendations

Number of recommendations - 1

1. The provider should ensure that new staff, who have not had any moving and handling training, have access to this prior to starting work in the centre. For those staff who's training is out of date, a refresher course should be accessed.

National Care Standards Support Services. Standard 2: Management and staff arrangements.

Quality Theme 4: Quality of Management and Leadership

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 management and leadership of the service."

Service Strengths

Strengths identified under Quality Theme 1, Quality Statement 1 apply to this statement.

Areas for improvement

See Quality Theme 1, Quality Statement 1.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 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

At this inspection, we found the service was performing well for this statement. We concluded this after we looked at a sample of care documentation, minutes of meetings, records, action plans and spoke with staff and people who were using or had used the service.

There were arrangements, policies and procedures which linked to different methods of quality assurance. These included for example, staff supervision and appraisal, the use of questionnaires, the complaints procedure, monitoring of accidents, incidents and falls and care reviews.

The information about how the service involves residents and relatives in assessing and improving the service is also relevant to this Quality Statement. See Quality Theme 1, Quality Statement 1.

Areas for improvement

Although the manager had put in place some effective quality assurance systems and processes there was no formal Quality Assurance policy in place. The service should continue to develop effective Quality Assurance systems. Internal audits should continue to be developed to cover all aspects of the service provision.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

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

Previous requirements

There are no outstanding requirements.

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

Previous recommendations

There are no outstanding recommendations.

6 Complaints

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

7 Enforcements

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

8 Additional Information

There is no additional information.

9 Inspection and grading history

This service does not have any prior inspection history or grades.

To find out more

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