



REPORT ON NATIONAL CARE HOME CONTRACT MONITORING FIRST VISIT

Provider Visited: Kincarrathie House

Type of Contractual Arrangement: National Care Home Contract

Contract Compliance Officer: Dave Henderson

Date of Visit: 11th February 2016.

Date of Draft Report: 12th February 2016.

Approved by: David McPhee (Line Manager) Date: 16th February 2016

Date of Final Version: 17th February 2016

Introduction

Contract compliance is a stand-alone exercise separate from that undertaken by other regulatory agencies but will be informed by these functions. All visits by Community Care Contracts Compliance & Commissioning Officer will use the agreed Contract Monitoring Framework and will focus on checking, controlling and recording whether the service is being provided in accordance with the terms of the National Care Home Contract.

Background

Kincarrathie House is a residential care home for older people set in fourteen acres of parkland on the outskirts of Perth. The home is owned by The Kincarrathie Trust and is a charitable trust.

Accommodation comprises of 44 single rooms with en-suite facilities, 1 room is dedicated for respite clients. Residents have access to a number of public rooms and gardens.

It was observed during visit the internal and external condition of the home to be in very good condition.

Reporting

The monitoring visit to the service took place on 11th February 2016. The following methods were used in order to obtain the information contained in this report.

- Discussions with Manager
- Sampling of residents personal records
- Completion of training evaluation tool
- Evidence of staff induction training
- Evidence of staff supervision
- Sampling of recorded training
- Evidence of health and safety measures
- Examination of policies and procedures
- General observation of Care Home living conditions
- Discussions with residents

The report is based on the principles of the National Care Standards 'Care Homes for Older People' and 'National Care Home Contract including relevant legislation, regulations and guidance from the Social Services Council.

Care Commission / SCSWIS / Care Inspectorate Report

The last available report on the Care Inspectorate website relates to an unannounced visit undertaken on 2nd July 2016.

As a result of this visit no requirements or recommendations were made.

Based on the findings of this visit Kincarrathie House was awarded the following grades:

Quality of Care and Support – 6 (excellent)
Quality of Environment – 6 (excellent)
Quality of Staffing – 6 (excellent)
Quality of Management and Leadership – 6 (excellent)

It is the responsibility of the care home manager to advise the Contract Compliance Officer – Care Homes (within one week) when:

- A SCSWIS inspection is complete
- The grading outcome SCSWIS from an inspection

Discussions with residents

During the monitoring visit the Contracts Compliance & Commissioning Officer met with two female residents, one was in the main area of the care home whilst the other was met in her own room. The first resident had been a resident in the care home for over three years whilst the other resident had been a resident for one year.

Both residents were complimentary in relation to the menu. One resident commented since a new chef had started she felt the standards had been “upped” with more variety and taste. One of the residents is currently having her meals in her own room due to her currently being unwell; there have been no issues with having meals in her room.

One of the ladies commented on the lovely panoramic view she has from her room. Rooms are cleaned daily to a high standard; one resident commented that there was now more domestic staff on at weekends. Both residents had individualised their rooms with personal items; one lady has her own furniture and chairs. She also says her room is a “boorach” but that is her own choice.

Both residents were full of praise for staff, both had noticed a few younger staff members starting however one resident commented that the Manager always made sure they get trained to SVQ3 level. The other resident commented the young staff members were willing to learn and listened to the residents. She also commented that staff fit round the resident’s needs / routine and not vice versa.

Activities are regularly happening in the care home with three activity co-ordinators in post; one of the residents commented what an excellent job they do. A weekly activity planner was evidenced in one of the resident’s room.

One of the residents likes doing jigsaws but also likes receiving family visits and telephone calls, she does think there are a lot of activities on offer but will choose which ones she wants to take part in.

The other resident likes to part in all the organised activities, she particularly mentioned the weekly exercise class with college students, baking knitting and a weekly bus outing. She felt there was a good balance and wide range of activities.

None of the residents had any complaints about the care home; one commented that a resident had recently passed away and felt that the obituary in that day's newspaper summed up how residents feel about Kincarrathie. It read "in the tender care of her Kincarrathie family".

She also mentioned that some family members of ex-residents still visit the care home and are actively involved in groups within the care home e.g. gardening

2. Organisational Capacity and Capability

2.2 Induction and Training

A.9.30 of the National Care Home Contract states "The Provider shall have in place and review as appropriate a staff development strategy and an effective yearly training plan to meet the requirements of the Care Standards".

Training is facilitated through a range of sources e.g. internal, Perth & Kinross training calendar, SVQ and e-learning. A training plan was in place for 2014/2015 however this focuses solely on Management / SVQ qualifications.

All staff have individual logins to the e-learning system and can access the system both in the care home and at home; e-learning modules are not allocated specific to each staff member's role but are mandatory for all staff. Printable certificates are part of the e-learning system and can be printed off and kept in individual staff files. The deputy manager leads on all recording and monitoring of training.

A range of management reports can be accessed by the manager and deputy manager. Reports can be filtered by a range of options e.g. course, staff member, compliance levels.

The manager evidenced a spreadsheet for E-learning. The spreadsheet clearly identifies courses completed, started and not yet started. A more succinct summary spreadsheet was also evidenced; these showed essential E-learning stats for the care home were:

<u>Module</u>	<u>No. of Users Passed</u>	<u>% of Staff</u>
Adult Support & Protection	37	71%
C.O.S.H.H.	15	28%
Dementia Awareness	32	61%
Fire Awareness	35	67%

First Aid	32	61%
Flu Awareness	30	57%
Food Hygiene	8	15%
Health & Safety	30	57%
Infection Control	28	53%
Manual Handling	35	67%

Non-essential training modules are:

<u>Module</u>	<u>No. of Users Passed</u>	<u>% of Staff</u>
Anaphylaxis Awareness	3	5%
Catheter care	0	0%
Child Protection	4	7%
Communication	7	13%
Complex Behaviour	33	63%
Continence Care	23	44%
Customer Engagement	3	5%
Diabetes Awareness	2	3%
Diet & Nutrition	18	34%
Equality & Diversity	5	9%
Falls Prevention	23	44%
Grief & Loss	3	5%
Grief & Loss - Managers	3	5%
Induction Training	1	1%
Management of complaints	0	0%
Meaningful Activities	27	51%
Medication Awareness	14	26%
Palliative Care	18	34%
Parkinson's Disease Awareness	4	7%
Person Centred Care	5	9%
Personal Care	5	9%
Record Keeping	2	3%
Restraint	4	7%
Staff Appraisals	7	13%
Tell Someone	6	11%
Wound Care	22	42%

The acting deputy manager has already addressed the issue of outstanding e-learning modules with some staff members; evidenced a sample of letters sent to staff members with a deadline of 31st March to complete the identified modules.

Practical training records are held which included two folders holding individual staff training records whilst a "training folder" is in place that holds

training records per course; evidenced the following training completed by staff during 2015:

- First aid – 21 staff have completed this training
- Fire training - 10 staff have completed this training
- Contenance – 13 staff have completed this training
- Wound care – 16 staff have completed this training
- Palliative care – 5 staff have completed this training.
- Independent advocacy – 4 staff have completed this training.
- Falls Awareness – 6 staff have completed this training.
- Diabetes – 2 staff have completed this training.
- H & S – 7 staff have completed this training.
- Stroke – 5 staff have completed this training.
- Vision awareness – 8 staff have completed this training.

- Manual handling – staff have undertaken refresher training and are asked to have a Scottish Manual Handling Passport Scheme. The Scottish Manual Handling Passport Scheme (SMHPS) is an initiative designed to improve the standard and consistency of manual handling training / education and the systems (process/procedures) that underpin it within Health Boards and Local Authorities in Scotland. It consists of three elements:
 - manual handling organisation
 - education, training and assessment, and
 - an audit tool and guidance with criteria for manual handling documentation.

- Dementia – 26 staff have undertaken Promoting Excellence level 1 training.

- Medication – 16 staff have undertaken refresher training from the external pharmacist.

The manager will offer to other local care homes any spare spaces on training she buys in from external training companies.

Kincarrathie House continues to have an extensive induction programme in place; evidenced completed induction packs.

The home has a policy of employing new staff on an initial three month trial period before they are offered a permanent contract. New starts follow a four week induction training programme covering personal care, occupational therapy, residents call system, meals and drinks, policies and procedures etc. The induction period includes a weekly “protected” time with their mentor.

All new care assistants must also complete a “care assistant induction” booklet which has been sourced from an external company and it’s aim is to allow the person to “understand your role within the caring team and to ensure

the highest levels of care are given at all times to residents". Timescales for completing the booklet is approximately twelve weeks however the manager evidenced one staff member whose trial period was terminated as despite support being given she was unable to show that she was capable of meeting the care standards expected of her.

All staff are asked at their job interview if they are willing to achieve SVQ qualifications and have been employed on that basis. The manager monitors SVQ statistics in the care home.

Recommendations

Ensure essential e-learning modules are completed.

2.3 Staff supervision and support

Supervision is covered in the "staffing" policy; the policy states "each care staff member will receive formal staff supervision at least every eight to twelve weeks".

The manager carries out supervision on the deputy manager, heads of departments, team leaders and senior carers who in turn then supervise their own staff members.

Evidenced a sample of supervision records and all had received a regular programme of supervisions throughout 2015. One staff member had received monthly supervisions for the majority of 2015 in response to a concern about the level of care she provided.

It was evident from the sample of supervision sessions that a range of training issues are discussed.

Supervision dates are agreed at the end of each supervision session between the supervisor and staff member, the person leading the supervision will then diarise the date. This process was confirmed by two senior members of staff.

The manager explained that at her request the Kincarrathie Board of Trustees carry out formal supervision sessions on both herself and administrator on an annual basis in addition she is required to attend quarterly board meetings. Trustees will also "pop in" on an almost weekly to spend time with the manager.

The manager evidenced a "live" project plan for "operational and property risks"; this is used by the Board of Trustees, Senior Management and the manager to monitor the care home.

No Recommendations

2.6 Scottish Social Services Council (SSSC) Requirements

The manager monitors staff SSSC registration and has in place a monthly check of registrations.

Insurance documents are in place for both employers' liability insurance and public liability insurance and meet NCHC levels.

An "emergency arrangement book" is in place, this is supported by a "firebox" which contains appropriate information and equipment.

Conclusion

Kincarrathie House has maintained their "excellent" Care Inspectorate grades which they were first awarded in August 2014. An experienced manager is in place as is an established structure and staff in support of her.

E-learning training is split between essential and non-essential training; the acting deputy manager has already addressed the issue of outstanding modules with some staff members and a timescale has been put in place to complete them. Practical training is the preferred option for training.

The manager should follow the good practice of ensuring the "emergency arrangement book" is reviewed on an annual basis and this in conjunction with the "firebox" should be developed through a desktop exercise with input from senior staff in the care home. Focus should not only be on evacuation emergencies but also non-evacuation emergencies to ensure staff are aware of their roles and responsibilities.

The monitoring visit undertaken by the Contract Compliance & Commissioning Officer looked at only specific areas of the National Care Home Contract, based on the findings of the visit it is appropriate to recommend that a follow up visit is not required within 2015/16 unless circumstances dictate otherwise.

It is the responsibility of the care home manager to evidence compliance with individual recommendations within the timescales laid out.

Ref	Action	Person Responsible	Date To Be Actioned
1 st Recommendation	2.2 Induction and Training <ul style="list-style-type: none"> Ensure essential e-learning modules are completed. 	The Manager	Six months after final report issued
2 nd Recommendation	3.11 Business Continuity <ul style="list-style-type: none"> Ensure "emergency 	The	Next visit

	arrangement book” is part of a desktop exercise involving senior members of staff.	Manager	
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