

North Berwick Day Centre Support Service

St Regulus
6 St Andrew Street
North Berwick
EH39 4NU

Telephone: 01620 890906

Type of inspection:

Unannounced

Completed on:

5 July 2019

Service provided by:

North Berwick Day Care Association Ltd

Service provider number:

SP2014012357

Service no:

CS2014330984

About the service

North Berwick Day Centre registered with the Care Inspectorate in 2015 to provide a care service to up to 18 adults. The service is provided by the North Berwick Day Care Centre Association Ltd.

The aims of the centre include: 'to provide a first class, compassionate, individualised and supportive care service in a purpose built Day Centre for older people who may be isolated, have medical conditions or a diagnosis of dementia living in North Berwick and surrounding areas.'

The centre opens five days a week, Monday to Friday. The service provides transport and assistance to get to/ from the centre. In addition, the management committee arrange a monthly evening cinema club which is open to the public.

At the time of the inspection the centre was providing a service to 48 people. People attended on various days, however, we noted that 30 people only attend the day centre one day a week. There were no people on the waiting list and the manager was planning to review whether people currently attending would benefit from additional days.

The inspection was carried out on 1 July 2019 by a small team (inspector, an inspection assistant and an inspection volunteer).

Feedback was provided to the manager and two directors of the management committee on 5 July 2019.

What people told us

In addition to speaking to people during the inspection, we also sent out questionnaires in advance for people to complete.

People told us that:

"We cannot praise the service enough.. with a team of outstanding individuals who do their utmost to provide the attendees in the centre with a highly personalised and caring experience."

"All staff at the day centre are fantastic."

"I feel safe and secure when attending the day centre as I know I am looked after by the staff.. It gets me out and about, otherwise I would e sitting in the house."

"I have only recently joined the day centre and I am totally satisfied with all aspects of the organisation."

"All the staff, without exception are caring, kind and never patronising."

"The manager, staff and volunteers are all wonderful people who do a great job."

Self assessment

The Care Inspectorate is not currently requiring self assessments

From this inspection we graded this service as:

Quality of care and support	5 - Very Good
Quality of environment	5 - Very Good
Quality of staffing	4 - Good
Quality of management and leadership	4 - Good

Quality of care and support

Findings from the inspection

We observed people experiencing compassionate care and being treated with dignity, respect and kindness. Staff were knowledgeable about each of the people using the service. We observed caring interactions with staff displaying patience when supporting people with complex needs.

We also noted that the service's logo which featured on the service's documentation was an alternative play on the road sign for older people crossing the road, with people jumping lifting their walking sticks in the air. This positive imagery demonstrated the overall ethos of the service, which was one of valuing people.

On the day of Inspection, we noted that people were given the opportunity to choose the activities they wanted to participate in (free choice). In the morning a group of people joined in a word quiz and after lunch some people chose to go on the bus for a trip. Other people enjoyed a game of music bingo and a general knowledge quiz.

There was a range of diverse activities provided at North Berwick, offering mental stimulation, creativity and physical activity. Most recently the centre has been gifted a rickshaw bike where staff will cycle and enable people to enjoy the outdoors and fresh air. People also talked about the beach wheelchairs which they had enjoyed. Other people spoke about the seaside theme that they had chosen for the quiet room and the cushions they had made. Other people spoke about the various projects they had participated in. At the time of the inspection people were excited about going to Musselburgh races. Where people do not want to participate in activities but would prefer to sit outside and watch people 'coming and going' this was supported.

In addition to group activities we heard about individualised activities. We heard about some very person centred support; this included staff sourcing food from one person's home in England and staff supporting people to go shopping in their favourite shop in Edinburgh.

People's wellbeing was noted to be a priority. We found that people's physical and mental health benefited from attending North Berwick Day Centre. While the service did not provide nursing care, staff were vigilant to changes in people's health and wellbeing and acting on this by speaking to families or medical staff. Nursing staff and the GP also visited the centre, to attend to dressings or provide flu jabs as necessary.

People reported that they enjoyed the lunches provided. The service benefitted from having a cook and kitchen staff so that freshly made food, sourced locally, was provided. The benefits of this was that people experienced the smell of home cooking stimulating their appetite. On the day of inspection people were offered an unhurried two course meal. Where people required special diets, alternatives were provided. The cook regularly asked people for their choice of meals in order that these were included on the menu. We also heard that the cook had prepared food from people's own recipes. People using the service had also been involved in baking and in activities such as making Christmas cakes and preparing fruit kebabs.

We found that the assessment and support planning arrangements reflected people's needs and wishes and evidenced positive outcomes experienced by people attending the day centre. The plans were used by staff to provide the care and support required and people's experience was monitored and reviewed. The benefits people derive from activities or attending the centre were very well recorded by key workers in the monthly summaries.

We saw some interesting and detailed life story books which people had produced, however, following the last inspection where the service had been told not to keep people's personal information unlocked, these have not been developed further. Unlike support plans which contain personal and sensitive information and as such must be kept locked for reasons of confidentiality, life story books should be available for people to share as they wish and generate conversations within the centre and with families.

The service promoted the Health and Social Care Standards with staff and people using the service. This was noted at an evaluation day where people were asked to comment on how well the service met the standards and were asked to identify suggested improvements.

Areas for Development and Improvement:

Whilst we saw very well written examples of personal outcomes recorded in people's support plans, we didn't always see what people wanted to achieve as a result of attending the centre. Linking these will more clearly evidence how well the service is meeting people's needs and aspirations.

Where people have the capacity and interest to take more of a lead in developing their own support plans and life story books, this should be encouraged and supported.

Where restrictions are placed on people using the service, these should be lawful and not breach people's rights, for example people buying a drink while at the pub or an outing.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 5 - very good

Quality of environment

Findings from the inspection

The day centre, which is located near the town centre was purpose built. The layout of the main public area is open plan, with a communal lounge area and a dining area. Seating is arranged around small tables enabling people to sit in small relaxed groupings. The seats are rearranged to suit the activities on offer. There are also toilets, and a separate freshly decorated multi-purpose room.

There was an attractive courtyard with outdoor seating and a summer house, which offered people an opportunity to enjoy the fresh air and colourful plants, flowers and vegetables. The installation of a bird house with camera had generated much interest and discussion. People were also seen to go into the garden independently to water plants and tend to the vegetables.

People using the service were keen to talk about the recent redecoration and the new carpet which runs throughout the centre making it bright, pleasant and dementia friendly. Advice had been sought from a dementia specialist when selecting the colours and seating. People with dementia also benefitted from good signage and well designed toilet facilities.

There is a separate kitchen adjacent to the dining room with a door and large hatch. This allowed people to experience meals being prepared and served but for the hatch and door to be closed while dishes were being collected and washed without the associated noise disturbing people's meal time experience.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 5 - very good

Quality of staffing

Findings from the inspection

The staff we met during the Inspection were very positive and enthusiastic about their work and the benefits people experience from coming to the day centre.

We found that staff were recruited well. People benefit from safe recruitment practices and safeguards. Induction and training was relevant to the needs of the people using the service and appropriate to their role.

In addition to a staff team of 12 staff, the service also benefits from the support of 50 volunteers. Appropriately the volunteers work is coordinated (by another volunteer), and volunteers have the opportunity to meet together and benefit from training. Volunteers provide support in a variety of ways, from helping with domestic activities, to producing the newsletter and moderating the website.

On the first day of inspection there were staff shortages in the kitchen; despite this, people were provided with a two course meal and there were sufficient staff and volunteers working to enable various activities to be enjoyed and individuals to be supported.

The staff we spoke to were aware of the Health and Social Care Standards. Opportunities for these to be shared with the volunteers should be sought.

Areas for Development and Improvement:

We identified through viewing the service's own records that various training courses and updates were required by various members of staff and volunteers (adult support and protection, medication, first aid and moving and handling).

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 - good

Quality of management and leadership

Findings from the inspection

The commitment from the manager and the directors was recognised in respect of the work they do for North Berwick Day Centre and also in facilitating the operations of the Association and coordinating training for the other day centres in East Lothian.

The manager, staff, volunteers and people attending the centre shared the overall understanding that the day centre serves an important role in supporting people who would otherwise be isolated at home. The service's written aims and objectives are retained in a file in the office. This should be reviewed in order that it is up to date and can be used as a tool to inform the evaluation of the service.

The service does recognise the importance of seeking feedback from people who use the service. In the past this has been done through the use of questionnaires, however, last year we were invited to participate in a café style discussion session, where people were asked for their views on the service and any areas for improvement. This was a well organised process and did generate some ideas for improvement and/or comments. The manager has since produced a photographic record of what has happened as a result of these suggestions (you said, we did).

In addition, we saw some positive feedback from families of people who have left the service, by moving onto a care home or having passed away. This is good evidence of the benefits people derive from attending North Berwick Day Centre.

Areas for Development and Improvement:

In order to develop quality assurance and improvement, the management team should develop a self-evaluation process against the new Care Inspectorate's framework questions and the Health and Social Care Standards. This would draw together the various sources of evidence showing how good the service is and enable the manager to develop an improvement plan.

All services should have a continuous improvement plan created as a result of all the quality audits and feedback. This plan should show what improvements have been identified, what difference these changes will make to the people using the service, and the timescales.

The newsletter and website could be used as a means of communicating feedback and sharing the changes in the service with people who attend, their families and wider interested parties.

People using the service should also be involved in all aspects of the service including participating in the management and leadership of the service, in ways that are relevant and appropriate to them.

We were told that a service user has recently agreed to act as a representative, to seek views of people using the service and representing them at meetings including the AGM. As there is a volunteer who undertakes a similar role, it would be helpful to clarify these individuals' roles/responsibilities to enable them to effectively work together and promote service user participation.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 - good

What the service has done to meet any requirements we made at or since the last inspection

Previous requirements

Requirement 1

The service should ensure that the reviews of support plans and risk management plans take place every six months. The views of the service user and their family should be clearly evidenced.

This is in order to comply with Scottish Statutory Instruments (SSI) 2011. No. 210. The Social Care and Social Work Improvement Scotland (SCSWIS) (Requirements for Care Services) Regulations 2011. Regulation 5(2)(b) - a regulation regarding the reviews of personal plans.

Timescale for implementation: Immediately.

This requirement was made on 14 March 2016.

Action taken on previous requirement

Support plans and associated risk assessments have been introduced and are reviewed in accordance with the legislation.

Met - within timescales

Requirement 2

The service should ensure that the support plan is completed within 28 days of the person starting with the service, in line with legislation. The support plans also need to state that outcomes the person is wanting from the service.

This is in order to comply with Scottish Statutory Instruments (SSI) 2011. No. 210. The Social Care and Social Work Improvement Scotland (SCSWIS) (Requirements for Care Services) Regulations 2011. Regulation 5(1) - a regulation regarding personal plans.

Timescale for implementation: Immediately.

This requirement was made on 14 March 2016.

Action taken on previous requirement

Support plans detail the outcomes experienced by the service. More work on the identification of peoples personal outcomes and aspirations has been identified in this years report.

Met - within timescales

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

Previous recommendations

Recommendation 1

The reviews could be improved by having more detail on how people were benefiting from being at the centre and the progress being made in relation to any outcomes they identified.

National Care Standards, Support Services, Standard 4, Support arrangements.

This recommendation was made on 14 March 2016.

Action taken on previous recommendation

This has been addressed.

Recommendation 2

The complaints policy and information booklet need to be changed to state the people can contact the Care Inspectorate at any time in the process.

National Care Standards, Support Services, Standard 12, Expressing your views.

This recommendation was made on 14 March 2016.

Action taken on previous recommendation

This has been addressed.

Recommendation 3

The service should consider developing a newsletter as a method of feeding back to service users and carers about service developments based on surveys done.

National Care Standards, Support Services, Standard 12, Expressing your views.

This recommendation was made on 14 March 2016.

Action taken on previous recommendation

A newsletter has been produced and is used as a means of communication about the service.

Recommendation 4

The detail in the risk management plan could be improved by having more detail on the risk and how it could be managed.

National Care Standards, Support Services, Standard 4, Support arrangements.

This recommendation was made on 14 March 2016.

Action taken on previous recommendation

This has been addressed.

Recommendation 5

The service should also ensure that if there is a Power of Attorney or Guardianship in place for someone that they have copies held on file so they are aware of the powers.

National Care Standards, Support Services, Standard 4, Support arrangements.

This recommendation was made on 14 March 2016.

Action taken on previous recommendation

This has been addressed.

Recommendation 6

The service should ensure that there is a signed service agreement for each person detailing what service will be provided, the cost and how the service could be ended in line with guidance.

National Care Standards, Support Services, Standard 3, Your legal rights.

This recommendation was made on 14 March 2016.

Action taken on previous recommendation

This has been addressed.

Recommendation 7

Although service users were involved in recruitment, this needs to be evidenced better with documentary evidence of their involvement being made available for inspection. The service also needs to develop the recruitment process further so that service users are involved in the adverts, job descriptions, short-listing, interviews and that their views are evidenced to have contributed to the final decision.

National Care Standards, Support Services, Standard 2, Management and Staffing. National Care Standards, Support Services, Standard 12, Expressing your views.

This recommendation was made on 14 March 2016.

Action taken on previous recommendation

More could be done to involve people in all aspects of the service including the management of the service.

Recommendation 8

The service should improve supervision, team meetings and incident recording to provide more opportunities for staff to reflect on their practice.

National Care Standards, Support Services, Standard 2, Management and Staffing.

This recommendation was made on 14 March 2016.

Action taken on previous recommendation

This has been addressed.

Recommendation 9

The whistleblowing policy needs updated to state that staff can contact the Care Inspectorate at any time in the process.

National Care Standards, Support Services, Standard 2, Management and Staffing.

This recommendation was made on 14 March 2016.

Action taken on previous recommendation

This has been addressed.

Recommendation 10

The service should work to a co-production model and look at other ways to involve service users in the service such as induction, training, developing policies and procedures, and all other aspects of how the service is managed including the Care Inspectorate self-assessment. The service user and carer representatives on the management committee could be given voting rights to enhance their involvement. The service should also ensure that all service users regularly have the opportunity to put their views to their representative.

National Care Standards, Support Services, Standard 2, Management and staffing arrangements. National Care Standards, Support Services, Standard 12, Expressing your views.

This recommendation was made on 14 March 2016.

Action taken on previous recommendation

This has been addressed.

Recommendation 11

The service should consider introducing internal regular audits such as a file audit to ensure the quality of the support and paperwork is monitored.

National Care Standards, Support Services, Standard 2, Management and staffing arrangements.

This recommendation was made on 14 March 2016.

Action taken on previous recommendation

Auditing systems have been introduced but need to form the wider Quality Management processes.

Recommendation 12

The service should include all stakeholders including other professionals in quality assuring the service so should issue questionnaires to them for feedback. Feedback should also be obtained from service users when they leave the service through an exit interview.

National Care Standards, Support Services, Standard 2, Management and staffing arrangements. National Care Standards, Support Services, Standard 12, Expressing your views.

This recommendation was made on 14 March 2016.

Action taken on previous recommendation

This recommendation has been addressed in part but forms part of this year's areas for development and improvement.

Recommendation 13

The service should develop an overarching quality assurance system that demonstrates that the service is supporting people to achieve positive outcomes and brings together feedback from all sources including review meetings and supervision.

National Care Standards, Support Services, Standard 2, Management and staffing arrangements. National Care Standards, Support Services, Standard 12, Expressing your views.

This recommendation was made on 14 March 2016.

Action taken on previous recommendation

This remains an area of development and improvement.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

Date	Type	Gradings
4 Mar 2016	Unannounced	Care and support Environment Staffing Management and leadership
		4 - Good 4 - Good 4 - Good 4 - Good

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