

Fram House

Service name

Fram House

Service address

High Street

Beauly IV4 7BT

Type of care service

Care Home Service

Provider name

Nansen Highland

Service number

CS2003008526

Date of inspection

6 November 2006

Type of inspection

Announced

Care Commission Office

Inverness

Period since last inspection

9 months

Introduction

Fram House was registered with the Care Commission on 22 March 2004 to provide a Care Home service to a maximum of 4 adults with Learning Disabilities. Overall management was the responsibility of Nansen Highland a non-profit governmental body registered as a Scottish Charity. Nansen Highland also managed a support Service at Redcastle, Muir of Ord and service users made good use of this service.

Fram House was located in the centre of Beauly. The house was not purpose built for this service, however the accommodation comprised of four en suite bedrooms, a large living room, a large kitchen adapted for purpose and staff accommodation/office, garden and outside storage.

The accommodation was in a good state of repair and the atmosphere felt welcoming and relaxed.

The aims of the service were to provide a safe, secure, stimulating and caring environment whilst also respecting each person as an individual. They strive to promote opportunities for the service user to develop for their own future. Staff hoped to provide a warm, safe and stable environment, which provided care and support while meeting the individual needs.

Basis of Report

This report is based on consideration of the services compliance with the Regulation of Care (Scotland) Act 2001. The inspection focused on the Scottish Statutory Instrument 114 of the Regulation of Care (Requirements as to Care Services) (Scotland) Regulations 2002,

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

The Care Commission officer wrote to the service advising them when the inspection would take place.

Prior to the announced inspection visit, the service completed an electronic version of the annual return containing information about the service. A Self Evaluation form had also been submitted electronically prior to the time of inspection.

The announced inspection took place on Monday 6 November 2006. The Officer spoke with the Manager and one member of staff. The premises were viewed and time was spent observing how staff members worked with service users.

The Care Commission Officer looked at a range of policies, procedures and records associated with the care of service users and the provision of the service.

Examination of documentation also included ensuring compliance with current regulations.

The Care Commission Officer took all of the above into account and reported on whether the service was meeting the following National Care Standards for Care Homes for people with learning disabilities.

Standard 2: Trial Visits

Standard 4.17: Your Environment

Standard 5: Management and Staffing

Standard 15: Keeping Well and Medication

Standard 19: Support an Care In Death and Dying

The inspection themes of Fire Safety, Access to Single Room Occupancy and Safer Recruitment were also taken into account.

Standard 3: Your Legal Rights and the inspection theme Fair Terms of Care will be reported on following the unannounced inspection.

Action taken on requirements in last Inspection Reports

There were no requirements following the last Inspection.

Comment on Self-Evaluation

The self-evaluation had been completed by the service prior to the announced inspection.

View of Service Users

The service users were given the opportunity to contribute to the inspection process. The service users warmly welcomed the Care Commission officer. They all took the opportunity to talk openly

about their service experience. Throughout the inspection the service users appeared relaxed and happy in their environment.

View of Carers

There were no family members or independent representatives present at the time of the inspection.

Regulations / Principles

National Care Standards

National Care Standard Number 2: Care Homes for People with Learning Disabilities - Trial Visits

Strengths

Prospective service users had information made available to them in the form of a brochure which included an `admission and reviews` policy informing prospective service users of the `trial period`. Prospective service users were able to visit the care home prior to making use of the service. The admission policy illustrated the assessment process as being two-way in that the prospective service users assessed whether they felt the home would meet their needs and the service assessed their ability to meet the needs of the service user with the prospective service user being at the heart of these decisions.

Prospective service users, family members, carers and or the service users` representative were involved in all the planned stages of the move.

The assessment process allowed service users to discuss their needs, preferences and enabled them to get to know the people they would be living with. Service users living within the care home were also informed and involved in welcoming of prospective service users.

Areas for Development

There were no areas for development identified as part of this inspection

National Care Standard Number 3: Care Homes for People with Learning Disabilities - Your Legal Rights

Strengths

This standard will be inspected against at the next inspection taking into account the Office of Fair Trading Report, `Fair terms of Care`.

Areas for Development

National Care Standard Number 4: Care Homes for People with Learning Disabilities - Your Environment

Strengths

Aspect 4.17 of this standard was inspected against at this inspection. All rooms are single occupancy with en - suite facilities. The service would be able to provide en suite accommodation for a couple if requested.

Areas for Development

There were no areas for development identified as part of this inspection

National Care Standard Number 5: Care Homes for People with Learning Disabilities - Management and Staffing Arrangements**Strengths**

The service had policies and procedures in place. The manager had indicated that these were reviewed at a minimum frequency of every two years or as events dictated.

There was a system in place to record accidents and incidents. The records observed were clear and concise in content. There was also a system in place to record complaints.

The manager was aware of the requirements with regards to the Scottish Social Services Council and the registration process for all care staff. Staff have been undertaking Scottish Vocational Qualification at level III.

The service was adequately staffed to support and meet the needs of the service users.

A staff development and appraisal scheme was completed for each member of staff on an annual basis. The manager had developed a comprehensive, generic job information and induction pack which was made available to staff.

Following a risk assessment of the premises, the manager had completed comprehensive Health and Safety guidance for all staff which incorporated fire safety procedures, location of fire fighting equipment etc.

The service had a policy on the use of restraint and this was linked in with staff having annual in house refresher training on non-violent crisis intervention.

Areas for Development

There was evidence that, for some staff, prior to employment, the service had not received two references. To ensure a safe and robust recruitment procedure the service needed to ensure that at least two satisfactory references had been obtained prior to appointing new staff. (Requirement 1)

It was also noted that there was no written record of staff being declared physically and mentally fit for their role within the service. Again, to ensure a robust and safe recruitment procedure the service needed to have a written record of staff being declared physically and mentally fit for their role within the service. (Requirement 2)

A fire safety risk assessment specific to fire safety and to the premises should be completed incorporating post evacuation procedures.

(recommendation 1)

In relation to fire safety, staff were not able to access fire training as regularly as twice a year. The service needed to ensure that all staff had access to fire training at least twice a year (recommendation 2)

National Care Standard Number 15: Care Homes for People with Learning Disabilities - Keeping Well - Medication

Strengths

Arrangements were in place for service users to self medicate unless there were specific reasons which prevented this.

Service users are supported via a key working system to re order and collect their own repeat prescriptions.

The service had close links with the local General Practice and Pharmaceutical service. There was evidence of General Practitioner and hospital involvement in the review of service user s medication.

Areas for Development

The management of medication should be based on current best practice guidance The

Administration and Control of Medicines in Care Homes and Children's Services (Royal Pharmaceutical Society of Great Britain 2003) (Recommendation 3)

Where service users are unable to consent to medical treatment under the Adults with Incapacity (Scotland) Act 2000, The manager is to ensure that Part 5 of the Act is acted upon. (Requirement 3)

National Care Standard Number 19: Care Homes for People with Learning Disabilities - Support and Care in Dying and Death

Strengths

The staff were aware of the need to support service users through the process of bereavement. Staff training and qualifications encompass the needs of those service users experiencing loss and grief. Where possible the service will assist service users to access support groups.

Accommodation was made available to families of the service users to allow them to spend time with the service user.

Areas for Development

During the care planning process, the service should give consideration to the wishes of service users with regards to physical personal and spiritual care in death and dying.

Enforcement

Other Information

The Care Commission Officer would like to thank both the service users and the staff present during their visit for the welcome received and the cooperation experienced throughout the inspection.

Requirements

Requirement 1: It is a requirement that at least two satisfactory references are obtained prior to appointing new staff.

This is in order to comply with:-

SSI 2002/114 Regulation 9 (1) Fitness of Employees

National Care Standards, Care Homes for people with learning disabilities Standard 5: Management and Staffing Arrangements

Requirement 2: It is a requirement that the service has a written record for staff being declared physically and mentally fit for their role within the service.

This is in order to comply with:-

SSI 2002/114 Regulation 9 (2)(a) Fitness of Employees

National Care Standards, Care Homes for people with learning disabilities Standard 5: Management and Staffing Arrangements

Requirement 3: It is a requirement that the Adults with Incapacity (Scotland) Act 2000, Part 5 Medical Treatment and Research Section (47) (1) is fully acted upon.

This is in order to comply with:-

SSI 2002/114 Regulation 4 (1) (a) Welfare of Users

National Care Standards, Care Homes for people with learning disabilities Standard 15: Keeping Well - Medication

Recommendations

Recommendation 1: A fire safety risk assessment specific to fire safety and to the premises should be completed. Reference should be made to the Fire Safety Guidance Booklet published by the

Scottish Executive.

Recommendation 2: In relation to fire safety, staff were not able to access fire training as regularly as twice a year. The service needed to ensure that all staff had access to fire training at least twice a year .

Recommendation 3: The management of medication should be based on current best practice guidance The Administration and Control of Medicines in Care Homes and Children s Services (Royal Pharmaceutical Society of Great Britain 2003)

These are in accordance with the National Care Standards, Care Homes for people with Learning Disabilities Standard 4 and 5

Shona Knight
Care Commission Officer