### 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** 13 February 2006

Type of inspection Unannounced

**Care Commission Office** Inverness

Period since last inspection

6 months

#### Introduction

Fram House was located in the centre of Beauly and provided care and accommodation for up to four Service Users. Service Users moved to Fram House in May 2003 from their previous home in Evanton. The accommodation had been extensively refurbished and provided a high standard of accommodation.

Overall management was the responsibility of Nansen Highland a non-governmental body registered as a Scottish Charity. The day to day management of Fram House was the responsibility of the appointed manager.

Nansen Highland also managed a support service (day care) at Redcastle Station, Muir of Ord and all service users made good use of this service.

# **Basis of Report**

This report is based on consideration of the service s compliance with the Regulation of Care (Scotland) Act 2001, as well as taking into account any requirements, recommendations or areas of development made, from the announced inspection of 6 September 2005.

The Care Commission Officer visited the Care home on an unannounced basis and during the inspection which took place on the 13 February 2005, the Care Commission Officer spoke with the member of staff on duty at the time of the visit and also spoke with the 4 service users.

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 1: informing and deciding

Standard 5: Management and staffing arrangements

Standard 6 : Support arrangements

Standard 7: Moving in

### Action taken on requirements in last Inspection Reports

There were no requirements made in the last report

### **Comment on Self-Evaluation**

N/A

### **View of Service Users**

The Care Commission officer met with the 4 service users on a prearranged evening and spent time speaking with them about their experiences of living in Fram House. They spoke both positively and enthusiastically about the care and support that was offered to them and were clear about their rights and responsibilities within the care setting. They spoke particularly highly of the staff group.

### **View of Carers**

No carers were available for comment at the time of the inspection.

### **Regulations / Principles**

### **National Care Standards**

# National Care Standard Number 1: Care Homes for People with Learning Disabilities -Informing and Deciding

### Strengths

Prior to any Service User moving into the Care Home, they were offered the chance to visit the service and meet with staff, they were provided with written information about the service and they were also offered a video to watch regarding life at Fram House and Nansen Highland.

The Nansen Highland introductory package included the booklet 'welcome to your new home.'

This information was presented in plain English and was attractive, informative and comprehensive in it's content.

The booklet contained detailed information regarding the service being offered, including the following;

The accommodation and service provided

The home's philosophy

House rules

The complaints procedure

Details concerning rights and responsibilities

Budgeting and finance

Risk management

**Funding** 

There was detailed reference to the aims of the organisation, including reference to the organisation's principles being;

Privacy,
Dignity
Independence
Choice
Right and fulfilment.
Areas for Development No areas for development were identified at this inspection
National Care Standard Number 5: Care Homes for People with Learning Disabilities - Management and Staffing Arrangements
<b>Strengths</b> The Care Service had clear and comprehensive policies and procedures in place including:
Staffing and training.
Administration of medication
health and safety
'Whistleblowing'
Environmental health
Fire safety
Managing risk
Record keeping, including recording of incidents and complaints.
Recruitment of staff
Equal opportunities policy
Restraint policy.
Handling of residents finances policy.

Staff spoken with confirmed that they had all received their own copies of all policies and procedures when employed with the service and had access to copies of the documents both throughout the home and on CD ROM.

Staff displayed a good working knowledge of the homes underpinning values; Choice, dignity, independence and fulfilment and were clear that policies and procedures were 'working documents' to be referred to, updated and reviewed, whenever necessary.

No formal complaints had been received by the service at the time of the inspection, appropriate systems were in place should this occur.

The staff induction process was a condition of employment, there was a 'buddy system' in place for new staff with a varying period of supervision provided based on individual need.

Training records were kept and training was clearly an integral part of the homes philosophy. 'Training periods,' were identified on a six monthly basis whereby all staff were supernumerary and 2 days of in house training was provided to all. Further training was offered at other appropriate times.

A clear training and development plan was in progress and a number of staff were in the process of completing SVQ qualifications at level 2 and 3.

There was a clear recruitment policy in line with current legislation.

There were clear and comprehensive recruitment procedures in place.

There was a good awareness of the Scottish Social Service Council

Appropriate staffing levels had been maintained.

Procedures were in place regarding the safe administration of medication.

A clear policy and procedure in relation to the handling of service users monies was in operation and working effectively.

### **Areas for Development**

No areas for development were identified at this inspection.

Recommendation1. had been appropriately addressed at the time of the inspection.

# National Care Standard Number 6: Care Homes for People with Learning Disabilities - Support Arrangements

## **Strengths**

A comprehensive and clear package of personal planning was in operation.

A key worker system was in operation from commencement of service use, providing a person centred approach to the provision of care.

The personal plan's were well developed and made reference to support and care needs and personal preferences. The plans contained detailed risk assessments which included a clear date for review.

Personal plan's were based on holistic assessment of need once the person was resident within the home.

Area's covered included;

Health and medication

Diet

Travelling

Menu planning
Cooking
Budgeting
Leisure and freetime
Emotions
Any changes/important information
Plans viewed contained detailed social history for service users, offering a view of the person as a whole.
Plans were reviewed on a monthly and 6 monthly basis and where possible service users and their carers were involved.
Service users were encouraged to comment on and be involved in the planning of their care.
Areas for Development  No areas for development were identified at this inspection.
National Care Standard Number 7: Care Homes for People with Learning Disabilities - Moving In
Strengths The care service operated a key worker system, where each service user was allocated a named

The service users were able to bring items of their own furniture, following discussion with the staff. Attempts were made to make the atmosphere more homely and the move from their own home less traumatic.

member of staff who was responsible for ensuring that all service users needs were being met, in

accordance with their care plan and the home's ethos of person centred care.

Staff were available to discuss any issues of concern that the service user may have at any time and the Manager or Senior on duty was responsible for ensuring that all relevant information regarding a service users current disposition was passed on to all members of staff during a shift and at shift changeover.

## **Areas for Development**

No areas for development were identified at this inspection

# National Care Standard Number 18: Care Homes for People with Learning Disabilities - Supporting Communication

### **Strengths**

The care planning and assessment tool used within the care home, ensured that the communication needs of the service user were regularly reviewed. As such, where it may be identified that a service user may have difficulty in communicating his/her views, the Care Home would respond as appropriate to the individual circumstances.

Large print materials were held within the home, for use as necessary.

### **Areas for Development**

No areas for development were identified at this inspection

### **Enforcement**

### **Other Information**

## Requirements

No requirements were made as a result of this visit.

### Recommendations

1. 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)

This recommendation had been fully addressed at the time of this inspection visit.

Allyson Jordan Care Commission Officer