

Kalisgarth Day Centre Support Service

Kalisgarth Care Centre
Pierowall
Westray
Orkney
KW17 2DG

Telephone: 01856 871 134

Type of inspection:
Unannounced

Completed on:
6 June 2023

Service provided by:
Orkney Islands Council

Service provider number:
SP2003001951

Service no:
CS2007154807

About the service

Kalisgarth Day Centre is a purpose-built care centre comprising seven self-contained flats, a one bedded respite care facility and an additional day care unit. Additional accommodation is provided to the rear of the core building.

The service is located in the village of Pierowall on Westray, a northern Orkney island. The tenants and respite guests can attend the day service where they have opportunities to socialise with people from the wider community.

Kalisgarth focuses mainly on providing care for older people, but it also addresses the needs of the whole community, providing support for people with a physical or learning disability.

The aims of the service are to meet the individual, assessed, social care needs of service users and tenants in a professional, courteous and confidential manner. Staff will work with service users to maintain their independence and will respect their dignity and privacy at all times.

The service supported elderly and vulnerable people to sustain and develop their independence, by the provision of a range of services.

The service was registered with the Care Inspectorate in 2007

The day service operated on a Monday and Wednesday, and 10 people were being supported at the time of inspection.

About the inspection

This was an unannounced inspection as carried out by an inspector from the Care Inspectorate on 26 April 2023. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with four people using the service and family representatives
- spoke with five staff and the management team
- observed practice and daily life
- reviewed documents

Key messages

- Staff were familiar with people's needs and preferences.
- People were respected and valued.
- People enjoyed a range of meaningful activities.
- People receiving care and support told us they were very happy with the service.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	5 - Very Good
How good is our leadership?	3 - Adequate

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

5 - Very Good

We found a number of important strengths in aspects of the care provided and how these supported positive outcomes for people. There were few areas for improvement, therefore we evaluated this key question as very good.

People benefited from positive relationships established at the day centre. People benefited from a dedicated and committed staff team, and interactions were genuinely warm and caring. This meant people were comfortable in their relationships with staff and could request support. Staff were familiar with peoples' preferences and attentive to their needs. It was clear that people felt safe and supported within the service. One person said, "I couldn't ask for more". This confirmed to us that the staff team were caring and understood how to meet people's needs.

People who lived at Kalisgarth could take part in the day care club. This provided opportunities to meet up with neighbours and those attending for the day. They took part in the activities if they wished.

People had opportunities to participate in a range of meaningful activities. We observed activities including arts, games, outings, attending music events, use of a three wheeled rickshaw, and opportunities to meet with others. People told us they enjoyed attending the service and benefitted from meeting with friends. Comments included: "I can meet my friends and do what we want".

During the inspection people were having an outing using the service minibus.

The service had strong connections to the community which benefitted the people using Kalisgarth, and the wider community. Creative groups met there on a regular basis for art sessions. There was intergenerational activity, with local school children coming to spend time with the people who used the services. This was very much enjoyed by all. This helped people feel included and valued within their community.

People's health should benefit from their support. Personal plans were person centred and gave detailed descriptions of the support people required. Where appropriate risk assessments and risk reduction plans were implemented. This promoted peoples' health and wellbeing. However, some care plans we sampled contained out of date, historical information and were disorganised. The management team agreed that care plans could be better organised, that historical information could be archived, and key, current information made more accessible.

How good is our leadership?

3 - Adequate

There were some strengths in this key area, which just outweighed weaknesses. While the strengths may still have a positive impact key areas of performance needed to improve; therefore, we evaluated this key question as adequate.

Quality assurance systems had been introduced by a senior manager, which the service was trying to follow. There had also been changes in senior management due to long term sickness and retirement. We heard these changes resulted in less communication with senior management.

Care staff were following an audit schedule regarding care plans. Support plans were checked regularly and reviewed which ensured they were up to date.

Staff development supports improving outcomes for people. There were gaps in staff training in key areas, such as adult protection and dementia care. Improved oversight of staff training and development will help ensure people have the skills and knowledge required of their role. Staff described having to undertake required training either while on shift, or in their own time. Some staff supervisions had been completed, however staff told us this did not happen regularly, that they did not feel sufficiently supported. We have made an area for improvement in relation to staff training. See area for improvement.

Quality assurance should inform positive change. The service improvement plan should be updated to reflect the areas where improvement was needed, the timeframe and individuals responsible for actioning and following up. The service improvement plan should include feedback from staff, service users and relevant stakeholders. We have made an area for improvement in relation to quality assurance.

Areas for improvement

1. In order to ensure that people have confidence in the staff supporting them, the provider should ensure staff access training appropriate to their role, and apply their training in practice. This should include, but is not limited to, training in adult protection and dementia care.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

The provider should fully embed quality assurance processes across the operational arrangements of the service and use these to monitor, measure and improve the quality of care and support and outcomes of the people using the service.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that:

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19) and 'I use a service and organisation that are well led and managed' (HSCS 4.23).

This area for improvement was made on 10 October 2019.

Action taken since then

Limited quality assurance systems had been introduced by a senior manager, which the service was trying to follow. There had also been changes in senior management due to long term sickness and retirement. We

heard these changes resulted in less communication with senior management. Care staff were following an audit schedule regarding care plans, however this area for improvement had not been met.

Complaints

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

Detailed evaluations

How well do we support people's wellbeing?	5 - Very Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our leadership?	3 - Adequate
2.2 Quality assurance and improvement is led well	3 - Adequate

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