

Quality Outcomes Report 2015



North Tyneside Council

ALBANY HOUSE
OCTOBER 2015



North Tyneside Council

Name of Service:	Albany House
Date of Visit:	12th October 2015
Manager:	Anne Elkin
Person in Charge on day of visit:	Anne Elkin
Contracts Team Officers:	Karina Williamson & Wendy Gray

Not Met	Poor evidence of outcome being met
Partially Met	Good evidence of outcome being met /majority of evidence is in place but not all
Fully Met	All evidence is in place demonstrating the outcome is fully met

SUMMARY;

Albany House is a residential service for people with a diagnosed mental health need. The service can accommodate 10 service users. They currently have 4 vacancies. There was a large lounge, a large dining area, kitchen, small rear yard and 10 bedrooms over 3 floors. There was an area in the dining room for the service users to make themselves a hot drink. The service is in the heart of Whitley Bay therefore the service users are able to access the local amenities. Two of the service users have adopted a cat which has made himself at home.

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
1. People benefit from Personalised Care	1.1 Effective assessment procedures ensure that placements are appropriate and well planned	This outcome was fully met. The current North Tyneside funded service users were historical placements therefore we were unable to evidence the pre assessment documents however we did see blank document.	Fully met	2
	1.2 Effective care planning and review processes ensure people receive excellent, individualised care	Overall this outcome was met. Care plans were reviewed as a whole on a annual basis. No changes had been made to any of the plans. Reviews had been carried out on an annual basis however these were very brief . We were unable to evidence a process in place in the application and review of the care plan. This should indicate how they review the care plan, what changes are made and how these are adopted in practice. The recovery star document was completed for all service users however no future goal planning was evident.	Fully met	2
	1.3 Positive risk taking ensures people are encouraged to maintain independence	Overall this outcome was met. The review process should incorporate a discussion on the current risks assessments in place with the service user.	Fully met	2
			Score	6

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
2. People are supported by excellent staff	2.1 Comprehensive training procedures ensure staff have access to up to date knowledge and skills that is appropriate to the needs of the clients receiving the service.	Overall this outcome was met. Some staff required training refreshers in Safeguarding and Fire Training . All training was carried out every three years, however we would expect Moving and Handling, Safeguarding and Infection Control refreshers to be carried out annually. There were some gaps in the specialist training appropriate to this service that all staff should complete (Mental Health, Challenging Behaviour and Aggression in the Workplace) The training matrix and individual training plans were very clear and informative. All of the support staff had their competency assessed against The National Safeguarding Competence however the management need to complete theirs.	Fully met	2
	2.2 Staff are supported to undertake their duties	Overall this outcome was met. Staff meetings were held jointly with Falmouth House staff. Staff spoken with during the visit expressed they were supported in their role by the management. Supervisions are regular however every supervision should have an opportunity for staff to discuss their personal agenda.	Fully met	2
	2.3 Positive Staff Morale ensures people receive dignified care from a stable and productive staff team	This outcome was fully met. The feedback from the service users we spoke to during the course of our visit was very positive.	Fully met	2
			Score	6
ent systems ensure an excellent quality of service provision	3.1 Effective quality assurance procedures ensure the manager has a clear overview of service performance	Overall this outcome was met. There was no evidence to suggest the care plans are audited. A process should be implemented to demonstrate there is a management review and audit of the service. Appraisals and supervisions for the management had lapsed.	Fully met	2
	3.2 Effective Business Continuity procedures ensure the service can continue to care for people during crisis situations	Overall this outcome was met. It would be good practice to discuss the Business Continuity Plan with staff periodically as the last discussion had been in 2013. There had been a recent flood where staff followed the guidance, with residents having to be relocated in the sister service.	Fully met	2
	3.3 Effective recruitment procedures ensure the right staff are employed and people are protected from harm	This outcome was fully met. It would be considered good practice to have a rolling programme to renew the DBS checks.	Fully met	2
	3.4 Effective staff management ensures the right numbers of staff are available at the right time and have the right skills, knowledge, experience and competencies to carry out these duties.	This outcome was fully met.	Fully met	2

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
3. Management	3.5 Robust financial procedures ensure people retain as much financial independence as possible and are protected from financial abuse	Overall this outcome was met. One service user requires support with finances however receipts had not been obtained until this week. It is recommended that inventories of electrical equipment are updated annually, or as and when a change occurs.	Fully met	2
			Score	10
4. People benefit from a transparent, consistent and equitable service through effective policies and procedures	4.1 Effective Health and Safety procedures ensure people are cared for in a safe environment	This outcome was partially met. It is recommended that the Health and Safety Policy is signed and dated by a senior member of staff. Regular maintenance checks were carried out however there was no record of what had been checked. It was recommended that this document could be adapted to create a Health and Safety Audit. The Deputy Manager proceeded to work on this immediately during the visit. Fire Safety and Maintenance were regular topics within the staff meetings. It was advised that Health and Safety be a regular agenda item which would encompass both of these topics as well as other Health and Safety items.	Partially met	1
	4.2 Equal Opportunities procedures promote equal access to services and protect people from discrimination	This outcome was fully met. It was good to see that exit interviews were offered and completed.	Fully met	2
	4.3 Proactive Complaints and Compliments procedures ensure services are reactive and responsive to people's needs	This outcome was fully met. The service users we spoke to during the course of the visit were aware of the complaints procedure and were very complimentary of the staff and the service.	Fully met	2
	4.4 Confidentiality and data protection procedures ensure that sensitive information is treated with respect	Overall this outcome was met. Both the social networking and mobile phone policy did not make reference to safeguarding however the Manager rectified this during the course of the visit. The service is currently registered under the Data Protection Act (no. Z2966523).	Fully met	2
			Score	7
5. People benefit from a transparent, consistent and equitable service through effective policies and procedures	5.1 People are able to engage in meaningful activity and occupation	This outcome was partially met. The care plans did not contain information relating to the service users hobbies and interests. Activities were sporadic however it was noted that some service users are difficult to engage. There was a regular Art Therapy session, Armchair fitness, pamper sessions and a film nights and visits to the Playhouse. Some of the service users set the tables and wash the dishes on occasion. Daily notes did not reflect the regular one to one conversations between staff and the service users.	Partially met	1
	5.2 People are encouraged and supported to maintain and develop relationships	This outcome was fully met.	Fully met	2

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
5. People experience dignity and respect	5.3 People are proactively involved in services	This outcome was fully met. The feedback from the service user questionnaire completed in August and September 2015 was very positive.	Fully met	2
	5.4 People experience Choice and Control in every part of their life	This outcome was fully met. During the course of the visit we spoke to several service users who verified they have choice and control in all aspects of their lives. There is an array of choice available for meals, the service users told us they can get up and retire to bed whenever they like, and go out whenever they choose.	Fully met	2
	5.5 Privacy is a valued part of everyday life	This outcome was fully met. Each service user has their own key to their room. This was documented in their file.	Fully met	2
	5.6 People experience a sense of belonging and being a valued part of the community	Overall this outcome was met. Whilst we acknowledge the client group can be difficult to engage, there was a limited amount of planned activities happening within the home and local community. However the service users do make use of the local amenities.	Fully met	2
	5.7 People have timely and appropriate access to information	This outcome was fully met. This is a small service where the majority of information is shared directly with the service users. There was evidence of information sharing and service users consultation within the service user meetings.	Fully met	2
			Score	13
6. People are protected from avoidable harm and are cared for in a safe environment	6.1 The Mental Capacity Act 2005 and Deprivation of Liberty procedures are effective and ensure people are treated with dignity and are protected from harm	This outcome was fully met. There was a policy in place in regards to restraint however this is not currently needed at the time of the visit. There were also DOL's forms available however they are not currently needed at the time of the visit.	Fully met	2
	6.2 Excellent safeguarding procedures ensure people are protected from harm	Overall this outcome was met. It was recommended that Safeguarding be a standard agenda item in both staff meetings and supervisions. Consideration to using a checking and vetted service for employing a person to carry out any work within the building was suggested during the visit. We also advised implementing a risk assessment for any work needed moving forward, to ensure the safety of the vulnerable service users.	Fully met	2
	6.3 Proactive falls prevention practices and procedures ensure that actions are taken to reduce the incidence and impact of falls	Overall this outcome was met. Currently all the North Tyneside funded service users have a falls risk assessment in place however all were considered low risk therefore no further action was needed. There was an Environmental Risk Assessment in place however we recommended access/egress, external areas and garden furniture are considered.	Fully met	2
	6.4 Maintaining a safe environment ensures people are protected from potential hazards	Overall this outcome was met.	Fully met	2
	6.5 Appropriate and safe equipment ensures people receive safe and dignified care	This outcome was not applicable for the North Tyneside funded service users at the time of the visit.	Not applicable	Not applicable

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
			Score	8
7. People experience improved health and well-being	7.1 People's nutritional needs are comprehensively met and dining is a positive experience for all	This outcome was fully met. The service users decide on the daily menu. Food and menu choices are discussed at every service user meeting. There are often several different meals each evening. Healthy options are encouraged by staff however often declined. We spoke with many service users during the course of our visit and the feedback in regards to the food was very positive. The proprietor often funds a takeaway or restaurant meal for special occasions for all of the service users.	Fully met	2
	7.2 Effective Health and Hygiene practices minimise the risk of cross infection	Overall this outcome was met. Each service user has their own coloured towels, a list of which is on the laundry wall. Cleaning schedules were in place and signed by staff. However we recommended they are signed off by the management.	Fully met	2
	7.3 Robust medication procedures ensure people receive the right medication at the right time to protect their health	Overall this outcome was met. The medication policy incorporated a procedure for medication errors however it did not direct staff to make a safeguarding alert. The Manager updated the policy to reflect this during the course of our visit.	Fully met	2
			Score	6

Total Scored	56
Maximum Score	58
Percentage scored	97%