



# Inspection report

## Hutton Park Care Home Care Home Service Adults

60 Greenock Road  
Largs  
KA30 8PD

**Inspected by:** Caroline Crowe  
**(Care Commission officer)**

**Type of inspection:** Unannounced

**Inspection completed on:** 13 December 2010

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**Service provided by:**  
Hutton Park Limited

**Service provider number:**  
SP2003000231

**Care service number:**  
CS2008185283

**Contact details for the Care Commission officer who inspected this service:**

Caroline Crowe  
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## Easy read summary of this inspection report


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There is a six point grading scale. Each of the Quality Themes we inspected, is graded using the following scale:

We can choose from six grades:



### We gave the service these grades

Quality of Care and Support		Good
Quality of Environment		N/A
Quality of Staffing		N/A
Quality of Management and Leadership		N/A

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

Grades for this care service may change after this inspection due to other regulatory activity; for example, if we have to take enforcement action to improve the service, or if we investigate and agree with a complaint someone makes about the service.

### What the service does well

We found the service had a warm, friendly and homely environment with good quality accommodation.

When people who use the service, their relatives or staff suggested ideas to improve the service we found that managers acted on this.

There were good links with external professionals including doctors, district

nurses and social workers. This meant people got help from these individuals when they needed it.

Staff were aware of the individual needs and preferences of people using the service and were good at meeting those needs. They provided a good range of activities to meet the needs of individuals living in the home. We found the staff on the whole were well trained.

We found the staff to be respectful and caring in their approach to the people living in the home. The manager and providers were readily available to them and their families. People using the service and their relatives rated the staff, manager and providers highly.

### **What the service could do better**

Some of the paperwork in the service could be better this included:

- the care planning system;
- risk assessments and records of restraint;
- falls audits.

### **What the service has done since the last inspection**

Since the last inspection the service had experienced a sad loss to the external management team. This had not affected the day to day running of the service nor the future plans for the service. However, it had impacted on the timeframes for the manager and directors to address all the recommendations and requirements made at the last inspection.

The directors and manager had however:

- ensured the housekeeping staff had training on best practice and had introduced new procedures;
- arranged further training for the cook within the service;
- developed a system to collect and record all the views and suggestions put forward from people using the service and their relatives;
- held a meeting with relatives to organise a 'relative's forum.'

## **Conclusion**

Hutton Park provides a homely, friendly and welcoming environment. People living there made very positive comments about the quality of the service they received. Some of the paperwork and audits could be better. However, we found the staff were committed to providing person centred care and were supported by a strong management team.

## **Who did this inspection**

### **Lead Care Commission Officer**

Caroline Crowe

### **Other Care Commission Officers**

### **Lay Assessor**

**Please read all of this report so that you can understand the full findings of this inspection.**

## About the Care Commission

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We were set up in April 2002 to regulate and improve care services in Scotland.

Regulation involves:

- registering new services
- inspecting services
- investigating complaints
- taking enforcement action, when necessary, to improve care services.

We regulate around 15,000 services each year. Many are childminders, children's daycare services such as nurseries, and care home services. We regulate many other kinds of services, ranging from nurse agencies to independent healthcare such as hospices and private hospitals.

We regulate services for the very young right through to those for the very old. Our work can, therefore, affect the lives of most people in Scotland.

All our work is about improving the quality of care services.

We produce thousands of inspection reports every year; all are published on our website: [www.carecommission.com](http://www.carecommission.com). Reports include any complaints we investigate and improvements that we ask services to make.

The "Care services" area of our website also:

- allows you to search for information, such as reports, about the services we regulate
- has information for the people and organisations who provide care services
- has guidance on looking for and using care services in Scotland.

You can also get in touch with us if you would like more detailed information.

## About the National Care Standards

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The National Care Standards (NCS) set out the standards that people who use care services in Scotland should expect. The aim is to make sure that you receive the same high quality of service no matter where you live.

Different types of service have different National Care Standards. When we inspect a care service we take into account the National Care Standards that the service should provide.

The Scottish Government publishes copies of the National Care Standards online at: [www.scotland.gov.uk](http://www.scotland.gov.uk)

You can get printed copies free from:

Booksource  
50 Cambuslang Road  
Cambuslang Investment Park  
Glasgow  
G32 8NB  
Tel: 0845 370 0067  
Fax: 0845 370 0068  
Email: [scottishgovernment@booksource.net](mailto:scottishgovernment@booksource.net)

## What is inspection?

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Our inspectors, known as Care Commission Officers (CCOs), check care services regularly to make sure that they are meeting the needs of the people in their care.

One of the ways we check on services is to carry out inspections. We may turn up without telling the service's staff in advance. This is so we can see how good the care is on a normal day. We inspect some types of services more often than others.

When we inspect a service, typically we:

- talk to people who use the service, their carers and families, staff and managers
- talk to individuals and groups
- have a good look around and check what quality of care is being provided
- look at the activities happening on the day
- examine things like records and files, if we need to
- find out if people get choices, such as food, choosing a key worker and controlling their own spending money.

We also use lay assessors during some inspections. These are volunteers who have used care services or have helped to care for someone who has used care services.

We write out an inspection report after gathering the information. The report describes how things are and whether anything needs to change.

Our work must reflect the following laws and guidelines:

- the Regulation of Care (Scotland) Act 2001
- regulations made under this Act
- the National Care Standards, which set out standards of care that people should be able to expect to receive from a care service.

This means that when we register or inspect a service we make sure it meets the requirements of the 2001 Act. We also take into account the National Care Standards that apply to it.

If we find a service is not meeting these standards, the 2001 Act gives us powers that require the service to improve.

## **Recommendations, requirements and complaints**

If we are concerned about some aspect of a service, or think it could do more to improve its service, we may make a requirement or recommendation.

- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement.
- A requirement is a statement which sets out what is required of a care service to comply with the Act and Regulations or Orders made under the Act, or a condition of registration. Where there are breaches of the Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Commission.

Complaints: We have a complaints procedure for dealing with any complaint about a registered care service (or about us). Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

We investigate all complaints. Depending on how complex it is, a complaint may be:

- upheld - where we agree there is a problem to be resolved
- not upheld - where we don't find a problem
- partially upheld - where we agree with some elements of the complaint but not all of them.

## How we decided what to inspect

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### **Why we have different levels of inspection**

We target our inspections. This means we spend less time with services we are satisfied are working hard to provide consistently high standards of care. We call these low-intensity inspections. Services where there is more concern receive more intense inspections. We call these medium or high intensity inspections.

### **How we decide the level of inspection**

When planning an inspection, our inspectors, or Care Commission Officers (CCOs) carefully assess how intensively each service needs to be inspected. They do this by considering issues such as:

- complaints
- changes to how the service provides care
- any notifications the service has given us, such as the absence of a manager
- what action the service has taken in response to requirements we have made.

The CCO will also consider how the service responded to situations and issues: for example how it deals with complaints, or notifies us about incidents such as the death of someone using the service.

Our inspections take account of:

- areas of care that we are particularly interested in (these are called Inspection Focus Areas)
- the National Care Standards that the service should be providing
- recommendations and requirements that we made in earlier inspections
- any complaints and other regulatory activity, such as enforcement actions we have taken to improve the service.

# What is grading?

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We grade each service under Quality Themes which for most services are:

- **Quality of Care and Support:** how the service meets the needs of each individual in its care
- **Quality of Environment:** the environment within the service (for example, is the service clean, is it set out well, is it easy to access by people who use wheelchairs?);
- **Quality of Staffing:** the quality of the care staff, including their qualifications and training
- **Quality of Management and Leadership:** how the service is managed and how it develops to meet the needs of the people it cares for
- **Quality of Information:** this is how the service looks after information and manages record keeping safely.

Each of the Quality Themes has a number of Quality Statements in it, which we grade.

We grade each heading as follows:

<b>6</b>	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>
excellent	very good	good	adequate	weak	unsatisfactory

We do not give one overall grade.

## How grading works.

Services assess themselves using guidance that we given them. Our inspectors take this into account when they inspect and grade the service. We have the final say on grading.

The Quality Themes for this service type are explained in section 2 The Inspection.

## About the service we inspected

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Hutton Park is a privately owned 37 bedded care home for older people situated within the North Ayrshire town of Largs. Six of these 37 places can be used for respite.

The home is a large grand house situated on Largs shorefront with uninterrupted views. The accommodation is on three floors. All bedrooms are single occupancy with en-suite facilities.

There is a lounge on each floor and in addition the ground floor has a dining room. The home has good disabled access. There is a lift.

The service aims and objectives state:

'Each person has basic rights and responsibilities both as a citizen and as an individual. All service users in Hutton Park Care Home have a right to :- Respect, Independence, Choice, Privacy, Involvement, Participation and Representation' .

The home has been registered with the Care Commission since January 2010.

Based on the findings of this inspection this service has been awarded the following grades:

<b>Quality of Care and Support</b>	<b>4 - Good</b>
<b>Quality of Environment</b>	<b>N/A</b>
<b>Quality of Staffing</b>	<b>N/A</b>
<b>Quality of Management and Leadership</b>	<b>N/A</b>

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

Grades for this care service may change after this inspection due to other regulatory activity; for example, if we have to take enforcement action to improve the service, or if we investigate and agree with a complaint someone makes about the service.

You can use the "Care services" area of our website ([www.carecommission.com](http://www.carecommission.com)) to find the most up-to-date grades for this service.

## How we inspected this service

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### **What level of inspection did we make this service**

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

### **What activities did we undertake during the inspection**

From October 2010 the Care Commission has temporarily introduced an additional, less intense inspection approach for services which have previously reached a good level of performance. This service qualified for this reduced inspection approach and was therefore inspected only against one quality theme at this inspection.

We wrote this report after an unannounced inspection that took place between 10:00 am and 2:00 pm on 13 December 2010.

In this inspection we gathered evidence from various sources including records and other documents including:

- observing how staff work
- examining equipment and the environment
- sample of three personal plans of people using the service
- accident and incident records
- staff rotas
- registration certificate
- staffing schedule
- staff training plan
- minutes of staff meetings
- minutes of meetings with people using the service
- Discussions with various people including:
  - provider
  - manager
  - three members of care staff
  - six people using the service

### **Inspection Focus Areas (IFAs)**

Each year we identify an area, or areas, we want to focus on during our inspections. We still inspect all the normal areas of a care service; these are extra checks we make for a specific reason.

For 2010/11 we will focus on:

- Quality assurance for care at home and combined care at home and housing support services.

You can find out more about these from our website [www.carecommission.com](http://www.carecommission.com).

### **Fire safety issues**

The Care Commission no longer reports on matters of fire safety as part of its regulatory function. Where significant fire safety issues become apparent, we will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Care service providers can find more information about their legal responsibilities in this area at: [www.infoscotland.com/firelaw](http://www.infoscotland.com/firelaw)

### **Has the service had to take any actions as a result of or since our last inspection?**

The service provider must ensure that all assessments and incidents of restraint are recorded and reviewed regularly. This is in order to comply with SSI 2002/114 Regulation 4 (1) (a) - Welfare of service users and 19 (3) (a) - Records. It also takes account of the Mental Welfare Commission guidance; 'Rights, Risks and Limits to Freedom'. Timescale: 12 weeks from receipt of this report.

### **Action taken on the Requirement**

The service was still within the timeframe to address this complaint and it remained outstanding.

### **The requirement is:**

Not Met

The service provider must ensure that the head cook within the service receives the relevant standard of training to manage the kitchen. This is in order to comply with SSI 2002/114 Regulation 13 (c) (i) (ii) - Staffing. Timescale: 12 weeks from receipt of this report

### **Action taken on the Requirement**

Training had been organised for the cook to attend in February 2011.

### **The requirement is:**

Not Met

The service provider must ensure that housekeeping procedures within the home comply with best practice standards in relation to infection control. This is in order to comply with SSI 2002/114 Regulation 4 (1) (d) - Welfare of users. Timescale: One week from date of inspection

#### **Action taken on the Requirement**

The provider had reviewed the housekeeping procedures and staff had been trained in best practice guidance which they now followed.

#### **The requirement is:**

Met

#### **Actions Taken on Recommendations Outstanding**

1. The service provider should complete the written training plan for staff to enable monitoring and planning of staff training. National Care Standards Care Homes for Older People, Standard 5.9: Management and Staffing.

**Action Taken:** The training plan was in the process of being completed at the time of inspection. We will follow this up at our next inspection

**Outcome:** Partially Met.

#### **The annual return**

We use annual returns (ARs) to:

- make sure we have up-to-date, accurate information about care services; and
- decide how we will inspect services.

By law every registered care service must send us an annual return and provide us with the information we have requested. The relevant law is the Regulation of Care (Scotland) Act 2001, Section 25(1). These forms must be returned to us between 6 January and 15 February.

#### **Annual Return Received**

No

#### **Comments on Self Assessment**

The service was not asked to update the self assessment prior to this unannounced inspection.

#### **Taking the views of people using the care service into account**

We spoke with six people out of the 31 people using the service. We also sat in the lounge area observing and chatting with a group of residents. Everyone we spoke with

was extremely happy with the service. We observed some very good interactions between staff and people using the service. There was a friendly and homely atmosphere that was welcoming.

Comments included:

'We have a nice home here. The staff are lovely and I feel quite lucky to be here.'

'I enjoy singing and chatting with my friends in here. I have lots of friends and am never bored.'

'Food is good. We have hot meals every day.'

'It's nice to see all the young children that come in. They are such a joy.'

'The views are the best in Ayrshire. Watch the sea all day.'

#### **Taking carers' views into account**

We met one relative during the inspection. They were happy with the service that was provided to their loved one.

# Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 4 - Good

## Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

### Service Strengths

This statement was last looked at in August 2010 and was graded 4 - good. We found that the service had maintained its performance for this statement and have continued to grade it 4 - good. We decided this after we examined documentation, spoke with staff and people using the service and a relative.

We found that the service had continued to involve people using the service and their relatives and carers and asked for their views in a variety of ways including:

- Monthly resident's meetings
- Questionnaires given out to people using the service or their relatives before reviews of care
- Regular one to one discussions between staff, people living at Hutton Park their relatives and friends
- Regular email contact with families and friends of residents

We sampled three personal plans and found them to have been regularly reviewed involving relevant people. On the day of inspection we observed staff having frequent discussions with individuals on how they wished to spend their day. We spoke to six out of the 31 people using the service and they all told us they were involved in the care and support they received. Their comments included:

'It's a nice friendly place here. We are lucky. You get to do your own thing and the staff care about you.'

'I like it fine here. I would rather be in my own wee place but I can't fault it here. They make sure you have all you need and are well looked after.'

'The girls are there if you need them. They are only willing to help and work very hard.'

Following a recommendation made at the last inspection the manager had developed a system for making sure that all action points from minutes of meetings and discussions were recorded. This meant there was less chance of any points being missed and it was

easy to see who was responsible for making the changes and how long it took to make them.

Since the last inspection the service had also held a meeting for relatives and families. One relative had expressed an interest in chairing and leading on a relative's forum. We will look at how this has progressed at our next inspection.

The manager had also installed 'skype' to the home's computer. This meant that residents could keep in touch via video link with relatives who lived far away. One relative told us that they found this extremely useful and important to both them and their loved one.

### **Areas for Improvement**

The manager had identified her own areas for development in the self assessment. Some of these were still to be put in place, namely:

- the production of a Newsletter as another way of keeping people informed of service improvements and developments
- providing training for staff on the new 'Participation Strategy'. This should provide further guidance for staff on the different ways people could get involved.

The service should continue to build on the tools and methods used to gain people's views, including those people with dementia.

### **Grade awarded for this statement**

4 - Good

### **Number of Requirements**

0

### **Number of Recommendations**

0

## **Statement 3**

We ensure that service user's health and wellbeing needs are met.

### **Service Strengths**

This statement was last looked at in August 2010 and was graded 4 - good. We found that the service had maintained its performance for this statement and have continued to grade it 4 - good. We decided this after we examined documentation, spoke with staff and people using the service and a relative.

We revisited evidence looked at during the last inspection including:

- Sample of three personal plans
- Links with professionals external to the service
- Individual Risk Assessments for people living at Hutton Park
- Training for domestic staff and housekeeping procedures

We found the service continued to have good health assessments in place for individuals. We also found they continued to have good links with other professionals including the doctors, nurses, dentists, social workers and podiatrists. This meant that residents could get support from these individuals if needed.

Since the last inspection the service had addressed a requirement in relation to the training and procedures for housekeeping staff. This meant that infection control procedures in the home followed best practice.

### **Areas for Improvement**

There was a requirement made at the last inspection in relation to risk assessments. We found that where decisions had been made about keeping people safe, the records did not meet legal requirements. The service was still within the timeframe for addressing this requirement and it remains outstanding (See Requirement 1 made under this statement).

The manager was developing a more robust audit for falls within the care home. We agreed that this would be a good idea as the home did go through periods where there was a relatively high incidence of falls. Examination of records and discussions around incidents would suggest these are being managed appropriately. However, a more in-depth analysis by the manager may highlight areas for further improvement or training for staff. We will look at this at our next inspection.

At the last inspection we found the focus on the care planning system was on medical needs. Social and emotional wellbeing needs were not well recorded in care plans. The manager was aware of this and was looking at developing a new care planning system (See Recommendation 1 made under this statement).

**Grade awarded for this statement**

4 - Good

**Number of Requirements**

1

**Number of Recommendations**

1

**Requirements**

1.

The service provider must ensure that all assessments and incidents of restraint are recorded and reviewed regularly. This is in order to comply with SSI 2002/114 Regulation 4 (1) (a) - Welfare of service users and 19 (3) (a) - Records. It also takes account of the Mental Welfare Commission guidance; 'Rights, Risks and Limits to Freedom'.

Timescale: 4 weeks from receipt of this report.

**Recommendations**

1.

The service provider should review and develop the care planning system to ensure it covers all aspects of the health and wellbeing needs of individuals. Especially the areas relating to mental and social wellbeing.  
National Care Standards Care Homes for Older People, Standard 6.1: Support arrangements.

## Other Information

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### **Complaints**

No complaints have been upheld, or partially upheld, since the last inspection

### **Enforcements**

We have taken no enforcement action against this care service since the last inspection

### **Additional Information**

#### **Action Plan**

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in the Care Commission re-grading the Quality Statement within the Management and Leadership Theme as unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).

## Summary of Grades

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<b>Quality of Care and Support - 4 - Good</b>	
Statement 1	4 - Good
Statement 3	4 - Good
<b>Quality of Environment - Not Assessed</b>	
<b>Quality of Staffing - Not Assessed</b>	
<b>Quality of Management and Leadership - Not Assessed</b>	

## Inspection and Grading History

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<b>Date</b>	<b>Type</b>	<b>Gradings</b>								
19 Aug 2010	Announced	<table> <tr> <td>Care and support</td> <td>4 - Good</td> </tr> <tr> <td>Environment</td> <td>4 - Good</td> </tr> <tr> <td>Staffing</td> <td>4 - Good</td> </tr> <tr> <td>Management and Leadership</td> <td>4 - Good</td> </tr> </table>	Care and support	4 - Good	Environment	4 - Good	Staffing	4 - Good	Management and Leadership	4 - Good
Care and support	4 - Good									
Environment	4 - Good									
Staffing	4 - Good									
Management and Leadership	4 - Good									

## Terms we use in our report and what they mean

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**Action Plan** - When we inspect a service, or investigate a complaint and the inspection report highlights an area for improvement; either through recommendations or requirements, the action plan sets out the actions the service will take in response.

**Best practice statements/guidelines** - This describes practices that have been shown to work best and to be achievable in specific areas of care. They are intended to guide practice and promote a consistent and cohesive approach to care.

**Care Service** - A service that provides care and is registered with us.

**Complaints** - We have a complaints procedure for dealing with any complaint about a registered care service or about us. Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

We investigate all complaints which can have more than one outcome. Depending on how complex the complaint is, the outcomes can be:

- upheld - where we agree there is a problem to be resolved
- not upheld - where we don't find a problem
- partially upheld - where we agree with some elements of the complaint but not all of them.

**Enforcement** - To protect people who use care services, the Regulation of Care (Scotland) Act 2001 gives the Care Commission powers to enforce the law. This means we can vary or impose new conditions of registration, which may restrict how a service operates. We can also serve an improvement notice on a service provider to make them improve their service within a set timescale. If they do not make these improvements we could issue a cancellation notice and cancel their registration.

**Disclosure Scotland-** Disclosure Scotland provides an accurate and responsive disclosure service to enhance security, public safety and protect the vulnerable in society. There are three types or levels of disclosure (i.e. criminal record check) available from Disclosure Scotland; basic, standard and enhanced. An enhanced check is required for people whose work regularly involves caring for, training, supervising or being in sole charge of children or adults at risk; or to register for child minding, day care and to act as foster parents or carers.

**Participation** - This describes processes that allow individuals and groups to develop and agree programmes, policy and procedures.

**Personal Plan** - This is a plan of how support and care will be provided. The plan is agreed between the person using the service (or their representative, or both of them) and the service provider. It is sometimes called a care plan mostly by local authorities or health boards when they commission care for people.

## How you can use this report

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Our inspection reports give care services detailed information about what they are doing well and not so well. We want them to use our reports to improve the services they provide if they need to.

Care services should share our inspection reports with the people who use their service, their families and carers. They can do this in many ways, for example by discussing with them what they plan to do next or by making sure our report is easily available.

## People who use care services, their relatives and carers

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We encourage you to read this report and hope that you find the information helpful when making a decision on whether or not to use the care service we have inspected. If you, or a family member or friend, are already using a care service, it is important that you know we have inspected that service and what we found. You may find it helpful to read previous inspection reports about his service.

## The Care Commission

We use the information we gather from all our inspections to report to Scottish Ministers on how well Scotland's care services are performing. This information helps us to influence important changes they may make about how care services are provided.

## Reader Information

This inspection report is published by the Care Commission. It is for use by the general public. You can get more copies of this report and others by downloading it from our website [www.carecommission.com](http://www.carecommission.com) or by telephoning 0845 603 0890.

## Translations and alternative formats

This publication is available in other formats and other languages on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

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**Web: [www.carecommission.com](http://www.carecommission.com)**

Improving care in Scotland