



Title Inspection of Cherry Road Resource Centre

Report by: Nick Clater, Head of Adult Services, Health and Social Care

Report for Decision

1 Recommendations

Performance Review and Scrutiny is requested to

1. To note the outcome of the inspection of Cherry Road Resource Centre by the Care Inspectorate.

2 Purpose of Report/Executive Summary

This report advises of

1. The outcome of the inspection of Cherry Road Resource Centre
2. The actions that are being progressed as a result of the centre

Date: 10/5/23
Report Contact: Nick Clater

3 Background

3.1 Inspection

Cherry Road Resource Centre is a Day Service, operated by Midlothian Council that provides support for adults with Learning Disabilities. It caters for individuals with complex learning disabilities and physical disabilities in addition to their Learning Disability.

In March 2023 the Care Inspectorate conducted and announced a short notice inspection of Cherry Road Resource Centre. A copy of the report is contained in Appendix B of this report.

3.2 Grades

Following the inspection the Care Inspectorate awarded the following grades.

- How well do we support people's wellbeing? 4 – Good
- How good is our leadership? 4 – Good
- How good is our setting? 3 – Adequate
- How well is our care and support planned? 5 – Very Good

The Inspection report noted strengths in the following areas:

- Positive outcomes were being experienced by people using the service.
- There was a high level of staff consistency, resulting in meaningful working relationships being established.
- People's care plans were of a very good quality and person centred to their individual needs.

The table below lists previous grades for Cherry Road Resource Centre. It should be noted that these grades are assessed against a different evaluation framework.

Date	Care and Support	Environment	Staffing	Management and Leadership
01 Aug 2018	6 - Excellent (I)	Not Assessed	Not Assessed	5 - Very Good (I)
16 Jul 2015	4 - Good (I)	4 - Good (I)	5 - Very Good (I)	5 - Very Good (I)
22 Aug 2012	4 - Good (I)	5 - Very Good (I)	4 - Good (I)	4 - Good (I)
03 Aug 2011	3 - Adequate (I)	4 - Good (I)	Not Assessed	Not Assessed
03 Sep 2010	4 - Good (I)	3 - Adequate (I)	Not Assessed	Not Assessed
12 Oct 2009	3 - Adequate (I)	3 - Adequate (I)	4 - Good (I)	4 - Good (I)

Date	Care and Support	Environment	Staffing	Management and Leadership
04 Dec 2008	4 - Good (I)	3 - Adequate (I)	3 - Adequate (I)	4 - Good (I)

3.2 Areas for Improvement

The report identifies 2 areas for improvement and makes one requirement in relation to the Environment.

The first area for improvement was in relation to inconsistent use of Personal Protective Equipment PPE in relation to infection control including COVID-19.

The second area for improvement was in relation to the concerns the Care Inspectorate had in relation to mealtime experience. It was however recognised that this observation was made on an occasions where typical mealtime dynamics were not observed due to the programme of activities on the day of the inspection.

A requirement was made in relation to the environment of the centre with a requirement to develop an improvement plan for the centre including improvements in the following areas:

- the flooring of bathrooms and communal areas;
- door frames to support cleaning and provide a pleasant environment of people;
- ensuring surfaces, (including kitchen worktops), are easy to wipe clean using appropriate cleaning products;
- the redecoration of areas to improve the appearance and provide high quality facilities; and
- ongoing upkeep of the premises.

3.3 Actions Being Progressed

The following actions are being progressed to address the areas for improvement identified in the inspection report:

- Subsequent to the inspection staff training has been completed in relation to use of PPE. In addition since the report was published further guidance has been released in relation to the use of PPE which will negate its use in all except a small number of specific circumstances

- Arrangements for mealtimes have been reviewed in consultation with service users and their families. Adjustments have been made in relation to individuals where these changes were compatible to their support needs.

In relation to the requirements to improve the environment the following actions have been progressed:

- Action plan for the care Inspector has been completed highlighting the list full list of repairs and upgrades required as requested. The priority areas identified and an update on action taken and any works currently completed.
- E forms action plan completed for discussion with the inspector
- Liaising with maintenance managers regarding organising the priority floor repairs in the toilet/changing spaces areas

4 Report Implications (Resource, Digital and Risk)

4.1 Resource

There will be some resource implications in relation the environment improvements.

4.2 Digital

There are no digital implications related to this paper.

4.3 Risk

There is a reputational risk to Midlothian Health and Social Care Partnership in relation the standard of care and support it is providing being affected by the quality of the environment although it should be stressed that the quality of care was rated Very Good.

4.4 Ensuring Equalities (if required a separate IIA must be completed)

The provision of day services by Cherry Road Resource Centre addresses inequalities experienced by people with Learning Disabilities.

4.4 Additional Report Implications

There are no additional report implications at present.

Appendices

Appendix A – Additional Report Implications

Appendix B – Cherry Road Inspection Report

APPENDIX A – Report Implications

A.1 Key Priorities within the Single Midlothian Plan

Health and Social Care - Increase number of people who report feeling connected to others.

A.2 Key Drivers for Change

Key drivers addressed in this report:

- Holistic Working
- Hub and Spoke
- Modern
- Sustainable
- Transformational
- Preventative
- Asset-based
- Continuous Improvement
- One size fits one
- None of the above

A.3 Key Delivery Streams

Key delivery streams addressed in this report:

- One Council Working with you, for you
- Preventative and Sustainable
- Efficient and Modern
- Innovative and Ambitious
- None of the above

A.4 Delivering Best Value

The report does not directly impact on Delivering Best Value

A.5 Involving Communities and Other Stakeholders

Subsequent to the inspection there has been consultation with users of the service and their families in relation to the arrangements for mealtimes.

A.6 Impact on Performance and Outcomes

This report highlight a number of actions that will improve performance and the outcomes of people using the service.

A.7 Adopting a Preventative Approach

Not applicable

A.8 Supporting Sustainable Development

Not applicable