

# Abbeyfield Stewartry Society Ltd

## Housing Support Service

Bothwell House  
72 St Andrews Street  
Castle Douglas  
DG7 1EN

Telephone: 01556 502271

**Type of inspection:**

Unannounced

**Completed on:**

5 April 2019

**Service provided by:**

Abbeyfield Stewartry Society Ltd

**Service provider number:**

SP2003002528

**Service no:**

CS2003051796

## About the service

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at [www.careinspectorate.com](http://www.careinspectorate.com)

This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

Abbeyfield Stewartry Society Ltd is a not for profit organisation, administered by a voluntary executive committee. It provides a combined housing support and care at home service to older people over the age of 60, living in two houses located in the rural towns of Kirkcudbright and Castle Douglas in Dumfries and Galloway, offering residents help and support to maintain their tenancies and attend to their personal and healthcare needs.

People have facilities within their individual accommodation to prepare breakfast or light snacks if they wish. With the exception of breakfast, meals were prepared by the house assistants.

The communal areas are furnished to a high standard and the house assistants ensure a high standard of cleanliness throughout the buildings. Both houses have a staff member on duty seven days a week and a 'sleep in' member of staff during the night-time period.

An important part of the ethos of Abbeyfield services are the volunteers who come in and help support residents, amongst other things; to take part in activities, go places and attend appointments. The volunteers are referred to as 'friends,' within the service and are generally retired people from the local community.

Their aims and objectives are to 'provide good quality housing support with the highest standards of service delivery to all residents who require various levels of care to meet the individual needs of the residents. The society will also provide a care at home service to enhance the current housing support services.'

They continue to work from their core principles of: presence, choice, competence, participation, respect, individuality, flexibility, co-ordination, racial cultural and religious sensitivity, civil liberties, rights and risks.

During the inspection there was a total of 20 people receiving support from this service.

## What people told us

During the inspection we received feedback from 21 residents and relatives who all agreed they were happy with the quality of care and support provided within the service.

People were impressed with the consistent approachability, support and encouragement from the management of the service and the caring friendly and compassionate nature of the staff. Residents continued to feel valued members of their community as they were supported and encouraged to attend various external activities arranged by the volunteers/ friends with other residents, friends and relatives. They felt safe and secure overnight from the sleep over service provided.

We received the following comments:

"We are looked after very well staff are wonderful."

"Staff are interesting and interested."

"Staff are considerate and caring and my relative is reassured by having support overnight."

"Care is unbelievable I am perfectly happy here."

"Everything is well explained by Ann and we have plenty of information within the booklet."

"I am overwhelmed with kindness."

"The care here is everything we expected."

"We praise Ann for all her practical help and support and for making everything so simple."

"Staff are excellent and willing."

"I'm impressed by lively interactions between the friends and residents who really help to make this a friendly place with a more personal feel."

## Self assessment

The service had not been asked to complete a self-assessment in advance of the inspection. We discussed the development of their improvement plan and quality assurance paperwork and how these should demonstrate their priorities for developing and monitoring of the quality of the provision within the service.

## From this inspection we graded this service as:

Quality of care and support	5 - Very Good
Quality of staffing	not assessed
Quality of management and leadership	6 - Excellent

## Quality of care and support

### Findings from the inspection

The quality of care and support demonstrates some major strengths in supporting positive outcomes for people using this service.

Residents human rights were protected and promoted. They experienced a very high level of care and support with dignity and respect from staff, who believed in their potential and recognised they were experts in their own experiences needs and wishes, ensuring their needs were met to a high standard.

Residents were getting the most out of life because staff supporting them had a caring, fun and enabling attitude. People felt at ease, safe and comfortable in their own homes as they were greeted fondly by staff who had good working relationships. Care and support was consistent and stable because staff worked well together.

Some warm nurturing positive relationships were formed between residents and staff. Residents and relatives felt listened to, as their preferences and wishes were used to determine how they were supported.

Residents were empowered and enabled to be as independent as possible through gaining previous skills and abilities which had been lost through ill health or lack of support. This meant people were remaining as much in control of their lives as they could be. Relatives and legal guardians were included in this process. Personal care was carried out in a dignified way with privacy and personal preferences respected.

Residents were protected from harm by staff who had a clear understanding of their responsibilities and were highly sensitive, alert and responsive to any signs of changes and deterioration in individual's health and well being.

The service manager and care staff continued to maintain proactive approach towards changes in residents healthcare needs. They had formed exceptionally strong working relationships with various healthcare specialists to ensure resident's needs were being met to a very high standard.

Residents and relatives were helped and supported to address any concerns or complaints they had which were discussed with individuals, and were acted upon sensitively and positively without negative consequences. The service manager planned to review the complaints procedure regularly with residents to ensure they would always feel comfortable discussing any concerns directly with her and knew more about the Care Inspectorate and our complaints procedures.

Personal plans were person-centred setting out how their needs would be met considering their wishes and choices. Future needs were anticipated as part of this process as well as their previous life histories, skills and abilities. This helped service users maintain their interests in the way they liked.

However, they lacked some clarity around best practice guidance regarding various healthcare needs such as: skin care.

As a result of this, it was unclear how some of these needs were being met. Identified needs risks and restrictions were discussed with residents and relatives, but were not always updated to reflect changes in current needs and for things such as financial procedures. Area for improvement 1

Staff received training and best practice guidance to ensure they were administering medication safely and effectively. However, we found variations in information recorded with medication administration records and personal plans. We found some prescription creams out-of-date. Area for improvement 2

Residents and relatives were being supported to discuss significant changes in their lives such as death or dying as the service manager was sourcing local Anticipatory care planning best practice guidance.

Do Not Attempt Cardio Pulmonary Resuscitation (DNACPR) forms were in place for those people who did not wish to be resuscitated.

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 2

1. In order to ensure service users health and care needs continue to be met as part of the care planning process, the service manager should ensure that care plans are reviewed and updated to contain detailed information regarding personal finances and risk assessments, and reflecting best practice guidance to follow when supporting service users with various healthcare needs such as skin care.

Health and Social Care Standards, My support my life;

1: I experience high quality care and support that is right for me.

1.19: My care and support meets my needs and is right for me.

1.24 Any treatment or intervention that I experience is safe and effective.

4.11: I experience high quality care and support based on relevant evidence, guidance and best practice.

2. The service manager should ensure that best practice guidance is followed when administering, recording, and auditing service users medication which should be clearly identified within personal plans to include accurate information which allows staff to monitor residents medication and and the condition it has been prescribed for. This might include when a medicine is started, who prescribed it, what it is for, where it has to be applied (ointment, eye drops etc.), and for how long.

Health and Social Care Standards, My support my life;

1: I experience high quality care and support that is right for me.

1.19: My care and support meets my needs and is right for me.

1.24 Any treatment or intervention that I experience is safe and effective.

4.11: I experience high quality care and support based on relevant evidence, guidance and best practice.

**Grade:** 5 - very good

## Quality of staffing

This quality theme was not assessed.

## Quality of management and leadership

### Findings from the inspection

The management team demonstrated sector leading performance which supported experiences and outcomes for residents with outstanding high quality.

They demonstrated a consistent track record of innovative, effective practice with high quality performance across a wide range of activities from which others could learn, which we were confident could be sustained and maintained such as:

- Using feedback from residents relatives, commissioning, local council, social work and the wider community to consider create and provide services tailored around individual needs.
  - Recruitment of committee members from a wide range of professional backgrounds with different skills and knowledge and allocated various responsibilities in line with current strategy.
  - Future strategic plan identifying areas of growth within the service and the local community
- Residents and relatives benefited from a culture of continuous improvement and were encouraged and supported to be meaningfully involved in how the service developed through their participation policy which

included: regular meetings with the chairman of the board, annual questionnaires and informal discussions during 'chatterbox' meetings and various activities carried out with the friends committee.

Individual issues ideas and concerns were discussed and acted upon with the management team using learning from feedback to continuously improve service delivery for things such as: staff codes of conduct and performance, and purchase of various aids and adaptations to encourage independence and safety.

The management and committee members continued to maintain exceptionally strong links within the local church and community by providing meaningful community based activities both within and out with their homes.

Professional colleagues visiting the home were highly complementary of the service manager and staff team for their proactive approach towards changes in residents healthcare care needs.

They had formed exceptionally strong working relationships to ensure resident's needs were being met to a very high standard.

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 0

**Grade:** 6 - excellent

## What the service has done to meet any requirements we made at or since the last inspection

## Previous requirements

There are no outstanding requirements.

## What the service has done to meet any recommendations we made at or since the last inspection

### Previous recommendations

#### Recommendation 1

The manager should ensure review of the process of storing all residents' money in a general safe within the homes. Residents should be encouraged to hold their own valuables within their lockable private areas within their rooms unless their individual circumstances means that they are unable to do so. All money and valuables should be added to a personal inventory which is routinely checked and audited.

Personal plans were being updated to record individual preferences regarding the safe keeping of various financial documentation in line with individuals needs and wishes.

Health and Social Care Standards, My support My life;

3: I have confidence in the people who support and care for me.

3.14 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.

**This recommendation was made on 16 April 2018.**

#### Action taken on previous recommendation

Residents continued to be encouraged and supported to hold their own valuables and money wherever they wanted, with the option of safe keeping within the homes where safe areas were designated.

Individual recording sheets were now in place for all residents requesting money to be held on their behalf making it easy to define and access.

Routine audits and checks were taking place as extra safeguards.

This recommendation is: met.

#### Recommendation 2

The manager should ensure that all accidents and incidents are recorded investigated, reviewed and evaluated as part of the service quality assurance procedures.

Health and Social Care Standards, My support My life;

3: I have confidence in the people who support and care for my Wellbeing.

3.20 I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities.

**This recommendation was made on 16 April 2018.**

#### Action taken on previous recommendation

Accidents and incidents continued to be addressed, investigated and recorded as part of the care planning process.

These were routinely reviewed by the management team as part of their quality assurance procedures. The service manager was considering how accidents and incident records could be updated to include more detailed evaluations.

This recommendation is: met.

## Recommendation 3

The manager should ensure that all staff undergo various levels of dementia training appropriate to their role in accordance with the Promoting Excellence framework.

Health and Social Care Standards, My support My life;

4: I have confidence in the organisation providing my care and support Wellbeing.

4.27 I experience high quality care and support because people have the necessary information and resources.

**This recommendation was made on 16 April 2018.**

### Action taken on previous recommendation

The service manager had accessed dementia training in line with the Promoting Excellence framework. Care staff were working through various modules at the skilled level with group discussions allowing reflection and further learning and development. Once completed the service manager aimed to access the higher level for herself and senior house assistants which we will continue to review at the next inspection.

This recommendation is: met.

## Recommendation 4

The manager should ensure that PVG checks are taken three yearly in line with best practice.

Health and Social Care Standards, My support My life;

4: I have confidence in the organisation providing my care and support Wellbeing.

4.27 I experience high quality care and support because people have the necessary information and resources.

**This recommendation was made on 16 April 2018.**

### Action taken on previous recommendation

Staff continued to undergo the Protection of Vulnerable Groups (PVG) checks. This meant previous records were routinely reviewed in line with best practice to ensure they were competent and safe to work within the homes environment.

This recommendation is: met.

## Recommendation 5

The manager should ensure that policies and procedures include reference to relevant best practice and legislation. They should ensure staff are familiar with the local multi-disciplinary adult and child support and protection guidelines.

Health and Social Care Standards, My support, My life;

4: I have confidence in the organisation providing my care and support Wellbeing.

4.27 I experience high quality care and support because people have the necessary information and resources.

**This recommendation was made on 16 April 2018.**

### Action taken on previous recommendation

Policies and procedures continue to be routinely reviewed and updated including various best practice and legislation.



Staff were familiar with the local multi-disciplinary adult and child support and protection guidelines which were easily accessible.

Some policies could make further reference to r best practice and legislation which was being sourced via the Care Inspectorate hub.

This recommendation is: met.

### Recommendation 6

The provider should be clear how it will monitor the quality of the service and quality assurance audits should use the quality assurance policy to hold the management team accountable.

Health and Social Care Standards, My support My life;

4: I have confidence in the organisation providing my care and support Wellbeing.

4.27 I experience high quality care and support because people have the necessary information and resources.

**This recommendation was made on 9 March 2017.**

#### Action taken on previous recommendation

The quality assurance policy had been reviewed and updated. It included how the quality of service would be monitored through the continuous improvement of the quality and safety of its services, which will be assessed monitored and reviewed through various procedures on a continuous basis.

This process focused on outcomes for residents and their experiences of the care, treatment and support they received.

This recommendation is: met.

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## Enforcement

No enforcement action has been taken against this care service since the last inspection.

## Inspection and grading history

Date	Type	Gradings
16 Apr 2018	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership Not assessed
9 Mar 2017	Announced (short notice)	Care and support 5 - Very good Environment Not assessed Staffing Not assessed Management and leadership 5 - Very good
12 Mar 2015	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership 5 - Very good
17 Oct 2013	Announced (short notice)	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership 5 - Very good
27 Oct 2011	Unannounced	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership Not assessed
12 Jan 2009	Announced	Care and support 6 - Excellent Environment Not assessed Staffing 4 - Good Management and leadership 5 - Very good

## To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at [www.careinspectorate.com](http://www.careinspectorate.com)

## Contact us

Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

0345 600 9527

Find us on Facebook

Twitter: @careinspect

## Other languages and formats

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

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

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.