

## Fraserburgh Respite Robertson Road Care Home Service

Respite Bungalow  
Robertson Road  
Fraserburgh  
AB43 9BF

Telephone: 01346 512447

**Type of inspection:**

Unannounced

**Completed on:**

22 February 2019

**Service provided by:**

Aberdeenshire Council

**Service provider number:**

SP2003000029

**Service no:**

CS2003000307

## About the service

Fraserburgh Respite provides short breaks and a respite care service for a maximum of three adults or children with learning disabilities and mental health problems. The Robertson Road accommodation is a purpose-built bungalow, on the same site as the Robertson Road Resource Centre. Adults and children do not attend at the same time.

The respite service includes in its aims to "provide a home from home" and "to encourage development of self-help skills and enable service users to reach their maximum potential."

## What people told us

During the inspection we spoke with the relatives of people who used the service. They were happy with the service provided and made comments such as:

"I am confident they can meet (my relative's) needs, he enjoys going."

"I know he has a care plan, and I think it reflects his needs and how he needs to be supported"

"I can't think of anything that would make the service better for (my relative)."

"I am more than happy with the service, in fact I am liking to access more support hours for (my relative)."

"I would just phone the staff if I was worried about anything, I'm sure they'd sort it out!"

"My relative loves going, they are very able to meet his needs. We have a communication book that goes back and forwards and that's really helpful"

## Self assessment

We did not request a self assessment this year. We discussed and considered the service's own development plan as part of this inspection.

## From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of environment	not assessed
Quality of staffing	not assessed
Quality of management and leadership	3 - Adequate

## What the service does well

The service has three bedrooms for respite users, one of which is adapted for use by someone with a physical disability, as well as a communal lounge and kitchen area which is well used for a range of events and activities, and which gave people an opportunity to socialise. People we met who were using the service at the time of inspection appeared to have good relationships with the people who supported them.

Support plans and associated documents gave staff some information to help them to meet the needs of people they supported. Risk assessments were also in place identifying areas where there may be the potential for risk to the service user. Where appropriate, records also evidenced the involvement of associated services and professionals such as day services, speech and language therapy and Community Learning Disability Nurses, or information from family about the management of health issues.

Daily contact notes showed that appropriate records were kept about what people did during their respite stay, and we felt these showed that people were encouraged to access community resources, or to take part in activities that were offered or suggested to them and by them.

Training was primarily accessed through the local authority, although the service was able to access additional training from external providers as required. This included service user specific training.

The service had a range of audit processes in place to ensure a quality service, where the assistant manager completed a checklist on a regular basis which is monitored by the service manager. We could see that regular checks were made to ensure a safe environment. An overall Managers Action Plan covering 2019-21 was in place which we could see was outcome based and had an improvement focus.

## What the service could do better

At the last inspection a recommendation was made for the service to update support plans to provide more detail about the person's routine. As part of the inspection we sampled six support files, and we noted that there was a lack of consistency in both the format and the content of support plans. This may mean that relevant detail on the needs of people who use the service could be overlooked or unrecorded, and it made it difficult to carry out reviews appropriately. The manager was able to confirm that the quality of the format and content of support plans had been identified as not meeting the service's needs and was to be reviewed in detail. As we were confident that the quality of care had not been affected by the lack of consistency we decided to retain the recommendation about this made at the last inspection. Although we were confident that reviews took place at appropriate intervals we did not always see minutes of these within support files. This had also been picked up by the service's own audit process, and the manager confirmed that this was also an identified area for improvement. This recommendation therefore remains in place.

The manager confirmed that as part of a general review of the service, the quality assurance process was being strengthened to include outcome focussed processes, and the production of clear improvement actions. We felt the service would benefit from a clear development plan with SMART actions identified along with responsible persons and dates for completion. We made a recommendation about this.

## Requirements

Number of requirements: 0

## Recommendations

**Number of recommendations:** 2

1. The service should update the support plans to provide more detail of the person's routine and to ensure that information contained is consistent throughout. This is to ensure that a consistent level of support can be provided to the service users.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that "my needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected" (HSCS 1.23).

2. The service should ensure that the service users support is reviewed at least once in a six month period whether this is at the individual service or as part of a holistic review. This would help ensure that there was a consistent approach by all services.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that "I am fully involved in developing and reviewing my personal plan, which is always available to me" (HSCS 2.17).

## 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).

## 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 service should update the support plans to provide more detail of the person's routine and to ensure that information contained is consistent throughout. This is to ensure that a consistent level of support can be provided to the service users.

National Care Standards, Short Breaks and Respite Care Services: Standard 6 – Individual Agreement.

**This recommendation was made on 10 October 2017.**

#### Action taken on previous recommendation

We have commented on this in the body of the report and the recommendation remains in place.

#### Recommendation 2

The service should ensure that the service users support is reviewed at least once in a six month period whether this is at the individual service or as part of a holistic review. This would help ensure that there was a consistent approach by all services.

National Care Standards, Short Breaks and Respite Care Services: Standard 6 – Individual Agreement.

**This recommendation was made on 10 October 2017.**

#### Action taken on previous recommendation

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## Inspection and grading history

Date	Type	Gradings
12 Sep 2017	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing Not assessed Management and leadership Not assessed
29 Aug 2016	Unannounced	Care and support 4 - Good Environment Not assessed Staffing 5 - Very good Management and leadership Not assessed
2 Sep 2015	Unannounced	Care and support 5 - Very good Environment 5 - Very good Staffing 5 - Very good Management and leadership 5 - Very good
12 Sep 2014	Unannounced	Care and support 5 - Very good Environment 5 - Very good Staffing 4 - Good Management and leadership 5 - Very good
2 Sep 2013	Unannounced	Care and support 5 - Very good Environment 5 - Very good Staffing 4 - Good Management and leadership 5 - Very good
1 Feb 2013	Announced (short notice)	Care and support 4 - Good Environment 5 - Very good Staffing 4 - Good Management and leadership 4 - Good
14 Mar 2012	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership Not assessed

Date	Type	Gradings	
23 Nov 2010	Unannounced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
31 Aug 2010	Announced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	4 - Good
2 Mar 2010	Unannounced	Care and support	4 - Good
		Environment	5 - Very good
		Staffing	Not assessed
		Management and leadership	Not assessed
3 Sep 2009	Announced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
25 Mar 2009	Unannounced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	4 - Good
8 Sep 2008	Announced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good

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