

## Willowbank Bungalows 1,2&3 Care Home Service

Willowbank  
Glendaveny  
Peterhead  
AB42 3DY

Telephone: 01779 838 588

**Type of inspection:**  
Unannounced

**Completed on:**  
24 November 2021

**Service provided by:**  
Aberdeenshire Council

**Service provider number:**  
SP2003000029

**Service no:**  
CS2003015265

## About the service

The Willowbank Bungalows 1,2&3 care home provides accommodation, care and support for up to 12 adults with learning disabilities. The service is situated in large grounds in the Glenadaveny area on the outskirts of Peterhead. At the time of the inspection there were ten people living in the service.

The provider is Aberdeenshire Council, and the staff team comprises care staff, social care officers, assistant managers and the registered manager.

The service's aims include respecting privacy, maintaining dignity, promoting choice, safeguarding rights, promoting a needs-led service, providing a working environment that enables staff to support these aims and regularly evaluating the service provided.

This service has been registered since 2002.

This was a focused follow up inspection to assess the progress the service was making in meeting the one requirement and three areas for improvement made at our inspection on 11 August 2021.

This inspection was carried out by one inspector from the Care Inspectorate.

We evaluated the requirements and areas for improvement as being not fully met. We could see that progress has started to be made across a number of areas that had been identified at the last inspection. Further work is required, however, to fully embed the changes. The timescale for the requirement has therefore been extended to give the service more time to clearly identify when the required refurbishment will commence.

We observed warm interactions between staff and people living in the service. It was clear that the staff knew the people well, which had a positive impact on their quality of life. People told us that they liked living in Willowbank and that they liked being able to go out to meet friends and family.

## What people told us

During the course of our inspection we spoke to people who live in Willowbank Bungalows to find out what they think about living in the service, and their comments informed our findings.

Feedback was generally positive. People told us they liked the staff, they took pride in keeping their living area clean and tidy, and they liked to be able to get out and about to access activities that they enjoyed. We could therefore see that a wider range of activities was available to people and that people were involved and included in the day-to-day running of the service.

Staff told us that communication had improved since the last inspection.

## How well do we support people's wellbeing?

The service had implemented a detailed action plan following our previous inspection and had increased and improved the range of activities that people could access. This meant there was a focus on making the changes that were necessary in order to improve people's experience of living in the service and to support them to get the most out of life. The service needs to focus on seeking the views of people who use the

service and their families with regards to activities, and implement any further changes accordingly. The service also needs to allow time to embed the new managerial oversight tool to evidence improved accident and incident recording. **(See area for improvement 1 & 2.)**

**(See 'What the service has done to meet any areas for improvement we made at or since the last inspection'.)**

### Areas for improvement

1. To ensure the activities programme meets people's needs, the provider should regularly seek people's views and personal outcomes and use this information to continuously review and improve the activities programme.

This is in order to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that:

'I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors.' (HSCS 1.25); and

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19)

2. To keep people safe and well, all accidents and incidents should be clearly recorded and analysed and actions taken to minimise future risks.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I use a service and organisation that are well led and managed.' (HSCS 4.23)

### How good is our care and support during the COVID-19 pandemic?

#### 7.2 Infection control practices support a safe environment for people experiencing care and staff.

A detailed action plan is in place to identify the areas for refurbishment that are required to ensure that the environment is updated and can be effectively cleaned. Further work needs to be done to identify when the necessary work will be completed. **(See requirement 1.)**

**(See 'What the service has done to meet any requirements made at or since the last inspection'.)**

#### 7.3 Staffing arrangements are responsive to the changing needs of people experiencing care.

We found improvements had been made in relation to staffing levels since the last inspection. Care staff were continuing to work hard to ensure people's needs were met and that people were supported to access activities wherever possible.

Good progress had been made with supporting staff to read and reflect on the Scottish Social Services Council Codes of Practice, which meant that there was a better understanding of professional roles and

responsibilities. This requires to be further embedded through supervision arrangements and the use of improved communication tools. **(See area for improvement 1.)**

**(See 'What the service has done to meet any areas for improvement we made at or since the last inspection'.)**

## Requirements

1. In order to ensure the premises are fit to be used for the provision of a care home, by the 18 February 2022, the provider must update the improvement plan with clear and detailed timescales to:

- modernise, repair and/or update the kitchens, bathrooms and flooring so that they are fit for purpose and can be effectively cleaned, addressing the areas of most significant concern first.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

"I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment." (HSCS 5.22); and

It is also necessary to comply with the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, No 210: 10 (1) - a provider must not use premises for the provision of a care service unless they are fit to be so used. (2) Premises are not fit for the provision of a care service unless they - (b) are of sound construction and kept in a good state of repair externally and internally; (d) are decorated and maintained to a standard appropriate to the care service.

## Areas for improvement

1. So that people have confidence in the staff and organisation that support them, the provider should ensure all staff read and reflect on the Scottish Social Services Council Codes of Practice, emphasising the need for everyone to communicate information openly and accurately.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'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.' (HSCS 3.14)

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

### Requirements

#### Requirement 1

In order to ensure the premises are fit to be used for the provision of a care home, by the 31 August 2021, the provider must develop an improvement plan, detailing the timescales to:

- modernise, repair and/or update the kitchens, bathrooms and flooring so that they are fit for purpose and can be effectively cleaned, addressing the areas of most significant concern first.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment.' (HSCS 5.22); and

It is also necessary to comply with the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, No 210: 10 (1) - a provider must not use premises for the provision of a care service unless they are fit to be so used. (2) Premises are not fit for the provision of a care service unless they - (b) are of sound construction and kept in a good state of repair externally and internally; (d) are decorated and maintained to a standard appropriate to the care service.

**This requirement was made on 21 September 2021.**

#### Action taken on previous requirement

We could see that the management team are trying to progress extensive refurbishment within the bungalows, as directed by the requirement. Kitchens, bathrooms and flooring in all three bungalows are to be updated with a target date of June 2022.

We agreed with the management team that they will provide a further detailed action plan which will identify intermediate target dates for areas that can be completed prior to June 2022. This is because we are concerned that there is not an identified date for the work to have been commenced, which means there will be a sustained impact on the quality of life of the people living in the service. There will also be an ongoing risk in terms of infection prevention and control if the bungalows cannot be effectively cleaned.

This requirement has been reinstated. (See requirement 1 under 'How good is our care and support during the Covid-19 pandemic?')

**Not met**

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

### Areas for improvement

#### Previous area for improvement 1

To ensure the activities programme meets people's needs, the provider should regularly seek people's views and personal outcomes and use this information to continuously review and improve the activities programme.

This is in order to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that:

'I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors.' (HSCS 1.25); and

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19)

**This area for improvement was made on 21 September 2021.**

#### Action taken since then

An activities programme is in place and we observed individual activities planners for different supported people. People also told us about their personal choices regarding activities, and linked these to their plan. People were taking part in activities during the inspection. This showed us that there is a range of activities planned, and that these support individual preferences.

There is a vehicle being used regularly to ensure that all the people living in the service are able to get out to access activities of their choice. Two people were out on trips on the day of the inspection.

We heard that people enjoy going out for their 'fly cup', but also that sometimes it can be more difficult to support people getting out and about, depending on staffing levels.

An initial questionnaire had been devised to seek people's views regarding activities. This was, however, under revision at the time of the inspection, to ensure that it is distributed in a range of formats that will enable the full participation of people living in the service and their families. We found this to be a positive decision, which will support wider inclusion and participation.

The data from the questionnaire will also enable the review of the existing activities arrangements, with changes made where necessary to ensure that the activities being offered are consistent with people's individual choices and preferences.

This has been partially met. (See area for improvement 1 under 'How well do we support people's wellbeing?')

### Previous area for improvement 2

To keep people safe and well, all accidents and incidents should be clearly recorded and analysed and actions taken to minimise future risks.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I use a service and organisation that are well led and managed.' (HSCS 4.23)

**This area for improvement was made on 21 September 2021.**

#### Action taken since then

The management team have recently introduced a tracker system which we found to be a robust tool to collect and record key data such as incidents and accidents, as well as feedback from supported people, families and professionals. The tool will inform managerial insight of all accidents and analysis of the data collected will support quality assurance processes, and identify areas for improvement.

The key focus is now for this new tool to be embedded, with evidence of staff reporting and using it appropriately.

This has been partially met. (See area for improvement 2 under 'How well do we support people's wellbeing?')

### Previous area for improvement 3

So that people have confidence in the staff and organisation that support them, the provider should ensure all staff read and reflect on the Scottish Social Services Council Codes of Practice, emphasising the need for everyone to communicate information openly and accurately.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'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.' (HSCS 3.14)

**This area for improvement was made on 21 September 2021.**

#### Action taken since then

All staff have read the Scottish Social Services Council Codes of Practice and had an opportunity to discuss them during a virtual session with the service manager.

The management team have been working on internal communication and understanding of roles and responsibilities, as well as identifying areas for professional development within the staff team.

A comprehensive tool has been recently introduced to support communication across all of the bungalows on a daily basis. This ensures that all staff are aware of the management arrangements as well as any day-to-day issues. As this tool is further embedded, the service should be able to evidence how it has improved both practice and communication.

This has been partially met. (See area for improvement 1 under 'How good is our care and support during the COVID-19 pandemic?')

## 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).



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