

# Abbey Croft Care Home Service

Kilwinning

**Type of inspection:**  
Unannounced

**Completed on:**  
22 March 2022

**Service provided by:**  
North Ayrshire Council

**Service provider number:**  
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CS2003001163

## About the service

Abbey Croft is a residential children's house in the town of Kilwinning. The service provides care and accommodation for young people accommodated by North Ayrshire Council. Abbey croft is registered for up to eight children and young people, up to the age of eighteen. During our inspection there were eight young people living in Abbey Croft.

The building is detached and over one level. There is a car park and garden space on the grounds. The house is decorated and furnished to a very high standard and provides a comfortable and homely living space. There is a large living room, games room and snug room where young people can relax and spend time together. The outside areas are accessible and provide a space for children and young people to play and relax.

The service has been registered with the Care Inspectorate since April 2002.

It should be noted that this inspection took place during the covid-19 pandemic restrictions and therefore followed a revised procedure for conducting inspections in these circumstances.

## What people told us

"I like it here."

"The staff are nice."

"Staff help me."

"I like working here."

"I know staff will always keep in contact."

"The food is good."

## How well do we support children and young people's wellbeing?

**5 - Very Good**

We evaluated this key question as very good, as we found significant strengths. These lead to positive outcomes for the young people.

The young people in Abbey Croft had developed meaningful and secure relationships with those caring for them. These were based upon empathy, compassion, love and fun. We saw staff spending time with young people and young people told us that they felt supported by staff. Whilst there staff were in the process of planning a party for a young person to celebrate a milestone birthday.

The staff and managers at Abbey Croft were proactive in helping the young people plan achieve in education, employment and college or university. Staff ensured that young people had ambitious but realistic goals and supported them to take the necessary steps to achieve them. Where the ambition was to go to college or university this year, contingency plans were also in place in case the young people need

more time to achieve their ambitions. We heard from young people how staff supported them to apply for college and support them during their studies.

We heard clearly from young people that they felt safe at Abbey Croft and they were protected from abuse, harm, neglect and bullying. The adults used creative ways to stay in touch with young people when they were out and made good use of the technology available to them to support this. This was also utilised to stay in contact with young people who had moved on from the house.

Staff had a clear understanding of continuing care and this culture was embedded in the service. Young people were encouraged to stay in the service until they felt ready to progress into adulthood. The service had also kept a young person's bedroom available to them, when they moved away to attend university allowing the young person to come back and stay or visit when and if they wanted to.

### How good is our leadership?

This key question was not assessed.

### How good is our staff team?

This key question was not assessed.

### How good is our setting?

This key question was not assessed.

### How well is our care and support planned?

**5 - Very Good**

We evaluated this key question as very good, as there was significant strengths. These lead to positive outcomes and support for the young people.

During our inspection we found that the service were in the process of implementing a new process of record keeping and care planning. We found clear evidence of the process which was implemented to develop the plans. The process had consulted staff, young people and had been well thought through and the re-designed plans were SMART (Specific, Measurable, Achievable, Realistic, Time-bound) which allowed progress and development to be evidenced. There had been a large focus on ensuring the language used was trauma informed, whilst also ensuring the young people could understand the plan.

We also reviewed some of the plans that had not yet been replaced and found that all of them were updated regularly and were signed off by the young people.

The older plans had information about bed time routines but could have had more information regarding morning, school and homework routines in place. It was, however, clear that 1-1 sessions took place regularly with the young people and it was clear that they had an input into their plans. We found that there was

some varying quality in the documents but many of them were written to the young people, explaining the decisions they had come to.

Most of the plans we saw were written in a way young people would understand and were strengths based. However, some documents were still written in an older style and were more difficult to follow or negative in the use of language.

We found that managers had a very good understanding where areas of development were required, including the language used in incident reporting, and had plans in place to address this.

## 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

We made a recommendation during the last Inspection that the provider should have a clear framework for care and control within residential services. The development of this framework should be carried out alongside children and young people, and be grounded in children's rights, the Health and Social Care Standards and also integrated into the aims and objectives of the service .

Although we could see that there had been some improvements in terms of more proportionate and individualised approaches being taken to facilitate learning for young people, the service had not collaborated sufficiently with young people. During the Inspection some problems were still being raised by young people in relation to house rules. We have asked the managers of the service to hold further consultation, and in addition consideration should be given to a service wide policy being developed. We will look at this area again during the next service Inspection.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that 'If my independence, control and choice are restricted, this complies with relevant legislation and any restrictions are justified, kept to a minimum and carried out sensitively' (HSCS 1.3).

**This area for improvement was made on 6 August 2019.**

#### Action taken since then

The service, had developed a change in culture. This allowed house rules to be diminished and was supported through their service plans.

#### Previous area for improvement 2

Young people were being supported to take part in a range of interests including physical activities, with varying degrees of success. We suggested to managers at feedback that more consideration should be given to encouraging young people to engage in more creative arts and crafts that they could plan as this would encourage interaction and potentially help young people to express themselves.

The service agreed that would utilise this approach and also consider movie nights, board games and

holistic therapies.

This is to ensure care and support is consistent with the Health and Social Care Standards 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 1.30).

**This area for improvement was made on 6 August 2019.**

#### Action taken since then

The service had involved the young people in a wide range of activities. There was a specific arts and crafts area and paintings on the wall which young people had been involved with.

#### Previous area for improvement 3

Since the last Inspection the service had carried out a training audit, which was positive for identifying gaps in learning, what was required and to ensure that a nurture approach to practice was being adhered to. However, it was not clear how the information gathered for this audit was going to be used. There was also not a clear structure for training and the manager did not hold an overall tracking system. Managers agreed at feedback that they would make the necessary improvements.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that '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 6 August 2019.**

#### Action taken since then

There was a comprehensive training log in place, this tracked mandatory training and ensured this was completed. This also gave a good insight and overview into other courses staff had undertaken and timescales in which they were completed in.

#### Previous area for improvement 4

During the last Inspection we highlighted that although supervision records were appropriate, not all managers were using the same template. We could see some improvement in this area, however we were not satisfied that there was consistency of frequency and some staff did not have supervision agreements. We have asked the provider to review their policy.

This is to ensure care and support is consistent with the Health and Social Care Standards 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 organisational codes' (HSCS 3.14).

**This area for improvement was made on 6 August 2019.**

#### Action taken since then

Supervision records were consistent and regular. We could see positive conversation also recorded to help develop staff skills and also monitor practice.

## 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).

## Detailed evaluations

How well do we support children and young people's wellbeing?	5 - Very Good
1.1 Children and young people experience compassion, dignity and respect	5 - Very Good
1.2 Children and young people get the most out of life	5 - Very Good
1.3 Children and young people's health benefits from their care and support they experience	5 - Very Good
How well is our care planned?	5 - Very Good
5.1 Assessment and care planning reflects children and young people's needs and wishes	5 - Very Good

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