

Abbotsford Care, Newburgh Care Home Service

Gardens Road
Newburgh
Cupar
KY14 6BZ

Telephone: 01337 841 184

Type of inspection:
Unannounced

Completed on:
14 August 2023

Service provided by:
ABBOTSFORD CARE LTD

Service provider number:
SP2010010867

Service no:
CS2010248944

About the service

Abbotsford Care, Newburgh is registered to provide 24 hour care to a maximum of 40 people, comprising of 28 older adults and 12 adults under the age of 65. People being cared for experience a range of care needs including physical and sensory impairment, mental health issues and learning difficulties.

Accommodation is provided in a single storey, purpose-built building set in an attractive location next to the River Tay. The home is structured as three units, two are interconnected and the younger adult unit is self-contained. Each unit has its own kitchen/diner and separate living room. An attractive, secure courtyard is accessible from the two units for older people. The garden grounds are directly accessible from the younger adult unit.

About the inspection

This was an unannounced inspection which took place on 7, 8 and 10 August 2023. The inspection was carried out by two inspectors from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with eight people using the service and five of their family
- spoke with six staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- People had caring and warm relationships with staff.
- Organised activities were well received.
- Medication management is under a period of review and improvement.
- Leadership is supportive and visible
- The environment and staff approach could do more to promote independence.
- Care planning continues to require improvement.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

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

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

3 - Adequate

We evaluated this key question as 'adequate', where strengths just outweigh weaknesses. Improvements can be made by building on strengths and addressing elements which negatively affect people's experiences.

Affectionate relationships existed between people living in the service and the staff who cared for them. Some individuals sought frequent reassurance and comfort from staff and received this with warmth and compassion. When asked about their care and support, people in the younger adults' unit said 'We're treated fairly and well' and 'We're treated as equals'.

Communal lounges in the older adults' units would benefit from further attention to layout and furnishing. Family members commented that some spaces were dark and not homely, with a clinical feel. The manager had begun a program of redecoration in order to brighten corridors and was aware that this was an element of the home which could be developed.

People were able to engage in regular organised activities. This created structure to the week. A church service and a community lunch enabled people to stay connected to their local community. People were able to speak about their enjoyment of recent events within the home and look forward to upcoming trips and activities.

Some people from the younger adults' unit were planning a holiday to Blackpool. This was clearly much anticipated and a source of great excitement. People could be confident that staff would work with them to create meaningful events and experiences which enriched their lives. Staff also used a 'home day' system to ensure that people were able to continue to fulfil their individual wishes in terms of hobbies and interests.

The home would benefit from further development of day to day and individual activities. Families reported that they felt there was a lack of stimulation at times in the older people's units. The manager was in the process of recruiting an additional activities worker to address these issues.

People's health and wellbeing should benefit from their care and support. Nursing staff had good clinical oversight of healthcare needs within the home. One relative commented on how well her loved one's wounds had healed since staying in the home. Systems and data collection allowed staff to promptly identify people at clinical risk. Developments within the staff team had increased the clinical oversight of the younger adults' unit. This ensured that nursing staff who were clinically responsible for people living in the home were fully informed of any concerns in a timely manner.

Medication management had been an issue of concern within the home for a period of time. A number of actions had been taken in order to reduce the frequency of errors and omissions but this was an ongoing process. An area for improvement is made. **(See area for improvement 1.)**

Some infection prevention and control issues were evident in one unit of the home. There were issues with the cleanliness of food storage containers and the fridge. Some food stuffs were stored in unlabelled containers which had previously held another product. This presented a risk to people using the food items. An area for improvement is made. **(See area for improvement 2.)**

Areas for improvement

1. The provider should continue to assess and analyse medication processes including all errors and omissions which occur, with a view to improving accuracy. Relevant agencies should be kept informed of the total number of medication errors each month until further notice.

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

'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24).

2. The provider should ensure that service users experience care in an environment that is safe and minimises the risk of infection. In particular the provider should ensure the safe and hygienic storage of food stuffs and the cleanliness of the food service environment.

This is to ensure that 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).

How good is our leadership?

4 - Good

We evaluated this key question as 'good', where there are important strengths which clearly outweigh areas for improvement.

The manager was undertaking a range of audits and oversights in order to monitor and improve standards across the home. Staff members were involved in the process of audit which meant that staff were empowered to contribute to improvement in a meaningful way. Further development of this approach would increase the consistent undertaking of audits when the manager was on leave or absent from the home. Data and information gathered during audits was being analysed in order to consider any necessary changes to practice.

There was some engagement with people living in the home in order to gather feedback and views. People had actively been involved in menu planning and people in the younger adults' unit were regularly consulted on their views. At times it was clear that decisions had been made without consultation and people did not feel in control of their environment. It is important that people are included in all decisions which affect them and that their views and wishes remain central to care at all times.

How good is our staff team?

4 - Good

We evaluated this key question as 'good', where strengths outweigh weaknesses and strengths have a positive effect on outcomes for people.

Staffing within the home had a good balance of skills and experience. Staff were visible throughout the home and leaders were available promptly to address concerns. Staffing levels allowed people in the younger adults' unit to remain active and access the local community regularly. The home had reduced their agency use which meant an increase in the continuity of care. People could be confident that they knew the

staff caring for them and trust was built as a result.

Staff training completion was inconsistent across the home. Whilst some staff had completed all mandatory training, others had a number of courses still to complete. This required action to ensure that all staff were working from the most up-to-date practice guidance.

Staff supervision was undertaken on a flexible basis, with staff deciding the frequency of meetings. The manager was working to develop a robust and sustainable system for all staff. Staff felt supported by those in leadership positions and reported the manager to be present and visible throughout the home. Although regular staff meetings were held for some staff groups this was not consistent across the whole home. Some staff felt that it would be useful to share their experiences and receive support and advice in a group format, but this was not routinely available.

How good is our setting?

3 - Adequate

We evaluated this key question as 'adequate' where strengths just outweigh weaknesses and improvements are necessary.

Some aspects of care and support within the home promoted independence and control. People in the younger adults' unit were able to access a secure garden and spend time outdoors as they chose. People spoke of being involved in maintaining the garden and being able to enjoy barbeques during the good weather.

We found that people were more limited in the older adults' unit as they were not permitted access to the secure courtyard without staff supervision. This had been a change to the previous arrangement, and it was not clear if people had been consulted. Although people were aware that not everyone would be safe to venture out alone, one person described the decision as 'using a sledgehammer to crack a nut'. Another missed the opportunity to enjoy time spent in the sun. They felt restricted and limited when staff were not available. The decision reflected a lack of an individual approach to care. The manager took steps to address the issue during the inspection.

Although people living in the younger adults' unit plan and cook their meals within the unit, they do not currently complete a large weekly shop. Staff do this shop on their behalf. This limited people's independence and was not in keeping with a skill development approach to care. The obstacles which were preventing people from shopping were not insurmountable and this issue was brought to the attention of the manager to be addressed. An area for improvement is made. **(See area for improvement 1.)**

Areas for improvement

1. The provider should ensure the promotion of independence for people living in the service. Where opportunities for skill development and experiences exist, these should be encouraged and supported.

This is to ensure that care and support is consistent with the 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).

How well is our care and support planned?

3 - Adequate

We evaluated this key question as 'adequate', where strengths just outweigh weaknesses.

Care plans provided adequate information in order to guide care. Where people had specific healthcare needs the home used specialised care pathways to outline the plan of care. People could be reassured that staff had clear and detailed guidance.

Most people were regularly consulted about their planned care through a key worker meeting system, however, this was inconsistent for some people. This meeting provided a good opportunity for people's wishes and preferences to be established and for evaluation of the care plan. People would benefit from a more robust schedule of meetings to ensure that they are fully involved in their care planning wherever possible. An area for improvement is made. **(See area for improvement 1.)**

Not all care plans were fully up-to-date. Documents used to assess people's risk of falls were inconsistently completed. At times people's health needs had changed and plans did not fully reflect this. Staff were aware of the need to improve care planning and various staff members had recently had additional care plan training. A recent quality assurance visit by the senior management team had also highlighted areas for improvement. We were confident that the home were aware of the issue which needed attention and were working towards improvement.

Areas for improvement

1. The provider should ensure that care plans are up-to-date and reflect people's needs and wishes. People should have a regular opportunity to be involved in reviewing their care plan.

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

'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15).

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How well do we support people's wellbeing?	3 - Adequate
1.1 People experience compassion, dignity and respect	4 - Good
1.2 People get the most out of life	4 - Good
1.3 People's health and wellbeing benefits from their care and support	3 - Adequate

How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good

How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good

How good is our setting?	3 - Adequate
4.2 The setting promotes people's independence	3 - Adequate

How well is our care and support planned?	3 - Adequate
5.1 Assessment and personal planning reflects people's outcomes and wishes	3 - Adequate

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

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

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.