

Castlebrae Retirement plus service Housing Support Service

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Type of inspection:
Unannounced

Completed on:
29 August 2023

Service provided by:
Bield Housing & Care

Service provider number:
SP2004005874

Service no:
CS2004071963

About the service

Castlebrae Retirement Plus Service is registered to provide a service to adults over the age of 50 with physical disabilities, learning disabilities and mental health issues living in their own homes within the sheltered housing complex and in the wider community. The service was registered with the Care Inspectorate on 30 September 2004 and managed by Bield Housing & Care.

The service is situated in the Craigmillar area of Edinburgh. The sheltered accommodation provides a service to 12 tenants whose flats are in the one building on three floors. Facilities included a communal lounge, dining room, laundry room and garden areas. Tenants were provided with two meals a day which were prepared on the premises.

There was an office at the sheltered accommodation and staff were on site from 07:00 hours until 22:00 hours each day and tenants had access to off-site support overnight using a call bell system. At the time of the inspection the service was supporting 10 tenants in the sheltered housing complex and no people in the wider community.

About the inspection

This was an unannounced inspection which took place on 23 and 24 August 2023. The inspection was undertaken by one inspector from the Care Inspectorate. To prepare for the inspection we reviewed information about the service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

We evaluated how well people's health and wellbeing was supported, meaningful activities, as well as the management of the service.

To inform our evaluation we:

- spoke with all 10 tenants, four relatives and three professionals working with the service
- spoke with seven staff, the manager and deputy manager
- observed daily life at the service
- observed how well care staff supported people
- considered the quality of the physical environment
- reviewed documents and electronic records.

Key messages

- People were satisfied with the quality of the care and support received.
- Staff interacted warmly and respectfully with people.
- Support workers actively encouraged people to engage in meaningful activities.
- The communal environment was clean, tidy and homely.
- Staff were well trained and supported.
- Managers were competent and approachable.
- The service sought feedback from tenants through regular meetings.
- People's personal plans were thorough and up to date.

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?	5 - Very Good
How good is our leadership?	5 - Very Good

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

How well do we support people's wellbeing?

5 - Very Good

We evaluated the service as operating at a very good level for this key question. There were significant strengths with the care provided and how this supported positive outcomes for people.

Tenants we spoke to were satisfied with the quality of the care and support received in their homes. People's independence was promoted, this involved people in their banking, shopping, menu planning and medication administration. Staff interacted warmly and respectfully with people and knew their history, routines and preferences. Staff would assist people who were anxious in a caring and calming way. Tenants told us "it is fine living here, the support is really quite good," "I love it here" and "I am more safe now I'm here." This meant people could build trusting relationships at the service. Professionals working with the service said "she is very well looked after and supported" and "the care and support has been excellent and the staff have liaised closely with the allocated social workers."

In the communal lounge there was an evening group activity each night and during the day there were games, arts and crafts. When assisting people with activities, staff interacted supportively and with encouragement. There was plenty of laughter and people were enjoying the games in the communal lounge. Some people were attending day centres and everyone had allocated one-to-one time with staff to access shopping trips, attend appointments and outings. There was also a visiting podiatrist and hairdresser. Some people had really enjoyed holidays with staff attending. The service was engaged with the local community by providing a monthly community bingo night, weekly outings to a public house and the annual fayre in August which the local community was invited too. This kept people stimulated, engaged with interests and connected to the community.

Tenants contributed to planning group activities, occasional visiting entertainment and outings. People's hobbies and interests were recorded in personal plans to enable to maintain what is important to them. These opportunities to take part in meaningful activities supports people to be involved and valued.

Tenants told us "I do some of the activities in the evening in the lounge, I've baked the rice crispy cakes," "I play games and bingo here and watch movies" and "I've been to Blackpool this year." Relatives said "the staff are busy but have time for activities such as bingo, bar nights, and baking and have a movie day too" and "they get him out of his bed, get him downstairs for social activities and out to the pub."

Mealtimes in the communal dining room were well staffed, and people were not kept waiting for their meals or being rushed. People could choose to have their meal in their flat if preferred. People were informed by staff what was for lunch and dinner and alternatives were provided if necessary, though a written menu on display would be useful for tenants. Comments included "they are good the meals," "lunch was good" and "great emphasis on healthy eating."

Staff were seen to wear, use and dispose of personal protective equipment such as gloves and aprons in line with guidance. People were treated with dignity as medication was kept securely in their own flats and administered in private. Medication administration was well organised with regular audits. This ensured that people experienced safe and effective medication. Health issues of tenants were being monitored well and actions taken. This supported the service to effectively respond to signs of deterioration in people's health.

Communal areas were clean and tidy, though retained a welcoming and comfortable setting. However, the cleaning products for the communal toilets needed to be effective against Covid-19 as advised in national guidance. The staff provided a cleaning service for people's flats which was thorough and well-organised. There were arrangements in operation for maintenance of the premises to ensure tenants are safe.

How good is our leadership?

5 - Very Good

We evaluated the service as operating at a very good level for this key question. There were significant strengths with the leadership and quality assurance.

People we spoke to considered that managers were approachable and responsive. If there were any concerns regarding people's health and wellbeing, relatives were communicated with quickly. Relatives said "if there are any issues they address it" and "brilliant, phone me for everything, even the slightest things will let me know."

The service sought feedback from tenants through regular meetings. Also through satisfaction surveys with tenants, friends, relatives and staff. There were regular newsletters and were considering a social media presence which would be useful to communicate further with people. Any incidents were reported thoroughly with actions on improvements where needed. Regular quality audits were taking place, such as medication, activities and the environment. An action plan was in place to assist the service to plan, make and measure improvement. This was detailed with reasonable timescales and being implemented well. This ensured that there was a culture of continuous improvement for tenants.

Staff recruitment processes were thorough. Staffing arrangements worked well with no agency staff being used and new staff being supported competently. Staff had time to provide support with compassion and engage in meaningful conversations with tenants. Tenants said "the staff are great here" and "they are very good, couldn't get any better." Relatives told us "staff are really nice and caring" and "there is always somebody there who we can ask questions."

Staff reported good informal support available from their managers. Regular face-to-face supervision sessions and regular team meetings were held to assist communicating effectively with staff. Training was of good quality with a high level of completion. There were formal managerial observations of staff competence. This ensured people experienced high quality care and support based on relevant guidance and best practice.

People's personal plans detailed each area of care, for example, mobility, and set out any needs for support; updates were recorded regularly and promptly as were any changes in actions needed. The plans were written in a person-centred way. Three monthly reviews were taking place for tenants and their relatives. This ensured that personal plans remained right for tenants and that everyone had the opportunity for their views to be heard.

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?	5 - Very Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good

How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good

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