

Cornerstone Aberdeen South Housing Support Service

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Telephone: 01224 256 000

Type of inspection:
Unannounced

Completed on:
2 November 2023

Service provided by:
Cornerstone Community Care

Service provider number:
SP2003000013

Service no:
CS2015343108

About the service

Cornerstone Aberdeen South is a housing support and care at home service providing care to adults with a learning disability. The people they support live in their own homes, either alone, sharing with someone else, or with a group of people. At the time of inspection the service was supporting 15 people living in 5 different properties across Aberdeen.

The provider is Cornerstone Community Care, a large voluntary organisation and registered charity, which provides care services across much of Scotland.

Cornerstone aims, 'to be an expert provider of services to people with learning disabilities, autism and complex care needs.'

About the inspection

This was an unannounced inspection which took place on 31 October to 1 November 2023. The inspection was carried out by one inspector 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 four people using the service
- Spoke with seven staff and management
- Observed practice and daily life
- Reviewed documents.

Key messages

- The home and garden environments were inviting for people
- Staff were confident in speaking about plans for supporting people with what they wanted to do
- Support plans were clear, giving good guidance for how to help people get what they want out of life.

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

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| How well do we support people's wellbeing? | 3 - Adequate |
| How good is our leadership? | 3 - Adequate |
| How good is our staff team? | 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

People's wellbeing was supported to an adequate level. The findings from the inspection are contained in the Outstanding requirements section of this report.

How good is our leadership?

3 - Adequate

The leadership in the service was at an adequate level. The findings from the inspection are contained in the Outstanding requirements section of this report.

How good is our staff team?

3 - Adequate

The staff team were supporting people to an adequate level. The findings from the inspection are contained in the Outstanding requirements section of this report.

How well is our care and support planned?

3 - Adequate

Care and support planning was at an adequate level. The findings from the inspection are contained in the Outstanding requirements section of this report.

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

Requirements

Requirement 1

By 30 October 2023, the provider must ensure that all areas of the houses and gardens are clean and safe, and also easy and appealing for people to use.

This is in order to comply with Regulation 3 and Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI2011/210).

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 5.24).

This requirement was made on 20 June 2023.

Action taken on previous requirement

The houses and gardens were tidy, clean and safe. They were appealing for people to be in and this will enhance people's health and encourage them to get the most out of their life.

The gardens had clear areas and pathways leading to seating options. The trees and bushes were neat, meaning people could see different areas where they might want to be. People told us about plans for building accessible planters and what they planned to put in them, and also for going in to the garden in the nice weather.

Inside the houses, the rooms were neat and smelled fresh. Some areas had been recently repaired and for others, the improvements were planned. The occupational therapist had been involved with making a bathroom more useable for everyone and the residents had enjoyed using it. Residents said they had chosen the colours and decorations for their individual bedrooms, and were keen to show us these.

As well as the strengths mentioned above, there were some weak areas, for example, clearing unused goods from bedrooms, laying new flooring, painting walls. The service was actively working to address these areas with a systematic plan of improvements.

Met - within timescales

Requirement 2

By 30 October 2023, the provider must ensure all personal plans are up to date, accurate and based on people's choices and needs.

To do this the provider must:

- a) Review all personal plans along with the person, their relatives or guardians and relevant colleagues from the multi disciplinary team.
- b) Ensure all personal plans are written focusing firstly on people's strengths and skills and then also their needs.
- c) Ensure all personal plans are accurate throughout all areas.

This is in order to comply with Regulation 4 (1) (a) and 5 of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI2011/210).

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).

This requirement was made on 20 June 2023.

Action taken on previous requirement

People and their care managers had recently reviewed their support plans. Additionally there had been meetings and input for people from the wider health team, such as community coordinator, community learning disability nurse and occupational therapist. These conversations, and suggestions for support, were

clear in the care plans, and from people's daily routines. There were pictures and photographs in the plans which brought them to life and helped people to enjoy their plans if they were reading them.

The plans were clear and easy to follow, they described what people were able to do and how staff should support them. There were positive references to the nuances of people's characters and how to enable them to work with their strengths. Daily notes were respectful and positive. Staff who were coming on duty had good explanations of what had happened, and what may be helpful for people.

The compact and descriptive plans made it more likely that people will get effective support. The service had systems in place to continually monitor and review the support plans, and the managers assured us that this would take place.

Met - within timescales

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

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

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| How good is our leadership? | 3 - Adequate |
| 2.2 Quality assurance and improvement is led well | 3 - Adequate |

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| How good is our staff team? | 3 - Adequate |
| 3.2 Staff have the right knowledge, competence and development to care for and support people | 3 - Adequate |

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

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