

## 71 Westburn Road Care Home Service

71 Westburn Road  
Aberdeen  
AB25 2SH

Telephone: 01224 625 595

**Type of inspection:**  
Unannounced

**Completed on:**  
20 October 2025

**Service provided by:**  
Archway (Respite Care & Housing) Ltd

**Service provider number:**  
SP2003000018

**Service no:**  
CS2003000244

## About the service

71 Westburn Road provides a care service to a maximum of 12 adults with learning disabilities. It is a large house converted to a care home and is situated within Aberdeen City. It is close to town with good access to public transport and close to parks and shops.

## About the inspection

This was an unannounced inspection which took place on the 14 and 15 October 2025. 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 five people using the service.
- Spoke with five staff and management.
- Received feedback from three family members.
- Observed practice and daily life.
- Reviewed documents.

## Key messages

- People experienced warm, person led care and support.
- People were involved with activities they enjoyed.
- Staff were knowledgeable and worked well together.
- Quality assurance had improved with clearer oversight of the service.
- There had been improvements to the environment and there was a clear action plan for continued improvements.

## 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?                | 4 - Good      |
| How good is our staff team?                | 5 - Very Good |
| How good is our setting?                   | 4 - Good      |
| How well is our care and support planned?  | 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 found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore, we evaluated this key question as very good.

People told us they enjoyed living at Westburn Road. People benefited from warm and friendly relationships with staff. People were able to discuss with the staff their feelings if something was upsetting them. People also felt able to raise concerns if they felt their care and support was not as they wished. This meant there were trusting and supportive relationships.

People's care and support were person led. People received unhurried support, which was planned around people's own wishes, for example, timings of activities. Therefore, people benefited from flexible care and support, which reflected their individuality.

People benefited from many different activities reflecting their interests and goals, for example, some people were away on holiday during our inspection. Others enjoyed dancing, swimming, or simply going for a walk or to the shops. As a result, people were able to lead busy lives.

People's health needs were supported well. There was clear documentation about any referrals, for example, a dietetic referral that resulted in a change to a person's altered diet. There were good relationships with other healthcare professionals, for example, the GP practice, where people were supported to attend appointments. This meant people had confidence that if their health and wellbeing changed the service would seek appropriate support.

Medication was managed well with a few errors. When errors occurred the service investigated and made changes to reduce the chance of future errors. For example, errors reduced after medication was moved into people's own rooms. This meant people could be assured they received the right medication at the right time.

People's finances were managed well. The records were clear, and there was regular auditing of any transactions. Therefore, people could be assured their money was safe.

## How good is our leadership?

4 - Good

We evaluated this key question as good where several strengths impacted positively on service oversight and clearly outweighed areas for improvement.

Quality assurance systems had improved. There were a number of audits, for example, medication, care plan, and training which tracked areas for improvement from identification to completion. This meant there was good oversight and continuous improvement. For example, it was identified that there were gaps in the cleaning schedule, which resulted in the managers spot checking the cleanliness of the environment; and the service developed a meaningful connection policy reflecting Anne's Law. Therefore, people could be assured that the service were continually reviewing audit outcomes and improving the service.

The service improvement plan was well-structured and meaningful. For example, this resulted in improved incident recording, which should enhance staff oversight of patterns in stress and distress. This meant management oversight had a positive effect on people's care and support.

Accidents and incidents were recorded well. The document had embedded links to relevant information. This made the tracking of any incident, action taken and the outcome easily reviewed. As a result, this supported staff to keep people safe from harm.

### How good is our staff team?

### 5 - Very Good

We found significant strengths that supported positive outcomes for people, therefore, we evaluated this key question as very good.

Staffing levels were sufficient to meet people's needs. Staff did not appear rushed whilst delivering people's care and support. During the inspection, three people were away on holiday with staff. This showed the ability of the service to support people both at home and with their activities.

There had been a recruitment drive with new staff expected to start soon. As such, people could be assured the service was continually reviewing staffing arrangements to be able to support them.

People and their families spoke positively about the staff and the support they received, telling us, "I am very happy with all the services at Westburn." "They are all very good to [relative] and they are very good to everyone."

People's positive care experiences were supported by good staff team work and management support. Where there were concerns, the provider followed their HR policies, ensuring staff were supported. Therefore, people could be assured that the staff team worked well together.

Staff felt confident in their roles as a result of the training they received, for example, epilepsy awareness and rescue medication and infection control. However, we highlighted that some more face-to-face training would be more helpful for encouraging discussion. The provider may also wish to consider Health and Social Care Standards being on the agenda at the meeting to facilitate reflective discussions about practice and training.

Whilst the provider had undertaken some competency assessments, this could have been expanded to include all relevant areas of practice, such as moving and handling. The provider assured us that this was due to take place in the near future. This will provide more assurance around staff competence and the quality of people's care. We will review this at future inspections.

We reviewed recruitment paperwork and found the relevant documents, for example, right to work and references. This meant people could be assured that staff were appropriately and safely recruited.

### How good is our setting?

### 4 - Good

We evaluated this key question as good as there were several strengths that impacted positively on people's quality of life.

People's rooms were comfortable, personalised and reflected their interests and lives. Rooms were not en-suite; however, there were sufficient bathrooms and shower rooms, which were clean and tidy. There were several communal areas where people could choose to spend their day, including a separate games annexe where people could enjoy their hobbies and interests.

Overall, the environment had improved. It was brighter, cleaner and less cluttered. A daily management walkaround had been implemented to help ensure the service was consistently clean and to identify any necessary repairs, which were added to the maintenance action plan. This meant people benefited from a clean, comfortable place to live.

There has been good progress with the improvements identified at the previous inspection. The provider and landlord had worked well together to identify ongoing refurbishment. A comprehensive action plan had been developed following a condition survey. This outlined where the responsibility lay for improvements, timescales and outcomes. For example, replacing handrails and redecoration of people's rooms. The bedroom with significant water ingress had been fixed and decorated and was now a pleasant place to be. It was pleasing to see that aspirational improvements were being considered, for example, changing a sleepover room into a sensory room. This meant people could be confident the provider were committed to improving the environment.

We will review the ongoing refurbishment at future inspections.

## How well is our care and support planned?

**5 - Very Good**

We found significant strengths in aspects of the care planning and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

People's care plans were detailed and written with the person at the centre. Plans had clear information on people's likes and dislikes and how these could be communicated. This enabled staff to understand and use strategies to reduce stress and distress. People were actively involved with writing the plans, reflecting personal wishes, for example, going abroad on holiday were focused on enabling people to achieve their wishes and pursue their interests.

Daily notes along with monthly summaries gave very good information about how individuals were experiencing and coping with their care and support. These regular summaries helped staff to quickly review changes in people and their needs. This meant care plans were being constantly reviewed and updated and people received appropriate support.

The consistency of the plans had improved, with up-to-date information being recorded in relevant part of the plan, for example, the hospital passport. This meant people's plans had the correct information throughout their plans.

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

### Requirements

#### Requirement 1

By 30 June 2025, the provider must ensure that people benefit from using a service with robust and transparent quality assurance processes which lead to improvement.

To do this, the provider must, at a minimum:

- a) Develop the service development plan to reflect actions, timescales and outcomes for areas identified by audits and people's views.
- b) Review current audits to ensure they reflect the needs of the service and provide sufficient oversight.
- c) Ensure analysis of the audit information informs service improvement.

This is to comply with Regulation 4(1)(a) and 14(e) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) 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 requirement was made on 5 May 2025.**

#### Action taken on previous requirement

There has been improvements made to the quality assurance process. Please see key question 2 'How good is our leadership?'

**Met - within timescales**

#### Requirement 2

By 30 June 2025, the provider must ensure people have a safe and comfortable home guided by a comprehensive maintenance plan in conjunction with the landlord.

To do this, the provider must, at a minimum:

- a) Identify with the landlord all areas of maintenance for which they are responsible.
- b) Audit the whole environment regularly to include fixtures, furnishing and décor.
- c) Develop a maintenance plan and improvement plan with actions and timescales actions and timescales.
- d) Review and update both plans following audits and at regular intervals to ensure timely progress is made.

e) Ensure where there are identified environmental risks there is appropriate risk assessment documentation.

This is to comply with Regulation 4(1)(a) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulation 2011 (SSI 2011/210).

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 5.22).

**This requirement was made on 5 May 2025.**

### Action taken on previous requirement

There has been improvements in the environment and the recording of issues. Please see key question 4 'How good is our setting?'

**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](http://www.careinspectorate.com).



## Detailed evaluations

|  |               |
|--|---------------|
| How well do we support people's wellbeing?                                 | 5 - Very Good |
| 1.3 People's health and wellbeing benefits from their care and support     | 5 - Very Good |
| How good is our leadership?  | 4 - Good      |
| 2.2 Quality assurance and improvement is led well                          | 4 - Good      |
| How good is our staff team?  | 5 - Very Good |
| 3.3 Staffing arrangements are right and staff work well together           | 5 - Very Good |
| How good is our setting?   | 4 - Good      |
| 4.1 People experience high quality facilities                              | 4 - Good      |
| How well is our care and support planned?                                  | 5 - Very Good |
| 5.1 Assessment and personal planning reflects people's outcomes and wishes | 5 - Very Good |

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