

Dalvenie Gardens Very Sheltered Housing and Resource Centre Housing Support Service

Raemoir Lane
Banchory
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Telephone: 01330 700 362

Type of inspection:
Unannounced

Completed on:
31 October 2025

Service provided by:
Aberdeenshire Council

Service provider number:
SP2003000029

Service no:
CS2013317593

About the service

Dalvenie Gardens is a purpose-built development of very sheltered accommodation for older people and people with complex needs. It is located in Banchory and is close to bus routes and local amenities. There are 24 self contained flats and one flat for respite care or short breaks. There were 24 people using the service when we visited.

About the inspection

This was an unannounced inspection which took place on 24 and 25 November 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 to seven people who used the service.
- Received questionnaires from four people using the service, two family members, and 12 staff.
- Spoke with staff and management.
- Observed daily life and practice.
- Reviewed documents.

Key messages

- People were very happy with their care and support.
- Staff were warm and caring with respectful relationships with people.
- The communal areas were welcoming, very clean and tidy.
- Medication error notifications needs to improve.
- Risk assessments should be in place for people at risk of choking.
- Whilst there were activities for people to enjoy, the service redesign and removal of a dedicated activities post has caused concern for people.
- The staff team work well together.

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?	4 - Good
How good is our staff team?	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?

4 - Good

We evaluated this key question as good. Several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

People told us they were very happy with their care and support. One person told us the service was "first class" and another said, "I am very well looked after." People felt they were treated with dignity and respect which we observed through warm and caring interactions. This meant people felt safe and respected.

When people's health changed, we were able to see the action taken, for example, referring to GP and other medical professionals. This meant people were assured they would be referred to the most appropriate person. Staff actively supported people with their health conditions and managed stress and distress well. Where this occurred, staff used de-escalation strategies as written in people's care plans. As a result, people benefitted from person-centred support.

Medication was stored in people's flats and administered by support staff. Through medication audits, errors had been identified, and we could see how the service was responding to these, for example additional training for staff. Some of the errors should have been notified to us. We highlighted these at inspection and shared the notification guidance with the manager (see area for improvement 1).

People enjoyed their meals, telling us "the food is very good." At times the meal service felt task-oriented with some staff not engaging with people when they were being served. We highlighted this to the manager. The service may wish to consider undertaking a mealtime audit to ensure it is a pleasant experience.

Dietary needs were generally well recorded. There was information about altered or fortified diets in the kitchen as well as people's care plan, therefore information was readily available to make staff aware of individual needs. We highlighted that some people may have been at risk of choking, and there was no risk assessment to guide staff on the right way to support the person with eating and drinking. The service ensured these assessments were put in place during the inspection (see area for improvement 2). Where there were concerns about people's weight, there was good recording and action taken, for example, referral to dieticians. Therefore, people could be assured of a diet which meet their needs to them.

Every person had a care plan which was held both in digital and paper formats. Plans contained relevant details about people's daily routines and preferences. However, case notes were recorded separately from a care plan. This meant staff may not be referring to care plans when writing case notes and vice versa. We highlighted this to the manager and were assured that the location of care plans and case notes would be discussed with the staff team and tenants to ensure information was easily available to everyone.

Areas for improvement

1. To ensure that people benefit from open and transparent leadership, the service should implement the guidance in the document 'Records that all registered care services (except childminding) must keep and follow guidance on notification reporting.' This is in order to keep the Care Inspectorate updated on important events.

This should include but not be limited to notifying us on medication errors as per the above guidance.

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

'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11); and

'I use a service and organisation that are well led and managed' (HSCS 4.23).

2. To support people's health and wellbeing, the service should continually review the need for risk assessments.

This should include, but not limited to, where people may be at risk from choking a risk assessment is in place.

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

'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

How good is our staff team?

5 – Very Good

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

People experience warm and respectful care from staff. People told us staff were "wonderful" and "helpful." We observed comfortable and trusting relationships between people and staff. It was obvious that the staff knew people very well.

Staff who we spoke to and who responded to the questionnaires were positive about working at Dalvenie and the support they received, referring to it as 'family.' We observed a staff team that worked well together which supported very good outcomes for people.

The service used a dependency tool to continually assess whether there was sufficient staff to meet people's care and support. Some staff commented that staffing levels limited the time they could spend with people, especially for meaningful engagement (see key question 1). We observed people's care and support being delivered in a timely manner and people told us they did not have to wait for support. Where there were vacant posts, there was ongoing recruitment to ensure people were supported by the right number of staff. The service did not use agency staff to cover absences or vacant posts. There was an internal relief pool of staff whom people knew, thus providing consistency.

Staff received regular supervision. The service may wish to consider incorporating reflective practice discussions into supervisions. This would support staff development and make supervision more meaningful. Monthly staff meetings were well attended. This gave staff the opportunity to discuss service development and receive any updates on changes within service provision. Meetings could be enhanced by including practice-based topics such as Health and Social Care Standards (HSCS) and lessons from good or poor practice. Therefore, people would benefit from a staff team which was continually learning.

Staff told us they felt confident in undertaking their role, which was supported through training for example, adult support, moving and handling and palliative care. As a result, people could be assured of a well-trained staff team.

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?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	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

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