

Abbey Court Very Sheltered Housing Support Service

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Mintlaw
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Type of inspection:
Unannounced

Completed on:
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Service provided by:
Aberdeenshire Council

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About the service

Abbey Court is a purpose-built very sheltered housing complex that contains 23 flats of which there were 21 people living at the service during our inspection. The service is registered to provide housing support, care at home, and day care for up to 10 people.

Tenants have a daily choice of meals which can either be taken in the communal dining room or in their own flats. There are large sitting areas where people can socialise.

Abbey Court is in the village of Mintlaw and enjoys a semi-rural location. There are landscaped gardens with patios. The complex is close to local amenities.

About the inspection

This was an unannounced inspection which took place on 10 and 11 December 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 eight people who used the service.
- Received questionnaires from sixteen people or their representatives and five staff members.
- Spoke with staff and management.
- Observed daily life and practice.
- Reviewed documents.

Key messages

- People were happy with their care and support.
- Staff were warm and knew people well.
- The communal areas were welcoming, clean and tidy.
- Risk assessments should be in place for people at risk of choking.
- Daily notes should be written with person-centred language.
- Whilst there were activities for people to enjoy, there were concerns about the reduction of activities, especially at the weekend.
- 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 where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

People told us they were happy with their care and support. They enjoyed living in Abbey Court. One person stated, "everyone is nice," while another said that carers looked after their wife well. This meant people felt safe.

The communal areas were bright and welcoming, offering several spaces where people could choose to spend time if they wished.

When people's health needs changed, the service acted quickly, seeking support, advice and referring to other professionals, for example, community nurses. One health professional told us, "communication was good and responsive to changes in people's needs." We reviewed visiting professionals' records and found good documentation of reasons for the referral and outcomes for visits. Therefore, people were confident that any changes to their health and wellbeing were dealt with appropriately.

Medication was managed well. Where errors occurred, the service mitigated risks, for example, through additional training. Covert and 'as and when' protocols were in place. The outcome of 'as and when' medication was recorded in the daily contact notes. It would be beneficial for the recording of outcomes to be within the medication folder, to ensure staff have the information when supporting people with medication. This would ensure people's medication remained right for them.

People enjoyed meals. One person said the "food is very nice" another said, "there is always a lot." Where altered diets were required, information was available. However, this was basic, and for one person there was not a risk assessment for choking. We raised this during inspection, which was subsequently put in place. This meant people received a nutritious diet which was right for them.

Activities were varied and well attended, including happy hour, concerts, and school visits. The service had a 'shop' which was run by people using the service. This enabled people to buy sweets and toiletries, which was welcomed by people. However, there were concerns from people, about the decrease of activities to three days a week due to the reduction in day care. People also commented that there were no activities at weekends. We raised this at the inspection and were reassured by managers, activities throughout the week would be discussed at the next tenants meeting.

Tenants were involved with the service delivery. Meetings were held regularly and well attended, where activities and meals were discussed, and tenants were kept informed about changes to the service, for example recruitment. This meant people felt listen to and part of the service improvement.

Everyone had a care plan which reflected people's likes, dislikes, and routines. The plans would benefit from review to ensure there is no duplication of information. This would ensure staff have the most up-to-date information to provide care and support. The service was working to review care plans in regard to people's preferences on who they wished to delivery their care and support (see 'What the service has done to meet area for improvement 1'). The service had also taken steps toward improving falls and skin integrity oversight (see 'What the service has done to meet areas for improvement 2 and 3').

Daily notes whilst detailed, did not use person-centred language. For example, people experiencing stress and distress were described as 'agitated' and 'aggressive.' We raised this with the manager and were assured that terminology would be reviewed, ensuring people are seen as a whole, not just their circumstances. When there was period of stress and distress it would be beneficial to document which strategies were used to reduce the situation. This would ensure there was continual review of the support for both people and staff.

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 people, therefore we evaluated this key question as very good.

People spoke highly of the staff. One person said, "we are all extremely happy with the support staff provide at Abbey Court often going above and beyond." One relative told us, "the staff at Abbey Court are amazing, supportive towards my [relative] and myself, nothing ever seems to be a bother for them, and it's done calmly and with fuss." Therefore, people benefited from a caring staff team.

Staff who we spoke to and who responded to the questionnaires were overall positive about working at Abbey Court and the support they received. We observed a staff team that worked well together, which supported 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 needs. 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. Due to absences, the service had had to start using agency staff. Although this is not ideal for maintaining consistency in staff, there was a good induction process, ensuring agency staff were able to undertake people's care and support.

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. Staff also receive training in specific topics, for example long-term conditions, such as Parkinson's. Future training has been arranged to include falls awareness and stress and distress training. Therefore, people could be confident of a well-trained staff team.

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

To promote positive outcomes for people, the service should maintain strong oversight to ensure that individuals' choices, particularly regarding the gender of their carer, are fully respected.

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

'My care and support meets my needs and is right for me' (HSCS 1.19).

This area for improvement was made on 19 November 2025.

Action taken since then

The service had updated some care plans with people's preference but not all. **Therefore, this area for improvement remains in place and will be reviewed at future inspections.**

Previous area for improvement 2

To promote health and wellbeing, the service must ensure that they have a robust falls prevention and management process in place. When a person experiences a fall, their risk should be reassessed, their care plan updated, and any changes communicated to staff. The service should also review and analyse all falls to identify learning and implement improvements that help prevent future falls.

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

'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14)

This area for improvement was made on 19 November 2025.

Action taken since then

Whilst there was some work on reviewing falls and risks this needs to be fully embedded. **Therefore, this area for improvement will be reviewed at future inspections.**

Previous area for improvement 3

To support positive outcomes for people receiving care, the service must ensure that individuals have care plans which clearly outline achievable, proactive and preventative measures to reduce the risk of pressure damage. The service should also implement robust systems for recording observations of any changes or concerns, along with the actions taken to address them. Additionally, it is essential that the service documents any reasons why pressure area observations could not be carried out.

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

'My care and support meets my needs and is right for me' (HSCS 1.19).

This area for improvement was made on 19 November 2025.

Action taken since then

The service was using the Braden skin tool to review the risk of pressure damage. We noted additional training had been arranged for staff. **Therefore, this area for improvement will be reviewed at future inspections.**

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

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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