

Cornerstone South Aberdeenshire Housing Support Housing Support Service

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Type of inspection:
Unannounced

Completed on:
19 March 2026

Service provided by:
Cornerstone Community Care

Service provider number:
SP2003000013

Service no:
CS2014328259

About the service

The service provides care at home and housing support to adults with additional needs and autism living in their own homes across Stonehaven and Portlethen.

The service is provided by Cornerstone Community Care who state, "We operate a person centred approach and identify goals for everyone we support based on four key areas - increased social inclusion, improved health, improved independence and improved wellbeing".

About the inspection

This was an unannounced inspection which took place between 16 and 19 March 2026. 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 and three of their family
- spoke with seven staff and management. We also received feedback from 11 staff through care surveys
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

- People were supported by staff who knew them well.
- People enjoyed a range of activities and opportunities that were of benefit to their wellbeing.
- Work was ongoing to transition support plans to an electronic recording system.
- The manager should consider how feedback from people who use the service, their families and other stakeholders can contribute to service development.

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 staff team?	4 - Good
How well is our care and support planned?	4 - 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 were supported by a staff team who knew them well. Staff had built positive relationships with individuals, which was evident in the way support was provided. People were involved in planning their day as much as they were able, and staff used their understanding of each person to help ensure their day was meaningful.

People were encouraged to participate in day to day routines around their homes. For example, cooking and helping with the housework. This helped to promote people's independence and helped to ensure they were fully involved in household routines within their own homes.

People's health and wellbeing benefited from their care and support. There was good information about people's needs and any conditions that might impact on their wellbeing. People had access to a range of other professionals that helped to ensure their health and wellbeing was regularly assessed and that they could access advice or treatment when it was needed. This helped to support good health outcomes.

Where guidelines have been provided by other professionals, it is important that these are easily accessible for reference. During this inspection, one set of guidelines could not be found which could present a risk that support is not provided as prescribed. Action was however taken to ensure a fresh copy was obtained and available to ensure there was access to the most up to date and relevant guidance.

People were supported to communicate in ways that suited their individual needs, and this was reflected in the good information recorded within their support plans. However, it was concerning that the new care planning system did not yet fully support alternative communication methods such as signifiers, photos, and pictures. This appeared to be due to limited staff training and familiarity with the system, and staff were committed to developing their skills in this area. It will be important to ensure that people can continue to access their support plans in formats they can understand and engage with.

People could be confident that they would be supported with their medication. There was a robust medication management procedure in place. Staff had received appropriate training and regular audits of documentation helped to ensure that good standards were maintained. This helped to ensure that people received their medication as prescribed which was important for their health and wellbeing. It was positive to see that people's ability to manage their own medication or aspects of their medication were supported and encouraged.

Staff recognised the importance of helping people maintain meaningful connections with their families and friends. Relatives expressed satisfaction with the service and the support their loved one was receiving. While they highlighted that the quality of care often depends on staffing levels, this was balanced with comments such as, "There is a good stable team at present," "We are still happy with the care they receive," and "Management and staff are all approachable and friendly."

Families confirmed they were kept well informed and were consulted when they expected to be. People were supported to spend time with family and friends and to maintain contact through telephone and video calls.

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

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

Staff were warm and welcoming during this inspection. They spoke positively about their roles in supporting people who used the service and demonstrated a clear knowledge of the Health and Social Care Standards. People were supported with compassion and respect and at a pace suitable to their needs.

Staffing arrangements were informed by peoples assessed needs and in consultation with commissioners. Staff were flexible in their approach worked together to ensure people were well supported. For example, recognising when a change of staff would be detrimental or positive for people during periods of stress or distress.

Some staff told us, "We have a good team here" and "We work well together." However, other feedback presented a different perspective, with comments such as "The staff culture presents some difficulties" and "Some staff members do not communicate during their shifts." Several staff members also said they felt it would be reassuring to have a manager based in the service full-time, as during the inspection the management team were temporarily supporting other areas. Staff did note, however, that they were usually able to contact a manager when needed.

The manager should consider how information and feedback from staff and other stakeholders is gathered and how it is used to help review and influence staffing arrangements across the service addressing some of the comments described above.

Staff training was ongoing. Staff told us that they had good opportunities and access to refresher training on key topics which helped to support them in their roles. Staff were concerned about the introduction of the new care planning programme as they had not received training in this area. The managers confirmed that training had been organised and that staff who were confident in using the database would be available to support staff until they felt more confident.

Formal staff supervision is important as if planned well, it provides staff with regular opportunities to reflect on their practice and their role supporting people. It was positive to see that whilst there was still some room for improvement, support for staff was more regular and consistent.

How well is our care and support planned?**4 - Good**

The Provider continued to introduce an electronic system for care planning. Some staff expressed a lack of training, a lack of understanding with the system and a lack of time. There was also some frustration at the time it was taking from introducing the system to receiving training and fully using the system. When asked what could be better staff told us;

'Just to allow time to do paperwork shifts and to get the training in order to access them online.'

'IT computer systems, recording information, training for colleagues who don't know how to use it.'

'Lack of support for completing/updating support care plans, any other paperwork/finances.'

Using two processes for the recording of assessments and support plan documents could become confusing as some information is presented in a hard paper copy whilst other information is available on the electronic system. This presents a risk around the consistency and accuracy of information and recordings which could lead to people not receiving the support they require.

Further training was planned shortly after this inspection, and the management team were committed to supporting staff with the full implementation of 'Advanced Care Planning'. This would help to ensure there is a consistent approach across the service at recording information. An area for development will be to ensure that people and their representatives can access their care and support plans in a format that is suitable for them so that they can meaningfully be consulted in the development of and the evaluation of their plans.

Care and support plans were however strengths led and clearly described what people could do and what they needed support with. There was a focus on enabling people so that they could maintain their independence and that they had opportunities to express their views, preferences and make choices.

Where people required support to make decisions and had been appointed a guardian, this information was available so it was clear who should be consulted. One family member told us, 'We are a partnership and we work well together'. Supporting these relationships with families and other legal representatives promotes better outcomes for people.

Technology such as door alarms and bed monitors could be considered as restrictive. It is important to ensure the decision to use these devices is clearly explained, assessed and that relevant people have given consent. Where technology is used to support people, this was described within specific care plans which were subject to regular review.

The service supported people in identifying goals they wished to achieve, ranging from activities and outings to holidays and learning new skills. Planning to help people achieve their desired goals was generally well recorded and it was reassuring to see how the new electronic care planning programme could support the use of photos and pictures to bring this information to life.

It is important that people are involved in developing and reviewing their care and support plan. Regular reviews of support plans were taking place. This is an opportunity for people to discuss their care and support.

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
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our staff team?	4 - Good
3.2 Staff have the right knowledge, competence and development to care for and support people	4 - Good
How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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