

# Inspection report

## Albyn House and Gordon Street House Care Home Service

76/78 Dee Street  
Aberdeen AB11 6DS

**Inspected by:** Susan Barrie  
**(Care Commission Officer)**

**Type of inspection:** Unannounced

**Inspection completed on:** 5 September 2007

**Service Number**

CS2003000248

**Service name**

Albyn House and Gordon Street House

**Service address**76/78 Dee Street  
Aberdeen AB11 6DS**Provider Number**

SP2003000019

**Provider Name**

Albyn House Association Ltd

**Inspected By**Susan Barrie  
Care Commission Officer**Inspection Type**

Unannounced

**Inspection Completed**

5 September 2007

**Period since last inspection**

7 1/2 months

**Local Office Address**Johnstone House  
Rose Street  
Aberdeen  
AB10 1UD

## **Introduction**

Albyn House and Gordon Street House were registered by the Care Commission in April 2002 to provide a care service for up to twenty people with alcohol misuse difficulties. Four of these places were within the designated place facility which offered a safe environment and an alternative to the criminal justice system, for service users who were recovering from the effects of alcohol intoxication. A further sixteen places were offered within Albyn House and Gordon Street for longer stay residents who wished to address their alcohol use.

The care service's aims and objectives document states that they will provide a service which aims to care for people in a humanitarian and therapeutic setting and to ensure that services users' rights to privacy, dignity and respect are upheld. The service, through its designated place, also aims to promote the decriminalisation of the offence of drunkenness.

## **Basis of Report**

This report was written following an unannounced inspection which took place on the 5 September 2007 by one Care Commission Officer.

This service was inspected after a Regulation Support Assessment (RSA) was carried out to determine the intensity of inspection necessary. The RSA is an assessment undertaken by the Care Commission officer (CCO) which considers: complaints activity, changes in the provision of the service, nature of notifications made to the Care Commission by the service (such as absence of a manager) and action taken upon requirements. The CCO will also have considered how the service responded to situations and issues as part of the RSA. This assessment resulted in this service receiving a low RSA score and so a low intensity inspection was required as a result.

The inspection was therefore based on the inspection focus area of Protecting People. This incorporates:

- Adult Protection
- Restraint
- Child Protection (in services for adults)

During the inspection, evidence was gathered from a number of sources including:

- Discussion with staff and service users
- Policy/procedure documents
- Training records/plans
  
- Observation of the environment.

Verbal feedback was provided following the inspection.

The Fire (Scotland) Act 2005 introduced new regulatory arrangements in respect of fire safety, on 1 October 2006. In terms of those arrangements, responsibility for enforcing the statutory provisions in relation to fire safety now lies with the Fire and Rescue service for the area in which a care service is located. Accordingly, the Care Commission will no longer report on matters of fire safety as part of its regulatory function, but, where significant fire safety issues become apparent, will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Further advice on your

responsibilities is available at [www.infoscotland.com/firelaw](http://www.infoscotland.com/firelaw).

### **Action taken on requirements in last Inspection Report**

The Care Commission had received an action plan from the service detailing how it would meet the recommendations arising from the last inspection.

### **Comments on Self-Evaluation**

A comprehensive self-evaluation and annual return had been returned by the service which influenced the inspection and subsequent report.

### **View of Service Users**

Three service users were spoken with during the inspection.

In discussion it was clear that service users felt safe and well supported. They stated that staff were honest and fair and worked well as a team. One service user stated that the holistic support they received was invaluable in impacting change in a number of areas of their lives. They spoke of opportunities to become involved in a number of structured groups and social activities, all of which were beneficial to their rehabilitation.

### **View of Carers**

N/A.

## **Regulations / Principles**

**Regulation :**

**Strengths**

**Areas for Development**

## **National Care Standards**

**National Care Standard Number 4: Care Homes for People with Drug and Alcohol Misuse Problems - Management and staffing arrangements (for services in a care home)**

**Strengths**

Not all elements of this standard were inspected. Elements were inspected as they related to the inspection focus areas identified for Care Homes for People with Drug and Alcohol Misuse Problems.

The service had a child protection procedure. This included guidance for staff and the action they should take should they have any child protection concerns. This made reference to the North East of Scotland Child Protection Committee (NESCPC) guidelines however did not include local contact details, or details of who would take responsibility for children visiting the service (see 'areas for development'). A copy of the NESCPC guidelines was accessible to all staff.

Staff spoken with stated that no forms of restraint were used within the care service. The service had a 'containment policy' which clearly stated that 'control and restraint techniques are not practised at Albyn House and (that) no training is given'. The policy provided clear guidance to staff regarding their responsibilities and the support strategies that they could use to manage challenging situations. The policy included information regarding the rights of service users.

Staff spoken with described the various ways by which they ensured the safety of service users. Issues of safety were recognised to be different in the hostel and the designated place resource, however were both based on risk assessment and ongoing support based on individual need. Service users spoken with in the hostel confirmed that their support plans were reviewed very regularly, with them participating fully in this process and their views and opinions considered to be crucial in future planning and goal setting.

The organisation had a training plan in place which identified core, and additional training. These included child protection, first aid, infection control, manual handling, care planning, key working, medication, boundaries, assessment, designated place and shift expectation. Training provided by external providers (SVQ/STRADA) was also provided to staff.

Training records were maintained which identified statutory and non statutory training.

Training was discussed within supervision and organised by the support worker. The support worker stated there had been a focus on induction training for new staff.

The support worker had an identified role in being 'responsible for organising the training of all staff. This includes updating current in house training packages.' At the time of inspection the training folder was seen to contain the training provided to staff, and a number of procedures which were in the process of being updated.

Staff were expected to complete feedback sheets following training. These were evidenced at the inspection, with the support worker stating that these were used to evaluate the effectiveness of training and make any required changes. New staff were also asked to contribute their views to the training and how this might be enhanced, using the benefits of fresh insight and opinion.

The service was committed to providing SVQ training for staff and understood their responsibilities in relation to the future registration of staff with the Scottish Social Services Council (SSSC).

### **Areas for Development**

Staff spoken with stated that children occasionally visited the service and remained the responsibility of their carer throughout the visit. As stated above the service had a child protection policy. This policy should be developed to include the practice in relation to visiting children. The procedure could also be enhanced with the inclusion of local contact details should staff need to discuss, or report child protection concerns (see Recommendation 1).

The service did not have a copy of the interagency policy document 'supporting and protecting adults from abuse'. The service should obtain this document and ensure staff are aware of the good practice guidance within it. (see Requirement 1).

**Enforcement**

There had been no enforcement action against the service since the last inspection.

**Other Information**

Albyn House Associaton Ltd and the Alcohol Advisory and Councelling Service (AACS) have merged and are now collectively known as Alcohol Support Ltd. A new certificate of registration will be issued which reflects this change.

**Requirements**

1. The service should obtain the 'local inter-agency adult protection procedures' document, and ensure staff are aware of its content.

This is in order to comply with SSI 2002/114 Regulation 4(1)(a) - a requirement that providers shall make proper provision for the health and welfare of service users.

Timescale : twelve weeks.

**Recommendations**

1. The child protection policy should be developed to include procedures for children visiting the service, and relevant local contact details.

National Care Standard 5 - Management and Staffing Arrangements.

**Susan Barrie**

**Care Commission Officer**