

Cloverfield Grove Housing Support Service

Bucksburn
Aberdeen
AB21 9PU

Telephone: 01224 358 540

Type of inspection:
Unannounced

Completed on:
6 May 2024

Service provided by:
Aberdeen Association of Social
Service, a company limited by
guarantee, trading as VSA

Service provider number:
SP2003000011

Service no:
CS2004068563

About the service

Cloverfield Grove is a supported living complex providing housing support and care at home services for older people. The service is provided by Voluntary Services Aberdeen (VSA) and is located close to local amenities in a residential area in Aberdeen City. The service is registered to provide a support service for adults; the service provides 24 hour, long-term support for up to 44 tenants with varying degrees of support needs.

The service has been registered since 17 August 2004. Tenants have their own spacious one bedroom flat and can eat in either of two cafes within the complex. There are a number of comfortable communal areas where tenants can choose to sit and socialise together within the complex. All flats have level access to amenities and there is a lift to access all floors. There is an extensive well maintained garden area around the property.

About the inspection

This was an unannounced inspection which took place on 30th April 2024 and 1st May 2024. 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 ten people using the service
- Spoke with nine staff and management
- Observed practice and daily life
- Reviewed documents
- Spoke with visiting professionals.

Key messages

- People were happy to be living in the service
- The staff were supportive but were busy at times
- People had mixed views about the food
- There were plenty of activities if people wanted to join in.

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?	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?

4 - Good

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

The communal areas were clean and pleasant. We saw people using the communal spaces and being able to access the well-maintained gardens as they wished. This meant people felt safe and at ease in their environment.

Meetings to handover information were observed, which provided a good level of information on people's health and wellbeing as well as priorities for the day ahead. We observed staff discuss with the GP practice the health and wellbeing of people and arranging for appropriate support from the GP. People could be confident staff would seek support from other relevant professionals in a timely manner.

Respectful interactions were observed between staff and people using the service. The service had changed the way medication was given, with staff providing the care and support also undertaking medication. This ensured people were receiving medication and support at the same time. Care and support were unhurried, and person led. People said staff supported them as they wished, although found language could be a barrier to understanding their needs. We discussed this with the provider, to consider how this could be achieved jointly with staff and people using the service. This would ensure both people and staff had an improved understanding of each other.

The service supports people to live as independently as possible. We discussed ways to enable a person to access hot drinks without calling for staff, which would further increase that person's independence. The service should continue to consider a range of ways to support people to be as independent as possible, including through reviews and external referrals for support.

The service had recently moved to an electronic record system. There was appropriate documentation held electronically, for example a safety sheet should someone leave the building unplanned. We saw accidents and incidents pertaining to an individual, appropriate risk assessments and onwards referrals, for example where someone was at risk of choking. Some plans were person centred and others were not. We found daily notes to be factual rather than outcome focused, and management acknowledged this during the inspection (**see area for improvement 1**).

People's needs were recorded on digital care system. New staff or temporary staff did not always have access to this information, which meant they were not always aware of people's most up to date care and support needs when supporting people. There were not enough mobile devices for each staff member on shift to access digital records at point of providing care. This meant that staff were sometimes reliant on their own knowledge. One staff member said, "I just ask someone." The service should ensure accurate and up to date information about people is easily accessible to ensure that all staff are able to support people with the right care (**see area for improvement 2**).

The service had a medication policy in place and medication audits were regularly conducted. There had been a number of medication errors and we saw through documentation, the service seeking advice appropriately and following up with additional training for staff. Overall, we found people received the right medication at the right time. This helped promote people's health and wellbeing.

Activities, for example chair-based Zumba and meditation, were planned each day and information was available for people to join the activities. We saw people able to access meaningful activities within the community or as part of an additional service, for example 1:1 support. People said they enjoyed the activities, being able to go outside and meet up with friends in the wider community. This allowed people to enjoy an active life, personal to the individual.

People had mixed views about the meals provided. The service was engaging with people about the meals and considering a different approach to meal service. Menus were displayed outside the café and people were given individual copies of their choices. We observed people not experiencing meaningful interactions during the lunch service, with staff only engaging in tasks, such as putting down the plates and meals without explaining what the dish was. This meant people who could not recall the meal they had ordered, did not know what they were being served. We discussed this with the provider during the inspection and are confident the provider will ensure staff understand meaningful communication.

Tenants' meetings were held monthly and were well attended by people using the service along with relatives. People were also part of the wider company's tenants' forum. The agenda covered a variety of subjects, for example activities, what is working well or not so well and changes in the staff at the service. This meant people were informed and involved with how the service was developing.

Areas for improvement

1. To ensure that people's health and wellbeing needs are accurately evaluated, the provider should ensure daily recordings and care plans reflect individual experiences and personal outcomes.

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

'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15).

2. To ensure that people's care and support needs are met appropriately, the service should develop a system for information to be easily available to all staff who would be supporting an individual.

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

'I know who provides my care and support on a day-to-day basis and what they are expected to do. If possible, I have a say on who provides my care and support' (HSCS 3.11).

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 spoken to during the inspection said they enjoyed working within the service and the company. Staff said training was effective and gave them confidence to undertake their role well. People using the service spoke about how kind the staff were and did a lot for them. We saw staff support each other whether it was to answer a question or support with caring for an individual. Some people we spoke to did comment staff were at times busy. The service should ensure staffing is responsive to the needs of people by regular reviews of needs and a staffing method to assess the level of staff which may be required (**see area for improvement 1**).

At the time of inspection vacant posts had been recruited for and the service was waiting for start dates for the new employees. We saw new staff induction paperwork, which was clear and covered a wide range of both training and service delivery, for example emergency procedures within the service and dementia awareness. There was good oversight of staff's training requirements and staff were able to attend training or have time during their working day to complete training. We spoke to a new member of staff who said the induction process was good and had supported them into a new role. There was the ability for new employees to reflect on their progression and highlight areas which required further training or support. The induction period was able to be extended both from the new employee and service perspective. The service supported staff with online training. This gave people confidence staff were competent within their role.

There had been a number of staff changes, which had been noted by people living in the service. This was mainly about people who had left their role. The service should ensure changes with staff are dealt with sensitively as people may have developed relationships with staff and could find changes difficult to adapt to.

The service had recently undertaken a staff satisfaction survey. Management met with the staff to go through the feedback. This gave a good indicator of how staff were feeling and where staff saw areas of good practice and areas that could improve. This meant people's outcomes would improve through the service having an ethos of continuous learning. We saw evidence that feedback from staff had influenced service delivery, for example café assistants supporting people with their choice of meals. This showed the staff worked for the benefit of the people they supported and felt able to make their thoughts heard. This resulted in the service listening and actively responding to staff suggestions on service improvement.

Areas for improvement

1. The service should ensure people's needs are met by the right number of staff.

This should include but is not limited to.

- a) Continue to regularly assess and review people's care and support needs.
- b) Demonstrate how the outcome of people's assessments are used to inform staff numbers and arrangements.
- c) Continue to use quality assurance system to evaluate people's care experiences to ensure staffing arrangements are effective in providing person-centred support.
- d) Be open with staff and service users about decisions on staffing arrangements.

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

'I am confident the people respond promptly, including when I ask for help' (HSCS 3.17).

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?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good

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