

Shawburn Care Home Service

18 Monkton Road
Prestwick
KA9 1AR

Telephone: 01292 678 486

Type of inspection:
Unannounced

Completed on:
8 July 2024

Service provided by:
Hansel Alliance

Service provider number:
SP2003000261

Service no:
CS2003001301

About the service

Shawburn is registered to provide a care service for a maximum of nine adults with learning disabilities. The provider is Hansel Alliance.

Shawburn is a large detached house located in the Prestwick area with easy access to a wide range of local facilities and transport links.

The accommodation comprises two levels with stair access, there are nine single bedrooms, one has ensuite facilities, the others have wash-hand basins. There are communal bath/shower rooms, lounge, dining and kitchen areas.

The service states, "Shawburn is 'home' for up to nine individuals who are supported in many different ways in order to lead the lifestyles they choose. All team members are dedicated to ensuring that everyone who resides at Shawburn has the opportunity to realise their full potential and achieve their ambitions. Everyone living at Shawburn is encouraged to have a say in the direction of the service."

About the inspection

This was an unannounced inspection which took place on from 2 July 2024 to 4 July 2024 between the hours of 09:30 and 17:00. 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 eight people using the service and two of their family members
- spoke with four staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

- We saw genuine, warm, compassionate interactions between staff and people being supported.
- People being supported were encouraged to be as independent as possible.
- Staff were knowledgeable and well trained.
- Management had a good overview of the service.
- As part of this inspection, we assessed the service's self-evaluation of key areas.
We found that the service was not yet undertaking self-evaluation. We discussed the benefits of self-evaluation and how this approach should be adopted to support improvement in the service.

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 leadership?	4 - Good
How good is our staff team?	4 - Good
How good is our setting?	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.

Quality Indicator 1.3 - People's health and wellbeing benefits from their care and support

We observed genuine warmth, kind and compassionate interactions between staff and people who are supported.

Staff had in-depth knowledge of the people they supported, including their health needs. We were able to see clear records of people's health being monitored and the responsiveness of staff where there was any deterioration. This included escalating concerns to the relevant health professionals.

There were very positive relationships with external health professionals such as psychiatrists, psychologists, physiotherapists, learning disability nurses and G.P's.

We could see that people were supported to have a healthy diet which benefits their health and wellbeing, and they were supported to make healthy choices. Weight charts, fluid charts and epilepsy seizure charts were all in use to provide key health information to external health professionals.

People are supported to be as independent as possible; they take part in their local community through volunteering and inviting neighbours round to the service for events. People are encouraged to take part in chores around the house and take responsibility for their home. House meetings take place, and these demonstrated the level of input people had into decision making about their home.

We found that people supported were taking part in groups and activities that were meaningful to them and the staff facilitated this. Everyone had their own routines, and their choices are fulfilled. We saw people exercising their right to vote.

We reviewed people's medication and found that there were robust systems in place. Medication was regularly reviewed and audited with as required medication protocols in place.

Personal plans were detailed, outcome focused, and people's healthcare needs were being managed in an agreed and consistent manner. There were very good examples of people's preferences and choices in personal plans. These guided staff to ensure that people's choices and wishes were respected.

We were able to see that where people lacked capacity they were supported under the principles of Adults with Incapacity.

How good is our leadership?

4 - Good

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

Quality Indicator 2.2 - Quality assurance and improvement is led well.

People using the service should benefit from a culture of continuous improvement. We found good quality assurance systems in place which fed into the service development plan. The service development plan is continually updated where progress is made. We were confident that management had good oversight of areas that required development and areas of responsibility were delegated between the management team. We discussed completing the self evaluation of core assurances and seeking feedback from all stakeholders with management and how this will develop their Improvement plan rather than have a development plan.

There were systems in place for tracking accidents and incidents along with analysis. Although there were no complaints about the service, management were able to demonstrate how they would effectively manage this. During the discussion it was evident that the management approach is most likely the reason there have been no complaints.

The service seeks feedback from people who use the service, and we could see that management were responsive to issues raised by relatives and people using the service. Management has good oversight of the service and performance, such as staff training, professional registrations, service reviews and staff competency.

Staff told us that they feel very supported by the management team at Shawburn. There is good communication with staff around organisational changes and developments.

The organisation has good safer recruitment practices in place which protect people being supported from risk of harm.

How good is our staff team?

4 - Good

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

Quality Indicator 3.3 - Staffing arrangements are right, and staff work well together.

Each person supported by the service had their own dedicated keyworker, providing people supported with consistency and continuity.

Staff schedules are designed around the person's support needs which includes ensuring they can attend activities and events that are important to them.

There is a consistent staff team who cover all shifts within the service and people living in Shawburn know their staff team well which helps to reduce stress and anxiety.

Staff receive a comprehensive induction when commencing employment which includes training. Training is maintained throughout the year and specialised training is sought where appropriate to meet people's needs.

Staff told us that they felt supported within their team and that the team work well together. This benefits people receiving support's wellbeing.

We found that team meetings were taking place which provided good support to staff and key issues or concerns were discussed. We saw that supervisions were taking place as well as staff competency checks which provides people being supported with confidence that staff are competent.

How good is our setting?

4 - Good

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

Quality Indicator 4.2 - The setting promotes people's independence

The service is easily accessible from the front and rear entrances for everyone.

We could see that people were able to move around the home freely. They had access to a communal lounge and dining area. The dining area had recently been refurbished with people living in the service choosing how this was decorated.

The garden is always accessible for people, and they can come and go as they please. There are football goals and a basketball hoop for use.

The environment promotes people's independence where the kitchen has been adapted to suit everyone's needs making it easier to use facilities.

Bedrooms were single occupancy, providing people with privacy. People were encouraged to make their bedroom homely; we saw lovely examples of personalised bedrooms.

Communal bathrooms on the ground floor had been refurbished and now offer bathing and showering facilities to everyone, giving them a choice.

One bedroom now has an ensuite which provides privacy, dignity and respect.

Despite some good refurbishment work completed, some areas of the home remain a little tired and need redecoration, such as the upstairs bathrooms and the painted wood throughout the home. The lighting in the downstairs and upstairs corridor is insufficient which could cause risk of falls. (See Area for Improvement 1).

Areas for improvement

1. The provider should ensure people are living in an environment that is homely, well looked after and decorated to a high standard, with appropriate lighting to protect people from risk of harm.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state: "I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment." (HSCS 5.24)

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

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

Quality Indicator 5.1 - Assessment and personal planning reflect people's outcomes and wishes

We sampled a few personal plans and found that they guided staff on how to support people with their health and wellbeing needs. We found the standard of personal planning and recording was good, plans were person centred, outcome focused and reflected people's personal choices and preferences.

Relevant information on people's health needs were in place as well as good risk assessments to reduce the risk of harm to people.

We found that care reviews were taking place, and that relatives and other health professionals were involved. Care reviews and evaluations captured the positive outcomes achieved which then informed the personal plan.

Personal plans should be completed within a 28-day period of someone moving into the service. This is to ensure that the staff have all the information they need to be able to support the person correctly. One person's personal plan was incomplete, however there was enough detail in the partially completed personal plan, risk assessment and 28-day review paperwork to ensure the person's needs were met. (See Area for Improvement 1).

Areas for improvement

1. The provider should ensure that people using the service and staff supporting them have a personal plan within 28 days of moving into the service. Giving staff the most up-to-date information on how to support the person, in the way they wish to be supported.

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

"I am fully involved in developing and reviewing my personal plan, which is always available to me." (HSCS 2.17)

"My care and support meet my needs and is right for me." (HSCS 1.19)

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 leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good
How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good
How good is our setting?	4 - Good
4.2 The setting promotes people's independence	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

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.