

Abbey Court Care Home Care Home Service

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Type of inspection:
Unannounced

Completed on:
12 February 2025

Service provided by:
ScotsCare Ltd

Service provider number:
SP2017012859

Service no:
CS2017356769

About the service

Abbey Court Care Home is registered to provide a care service to a maximum of 50 older people. The service is owned and managed by ScotsCare Ltd. Abbey Court Care Home is situated in the Easterhouse area of Glasgow, close to public transport links and other community resources. There is a car park at the front and rear of the property and enclosed gardens.

Since the last inspection the provider had increased the care provision. Building work had been completed. The additional areas had been completed to a high standard. There was a plan in place to improve some other areas of the care home.

The service is provided over two floors with lift and stair access to the upper floor. Each floor has 25 bedrooms with en-suite plus bathing facilities and shared lounges and dining rooms, toilets and bathrooms.

The service was registered with the Care Inspectorate on 27 April 2018.

There were 48 people living in the home during this inspection.

About the inspection

This was an unannounced inspection which took place on 11 February 2025 between 09:00 and 16:00 and 12 February 2025 between 07:30 and 17:00. The inspection was carried out by two inspectors 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 12 people using the service and six of their family members
- spoke with 13 staff and management
- spoke with four visiting professional
- observed practice and daily life
- reviewed documents
- received electronic feedback from three individuals living in the service.

Key messages

- The staff team were working well together to promote a positive experience for individuals.
- People had access to a range of activities based on their preferences.
- Staffing arrangements ensured the needs of people living in the home were met in a person led way.
- The service had increased in size since the last inspection, there was a plan in place to complete outstanding environmental work.
- Two previous areas for improvement have been met.

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

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| 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 made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant, positive impact on people's experiences.

People can expect to be treated with compassion, dignity and respect. We observed a team of dedicated and compassionate staff who clearly cared for the people they supported. It was evident during the interactions and engagements we witnessed and heard about, that staff treated people with compassion, dignity and respect. One person told us "staff are very friendly and helpful and treat all the residents and visitors well". This helped to make people feel valued.

People's health and wellbeing should benefit from their care and support. Staff responded to changes in health care needs and liaised with external health professionals. Feedback from external professionals confirmed that staff would seek support and guidance when required. One external professional commented "the staff are brilliant, I find them impressive".

People should expect to enjoy their meals in a relaxed environment. The dining experience was an enjoyable experience for individuals. Staff supported people to enjoy their meal in a kind and patient manner. The service routinely sought the views of individuals and these views were used to shape the menu. One person told us "staff always check with me and make sure I am okay with the menu and if I want something different to eat, if I don't like what is available". Where nutritional and fluid intake is compromised, staff should monitor what individuals consume, to determine if any changes to planned care is required. We found that the service had systems in place to introduce this additional monitoring when required. This helped to keep people well.

Overall, medication was managed well. This helped to keep people well. We shared some examples when medication records had not been completed as expected. This was in relation to as required medication and short term prescriptions. The management team agreed to monitor this area. This would ensure that best practice was being followed by the staff team.

Meaningful connection and activity are important for people's health and wellbeing. People were supported to maintain relationships with those important to them. One person told us "I am able to visit at any time that I wish". The staff team were responsible for ensuring that individuals had access to a range of meaningful activities. This included physical activity, intergenerational opportunities, arts and crafts and music based activities. People enjoyed these and attendance helped keep people connected. One relative told us "the staff always encourage residents to take part in what's going on".

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.

Staffing arrangements were determined by regular assessment of people's care needs and expressed wishes. The management team were responsive to the changing needs of individuals. The electronic care plan system allowed for assessment of individual needs. This allowed for the reviewing of staff as individual needs changed. However, we asked the service to formalise the assessment and discussions of staffing needs. This would ensure that staffing assessment was transparent and available for individuals to review. There were enough staff to meet the needs of individuals. One person told us "staff are very friendly and helpful and treat all the residents well".

People should have confidence that the people who support them are trained, competent and skilled. E-learning covered a wide range of mandatory training. The staff team engaged with the training provided. The management team worked alongside staff to monitor practice. This helped to ensure that staff worked consistently to the expected standards.

Staff told us they were well supported by the management team. Staff spoke positively about protected time with their line manager. This gave them the opportunity to discuss the service and express their views. The management team routinely engaged with those living in the care home prior to the supervision process. This allowed individuals living in the care home to share their views regarding the staff team. This helped to keep individuals involved and meant they felt listened to.

People could be confident that new staff had been recruited safely and the recruitment process reflected the principles of "Safer Recruitment, Through Better Recruitment". New staff had been interviewed with employment references and protection of vulnerable group checks undertaken. New staff confirmed that they had been afforded the opportunity to shadow more experienced staff. This helped them to get to know individuals and the expectations of the service.

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

Improved monitoring and clinical oversight systems should be developed to evaluate the effectiveness of planned care interventions.

This ensures that care and support is consistent with the Health and Social Care Standards, which state that: "Any treatment or intervention that I experience is safe and effective" (HSCS 1.24).

This area for improvement was made on 16 February 2022.

Action taken since then

The management team utilised the electronic system to monitor for changes to individuals health and wellbeing. This allowed for the monitoring of changes for individuals and to monitor if planned care was effective.

This area for improvement has been met.

Previous area for improvement 2

The service should develop a system to improve the co-ordination of staff training and target training specific to people's role.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: "I have confidence in people because they are trained, competent and skilled" (HSCS 3.14)

This area for improvement was made on 16 February 2022.

Action taken since then

The service had an overview of staff training in place. The training offered was specific to individual staff roles.

This area for improvement has been met.

Previous area for improvement 3

In order to ensure that people are safe and protected from harm the service must notify the Care Inspectorate of all accidents and incidents that have resulted in referral or treatment to a third party.

This ensures that care and support is consistent with the Health and Social Care Standards, which state that: "My Support, my life: 4 - I have confidence in the organisation providing my care and support".

This area for improvement was made on 25 April 2019.

Action taken since then

The service had made some progress with this area for improvement. We identified some incidents that should have been notified to the Care Inspectorate. The management team planned to refresh themselves with the guidance in this area and also share this with some of the senior staff. This would allow for compliance in this area.

This area for improvement has not been met and we will follow up and future inspections.

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

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| 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 |

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| 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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