

Broomhill Park Housing Support Service

Broomhill Park
195 Broomhill Road
ABERDEEN
AB10 7LN

Telephone: 01224 716 980

Type of inspection:
Unannounced

Completed on:
26 February 2025

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

Service provider number:
SP2003000011

Service no:
CS2013322577

About the service

Broomhill Park is a service offering housing with support and care at home. It is in a residential area in the west of Aberdeen and sits on a bus route allowing easy access to the centre of Aberdeen. The complex is owned and run by VSA and is registered to provide housing support and care at home for adults.

Broomhill Park provides flexible packages of support with people being able to choose whether or not they have meals, laundry, shopping and cleaning included in the support they receive.

The aim of Broomhill Park is to promote independence by working with people and where appropriate their friends and family, to provide them with services that meet their needs without taking away their independence.

About the inspection

This was an unannounced inspection which took place on 25 and 26 February 2025. 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 19 people using the service and their families
- spoke with nine staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- People's independence was promoted.
- People were encouraged to give their views and opinions on how the service could improve.
- Staffing arrangements had been reviewed and an increase in staffing levels had been agreed.
- Staff knew people well and interactions were kind and caring.
- The manager had very good oversight of all key processes across 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 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?

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.

The service was bright and spacious, with a relaxed atmosphere. People experienced support from staff who were compassionate, kind and respectful. We were told, 'There's very good staff. They do everything and more', 'I just call them if there's anything. I'm well looked after' and 'This place saved my life'. This helped people to build trust and confidence in staff, which in turn, contributed to better outcomes for people.

People enjoyed access to a range of activities and events within the sheltered housing complex. This provided opportunities for people to spend time together, and promoted the sense of the immediate community. People had active lives, and had free access to the wider community, as well as an enclosed courtyard. People told us, 'I do like the fresh air. I have to get someone to go out with me though' and 'I go out to eat once a week'. This helped people keep fit and healthy.

People were enabled to be as independent and in control of their lives as they could be. The service encouraged and supported people to maintain doing their own shopping, laundry, and meal preparation. This improved people's confidence and gave structure and purpose to each day.

Some people opted to have their meals provided. A recent consultation had resulted in a change to how meals were planned and provided. People including staff were excited about the return to home cooked meals prepared on site. Staff had knowledge around modified diets and supported people accordingly. Mealtimes were therefore seen as a positive experience.

Support plans were detailed, with personalised information about individuals support needs. A range of assessments had informed the basis of the support plans, and noted what was required to ensure people's safety. Daily notes reflected people's opinions, and gave an overview of what they had achieved each day. This meant that staff could use this information to engage with people to support them to achieve their goals.

People's health benefitted from engagement with other health professionals. Staff recognised changes in people's health or presentation, and sought referrals and advice from appropriate healthcare professionals. This helped to keep people well.

Where people required technology to keep them safe, such as call mats, the process in place for consent was not clear enough. Discussions regarding consent was not explicit, as it did not reflect the assessment, monitoring or effectiveness of these measures. As a result, people's understanding of these measures wasn't clear. We discussed this with the manager, who took prompt action to review this and we will follow this up at our next inspection.

There was a clear process in place for supporting people with their medications. A sample of medication recording sheets evidenced that people had received their medications as prescribed. This helped people to maintain good health. We discussed practice around some topical medications having no opened by dates on them, and the manager took prompt action to resolve this issue.

Staff were knowledgeable in relation to infection prevention and control, and the service was clean and tidy. People were happy with their accommodation, and were supported to contribute to maintaining a pleasant and safe environment for everyone.

The staff had supported the tenants to choose a cat to come and live in the service. This had led to positive outcomes for people. For example, one tenant was unable to bring her own cat when she moved in. Having 'Parker' in the service provided a focus for her, as she assumed responsibility for looking after him, and feeding him. This resulted in a smoother transition for the tenant, which reduced any anxieties.

People were encouraged to be part of the service. For example, tenants were involved in interviewing potential new staff. One tenant told us, 'I have my own notes and questions that I ask'. It was clear to see that involving tenants in the development of the service, was very important to them.

Regular care reviews had taken place with appropriate people. Reviews reflected the views and opinions of people, and this ensured that the right level of support was in place. As people were involved and listened to, people's self worth had increased, and this made them feel valued.

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.

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, protection of vulnerable group checks and registration of professional bodies checks being undertaken. This ensured that appropriate checks on new staff had been carried out to keep people safe.

Staffing arrangements should be determined by a process of continuous assessment. It was positive to hear that the manager had responded to feedback/concerns about staffing, and the impact this had on meeting people's needs. This had resulted in an agreement to increase staff. We will follow this up at our next inspection as this process is in its infancy at present and not fully embedded within the service.

Staffing arrangements were flexible and therefore staff worked across the service, supporting where dependencies or needs dictated. This meant people received the right care for them, at the right time, by staff who knew them well.

Staff were visible throughout the inspection, as was the manager. People told us, 'Staff always make time for me', 'I am reassured knowing they are there', 'I don't need much support but staff regularly pop in to check on me'. People were reassured that they were supported by a stable staff group, who were kind and caring.

Staff told us that they felt supported by the manager. Supervision had taken place on a regular basis, and identified any training needs or development opportunities. The service also had 'employee of the month' where hard work and good practice was recognised, and an employee engagement programme in place. This meant that staff morale was good within the service and staff enjoyed their work.

Meetings were held monthly, where staff had opportunities to voice their opinions, and contribute to development of the service. Non support staff were also involved. For example, some were involved in activities and one to one sessions with tenants. The manager ensured everyone was involved and this led to a whole team approach and good teamwork.

One staff member was involved in a staff forum for the organisation, where staff discussed services and shared views and ideas. Staff were looking forward to seeing how this could help improve outcomes for people. We look forward to learning more as the forum gathers momentum.

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

Care and daily notes should be written in a way that is clear, concise and provides enough detail.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I use a service and organisation that are well led and managed.' (4.23).

This area for improvement was made on 12 September 2023.

Action taken since then

Support plans were personalised, and contained a good level of detail in order for staff to know how to best support people, in order to meet their needs.

Plans were reviewed regularly to ensure level of support was appropriate for people.

Daily notes were informative and reflected people's views. It was clear to see how people had spent their time and what they had achieved each day.

This area for improvement has been met.

Previous area for improvement 2

Further training should be sought for staff to support a positive dining experience for people experiencing care.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that 'My care and support meets my needs and is right for me'(1.19).

This area for improvement was made on 12 September 2023.

Action taken since then

A relief pool coordinator was in place, and group supervisions had been held regarding the mealtime experience. Scenario based table top exercises were completed to ensure staff were interacting and supporting people appropriately at mealtimes.

All dining areas were pleasant and welcoming.

The manager had started a group with tenants to link with staff to aid discussions, and partnership chats regarding Scottish words and customs, to aid understanding of culture and expectations for some relief staff. Tenants were really keen to be involved with this.

Dining experience audits were completed regularly. These were a valuable tool to drive improvements.

Observations of mealtimes was positive. People were enjoying their meals in a pleasant environment. Staff were assisting where required and we saw nice interactions between people.

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

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