

Newton Dee Camphill Community Ltd Housing Support Service

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Unannounced

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Service provided by:
Newton Dee Camphill Community Ltd

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CS2012311598

About the service

Newton Dee Camphill Community Ltd provides a combined care at home and housing support service for up to 93 adults with learning difficulties. Everyone lives in houses within the Newton Dee Camphill Community, in spacious grounds at Bielside near Aberdeen.

People who live at Newton Dee prefer to be known as villagers, so we have used this term throughout the report.

The service was registered with the Care Inspectorate in 2012.

About the inspection

This was an unannounced inspection which took place between 29 January and 5 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 20 people using the service and 21 of their family
- Spoke with 13 staff and management
- Observed practice and daily life
- Reviewed documents
- Spoke with visiting professionals.

Key messages

- Everyone we spoke to was happy with life at Newton Dee
- The villagers enjoyed a good mix of social and work activities throughout the week
- There was a caring and calm atmosphere at all times
- There were good relationships with friendships and respect being encouraged at all times.

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?	3 - Adequate
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?

3 - Adequate

People's health and wellbeing was supported at an adequate level. There were clear strengths for people and some weaker areas that could lead to poor outcomes.

The villagers were happy, and enjoyed living and working at Newton Dee. One person told us they enjoy their work and having friends, and another said they had good hobbies. Two people agreed the only thing that made them sad was when the co-workers left after they have become friends with them. Relatives felt their family members were well looked after and happy. One said their son was, "Always enthusiastic to return to Newton Dee", and another said, "She is quite simply living her best life." Everyone at Newton Dee practised and encouraged good relationships and respect at all times, which meant people felt accepted and at ease.

The environment was secluded and large parts were not usually accessed by the general public. This helped with the calm and accepting atmosphere, and villagers were not subject to some of the everyday stresses that could impact on their happiness. There was plenty of safe space for people to walk to and from their houses, hobbies and work. Cycles or electric carts were also used to support people getting around, if they were not able to walk far.

People enjoyed their meals and snacks, with many of the ingredients being sourced from within Newton Dee. Dietary requirements such as dairy or gluten intolerance were catered for as part of everyday life. Meals were sociable times involving all people who lived in the house, and often visitors and friends joined them.

As well as the co-workers, people had access to multi disciplinary professionals such as physiotherapist, psychiatry, chiropody to ensure their health was maintained at a good standard. Advance healthcare screening such as optician and dementia screening were being used to identify any deterioration as early as possible and support people with their treatment.

As people became older, they often become less able to continue their home and work activities at the same level or standard. This would mean they could no longer contribute to the community life as they used to, and would need more support in their own home. Because Newton Dee is based on a life long shared living model, it is reasonable for villagers to expect that their increased care needs would be supported for as long as possible. This may mean the deployment of staff needed to change. We discussed this with the managers and encouraged discussions with care managers and families when these situations arise.

People's regular medication was administered to them, and this was adequately done. However, there were other points in relation to medication recording and storage that could lead to incorrect or ineffectual medication regimes. For example, people not having individual locked cupboards which could lead to mix ups, medication given 'as required' not accurately recorded to ensure appropriate time between doses and understanding of its' effectiveness, eye drops not being labelled with 'opening' date so could have lost their efficacy, some prescription labels so worn that they were unreadable so instructions could not be read. We discussed these with the managers and will make a requirement for improvement (**see requirement 1**).

For day to day use, and small amounts of cash, people were well supported with their finances. There were some issues that we drew to the manager's attention that need to improve, for example; people should not have excessive amounts of money in savings unless for a very specific purpose; if someone has a lot of money and would like an item bought then this should be enabled; if people have been incorrectly charged for a service then this money should be returned to them; information about who supports with or controls people's finances must be clear to decrease the potential for improper use (**see area for improvement 1**).

People all had plans to guide their support, and these contained some helpful information about people's likes and wishes. It was good that they also contained comments about how people were living their life, for example someone wandered during the night, and another person had a different posture for the same activity in different settings. As well as noting these things it would be helpful for them to be explored and staff given guidance on how to support people to achieve the best outcome at all times. These examples were discussed with the managers who agreed they could explore and add in some helpful information.

Requirements

1. By 11th April 2025, the provider must support people to have maximum benefit from all their medication to maintain their health and wellbeing.

To do this the provider must, at a minimum:

- a) Ensure safe medication storage
- b) Ensure accurate and useable labelling
- c) Ensure transcription of prescription instructions to a medication administration and recording chart, are complete and accurate
- d) Ensure accurate recording of all medication and its' efficacy.

This is to comply with Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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

'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24).

This is to comply with the Aberdeen City Health & Social Care Partnership (ACHSCP) Medication Support Service Guidance for Adult Services Version 3 (April 2017).

Areas for improvement

1. To support people to be in the optimum financial position, the provider should ensure everyone is clear about their responsibilities, and people's wished are fulfilled in a responsive and responsible manner.

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

'If I need help managing my money and personal affairs, I am able to have as much control as possible and my interests are safeguarded' (HSCS 2.5).

How good is our staff team?

4 - Good

Staffing arrangements and the way that staff worked together was good, with evident strengths that benefitted people.

There were enough staff at all times to support people, with house co-ordinators or paid co-workers in the houses and day workshops at all times. Permanent staff numbers were enhanced by foundation year co-

workers, who volunteer to live and work at Newton Dee, usually for a year at a time. The foundation year co-workers came from different countries and added vibrancy from their views and cultures that they shared with people. One drawback to this arrangement was voiced by two villagers who said they were sad when the foundation year co-workers left.

The recruitment of paid and volunteer workers was good, which meant people could expect to be safely supported. One aspect we discussed with the managers was the possibility of villagers having more information about who was coming to live with them. It would be respectful for them to know about who was coming to their home. The managers agreed to consider how this could be achieved.

People could be sure that the staff worked well together as a team, which contributed to consistent support. The staff had many opportunities to be involved in, and supported by, various groups and forums. There was a good emphasis on the development of co-workers and the community. We talked with the managers about ensuring this did not become more important than outcomes and development for individual villagers, and they agreed that there should be a balance in this area.

Staff told us they were trained and skilled for the support they delivered. People were happy with the support they were given. It was difficult to see a complete picture of everyone's training, but there were a number of expired trainings, for example first aid and fire safety. We advised the managers that it would be helpful for them to keep a full and easy to understand record of everyone's training, so they can be sure that people are up to date with the required skills and knowledge to support people. The managers told us that part of staff development was competency checks. There were no specific records for this and records would be useful so all colleagues know who is able to work independently and who needs extra support to keep people safe.

The staffing arrangements when villagers all go out of their home to their workshops was good and helped people to have routine and meaningful employment during the day. However, it was quite static. The certainty of supportive staffing arrangements when people's lifestyles changed, for example as they get older, was not clear. Also the way that some people were supported with their showering and bathing was restricted to a timetable linked to a member of staff's availability. These situations restricted people's choices and needed consideration. Everyone should have equal access to choice and suitable life long care in the community of Newton Dee. The managers agreed to look at how best to achieve this.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Detailed evaluations

How well do we support people's wellbeing?	3 - Adequate
1.3 People's health and wellbeing benefits from their care and support	3 - Adequate
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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