

# Wheatley Care - Fullarton Service Care Home Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
8 March 2025

**Service provided by:**  
Wheatley Care

**Service provider number:**  
SP2006008236

**Service no:**  
CS2012312157

## About the service

Wheatley Care - Fullarton Service provides a care home service for people where the overall objective is to improve the quality of life for people experiencing the effects of Alcohol Related Brain Damage (ARBD). The provider is Wheatley Care.

The service is abstinence based with a focus on recovery and rehabilitation for individuals with the aim of a return to independent living where possible, either to move on to their own tenancy in the community or an alternative supported setting. The service is part of a city-wide pathway supporting people with ARBD.

There were 19 individuals living in the service at the time of inspection.

## About the inspection

This was an unannounced inspection which took place on 7 and 8 March, 2025. 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, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with nine people using the service and three of their family
- spoke with seven staff and management
- observed practice and daily life
- reviewed documents including personal plans, activity schedules and the ARBD recovery programme
- prior to the inspection we issued questionnaires and received 18 from people using the service
- spoke with two visiting professionals

**Key messages**

Staff worked closely with health and social care partners to support people's health, wellbeing, and recovery.

People benefitted from strong relationships with a skilled and motivated staff team.

People were supported to access community resources and develop long term strategies to support their recovery.

The service delivered a recovery focused programme which was aligned with ARBD best practice.

The management team should develop the service improvement planning process in conjunction with people living 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 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?

5 - Very Good

We evaluated this key question as very good because performance demonstrated major strengths that supported positive outcomes for people. There were very few areas for improvement.

The service was home to people with alcohol related issues including Alcohol Related Brain Damage (ARBD). The service aimed to help people to live their lives as fully and independently as possible.

People lived in self-contained flats and were supported to manage their physical and mental health needs by a committed staff team. Staff had a good understanding of each person's day to day needs and preferences, which helped ensure people received appropriate support and achieved positive outcomes.

The support available had contributed to people feeling secure and better able to manage daily living. The service provided a calm environment which helped people focus on their recovery. They told us they felt safe in the service; several credited it with saving their lives. We heard many positive comments. These included "I have really benefitted from coming here. It helped me have a stable life ...and helped build my confidence" and "the service is great, canny fault it at all, helped me at the right time in my life with my drinking."

People told us staff were approachable, and they felt very well supported by the staff and management team. "Staff are brand new" said one resident. This ensured they felt comfortable, valued, and had confidence in the team.

Family members confirmed that living in the home had been a positive experience for their loved one. Comments included "My brother appears quite content here. It's been a hugely positive move for him" and "I think the wee place is great, he gets lots of support and it's great peace of mind for us."

Support covered aspects of people's daily living including maintaining their accommodation, budgeting, cooking and support to attend appointments or go shopping as well as emotional support. People confirmed support was flexible and staff would adjust support times to fit in with their plans and appointments. This ensured support planning was person led.

The main focus, however, was on recovery and people were aware of the expectation to be involved in working alongside staff to develop strategies designed to promote/protect their recovery from alcohol.

The service delivered a programme of group work developed in partnership with the Alcohol Related Brain Damage (ARBD) team and which was aligned with best practice.

People worked on aspects of recovery which helped them stabilise, develop insight, and take forward skills to support their abstinence and help them readjust to life in the community when appropriate. Exploring areas such as boundaries, triggers and negative thoughts helped people develop resilience and improved their chances of a successful move to their own tenancy or alternative accommodation.

People's health needs and medication support was managed well. Nursing staff were available to support medication routines where appropriate, but the focus on recovery and greater self-management ensured most people managed their own medication. This improved people's self-esteem and feelings of being empowered.

As well as accessing group work within the service, people were encouraged and supported to engage with the wider ARBD recovery community. This allowed people to make connections outwith the service which helped them sustain their recovery long term.

Group work content and social activities were regularly evaluated with people living in the service. The manager planned to develop more opportunities to ensure people were fully involved in service development. This will ensure people using the service can effect positive changes to their service.

A robust pre-placement assessment process ensured people accessing the service were aware of expectations regarding the need for abstinence and a commitment to playing a full and active part in their own recovery journey.

Personal plans helped to direct staff about people's support needs and their choices and wishes. Risk and vulnerability assessments shaped personal planning and staff collaborated with people to determine how best to keep themselves safe/well and achieve identified goals.

Recent staffing challenges had meant some aspects of recovery planning and evaluation had not been completed as expected. The manager planned to review the use of all recovery tools to ensure they reflected current needs and evidenced progress made. A previous area for improvement has been repeated. (See area for improvement).

## Areas for improvement

1. In order that people experience recovery focused support that is right for them, support plans should provide clear guidance about what outcomes people want to achieve and how they can be best supported to achieve them, using appropriate and current recovery tools.

This will ensure care and support is consistent with the Health and Social Care Standards, 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) and 'My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected' (HSCS 1.23).

## How good is our staff team?

**5 - Very Good**

We evaluated this key question as very good because performance demonstrated major strengths that supported positive outcomes for people. There were very few areas for improvement.

People should have confidence that the people who support them are trained, competent and skilled. Staff were motivated and committed to supporting people to achieve identified outcomes.

Staff were clear about their different roles and responsibilities and worked well together, demonstrating flexibility in response to changing situations to ensure support was consistent and stable.

Arrangements in place ensured scheduled support took place and support was adjusted according to people's needs and preferences. This demonstrated a flexible, person-led approach. Minimal use of sessional staff ensured a consistent approach to support.

There was effective communication and formal handovers between staff, with opportunities for discussion about their work and how best to improve outcomes for people.

Staff confirmed that senior staff were visible and accessible and informal mentoring and advice were readily available. Staff confirmed this was invaluable in supporting their practice and personal development.

Staff benefitted from a formal supervision and appraisal process. Team meetings and 1:1 performance/development sessions ensured staff had opportunities to identify training needs, reflect on wellbeing and to share ideas. This meant they felt listened to and valued.

The manager planned to enhance this by introducing group development sessions. This would give people further opportunities to discuss best practice, reflect on how it could improve their practice and support outcomes for people using the service.

A range of training opportunities was available both online and face to face. Staff confirmed that they were well supported to take advantage of advancement opportunities, and several had secured internal promoted posts. This offered consistency for people.

The service recruited staff with lived experience and people using the service had become peer volunteers in a mentoring role. Their input proved invaluable, and people highlighted the positive impact this had on their experiences and engagement. Feedback included "It's great as we are all recovering together."

## 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

In order that people experience recovery focused support that is right for them, support plans should provide clear guidance about what outcomes people want to achieve and how they can be best supported to achieve them, using appropriate and current recovery tools.

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**This area for improvement was made on 20 July 2022.**

#### Action taken since then

The manager plans to review all aspects of recovery in order to maximise people's chances of engagement and of achieving identified outcomes. The use of recovery tools will be included and will be reviewed at the next inspection.

This area for improvement has not been met and will be repeated.

### Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://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?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good



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