

16 Barlink Road, Elgin Housing Support Service

16 Barlink Road
Elgin
IV30 6HL

Telephone: 01343 548 622

Type of inspection:
Unannounced

Completed on:
2 May 2025

Service provided by:
The Moray Council

Service provider number:
SP2003001892

Service no:
CS2012306398

About the service

16 Barlink Road is a housing support and care at home service provided by Moray Council. The service is registered to provide support to four adults. At the time of inspection, the service supported four adults with learning disabilities and complex needs.

The accommodation is a large bungalow and comprises of four bedrooms, three lounges, shared communal kitchen and laundry facilities, and a large enclosed garden.

About the inspection

This was an unannounced inspection which took place between 28 April and 1 May 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, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with two people using the service and three of their family
- spoke with nine staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals
- reviewed the result of 14 surveys returned to us prior to inspection.

Key messages

- People appeared happy in their home and staff took time to create a calm environment for people to relax.
- People had access to healthcare that met their needs.
- Quality assurance and improvement resulted in improved experiences for people.
- People and staff had built positive and trusting relationships.
- Although short staffed, the service had made efforts to provide continuity of care.
- Care plans were outcome focussed and reviewed regularly.

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?	5 - Very Good
How good is our staff team?	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

People's personal care needs were supported well, and they appeared clean and well dressed. Staff ensured people were offered choices of what to wear, to maximise independence. People appeared happy in their home and staff took time to create a calm environment for people to relax. People could look and feel their best and relax in their home.

People were supported to access healthcare to maintain good general health. Records indicated that people regularly attended appointments with the GP, nurse, dentist, optician, and podiatrist. Where needed, home visits were arranged to reduce anxiety for people. People had been supported to attend vaccination appointments. People had access to healthcare that met their needs.

Staff knew people well, meaning they noticed changes in people's health quickly. Appropriate referrals were made to ensure responsive healthcare. For example, staff made referrals when one person showed signs of poor health and additional staffing was arranged to support them in hospital. People were supported to access health care by familiar staff when their needs changed.

People had access to food that they enjoyed. Fresh fruit and vegetables were available and encouraged and people had access to snacks of their choosing. People required additional support with safe eating and swallowing. Where required, speech and language therapy (SALT) guidance was in place. Menus reflected people's needs and had input from dietitians and SALT. Staff prepared meals, carefully ensuring that the texture reflected people's SALT guidance. Staff ensured people could enjoy their meals safely, in a relaxed environment.

People experienced stress and distress; however, they were supported by staff who understood their emotional needs. Positive behaviour support plans were detailed and person centred. The plans gave staff clear strategies to support people should they experience stress and distress. Leaders investigated all occurrences of stress and distress resulting in staff reflection and improvement to people's care and support. People were supported to reduce unnecessary stress in their lives.

Staff were trained to recognise and respond to signs of harm. The service had a clear adult support and protection procedure. Leaders made appropriate referrals and notifications when harm was suspected. On one occasion, staff recorded that a person had an unexplained bruise, however this was not reported to leaders promptly. The provider assured us that they had reviewed reporting procedures, and these would be implemented in the near future. This should result in prompt investigations and, if required, prompt referrals to appropriate professionals.

People were supported to take their regular medication at the right time. Medication was stored appropriately and checked regularly. However, one "as required" medication care plan did not reflect the prescribed instructions. This could result in people not receiving the prescribed dosage. We highlighted this to leaders who gave assurances that "as required" medication procedures will be reviewed immediately.

This should result in people receiving the correct medication at all times. We will review this at future inspections.

How good is our leadership?

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: 2.2 Quality assurance and improvement is led well

People were supported by an involved and caring leadership team. Leaders sought the views of people, staff, and families to inform their service improvement plan (SIP). The SIP resulted in improvements that benefitted people. For example, leaders completed a review of the staff induction procedure to lessen the anxiety people experienced during these times. People could be assured that leaders made service improvements based on their feedback.

Leaders had very good oversight of people's needs and the service as a whole. Staff and leaders completed various audits and checks to ensure people remained safe and had positive experiences. This included health and safety, finance, and medication audits. People could also be assured that staff were competent, with leaders observing staff practice regularly. People benefitted from positive and effective quality assurance.

Leaders completed detailed investigations when unplanned events, such as accidents or incidents, took place. Learning from all unplanned events was shared with the wider staff team. This allowed staff to reflect on practice and make meaningful improvements to people's lives.

People were supported to maintain their tenancy to a good standard. Regular cleaning schedules and health and safety checks resulted in an environment that was safe and clean. Although water temperature checks were completed regularly, the landlord had not completed a legionella risk assessment. Leaders were responsive to our concern and arranged for this to be done during inspection. This will ensure that people remain safe in their home.

How good is our staff team?

4 - Good

We evaluated this key question as good, 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.

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

Staff were kind and compassionate and had built positive relationships with people. People benefitted from having an identified support worker, meaning staff did not have to rush when delivering care and support. People were supported at a pace that suited them.

Leaders developed rotas that met people's needs whilst considering staff's individual skills and attributes. People were matched to staff for certain activities, such as swimming and cycling, or when a driver was required. People benefitted from staff who shared their interests.

Staff communicated well, to ensure that people's needs were met. Handovers took place at the end of each shift, allowing vital information to be shared. Staff took part in regular team meetings. Senior staff were present in people's homes to ensure good quality care and support. Leaders also visited the service regularly. Staff told us that leaders could be contacted with ease. The staff team worked well together to benefit the people they supported.

Staffing levels in the service sometimes resulted in compromises in people's support. The service had been short staffed, however had recently recruited new staff. Whilst there was still a staffing deficit, the provider continued to try and fill those vacancies. This should result in sufficient staff numbers to meet people's current needs.

Leaders told us they could not recruit staff to meet people's social needs. Whilst effort was made to provide staffing to allow people to enjoy a full life, this could not be guaranteed without sufficient funding. The provider has arranged for a review of all people's care needs with funding authorities. This should allow the service to recruit sufficient staff to meet people's identified needs, goals, and aspirations. We will review this at future inspections.

How well is our care and support planned?

4 - Good

We evaluated this key question as good, 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.

Quality Indicator: 5.1 Assessment and personal planning reflects people's outcomes and wishes

Care plans were accessible with information that was easy to find. This meant that staff could access the information they needed, to support people well.

Care plans and risk assessments had been reviewed and most were detailed. Care plans contained important information to keep people safe, for example speech and language therapy guidance. However, some care plans did not have sufficient detail. For example, one person did not have a care plan to support improved bowel health. We highlighted this to the provider who provided a plan for this immediately. This should result in consistent care.

Reviews were outcome focussed and resulted in improvements in people's experiences. For example, one person wished to see their family more. This resulted in the care plan being updated to ensure regular visits were arranged. Staff were aware of this and were working with the family to support this. People benefitted from reviews that focussed on what they wanted from life.

Some people had restrictions placed upon them to keep them safe. Staff were aware of how to support people with these restrictions. For example, staff knew to ensure a person had sufficient snacks of their choice, when access to the kitchen was restricted. However, care plans should reflect the risks associated with such restrictions. We were assured that new care plan templates were currently being developed that would highlight these risks. This should ensure that people are not unnecessarily restricted.

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

To ensure that people are supported by a trained and competent staff team, the service should ensure all staff attend relevant training courses and that leaders observe staff practice to ensure staff are competent in their 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, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

This area for improvement was made on 18 July 2024.

Action taken since then

Staff training attendance records had improved. Leaders had good oversight of the training that was due and had booked staff on courses to attend. Staff spoke positively about the training they had received and told us they felt sufficiently trained for their role. People benefitted from a trained staff team.

Competency assessments were completed regularly by senior staff. Leaders observed staff practice in areas such as medication, moving and handling and assessed the quality of staff interactions with people. When areas of practice did not meet high standards, this led to additional support and training, meaning staff practice could improve over time. Staff were supported to remain competent in their role in care.

This area for improvement has been met.

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?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good
How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	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

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