

Clashfarquhar House Care Home Service

23 Robert Street
Stonehaven
AB39 2DJ

Telephone: 01569 762 438

Type of inspection:
Unannounced

Completed on:
21 August 2025

Service provided by:
Church of Scotland Trading as
Crossreach

Service provider number:
SP2004005785

Service no:
CS2003000266

About the service

Clashfarquahar House is a large five-storey building in the centre of Stonehaven in Aberdeenshire. The property overlooks the town, the bay, and the surrounding countryside and benefits from an incredible sea view.

The service is owned by Crossreach and provides accommodation with care and support for a maximum of 21 older adults. Each person living in the service had their own flat which consists of a bedroom, en-suite shower, toilet, and a lounge with a small kitchenette area.

The home has communal living spaces which includes lounge areas, and a dining room. The home also benefits from a hairdresser room, activity room and a large outdoor veranda.

At the time of inspection 20 people were living in the home.

About the inspection

This was an unannounced inspection which took place on 18 and 19 August 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 10 people using the service, and four of their families;
- staff and management;
- observed practice and daily life;
- reviewed documents;
- spoke with one visiting professionals.

Key messages

- Staff were respectful, patient and kind in their interactions with people.
- People's health needs were supported well
- The prevention and management of falls needed to improve.
- People had limited access to outdoor space and their local community.
- Infection prevention and control practices protected people from risk of infection.
- People benefitted from a warm, clean and comfortable living environment.

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?	4 - Good
How good is our setting?	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?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

We observed kind and pleasant interactions between staff and the people they supported. Staff appeared to know people well which helped ensure their care was carried out according to their preferences. People praised the care they received from staff and told us they were happy living there. One person told us, "everyone looks after you and gives you attention", and a family member shared their relative is, "looked after very well and it's a fantastic home".

People's health benefitted from their care and support. Staff worked well with healthcare professionals and sought medical attention when required. This enhanced people's health.

Families told us staff kept them up to date with any changes in their relative's condition. One family shared, "I am very much kept 'in the loop' and part of the care decisions made". This reassured families that their relative received attentive care.

Assessments were in place to track changes in people's health which meant any changes in people's health were identified and addressed.

There was a range of activities for people to enjoy if they wished. This included bingo, quizzes, visits from children from a local nursery and entertainment. These opportunities provided structure to people's week and enhanced people's mood and wellbeing. However, some people and their families told us that they wanted to go out more. Due to staffing constraints these opportunities were limited. This could potentially make people feel isolated. The service should review their staffing arrangements and consider how this aspect of people's lives could be enhanced. We will follow this up at our next inspection.

People's nutrition and hydration needs were being met. We observed a mealtime experience which was relaxed, with people speaking naturally amongst themselves which contributed to the homely feel of the service. Meals were home cooked and well presented. People reported that they enjoyed their food. We saw that people were regularly offered fluids throughout the day. It was noted that one person's fluid chart did not include a clearly defined daily target. While staff were recording fluid intake consistently the absence of a target limited the ability to evaluate whether the person's hydration needs were being met. This could potentially delay the recognition of dehydration. We brought this to the manager's attention and were confident that this would be addressed.

Medication was managed well. Daily audits were taking place which provided an oversight of medication and allowed any errors or discrepancies to be detected and acted upon timelessly. This helped ensure people were supported to take their medication as prescribed.

Improvements were required for the prevention and management of falls. Appropriate risk assessments were not in place for people who had experienced falls and incidents were not routinely analysed to identify preventative actions. **(See area for improvement 1).**

We found that infection prevention and control procedures helped keep people safe. The home was clean, tidy, and free from any offensive odours. Housekeeping staff worked hard, and cleaning schedules were in

place. Staff were observed to be carrying out safe infection control practices throughout our inspection. Hand washing facilities and personal protective equipment (PPE) were available throughout the home. This minimised the risk of infection.

Areas for improvement

1. To support people's health and wellbeing, the provider should ensure care and support needs for people at risk of falls are identified through appropriate risk assessments. When people experience a fall, preventative measures to mitigate future reoccurrence should be identified and put in place.

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

'I am protected from harm because people are alert and responsive to signs of significant deterioration in my health and wellbeing, that I may be unhappy or may be at risk of harm'. (HSCS 3.21).

How good is our setting?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

The home was warm, and clean and benefited from a sea view which contributed to a calm atmosphere and supported people's wellbeing. People lived in self-contained flats. Some people had chosen to have doorbells fitted. This promoted people's privacy and quality of life. One family member told us their relative's "flat is lovely, it is kept nice and clean".

Communal areas were pleasantly decorated with comfortable and well-maintained furnishings. These areas provided opportunities for people to engage with others, reduce isolation and encouraged friendships.

The service involved people in decisions about their environment, including the selection of wall and carpet colours. This approach promoted a sense of ownership and belonging, contributing to a more homely and personalised setting.

People with a sensory, dementia or other cognitive impairments were supported through the provision of signage on doors to aid orientation to their environment. This helped people feel safe and comfortable within their home.

The service had recently replaced a number of windows within the home. However, several remained in poor condition, with ongoing issues such as leaks and excessive noise, which could affect people's comfort. The provider had a plan in place to replace the remaining windows, with work scheduled for a future date. This will help to improve the living environment for people.

The garden area was on a steep slope at the front of the property. The gradient restricted usable outdoor space as it presented accessibility challenges to some people. There was a covered decked area which provided people with outdoor space for relaxation and socialisation. However, people relied on staff availability and support to access this area. This had been identified by the manager who had plans to address this. We will follow this up at our next inspection.

Equipment was maintained well, with safety checks being carried out at planned intervals. This kept people safe.

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 positive outcomes for people who use this service the provider should ensure that people receive their medications as prescribed.

As a minimum the provider should:

- a) Ensure 'as required' medication records are completed fully in accordance with best practice.
- b) Ensure topical medication are recorded when administered appropriately.
- c) Ensure all medication which have a shelf life are dated when opened.

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

'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

This area for improvement was made on 14 August 2024.

Action taken since then

We sampled medication administration records and found these to have been completed in full.

Where a person was prescribed a topical medication such as a cream, a recording sheet was in place which provided directions to guide staff. This meant we could be assured that people were receiving their medication as prescribed.

Staff dated the medication upon opening, which helped prevent people from receiving it past its shelf life.

This area for improvement has been met.

Previous area for improvement 2

To ensure that quality assurance processes are carried out effectively and in a manner which achieves improvements in the provision of the service and reduces risk to people, the service should:

- a) Ensure quality assurance processes are in place to include meaningful analysis in the event of accidents and incidents.
- b) Ensure that complaints and concerns raised are documented and robustly investigated.
- c) Ensure people receive written responses which clearly detail the findings of the investigation, action taken, and lessons learned to improve outcomes for people.
- d) Ensure all notifiable events are notified to the relevant organisation as per regulation requirements.

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

'If I have a concern or complaint, this will be discussed with me and acted on without negative consequences for me'. (HSCS 4.21).

This area for improvement was made on 14 August 2024.

Action taken since then

There are some quality assurance systems and tools available to help the management team to identify and prioritise improvements. A self-evaluation of the service had also been completed. This meant we could be confident that improvements were driven forward.

The service engaged residents and families in meaningful discussions through regular meetings and a completed survey. This ensured their feedback shaped service improvements.

However, accidents and incidents were not routinely analysed, resulting in missed opportunities to identify risks and implement preventative actions.

The service had received no formal complaints since our last inspection. However, they were actively addressing concerns raised through a questionnaire that had been given to families. One family member told us they are "available and respond quickly and helpfully to any concerns or queries".

The service had made appropriate notifications as per regulation requirement.

Parts of this area for improvement had been met, and a new area for improvement has been made under key question 1 to address any outstanding issues.

Previous area for improvement 3

To ensure that people can be confident that staff supporting them are competent and skilled, the provider should introduce formal observations of staff practice to support staff to understand how their training and development impacts on practice and to improve outcomes for people who use the service.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state 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 14 August 2024.

Action taken since then

The leadership team were regularly undertaking formal observations of staff practice. This provided constructive feedback that helped staff reflect and develop their practice.

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?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	5 - Very Good

How good is our setting?	4 - Good
4.1 People experience high quality facilities	4 - Good

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.