

# Abercorn House Care Home Care Home Service

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Hamilton  
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**Type of inspection:**

Unannounced

**Completed on:**

7 November 2019

**Service provided by:**

Sanctuary Care (Combined) Limited

**Service provider number:**

SP2007009177

**Service no:**

CS2007157972

## About the service

Abercorn House is a purpose-built care home, in the town of Hamilton. It has fifty-eight single rooms, thirty nine of which have en-suite toilet facilities. Residents have access to shared bathrooms and shower facilities. There is a Lounge/dining area on each floor as well as a hairdresser upstairs and family/garden room on the ground floor. A lift is available between floors.

The service is registered to provide care and support to a maximum of fifty-eight older people, which includes five for respite/short break and a maximum of ten places for people under the age of 65 years.

The company states: "we offer care that is of the highest standard and is tailored to meet individuals with specific wishes and choices. These choices will be respected and honoured at all times".

## What people told us

We spoke with residents as part of the inspection who told us they were very happy with the service and spoke highly of staff and the management team.

Some of their comments were:

- staff treat me well and are nice to each other
- the service is spotless, the girls are always cleaning, they work so hard
- I am well looked after
- I feel safe and I like living here

A returned Care Inspectorate questionnaire noted 'I am happy that I am able to do things that I did before I came into the service, meet up with friends, go out for meals and to the local shops'.

Some residents were unable to tell us their views on the quality of the service so we spent time observing staff interactions and practices which we have reported on in this report.

## 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 leadership?	4 - Good
How good is our staffing?	4 - Good
How good is our setting?	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?

4 - Good

People using services have the right to feel at ease because they are greeted warmly by people.

We observed some very nice interactions by staff who obviously knew resident's needs and preferences and offered choices whenever possible. Staff were patient, spoke warmly and respectfully with residents who seemed happy to be in their company.

Staff we spoke with were clear about the Health and Social Care Standards and how to use them in their everyday work. We could see staff putting the standards into practice as we observed their interactions with residents.

There was a very full activity programme both in the home and out in the community. Recent outings included pumpkin picking, 10 pin bowling and a trip to the Science Centre. During inspection we observed some residents going to church which they did weekly. This supports residents spiritual needs and maintains relationships in their local community.

One resident commented on activities 'there is a lot on offer, I was recently at the beach, something I didn't think I would be able to do, but I enjoyed it very much'.

Residents were able to participate in the daily running of the home. Minutes of residents meetings showed they were asked for their opinions on all areas of the home such as food, menus, staff and management. Action plans were developed after the meeting to ensure any issues were dealt with.

Issues with the laundry had been brought to the attention of the inspectors and we raised this with the management team. We were told there will now be an additional 16 hours of laundry staffing and it was hoped this would lead to improvements.

Daily health charts such as re-positioning for pressure relief and overnight checks were well completed. These charts are usually put in place to monitor specific health issues therefore it is important they are fully completed.

## How good is our leadership?

4 - Good

People using services should benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.

There were a number of audits being completed across all areas of the home. There were action plans in place for any issues identified and we could see these signed off as actions were completed. This ensured the service continued to develop and improve the quality of service they delivered.

Relative meetings were poorly attended despite the efforts of the management team. In order to gather relatives opinions of the service a quick participation area had been developed at the front door. This asked relatives to comment on specific questions by placing a small coloured disc in a holder that would show if you were happy or not. This had given relatives an opportunity to give their views.

People we spoke with all spoke highly of the manager and deputy manager. We were told they were approachable and had made a big difference to the home since they joined the staff team.

A questionnaire returned to the Care Inspectorate had noted 'I know I can speak to the manager or any staff if I had any issues and they would help me resolve them'.

Any complaints made to the service were dealt with well. If an investigation was appropriate, this was thorough with detailed reports completed about the outcome. Complainants were informed of decisions and given the opportunity to respond if they were not happy with the outcome.

## How good is our staff team?

4 - Good

People who use services should be confident that people who support them have been appropriately and safely recruited.

We found staff were safely recruited with all expected checks and paperwork in place. New staff had a six month induction. They were given a mentor to support them through their induction and had opportunities to shadow experienced staff. This meant they were able to observe staff practice, ask questions and build their confidence before working on their own with residents. New staff were further supported with 1-1 supervision time with their line manager. This give them protected time to discuss their progress and if they needed further training or development.

This in depth induction programme meant staff had the skills and knowledge needed to support residents safely.

Staff had further training opportunities including dementia training at skilled level. This gave staff a high level of knowledge and skills to support residents living with dementia.

Staff came together at regular team meetings. These provided opportunities to discuss what was happening in the home, to learn from each other and discuss any issues. An action plan was developed to ensure any issues raised were dealt with.

Residents we chatted with all spoke highly of staff. They told us they were great, they worked hard and looked after them well.

We observed staff who worked well together and supported each other. They carried out their role with patience and humour.

## How good is our setting?

4 - Good

People have the right to live in an environment that is relaxed, welcoming, peaceful and free from avoidable and intrusive noise and smells.

The home is very clean with no malodours. A lot of redecoration work had been carried out and the home looked welcoming, homely, fresh and bright. There was a relaxed and calm atmosphere that was beneficial to people with sensory impairments and people living with dementia.

Residents had picked their preferred colour when their bedroom door was painted. This gave residents an opportunity to personalise their door and ensured they were offered a person centred service.

The long corridors had bannisters to enable residents to independently mobilise and seated areas so that they could stop and rest if needed.

**How well is our care and support planned?**

**4 - Good**

People who use services have the right to have a personal plan (sometimes referred to as a care plan) that is right for them because it sets out how their needs will be met, as well as their wishes and choices.

The personal plan format was good and flowed well. The plan included identified strengths, agreed outcomes and how these outcomes would be met. Plans were well written, person centred and included guidance around how staff could promote independence.

We found plans for stress/distress behaviours were well written. They provided detailed information about how staff should support residents who were anxious. This promoted a consistent approach which is beneficial to people living with dementia.

Plans clearly showed how residents preferred their care and support to be carried out. This included personal care, eating and drinking and socialising. Staff helped residents maintain skills they had by encouraging them to do as much for themselves as they could rather than doing tasks for them.

Plans were being evaluated monthly. However the detail in some of these could be improved as there seemed to be a standard statement each month rather than a reflection of what had happened.

**Complaints**

**Detailed evaluations**

How well do we support people's wellbeing?	4 - Good
1.1 People experience compassion, dignity and respect	4 - Good
1.2 People get the most out of life	5 - Very Good
1.3 People's health benefits from their care and support	4 - Good
How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good
How good is our staff team?	4 - Good

3.2 Staff have the right knowledge, competence and development to care for and support people	4 - Good
How good is our setting?	4 - Good
4.2 The setting promotes and enables people's independence	4 - Good
How well is our care and support planned?	4 - Good
5.1 Assessment and care planning reflects people's planning needs and wishes	4 - Good

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