

## Abercorn House Care Home Care Home Service

184-192 Low Waters Road  
Hamilton  
ML3 7QH

Telephone: 01698 423 342

**Type of inspection:**  
Unannounced

**Completed on:**  
15 June 2021

**Service provided by:**  
Sanctuary Care Limited

**Service provider number:**  
SP2019013443

**Service no:**  
CS2019378604

## About the service

Abercorn House Care Home is situated in Hamilton. It has 57 single rooms spread between two floors. People have access to a range of en-suite facilities as well as access to shared bathrooms and shower facilities. Lounge and dining facilities are available on both floors. There is a lift available between floors and individuals have access to a small garden area.

The service is registered to provide care and support to a maximum of 57 older people, which includes ten places for people younger than 65 and living with physical disabilities.

Sanctuary Care state that they aim to offer care that is of the highest standard and is tailored to meet individuals' specific wishes and choices. These choices will be respected and honoured at all times.

This was a focused inspection to evaluate how well people were being supported during the COVID-19 pandemic. We evaluated the service based on key areas that are vital to the support and wellbeing of people experiencing care during the pandemic.

This inspection was carried out by two inspectors from the Care Inspectorate.

## What people told us

We spoke with residents who were happy with the quality of the service and support they received.

Some residents had difficulty using verbal communication to give their views therefore we spent time observing how residents and staff interacted with each other. We observed very positive interactions and a staff team who enabled those they were supporting to engage in a range of daily activities.

We spoke with three relatives visiting the service and a further three by telephone.

They had no concerns about the care and support their relative received and could not praise the management and staff of the service enough.

People told us that communication between the service and relatives was very good and of the peace of mind they now had knowing their relatives were well cared for.

Some people were able to give some very good examples where they were able to support their relative during the pandemic. This included providing support to reduce peoples level of distress to supporting relatives with meals to help improve their nutritional intake and improve their health.

## 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
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How good is our care and support during the COVID-19 pandemic?	4 - Good
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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 the service to be performing at a good level. There were a number of important strengths that clearly outweighed the areas for improvement.

People should be treated with compassion, dignity, and respect. Those living in the service and relatives spoken with all confirmed that they had very good relationships with staff and that they were offered the right level of care and support to their needs. People were treated with sensitivity, being supported to do as much as possible for themselves, with the assurance that if they needed help it would be provided by a committed, well-trained and value driven staff team

This ensured people felt valued and respected which helped maintain their wellbeing.

People were supported to stay in touch with family and friends using technology and social media. Indoor visiting, as well as outings, took place in line with Scottish Government Open with Care guidance. Relatives spoken with advised that they were also supported to provide direct care and support to their family member where it was beneficial for the individual living in the home.

We found that care plans were person-centred and had sufficient detail to enable staff to meet people's needs. These were regularly reviewed and updated to reflect peoples wishes and changing needs.

End-of-life plans were in place and had been developed in consultation with families. When a resident was at end of life, arrangements were in place to allow a family to be with them.

People using the service should be sure that their health needs were well supported. This was provided through ready access to services such as GPs, District Nurses and other health professionals when needed. If people were assessed as being at risk in terms of managing areas such as potential skin breakdowns or food and fluid intake this was well monitored by staff. Where advice was sought from external health professional this was acted upon.

Effective systems were in place to manage people's medication. This meant that people could be confident their medication was being administered safely and their wellbeing promoted.

The way people spend their day should promote feelings of purposefulness and wellbeing. Those living in the service made their own decisions about how they wished to spend their days and staff provided the appropriate support to ensure that their choices were met.

A monthly activity planner was in place that reflected people's preferences. This included activities to stimulate individuals both mentally and physically daily. It was extremely positive to see care staff supporting the activities co-ordinator in delivering activities including on an individual basis. This ensured that people were fulfilled.

Prior to COVID 19 the service regularly reviewed and evaluated activities provided to ensure that they remained meaningful and beneficial to individuals. There were plans to recommence this to ensure activities remained relevant and beneficial to those taking part. We will review how effective this has been at the next inspection.

## How good is our care and support during the COVID-19 pandemic?

4 - Good

We evaluated the service to be performing at a good level. There were a number of important strengths that clearly outweighed the areas for improvement.

### 7.2 Infection control practices support a safe environment for people experiencing care and staff

During an outbreak of COVID-19, strict infection control procedures are important to make sure people are kept safe. We evaluated how well infection control practices support a safe environment for people experiencing care and for staff. We found strengths that had a significant positive impact on people's experiences and outcomes. We concluded that the service's performance in relation to infection control was very good.

It was positive to see that the service took action, where possible, to address the issues that had been identified by the visiting Infection Prevention & Control support teams in response to Covid-19.

The home was found to be clean and fresh. Housekeeping staff had a good knowledge of the appropriate cleaning materials and used these effectively. Arrangements were in place to ensure that frequently touched surfaces like handrails and light switches were cleaned at least twice daily.

We found that Personal Protective Equipment (PPE) was readily available, and staff wore appropriate PPE to keep people safe. Handwashing facilities and hand sanitiser were available throughout the home.

Areas of the environment were regularly audited, this included regular checks on mattresses to ensure they were not contaminated and needing replaced. Although we identified that some dining furniture needed to be replaced, this had been identified by the service and was on order. Continually auditing and identifying furniture and items that needed replaced helped to ensure that's effective infection control practices were maintained in the service and people kept safe.

We saw good practice in relation to donning and doffing of personal protective equipment (PPE) and hand hygiene. This ensured that staff kept themselves and others safe.

Routine weekly staff testing for COVID-19 took place in line with guidance. Staff were aware of the arrangements to put in place should a resident test positive for COVID-19 and how staff and residents would be cohorted in the event of an outbreak. This followed best practice and assisted with the continued protection of people and staff from harm.

A safe system was in place for laundering of clothes and linen and followed best practice guidance in relation to infection prevention and control.

### 7.3 Staffing arrangements are responsive to the changing needs of people experiencing care.

We evaluated if the staff team had the right competence, knowledge, and skills to support people in relation to COVID-19. We found staffing practice that demonstrated major strengths in supporting positive outcomes for people. We concluded that the service was performing at a good level.

Staffing levels were responsive to the changing needs of the people and were regularly assessed. This allowed for the number of people being supported in their rooms, facilitating family contact and additional measures to maintain good hygiene and infection control practices.

The service had a staffing contingency plan if staff were absent because of illness, self-isolation or exclusion following a positive COVID-19 test. Appropriate arrangements were in place to ensure that where agency staff were being used checks were in place to reduce the risk of cross infection.

Staff told us that they benefited from a supportive and approachable management team, and we saw that the service was very aware of the need to support staff wellbeing and resilience at this time.

Training had been provided in all key areas of infection prevention and control and staff said that they had found this training to be very informative and reassuring. They were also supported to keep up to date with current best practice. We discussed the need to ensure that all staff completed infection control training regularly and where staffs knowledge was tested that actions were identified where an incorrect response was given.

People could be confident that everyone put their learning into practice, including checks on PPE use, hand washing techniques, enhanced cleaning regimes and social distancing.

It was clear from our discussions with staff and our review of records that there were robust and transparent quality assurance processes in place to keep people safe. This meant that people could be confident that staff had the necessary knowledge and skills to support them during the pandemic.

## 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?	4 - Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	4 - Good
1.3 People's health benefits from their care and support	4 - Good

How good is our care and support during the COVID-19 pandemic?	4 - Good
7.2 Infection control practices support a safe environment for people experiencing care and staff	5 - Very Good
7.3 Staffing arrangements are responsive to the changing needs of people experiencing care	4 - Good

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