

Abbeycare (UK) Care Home Service

Murdostoun Castle
Wishaw
ML2 9BY

Telephone: 01698 386013

Type of inspection: Unannounced
Inspection completed on: 26 January 2018

Service provided by:
Abbeycare (UK) Limited

Service provider number:
SP2016012724

Care service number:
CS2016347332

About the service

This was the first inspection of Abbeycare UK. The service was registered with the Care Inspectorate in July 2016 to provide care and support for up to 21 people over the age of 18 who are experiencing alcohol/substance misuse difficulties. The service is provided by Abbeycare (UK) Limited and is situated in Murdostoun Castle within extensive grounds and within commuting distance of Edinburgh and Glasgow.

All rooms are single and provide spacious en suite accommodation with showering facilities. There are communal baths available providing an alternative to showers with a large dining room where independent caterers provide hot meals twice daily. There are kitchen facilities for clients to make snacks and drinks between times. Several lounges provide areas for clients to participate in therapy, support group and alternative therapy sessions.

The hospitality team are responsible for cleaning the rooms, communal areas and changing bed linen. There are washing and drying facilities available which clients are encouraged to use for their personal laundry.

The aim of the service is to "provide clients with a private, confidential and safe environment to heal and recover through a period of reflection and rehabilitation, where they can identify the changes they require to make to their life to enable them to maintain on-going recovery".

What people told us

Prior to this inspection we issued five Care Standard Questionnaires. In addition to the feedback and comments we received from the questionnaires we also attended the meditation and morning meeting, a graduation meeting as well as a client forum meeting. Some of the comments from clients were as follows:

- Fantastic staff, real team of strong individuals, Abbeycare should be proud of the staff who were very pleasant and caring but also firm with me when needed.
- The place has turned my life around.
- Upon arrival and in a chronic state of alcohol withdrawal I was instantly put at ease, staff observe clients actions carefully which makes us feel safe and we are treated with courtesy and patience.
- All members of staff are sympathetic, caring and always available to answer questions or attend to any problems quickly, meetings are meaningful and well structured and the reviews by management and key workers are regular, the daily routine is well-balanced.
- the staff treat me with dignity and respect, nothing is a bother to them. The counselling I have is to a very high standard, I couldn't ask for more.
- Staff are amazing, the one to one with my keyworker is very helpful, all staff are available at any time to listen to any concerns and the advice I'm given is invaluable.
- I felt safe and secure immediately on admission both physically and mentally, we all have keys to own lockable doors.
- Staff treat us with dignity, respect, professionalism, enthusiasm and with humour
- When I arrived in this facility I was filled with fear and anxiety, now I feel happy and healthy and without this service and the commitment from the staff my sustained recovery may not have been possible, the encouragement, support and robust programme allowed me to do this.
- There is a weekly forum for peers and staff. Clients advise them of anything they are unhappy with and is normally dealt with in a timely manner.
- I would recommend this service to anyone seeking help, staff are amazing and are all

available at any time to listen and the advice given is invaluable.

Self assessment

The Care Inspectorate did not request the service submit a self-assessment this year as part of the inspection process.

From this inspection we graded this service as:

Quality of care and support	6 - Excellent
Quality of environment	5 - Very Good
Quality of staffing	6 - Excellent
Quality of management and leadership	6 - Excellent

Quality of care and support

Findings from the inspection

Given the evidence we were presented with and the outcomes for people using this service we have graded this quality theme as excellent.

The first step towards recovery involved a comprehensive telephone assessment, completed by trained, competent staff. Following this assessment, admissions are pre- arranged and overseen by the services' doctor. Once a full medical consultation/assessment is completed the therapeutic recovery programme can begin. Each programme of therapy depends on individual need and can range from one to four weeks. Support group meetings are available daily and at various times throughout the month, providing a means of sharing experiences and offering emotional support to each other.

On admission each client is assigned a keyworker and together they complete a person-centred recovery care plan based on their physical and psychological needs. These plans were very informative, continually reviewed and completed to a high standard. The manager discussed how the service continually look at ways to develop and improve standards. Part of this improvement process was the introduction of electronic care planning in order improve the quality and content of the current documentation. This process had been well planned and coordinated and had progressed well with full completion due in April 2018.

Once admitted each client is introduced to a fellow client or "buddy" this helps reassure and orientate new clients to the service, providing valuable support through listening and sharing similar experiences.

Everyone receives a weekly timetable of meetings and therapy sessions and are expected to fully participate in this programme. The daily meetings encourage clients to discuss the previous days events, the support received and how they felt. Everyone described the support as excellent. The weekly client forum was chaired by a client and attended by the manager and staff. This encouraged an open discussion on all aspects of the service and encouraged suggestions for improvement. We could see that previous actions raised were resolved promptly ensuring people felt confident in making suggestions.

All clients benefit from a team of medical professionals who provide round the clock medical and psychological support. As well as, the staff team and therapists who deliver daily cognitive behavioural therapy, alternative therapies and meditation sessions.

Following graduation from the service staff continue to offer support through regular follow-up telephone consultations as well as, twice weekly aftercare groups where people can seek peer support and reassurance.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 6 - excellent

Quality of environment

Findings from the inspection

From the evidence we were presented with at this inspection we have graded the service at very good in relation to this quality theme.

The service is situated within the grounds of Murdostoun Castle amidst extensive grounds promoting a peaceful setting for people in crisis to relax and recover.

The service can accommodate up to twenty-one clients in single rooms with en suite facilities within a safe, supportive environment. The hospitality team ensure all rooms and communal areas are cleaned and clients are encouraged to keep their own rooms tidy and retain some of their normal daily routine. There is a fully equipped utility room for people to do their own personal laundry.

There were spacious communal lounges, treatment and therapy rooms and a large dining room providing facilities for clients to make hot drinks and light snacks. A continental breakfast is served in the dining room with hot meals provided externally from a local hotel. Staff record the temperature of the food prior to serving to ensure it meets the recommended food safety requirements.

The majority of the feedback received on the standards of catering showed there was room for improvement. The Service Manager had addressed this matter with the external catering company in an attempt to improve the quality of the food delivered on a daily basis however, the manager was not satisfied that sufficient improvements had been made. This has resulted in the decision to refurbish a kitchen within the service which will enable them to provide their own internal catering.

This will provide clients with a more varied choice of freshly cooked meals with instant access to a chef for any requests or complaints. We look forward to seeing how this has developed and if these proposed changes have had a positive impact on the dining experience.

The service recorded accidents/incidents, on the whole these were recorded well with good details to any follow-up actions required. We reminded the manager of the need to notify us of some specific incidents we saw. The manager was receptive to this feedback and we felt assured this would be positively actioned in the future.

There was the designated health/safety person who ensured all the relevant safety checks were completed for the environment and appliances. There was a log where staff and clients could record any repairs required. Repairs and maintenance was carried out by an external source, the manager discussed plans for the service to carry out their own maintenance and repairs as part of their ongoing future development plan. This will prevent delays in actioning requests.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 5 - very good

Quality of staffing

Findings from the inspection

From the evidence we were presented with we have graded the service excellent in relation to this quality theme.

People independently seek the support of this service when they reach a crisis point in their lives. As soon as they make contact with the service they are fully supported by a well recruited, competent workforce who have received the appropriate training to fulfil their roles and responsibilities.

We looked at the recruitment policy and a sample of files which demonstrated safe recruitment. Registration and safety checks with the relevant regulatory body were in place demonstrating that all staff employed were registered, safe and fit to practice.

Staff had access to an informative employee handbook with clear information on policies, principles and values which staff clearly knew and demonstrated.

Staff meetings were happening regularly and were well attended, staff who were unable to attend had signed as having read the minutes from these. A full range of topics were discussed at these meetings covering training, health and safety to results from audits and input from the internal multi-disciplinary team. This ensured staff were kept well-informed of what was happening in all aspects of this service.

Staff benefit from regular supervision meetings which provided the opportunity for staff to reflect on recent practice and to discuss their ongoing professional development plans. On-going staff development included staff working towards Scottish Vocation Qualifications at varying levels. This ensured that all staff were trained and could contribute various skills and knowledge to deliver effective care and support. There were dates

planned for staffs' annual appraisals and clients actively participated in this process by providing feedback on staffs' practice.

The service has a training champion who had developed a training plan demonstrating staff had attended annual mandatory training with more specialist training relevant to their role available every month. Training was provided both online and face to face by internal and external professionals for example the Scottish Drugs Forum and Epilepsy Scotland.

We attended a staff handover meeting this provided a detailed discussion on each clients stage of progress in their recovery plan. Two people who had recently graduated from the service had returned to speak to staff and current clients on how successful the programme had been, in positively changing their lives. This provided encouragement and confidence to current clients on the success of the programme.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 6 - excellent

Quality of management and leadership

Findings from the inspection

Taking into account the evidence we gathered at this inspection we have graded the service excellent for this quality theme.

The management team have a quality assurance system which the manager and staff were competent in completing. Audits were up to date and fully completed with actions plans demonstrating positive outcomes. Clients were involved in the day-to-day running of the service and provided feedback and suggestions at the weekly client group meetings. Issues discussed were carried forward and updates provided at subsequent meetings ensuring all actions continued to be reviewed and addressed. Questionnaires were distributed throughout the year and clients completed service evaluations at the end of their stay. Feedback from consultation was used to implement positive change and improve outcomes for future clients. An example being, the creation of an in-house kitchen which will improve the quality of food and choice available.

We looked at accident/incidents, medication and care plan audits as well as policies and procedures. The clinical nurse specialist audited the medication charts, observed staff practice and ensured all daily clinical observations were completed. This ensured any concerns or discrepancies were dealt with immediately with intervention from the medical team if needed. The policies and procedures had recently been reviewed and provided very good, clear information on what to expect from the service. A comprehensive audit had recently been completed by the Scottish Drug Forum involving all staff members, current clients and families. This provided very positive feedback on the performance of the service. The management team encourage staff development and promote leadership with regular open discussion, training and supervision. Staff said they felt valued and fully supported in their ongoing development.

There is a well-managed, competent, stable team of staff within this service. The daily routine was structured and very well organised. This ensured clients felt confident that there was support available from staff and fellow clients at various times throughout the day and night.

Staff continue to provide an excellent aftercare programme, we saw an example of staff providing support to a client following discharge and due to serious concerns for their welfare requested police intervention. This resulted in hospital admission and the potential prevention of a fatality demonstrating the excellent outcomes for people using this service.

We saw a detailed development plan for 2017, where actions had been identified there was evidence that these had been reviewed and positively completed. Questionnaires had been distributed to external stakeholders as a further means of obtaining feedback on the performance of the service. Feedback from these are collated and used in the ongoing development of the service. The 2018 development plan is due for publication in March 2018. This plan will provide details of the aims and vision of the service over the coming year and how they plan to achieve this.

The service do not currently manage any personal finances however, there is the facility to store valuables within a safe in the administrators office.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 6 - excellent

What the service has done to meet any requirements we made at or since the last inspection

Previous requirements

There are no outstanding requirements.

What the service has done to meet any recommendations we made at or since the last inspection

Previous recommendations

There are no outstanding recommendations.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

This service does not have any prior inspection history or grades.

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