

# Abbeyfield Dunfermline Society Ltd Housing Support Service Housing Support Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
17 June 2025

**Service provided by:**  
Abbeyfield Dunfermline Society  
Limited

**Service provider number:**  
SP2004004063

**Service no:**  
CS2004072003

## About the service

Abbeyfield Dunfermline Society is a housing support service based in Dunfermline. The service delivers support to seven people living in Allister House.

The service provides housing support alongside a tenancy for people over the age of 65 years. People who live in Allister House receive a package of support which includes three meals a day, a cleaning and a laundry service. Staff are present to provide other aspects of housing support between 8am and 2pm and again between 4pm and 6pm. Out with these times people benefitted from an external on call system.

## About the inspection

This was an unannounced inspection which took place on 10 and 12 June 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 five people using the service
- spoke with two staff and management
- observed practice and daily life
- reviewed documents
- reviewed three staff questionnaires.

## Key messages

People were meaningfully involved in all aspects of their support.

Staff were respectful of people's right to privacy and autonomy.

The manager was committed to continuous development.

Support plans were person-centred.

## 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?	4 - 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 evaluated this key question as 'very good' where there are major strengths.

Peoples health and wellbeing significantly benefited from the support they were receiving. People told us they were 'treated like royalty' and 'a weight has been lifted'. All people we spoke with were happy with the support they received. People spent time giving examples of how they felt respected and supported by the service.

People were being supported to maintain their tenancy in a variety of ways which suited them. Staff struck a delicate balance between providing support whilst also respecting people's independence and right to self-determination.

Changes to people's health and wellbeing were recognised promptly by the service. Given the set-up of the service, people had access to support at various times throughout the day as a need may arise. Where changes posed a potential risk, these were discussed with the person. We found records to demonstrate discussions and plans which had been co-produced with the person. People spoke about the support they received from staff and felt confident this was provided in line with their wishes and preferences.

Some people required additional support from external agencies. Where this was necessary the manager liaised with other agencies to ensure the views of the supported person were heard and prioritised. The manager was able to provide examples where communication with external agencies had a positive impact on the health and wellbeing of people using their service. As a result, people could feel confident their wellbeing would be prioritised.

People told us they were supported to access the community and stay connected with family and friends. The service organised a range of activities and opportunities for people to experience meaningful days.

The service invited other agencies to visit and share information about the support they could provide. This included support people could pay for as well as support which was free at the point of access. People could be reassured the service took steps to ensure they were well informed about resources which had the potential to enhance their physical and emotional wellbeing.

People told us about a variety of ways in which they were kept involved with service delivery. People felt well informed and consulted about changes and improvement planning. The service was clearly led by the people using it.

## How good is our leadership?

## 4 - Good

We evaluated this key question as 'good' where there were important strengths which clearly outweighed areas for improvement.

People should expect quality assurance and improvement to be led well. The service was overseen by a volunteer committee and a registered manager who was in the service four days per week.

The manager told us that she operates an open-door policy, where people and staff are welcome to have discussions as the need for them arises. Staff told us they felt well supported by their manager who was approachable. People told us the manager was visible and met with them regularly.

The manager demonstrated a strong focus on involving people in the development of the service. We reviewed improvement plans which were clearly influenced by the views of people using the service. People were encouraged to challenge their own expectation of support and understand the choices available to them. People could feel confident they would be meaningfully involved.

People should expect all staff who provide housing support to receive regular supervision and observations of their practice. We found records of annual appraisals with staff. These records demonstrated meaningful conversations taking place with staff about their job role and training. Records highlighted achievements as well as areas for development. Records identified goals and dates in which staff hoped to achieve these. However, there was no clear process to review individual goals out with the annual appraisal. The manager told us she observed staff in their practice regularly throughout the service. However, these observations were not always formally recorded. The manager should further develop systems to support oversight of staff practice including regular supervision and observations of practice. As a result, we made an area for improvement **(see area for improvement 1)**.

We sampled policies and records associated with recruitment. Whilst we found necessary checks had been undertaken, oversight of the recruitment and induction process would benefit from review. The service policy would also benefit from review to ensure it is clear, comprehensive and reflective of best practice guidance. As a result, we made an area for improvement **(see area for improvement 2)**.

There were a range of audits in place to assure quality and consistently good practice across the service. Whilst audits were in place the frequency of formal recording of these was inconsistent. A system to support oversight and occurrence of audits would benefit from further development to assure practice remains at a consistently high standard across the service. As a result, we made an area for improvement **(see area for improvement 2)**.

## Areas for improvement

1. To support the health, welfare and safety of people who use the service, the manager should ensure staff receive regular supervision and observations of practice which ensure their learning and development needs are assessed, reviewed, and addressed.

**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).**

2. To support ongoing improvement the manager should ensure systems are in place which effectively support oversight of the service. This should include but is not limited to recruitment of staff.

**This is to ensure that the care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).**

**How good is our staff team?****4 - Good**

We evaluated this key question as 'good' where there were important strengths which clearly outweighed improvements. However, improvements were necessary to maximise wellbeing.

Staff we spoke with were clear about their role and remit. Staff were able to be flexible in their approach to suit the needs of people they supported. The service was staffed by one member of staff who provided direct housing support at a time. Other staff were present at various times to provide support with cleaning. People told us they felt there were enough staff to meet their needs promptly. People knew where there was an emergency they should access support via their emergency care alarm, which was linked to an external provider.

The service benefitted from a small staff team. Where there was staff absence the team supported each other to ensure continuity for people. Staff demonstrated an ability to work together and with other agencies to maximise people's wellbeing.

The manager had developed a set of core and additional training. Some staff had undertaken additional training clearly based on needs of specific individuals. However other essential training had lapsed. It is important that staff refresh training periodically to ensure they are up to date with best practice guidance. As a result, we made an area for improvement (**see area for improvement 1**).

**Areas for improvement**

1.  
To promote health and wellbeing staff should regularly access training relevant to their role. This should include refreshing training where it has expired.

**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).**

## How well is our care and support planned?

4 - Good

We evaluated this key question as 'good' where there were important strengths.

Personal support plans should be developed in line with people's wishes and personal preferences. Personal plans included sufficient detail to guide person-centred care and support. Plans clearly included key contact details, who was important to people and when to contact them. Plans clearly took account of people's right to privacy and independence.

Records demonstrated conversations had taken place with people about what they wanted the service to do should there be a period of non-contact. Processes were clear regarding when and who the service should contact should someone not be in at anticipated times. People and relatives could feel confident staff would act should someone not be in at an anticipated time, to ensure their safety.

We found evidence of the service having developed risk assessments and management plans in response to accidents and/or incidents. Where an accident had occurred, plans were updated in line with the person's wishes. Plans were clear and included enough information to guide consistent practice across the staff team. As a result, people could feel confident staff would support them to mitigate risks.

Plans and records demonstrated an emphasis on working together with people to achieve their wishes. Support was provided in areas people acknowledged it was required. Where needs changed discussions always took place with the person prior to changing personal plans. People were clearly involved in their reviews.

The service had recorded where people had legal representatives. However, they had not always received copies of legal orders. Again, the service recorded having sought consent from people to contact their representatives in the event of various circumstances. Plans would benefit from clearer recording of consent from the person, specifically with regards to information sharing. Consents and legal powers should be clearly recorded in plans. These records allow the service to act appropriately in the event of unexpected circumstances and support future planning.



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

### Requirements

#### Requirement 1

The provider must ensure that support plans reflect the care and support needs of each tenant by 30 September 2019. The provider must have a format in place which ensures that identified risks are assessed and recorded in the plan and that the plan is updated with any new information as and when changes occur and/or within appropriate timescales for review.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that "My personal plan is right for me because it sets out how my needs will be met, as well as my wishes and choices" (HSCS 1.15); and "I am assessed by a qualified person, who involves other people and professionals as required" (HSCS 1.13).

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(a) - A provider must make proper provision for the health, welfare, and safety of service users; and Regulation 5(1) - A requirements for personal plans.

This requirement was made on 23 May 2019.

#### Action taken on previous requirement

We sampled personal plans which clearly recorded relevant risks to people's health and wellbeing. Where new risks had been identified, risk assessments had been developed accordingly and relevant changes made to plans.

As a result this requirement was met.

#### Met - within timescales

## 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

We recommend that the service review their quality assurance systems and identify where improvements are needed. Robust systems for quality assurance should be in place to ensure the highest standard of service delivery. For example, audits of incidents and accidents, mealtimes, maintenance and repairs, health and safety, and environmental risk assessments would help to ensure that the service can monitor the quality of the service, highlight good practice as well as any risks, and take action to address any issues that should arise.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that "I benefit from a culture of continuous improvement with the organisation having robust and transparent quality assurance processes" (HSCS 4.19).

This area for improvement was made on 23 May 2019.

#### Action taken since then

This area for improvement was made in 2019. The set up, management arrangements and size of the service have changed since then. We now use a new framework for inspection. We have made a new area for improvement under key question 2 (area for improvement 2) to better reflect the aspects of this area for improvement which are outstanding.

The area for improvement will be removed.

### 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?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very 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
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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