

AGENDA ITEM NO 4

REPORT NO 66/18

SCHEDULE 1

ANGUS COUNCIL

CHILDREN AND LEARNING COMMITTEE

20 FEBRUARY 2018

**CARE INSPECTORATE INSPECTION OF BRAMBLE COTTAGES CARE HOME
SERVICE**

BACKGROUND

As a minimum, the Care Inspectorate conduct annual unannounced inspections for registered services, that is care homes for older people; care homes for adults; care homes for children and young people; support services - care at home and secure accommodation. All other services such as pre-school centres receive a minimum frequency of inspection based on an intelligence-led risk assessment and previous performance.

The inspector evaluates registered services using a framework of quality themes linked to the National Care Standards:

- Quality of care and support
- Quality of environment
- Quality of staffing
- Quality of management and leadership

Bramble Cottages Care Home Service was inspected on 22 September 2017. This followed a challenging period operationally which had led to the closure of one of the two houses. A detailed action plan has been developed to address the issues noted in the report. The inspection report was published on 20 November 2017 and can be found online at:

www.careinspectorate.com/berengCareservices/html/reports/getPdfBlob.php?id=293666.

SUMMARY OF INSPECTION OUTCOME

What the service does well

- Many of the established systems and processes as well as the positive commitment of the manager, depute and the staff team had enabled some young people to make progress.
- Care plans were individualised reflecting a depth of knowledge and understanding of the young person and their needs.
- Transition plans has been developed and implemented in partnership with the young people and at a pace which met their needs.
- Staff have established caring, supportive relationships with young people.
- There was ongoing support following young people moving on from the service, and staff were able to recognise the importance of preserving friendships between young people, families and staff.
- There was evidence of a nurturing approach to care. There were regular shared mealtimes with healthy, well cooked food. Staff recognised the importance of rhythms and routines to provide a sense of security.
- The commitment of the skilled core staff team was commendable. They had worked flexibly to cover shifts and provide continuity of care.

What the service could do better

- Due to insufficient staffing levels, Rowan Cottage was closed in August 2017 and as a result some young people's placements were disrupted with a move from one cottage to another and three young people placed outwith the service. As a result some young people were distressed and the young people who remained at Bramble Cottages became anxious and unsettled.
- The service provider must take urgent action to ensure that optimum staffing levels are maintained at all times and that appropriate strategic plans are in place to avoid the service reaching a critical point.
- Three emergency admissions had taken place within the space of a few weeks. In order to reduce the risk to young people and the service as a whole the service must review and implement the admissions procedure, with specific reference to how emergency admissions will be managed.
- A number of other pressures had contributed to a very challenging and unsettling period of time for the service. The service is working with some young people who displayed extremely challenging behaviour which included numerous assaults on staff. This has clearly had a negative impact on the health, safety and wellbeing of other young people and staff.

Service also needed to consider the following:

- Develop a strategy to manage smoking in a way which promotes the health and safety of young people.
- Make sure that expiry dates for prescribed medication are recorded.

- Improve the way that complaints from young people are handled, including formal written responses, where appropriate.
- Make sure that notifications are made timeously in line with the Care Inspectorate's guidance on notifications.
- To support continued development, the service should maintain the frequency of team meetings and should continue to develop the effectiveness of quality audits.

RECOMMENDATIONS

No of recommendations: 0

REQUIREMENTS

There were four requirements issued in respect of the service:

1. In order to make sure that the health, safety, and wellbeing of young people is consistently supported, the service provider must ensure that, at all times, there are sufficient suitably qualified and competent persons working in the care service. Timescale: 31 October 2017.
2. The service provider should keep a record of the assessment that identifies the minimum staffing levels and deployment of staff on each shift over a four-week period. This will take into account aggregated information about the age and stage of development of the young people living there, the mix of ages, the layout of the building, the support needs of each young person, the skills and experience of the staff, and any additional information which may affect the staffing needs, over and above the minimum requirement. Timescale: 31 October 2017.
3. In order to promote the health, safety, and wellbeing of young people, the service provider must implement an admissions policy which includes an assessment of suitability of the placement for the young person, as well as considering the impact of new admissions on young people who are already living in the service. Timescale: 30 November 2017.
4. The service provider must review the provision of education to young people in Bramble Cottages and ensure that each receives sufficient educational input and support to enable them to achieve their academic potential. Timescale: 30 November 2017.

INSPECTION GRADES

Quality of care and support	2 - Weak
Quality of environment	not assessed
Quality of staffing	2 - Weak
Quality of management and leadership	2 - Weak

IMPROVEMENT PROGRESS

The service has taken the feedback seriously and a new management team is working with staff at the service to undertake a full review of arrangements and lead improvement. All the requirements have been satisfactorily addressed:

A record of the assessment of staffing levels and deployment of staff is in place and has been shared with and approved by the Care Inspectorate. This is monitored by the senior manager who continues to work to ensure that the staffing arrangements are appropriate.

An admission policy which includes requirements for the assessment of placement suitability and placement impact has been developed and was approved on 29 November 2017 for immediate implementation.

A review of the provision of education in place for residents has been completed ensuring that each resident receives sufficient educational input and support.

Contact for further information:

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