

ANGUS COUNCIL

CHILDREN AND LEARNING COMMITTEE

15 AUGUST 2019

CARE INSPECTORATE INSPECTION OF CARSEBURN ROAD 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 inspectorate evaluates registered services using a framework of quality themes linked to the National Health and Social Care Standards:

- How well do we support children and young people's wellbeing
- How good is our leadership?
- How good is our staffing?
- How good is our setting?
- How well is our care and support planned?

Carseburn Road (Care Home Service) was inspected on 23 April 2019. The inspection report was published in June 2019 and can be found here [Inspection Report](#).

Carseburn Road is a three bedroom care home located in Forfar. The service has been established to meet the needs of young people with complex health issues. This Inspection was undertaken using the new National Health and Social Care Standards and is the first inspection of this kind for the Children, Families and Justice Service.

**SUMMARY OF INSPECTION OUTCOME**

**How well do we support children and young people's wellbeing?**

The report noted that our young people had developed positive, meaningful relationships with most staff. Their capacity to adjust to and accept new staff had improved significantly over time, reflecting an increased sense of security.

Staff talked with genuine warmth and compassion for young people. They knew them well and responded to them with patience and understanding. They demonstrated a strong commitment to safeguarding young people's privacy and dignity which was also reflected in personal care plans.

Young people exercised a lot of choice in their day-to-day care. Staff worked with them to help achieve a balance between having choices and making good decisions.

Young people knew how to make a complaint. There had been one complaint which had been investigated and responded to.

Staff were passionate advocates for young people. There was limited involvement with independent advocacy services, reflecting young people's choice. For this reason, it was suggested that the service

should further develop staff awareness and understanding of young people's rights, with particular reference to those related to disability. This is being taken forward by the service.

Young people were strongly encouraged to take part in a range of activities and there have been some notable successes, including holidays abroad, trips out and participation in a football team.

The establishment of an 'events champion' who had devised a creative programme of activities in consultation with young people reflected the importance placed on this by the service. Unfortunately, despite staff enthusiasm, young people often decided not to participate in activities they had initially expressed an interest in.

A key strength is the way that family and friends were welcomed into the house. During the inspection, friends came for tea and family members dropped in to visit. Staff facilitate joint activities with family members outside the house.

Young people had individualised education packages. Staff worked closely with education colleagues to support attendance and attainment. Achievements were celebrated enthusiastically.

Staff were aware of the potential risks for young people when they were out and about in the community and risk management plans were in place. Staff responded quickly if young people needed support when out of the house. However, staff would benefit from additional training to develop their understanding of both child and adult protection issues and to consider the additional vulnerability which may arise as a result of disability. This will be part of our action plan going forward.

The service was very good at supporting young people with complex health needs. Staff made sure that young people attended medical appointments, were fully supported with hospital stays, and helped to follow through with health-promoting routines. There was good documentary evidence to show that this has had a positive impact on their health.

### **How good is our leadership?**

A well-defined quality assurance framework had been established. This included a range of regular reports and audits which supported good practice. Staff were designated 'champions' for specific areas of practice, a positive idea which shared responsibility for quality and provided opportunities for staff to develop skills and expertise.

Supervision was regular, focussed, and clearly recorded. From a sample of records, the Inspectors could see that it was used as a means of monitoring and guiding practice. Group supervision was offered to sessional staff on a quarterly basis.

Monthly placement reviews were being held, chaired by the manager and attended by members of the key team, the social worker, and young people when they wished to. These were an effective means of ensuring that care plans were progressed and supported by the manager.

Overall, the Inspectors found that quality assurance was led well and had a positive impact on the quality of young people's experiences. The service should continue to build on identified strengths and use suggested areas for development to improve practice.

### **How good is our staff team?**

For the most part, there were sufficient staff on shift to comfortably meet young people's needs. The situation had improved since the last inspection and there was now virtually no use of agency staff, while the expansion of the sessional staff pool helped to improve consistency and stability.

There was evidence to show that when planning the deployment of staff, account was taken of the need to provide additional staff to enable young people to participate in specific activities, for example swimming or football. However, the service needed to develop a format for assessing and recording appropriate staffing levels which takes account of young people's needs and staff skills and experience.

This should be prepared in advance and reviewed on a four-weekly basis. This action has been incorporated into the service development plan.

Generally, staff worked well as a team. There was a positive mix of skills, ages, experience, and personalities which provided young people with a diverse range of people to relate to and benefit from.

In discussion, some staff indicated that the team would benefit from opportunities to meet and discuss their practice. A new rota provides more time at shift changes. The service should develop a more structured approach to shift handovers to allow for reflection and forward planning.

Some training relevant to the complex needs of young people had been provided and staff had found this useful. However, the service needs to undertake a staff training needs analysis and to develop a staff development plan to support the specific training needs of this team.

### **Areas for improvement**

1. To ensure that staffing levels are right at all times and in line with our guidance to providers about records which all services must keep, the service should develop a format for assessing and recording appropriate staffing levels which take account of young people's needs and staff skills and experience.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "My needs are met by the right number of people" (HSCS 3.15).

This has been completed and a staffing risk assessment is in place and shared with all staff.

2. To ensure that people using the service can have confidence in the people who are caring for them, the service should complete a training needs analysis and a training plan which takes account of the complex and specific needs of the people who are using the service.

This is to ensure 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).

A training plan has been drafted and a member of the Investigation team has done some basic training on child protection issues with the staff group so far.

### **How good is our setting?**

The house provides a pleasant, light environment which is well placed to allow for access to town, schools, and family. The advantages of the location in allowing young people to be more independent and to have regular informal contact with family and friends is a key strength.

The house has recently been further adapted to allow each young person to have their own bedroom. Young people had been closely involved on the decision-making and implementation of this change and had chosen furnishings, décor and layout. Young people said that they were happy with their rooms.

Although this arrangement has meant the loss of the communal living room, all concerned (staff, young people, and placing social workers) felt that this has been a positive development, affording each young person a much greater degree of privacy and independence.

Young people's access to the outside world had been enhanced as they now have internet access. With a clear policy, extensive discussion, and individual, age-appropriate agreements, the introduction of internet access had been well managed. The opportunity to gain more internet time had proved a positive incentive for young people.

## How well is our care and support planned?

The service's approach to care planning had improved significantly since the last inspection, with regular monthly placement reviews which had young people at their heart. The meetings included the manager, key team, and placing social workers and reflected young people's views. The individualisation of care planning, including having allocated separate social workers and having separate reviews, was an important development. One young person attended a recent meeting, participated well, and found it a positive experience and it is hoped that this will be built on.

Young people's files included good, detailed, and personalised pen pictures and individualised personal care plans. Clear well written behaviour support plans were in place and appear to have contributed to a significant reduction in incidents of challenging behaviour.

The service had made a good start to implementing an outcomes framework which has involved young people in discussing and setting individualised targets linked to looked after and accommodated children (LAAC) reviews. Staff need more time and support to make the most of these as a useful care planning tool. The service should also consider how these can be incorporated into the monthly placement review structure.

The Inspectors recommended that the incident recording system should be reviewed. The corporate recording system does not lend itself to recording key events in young people's lives from their perspective, nor does it make it easy to analyse and review incidents in the context of young people's overall care plan.

Overall, we found that the improvements in care planning were having a positive impact on young people's experiences and outcomes.

## INSPECTION GRADES

How well do we support children and young 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

Contact for further information:

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