

ANGUS COUNCIL

CHILDREN AND LEARNING COMMITTEE - 17 SEPTEMBER 2019

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 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?

Bramble Cottages Care Home Service was inspected on 28 June 2019. The inspection report was published in August 2019 and can be found at [Bramble Inspection Report](#)

Bramble Cottages is a care home service for children and young people. The service is located in purpose-built premises on the outskirts of Arbroath. It comprises two cottages, Logan and Rowan. The service is registered to provide care for up to nine young people at any one time, with four in each cottage and the potential for an additional placement in the annexe to Logan Cottage.

At the time of this inspection, three young people were staying in Rowan Cottage, and one was admitted during the period of inspection, and four in Logan Cottage. Although registered as a single service, the two cottages are currently operating as two distinct houses with dedicated staff teams.

This inspection was undertaken using the new National Health and Social Care Standards.

**SUMMARY OF INSPECTION OUTCOME**

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

At Bramble Cottages, young people formed meaningful relationships with staff. This promoted their health and wellbeing and helped them to get the most out of life. It was noted that relationships were respectful and characterised by genuine care, good humour, and spontaneous physical affection.

Children's views were respected and they were encouraged to be involved in discussions about their care in ways which were comfortable for them. Not all wanted to be involved in planning meetings or reviews but staff spent time talking about plans and reflecting their views in discussions.

Young people were aware of their right to independent advocacy and had been encouraged to access services appropriately. However, key staff were very effective advocates for young people and the uptake of external advocacy services wasn't high. Young people's views were valued. They had been

consulted about day-to-day life in the cottages and wider issues. For example, they had been meaningfully involved in discussion of the service's anti-bullying strategy.

Through the development of strong collaborative links with schools, all young people had been supported to sustain and improve attendance and achievements in education. For one young person, attendance had increased from less than an hour a day to almost full time with improved concentration and behaviour in school.

For another, it had resulted in achieving national qualifications in unsettled circumstances. A third young person had gained awards and made a successful transition into college and employment.

Care staff worked alongside teachers to help develop therapeutic techniques to support children with additional support needs, reflecting their commitment to achieving consistency and improved outcomes.

Young people were actively supported to participate in a great range of activities, including football, bowling, basketball, and swimming. One young person was very pleased to have learned to swim for the first time. They made the most of community facilities and one young person was getting a great sense of satisfaction from regular volunteering. A fun activities programme was planned for the summer, with young people having had a big input into planning.

Staff demonstrated an understanding of how trauma and loss had affected young people and described how it informed their secure base approach to practice.

There had been a small number of incidents when young people had not felt safe as the result of the actions of others. While clearly these incidents had caused a degree of upset, the service had taken positive action to reduce and minimise the impact of these on young people's wellbeing.

Staff set safe boundaries and good routines. They had been particularly successful at helping young people to get into better night time routines, with improved sleep patterns having had a positive impact on young people's daytime experience.

There were very good arrangements for making sure that young people's health needs were met. Arrangements for managing medication were satisfactory, though the service should take account of the suggestions made during the inspection to improve record-keeping.

It was noted that key staff had persisted in supporting young people to access mental health services, to make sense of their diagnosis and to accept treatment. It is unlikely that this would not have happened without skilful and passionate staff advocacy.

Overall, Bramble Cottages demonstrated major strengths which had a positive impact on young people's experiences and outcomes.

### **How well is our care and support planned?**

Care planning was aspirational and reflected a collaborative, multi-agency approach to improving outcomes.

Regular planning and review meetings were used constructively to discuss and monitor young people's progress. However, it was felt that the system could be improved by developing the written care plans to become SMARTer (that is, more specific, measurable, attainable, relevant, and timely). Some very positive work was being done but wasn't captured and reviewed, which would have made it more effective and relevant to the overall plan. Some plans clearly stated who was responsible for specific pieces of work, but not all.

Staff were creative in their approach to recording daily and weekly plans in a format which made sense to young people. For example, by using symbols and whiteboards. They used the wellbeing web to help young people to talk about their progress.

Young people were at the heart of the care planning process and although some chose not to attend meetings, through their key workers they were able to influence decisions. The service should continue to develop ways in which young people can be more closely involved in formal care planning structures and be helped to recognise their own voice within their plans.

Some concerns were raised about the clarity of record-keeping in relation to incidents. In a positive attempt to preserve young people's privacy and dignity, some records were held in the form of 'supplementaries' but these were not structured and there was a lack of clarity and guidance about their use. They were sometimes used to record incidents of physical restraint but the lack of structure meant that some information was not captured in line with holding safely best practice guidance. This is being reviewed.

Records of incidents should also be held in a way which enables them to be read and understood in the context of young people's lives. It was also suggested that the service should develop a more formal system for recording and responding to complaints and this is currently being developed.

Overall, the approach to care planning had important strengths which supported positive outcomes. However, the service should improve systems as highlighted in the report so as to continue to maximise positive outcomes for young people.

#### **INSPECTION GRADES**

|   |               |
|---|---------------|
| How well do we support children and young people's wellbeing? | 5 – very good |
| How good is our leadership?                                   | Not assessed  |
| How good is our staffing?                                     | Not assessed  |
| How good is our setting?                                      | Not assessed  |
| How well is our care and support planned?                     | 4- good       |

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