

Rosslyn Avenue Care Home Service

Rosslyn Children's Unit
17-19 Rosslyn Avenue
East Mains
Glasgow
G74 4BP

Telephone: 01355 228624

Type of inspection: Unannounced
Inspection completed on: 18 December 2017

Service provided by:
South Lanarkshire Council

Service provider number:
SP2003003481

Care service number:
CS2003001375

About the service

This service registered with the Care Inspectorate on 1 April 2011.

Rosslyn Avenue Children's Care Home is owned and managed by South Lanarkshire Council. It is registered to provide a care service for a maximum of seven children. Eight children can be accommodated when two siblings share the largest bedroom. The care home is a large house in a residential area in East Kilbride. The two storey building was purpose-built to accommodate a group of young people. It has been well designed to blend in with the other housing in the area.

The accommodation consists of seven bedrooms, all of single occupancy. Young people had good access to bathrooms, showers and toilets. There are very comfortable living spaces on the ground floor, with five bedrooms upstairs and two bedrooms downstairs. There are very good facilities for young people to meet with visitors.

The service aims include; "to protect young people from threats to their health, welfare and development inside and outside the house."

What people told us

Most of the young people told us that, in the main, they like living at Rosslyn Avenue. They could all identify staff they got on well with and who they felt supported them.

Some of the young people told us that other residents slapped them and were threatening towards them. They said that staff intervened when they saw that happening but it did not make it stop. We were told that sometimes these incidents were not reported to staff for fear of reprisal from the perpetrator.

Young people said that they enjoyed the company of the staff. However, they said that they often felt that staff did not have enough time for them as they were busy doing office things, or attending to other young people.

There had been a prolonged period where young people's possessions were being stolen by another young person. Young people said it made them angry when their possessions could not be kept safe.

Self assessment

The service had not been asked to complete a self assessment in advance of the inspection. We discussed their improvement plans and quality assurance systems which identified their priorities for development and how they were monitoring of the quality of the provision within the service.

From this inspection we graded this service as:

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

What the service does well

At this inspection we looked at Quality Themes of 'Care and Support', 'Staffing' and 'Management and Leadership'.

We found that there were good outcomes for some young people who were living at Rosslyn Avenue. Some of the young people were attending and achieving at school and on work placement.

The staff had developed positive relationships with young people and the basic care provided was good. This has been hard to maintain in the context of staffing shortages. It was evident that staff were committed to the young people they care for and they worked hard to provide a supportive and nurturing culture within the home.

The staff highlighted young people's skills and personal attributes which helped them to build positive self-esteem. We saw staff helping young people to manage their relationships giving them direction and support.

The young people were confident when speaking to staff and well prepared to give their views about how they were cared for. We saw that the staff were sensitive and considerate towards the young people and were respectful of their personal views.

Some of the young people told us that they enjoyed activities both within the home and in the local community. Staff supported them in their chosen hobbies and offered new experiences whenever possible.

South Lanarkshire Council had a contract with 'Who Cares (Scotland)' to provide advocacy services for young people. A worker from 'Who Cares (Scotland)' visited the home regularly to speak to the young people and advocate on their behalf.

Young people had access to a variety of health professionals in order to meet their health needs. We found that there was very little medication held in the unit. Prescribed medication was well recorded.

The home was proactive in arranging visits from careers advice to help young people preparing for employment.

We saw good relationships between staff and they provided good role models for the young people. Staff told us that they felt supported by colleagues and managers. The staff and young people held the manager in very high regard.

What the service could do better

At the time of the inspection the service had 2.5 staff vacancies and a level of staff sickness that was impacting on the service. Core staff and management were working extensive additional hours to ensure continuity and continued basic care for young people. This had had serious impact on the outcomes for young people. The staffing situation affected all quality themes and as a result we have graded the service as 'weak' for Care and Support, Staffing and Management and Leadership. **See requirement 1.**

The care plans and risk assessments we looked at were poor in content and quality. They contained minimal information about the needs of the young people and therefore did not identify strategies staff should use to help young people make progress or to minimise risk to keep them safe. Much of the information held was not signed or dated which made assessing the relevance difficult. All of this meant that staff were inconsistent in their approach to young people and, in some cases, were not aware of the risks that individual young people

could present. We were also concerned that staff believed they did not need to have care plans in order to work effectively with the young people.

There was little evidence of the plans being reviewed regularly. We noted that, even where there was a high level of vulnerability, the system for sharing information and ensuring that staff were effectively informed about risk and keeping young people safe was not sufficiently robust. We have made a requirement about care planning and risk assessments. **See requirement 2.**

In addition, the local authority had introduced a new care planning system which the staff were clearly struggling with. Despite some direction from a manager from another children's home, there was a lack of clarity about how the new system worked and what was expected of staff. The new system also depended on computer access which was very limited within Rosslyn Avenue. **See recommendation 1.**

We found a lack of coordination between placing social workers and the home. Some young people had not seen their social worker for several months and changes in social worker had not resulted in a visit from the new social worker. Statutory 72 hour reviews, where young people were placed on an emergency basis, had not taken place, nor had placement disruption meetings for children arriving from foster placement. In addition, essential information plans and paperwork held by social workers was not made available to the home in order to plan effectively for the young people. Whilst we recognised that the placing social workers held some responsibility for this and that they too have their own pressures, we suggested that the staff at Rosslyn Avenue should do more to advocate for the young people in their care and insist on visits from placing social workers and receipt of essential paperwork. We have made a recommendation about this. **See recommendation 2.**

Despite the staffing issues the local authority continued to place young people in the home. A number of crisis placements and young people with serious complex needs added to the pressures on staffing and impacted on day-to-day living for the young people. This was evidenced by the increase in unsafe incidents within the home and in the community. **See recommendation 3.**

Young people told us that they had been slapped and bullied by other young people. Whilst staff intervened when that happened, the behaviour had not stopped. **See requirement 3.**

Whilst staff said they felt supported by their colleagues and managers we found that many of the staff support systems had broken down. Team meetings were not taking place, staff had not received one to one formal supervision, training days and staff development days had been cancelled. **See requirement 4.**

The manager and depute manager were equally pressured by working additional hours and providing basic care and this had impacted on the opportunities for managers to carry out management tasks and quality assurance having less priority. An example of this being lack of oversight of care planning and failure to submit relevant notifications to the Care Inspectorate. **See requirements 2 and 4.**

During the inspection we made some suggestions to the depute manager about how administration of homely medication could be improved.

At feedback the manager of the home and the external manager were accepting of our findings and committed to making improvements based on our requirements and recommendations. They told us about some initiatives already started such as recruitment of staff.

Requirements

Number of requirements: 4

1. The provider must ensure that enough staff are employed in the service with the skills and knowledge to meet the needs of all of the young people.

This is in order to comply with:

SSI 210 (2011) 4 (1)(a) - a regulation that a provider must make proper provision for the health, welfare and safety of service users.

Timescales: by 18 February 2018

2. In order to protect young people the provider must demonstrate and ensure that all young people have a care plan. This must include:

- Staff completing the care plan must have appropriate knowledge and expertise to undertake the assessment of need or risk.
- Detailed chronology and assessment of need has been sought and provided by the placing social worker to enable effective care planning.
- Clear risk assessments must be in place which identify the risk and action to be taken to address the risk. Sufficient detail regarding the need or risk must be recorded.
- The care plan must be communicated to staff involved in the day-to-day care and support of the young person.
- The plan must be reviewed at appropriate intervals, at least every six months, and appropriate staff, professionals and agencies must be involved in the review process.
- The review must consider how effective the care plan has been and any other action that is needed to address the needs of the young person.

This is in order to comply with:

SSI 210 (2011) 4 (1)(a) - a regulation that a provider must make proper provision for the health, welfare and safety of service users.

Timescales: Risk assessments must be put in place on receipt of this report. Care plans by 2 March 2018

3. The Provider must carry out a review of the bullying incidents, develop an anti-bullying strategy and put an action plan into place in order to keep young people safe.

This is in order to comply with:

SSI 210 (2011) 4 (1)(a) - a regulation that a provider must make proper provision for the health, welfare and safety of service users.

Timescales: by 18 February 2018

4. The provider must ensure that quality assurance systems are robust and used effectively in order to identify areas for improvement. This must include:

- staff supervision which is recorded, identifies staff strengths, areas for development and training needs and review of case work
- regular team meetings
- review of incidents and appropriate notification to the Care Inspectorate

This is in order to comply with:

SSI 210 (2011) 4 (1)(a) - a regulation that a provider must make proper provision for the health, welfare and safety of service users.

Timescales: Incidents notifications - on receipt of this report. Audit systems by 18 February 2018

Recommendations

Number of recommendations: 3

1. The provider should ensure that staff have sufficient training and resources to effectively implement care planning systems.

National Care Standards, Care homes for children and young people: Standard 4, Support arrangements and Standard 7, Management and staffing.

2. The service should ensure that placing social workers are aware of their responsibility to visit young people and provide appropriate paperwork to support the placement. Managers and staff in the home should be proactive in following this up.

National Care Standards, Care homes for children and young people: Standard 4, Support Arrangements.

3. The provider should consider strategies to minimise disruption to the lives of young people as a result of crisis placements.

National Care Standards, Care homes for children and young people: Standard 4, Support Arrangements.

Complaints

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

Inspection and grading history

Date	Type	Gradings	
16 Mar 2017	Unannounced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	Not assessed
4 Feb 2016	Unannounced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
21 Jan 2015	Unannounced	Care and support	5 - Very good
		Environment	4 - Good
		Staffing	5 - Very good
		Management and leadership	4 - Good
23 Dec 2013	Unannounced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
26 Nov 2012	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	5 - Very good
13 Dec 2010	Unannounced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
29 Jul 2010	Announced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	4 - Good
26 Jan 2010	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good

Date	Type	Gradings	
		Management and leadership	4 - Good
27 Aug 2009	Announced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
19 Mar 2009	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	3 - Adequate
15 Sep 2008	Announced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	3 - Adequate

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿੱਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.