

Action for Children - Clifton Road Care Home Service

311 Clifton Road
Aberdeen
AB24 4HN

Telephone: 01224 699656

Type of inspection:
Unannounced

Completed on:
29 May 2018

Service provided by:
Action for Children

Service provider number:
SP2003002604

Service no:
CS2014333318

About the service

Action for Children - Clifton Road provide a care home service for a maximum of seven young people between the ages of 16 and 21. The service is provided from a large detached house, with three self-contained 'bungalows' to the rear of the property. The accommodation has four en suite bedrooms in the large detached house, and three self-contained properties at the rear, intended to allow a greater level of independence for young people who would benefit from this. The house has a large communal living room, dining room, 'chill out' room and kitchen.

The service is close to local shops, parks and public transport links, with Aberdeen City Centre a short bus journey away.

What people told us

During the inspection visits three of the four of the six young people living at the service had the opportunity to speak to the inspector. Three young people also returned questionnaires to the Care Inspectorate prior to the inspection.

Young people were relaxed in the company of staff (and each other) during the inspection. They spoke warmly about various members of staff and how they were getting on at college and work. A recent change had left some of the group feeling more safe and settled, though with some uncertainty about the future. Generally there was lots of laughter and good feeling about the house.

Two of the three questionnaires returned were positive with young people agreeing that they were happy with the quality of care they get. The other was less positive and disagreed with that statement.

Only one social worker provided the requested feedback. Their response was very positive about the improvements to the service, the consistency and quality of staff and the supportive management. Positive comments were also made about good communication and positive relationships between young people and their keyworkers.

Self assessment

No self assessment had been requested by the Care Inspectorate.

From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of environment	5 - Very Good
Quality of staffing	3 - Adequate
Quality of management and leadership	4 - Good

Quality of care and support

Findings from the inspection

Relationships between young people and the staff caring for them were good. Young people were seen to enjoy spending time with staff who knew them well and were genuinely interested in their wellbeing. Young people had benefitted from a greater stability within the staff team and a more consistent approach.

The majority of the young people were doing well in education or employment. Those who were not working or in college were encouraged and supported to consider their future plans and how they could do this.

Young people were supported to register and attend healthcare services to maintain positive physical and mental health. Specialist services were accessed where these were beneficial and health related services had attended the staff meetings to share knowledge of the support they could offer. Support plans acknowledged the potential harmful effects of tobacco use, however, offered limited strategies to support young people to stop or minimise smoking. This would be beneficial (See "Creating a tobacco-free culture- Guidance for providers of residential care for children and young people").

Appropriate systems were in place for the safe administration of medication, however, there had been a significant amount of medication errors prior to the inspection. In response to these errors an increased level of auditing had been put in place. Whilst understandable this had led to a significant increase in the handling of medication which was not ideal. It may be helpful to consider whether an alternative arrangement can be made which does not lead to increased handling of medicines, or the need to remove them from the room they are stored in.

Support plans and risk assessments were variable in their content and quality. There was improvement from the previous inspection (and the requirement made), however, there were still significant omissions, including important information about young people at the time of admission to the service. The manager had a very clear plan of improvement which included documents and prompts to staff which should improve the quality of information and increase the confidence of staff. This will be examined at the next inspection. **(See recommendations 1 and 2.)**

To ensure the safety of young people, and where assessed as necessary, room searches were carried out. A recording system was in place to support this practice, however, it was rarely used. In order to safeguard young people, and uphold their human rights, this should be completed each time a room search is necessary. **(See recommendation 3.)**

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 3

1. All young people should have support plans which identify their support needs and how these will be met. They should be reviewed on a regular basis to ensure they are current and accurate.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that "My personal plan (sometimes referred to as a care 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)

2. Prior to any young person moving into the service there should be sufficient information available to determine whether the service is able to meet the needs of that young person, and whether there are sufficient staff to ensure the care and safety of all of the young people living there.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that "I am confident that the right people are fully informed about my past, including my health and care experience, and any impact this has on me" and "my needs are met by the right amount of people" (HSCS 3.4 and 3.15)

3. Where room searches are assessed as necessary to safeguard young people they should be fully recorded. All searches should comply with an appropriate policy.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that "My environment is secure and safe" (HSCS 5.17)

Grade: 4 - good

Quality of environment

Findings from the inspection

The service was provided from a large detached property with three self-contained properties to the rear of the building. The building is close to local shops and amenities and a short bus journey to the city centre of Aberdeen.

The main building and properties to the rear had been extensively refurbished to a high standard. All of the bedrooms were spacious and had en suite facilities. The 'bungalows' to the rear of the property were self-contained with a bedroom, kitchen, bathroom and living area. The properties to the rear of the building offered young people greater independence with continued access to staff support, but at a reduced level. They provided young people with the opportunity to develop the skills required to manage and maintain their own accommodation, prior to getting a flat in the wider community.

All of the communal areas were pleasantly decorated to provide a warm, homely environment. Young people were observed to spend time relaxing in the communal areas, chatting to staff and cooking meals.

Environmental checks were in place and consistently carried out. Staff had been delegated individual roles and completed relevant training such as Asbestos awareness, Legionella and Cooksafe.

At the time of the inspection one of the bedrooms was extensively damaged. Despite ongoing repairs the room was in a very poor condition. Staff at the service and within the organisation were aware of the difficulty in maintaining the room to a suitable standard, however, there was no real solution. This will be further examined at the next inspection.

There were some issues with the prompt repair of systems which the service depended on (internet and CCTV). While every effort was being made to have these repaired they had not been timeously repaired.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 5 - very good

Quality of staffing

Findings from the inspection

The staff team continued to comprise of staff employed by Action for Children and those employed via an agency. Despite this there had been few staffing changes since the last inspection, with the agency staff being on the rota full-time and as such a stable and consistent part of the team. All of the staff spoken with were committed to the service and providing consistent care to the young people who lived there.

Staff within the team were at various stages of their professional development. They were supported by enthusiastic and capable senior staff (the manager and team leaders) who were supporting improvement throughout the team. Team leaders worked alongside the staff team providing high levels of support and mentoring. Keyworkers had been identified for all of the young people and were being supported to develop and review support plans and chronologies, and other important documentation. Formal supportive processes were in place for staff including regular group and individual supervision, appraisal and performance management support.

Regular structured team meetings had been established. They included set agenda items such as sharing 'good news' stories, safeguarding and continuous professional development (CPD). Guest speakers had been invited to provide staff with information about the service they were involved with and how they could support the staff or young people.

A comprehensive induction was in place for new staff. This included service and corporate induction, shadowing experienced staff, and working alongside senior staff. Corporate and service specific induction books were also in place to support the new employee. New employees reflected that it had been a positive supportive process.

All of the staff were registered with the Scottish Social Services Council (SSSC) and had access to training provided by Action for Children and Aberdeen City Council. At the previous inspection a recommendation had been made that staff complete key training including proact SCIP (Strategies for Crisis Intervention and Prevention). At this inspection the SCIP training had not been completed, however, would be delivered in late June 2018.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 3 – adequate

Quality of management and leadership

Findings from the inspection

The manager had a real vision for the service and was actively moving it forward. Progress was considerable and informed by good professional knowledge and experience and a highly person-centred approach. Expectations for the service, and the staff team, were high, and though not all of the initiatives were fully implemented or embedded there was support to ensure that they would be. Team leaders were effective in sharing good practice and supporting staff to develop good professional knowledge and understanding. Where practice had not been of a high standard this had been effectively addressed.

Numerous external and internal auditing systems were in place. The service received external monitoring and support from senior staff within Action for Children and Aberdeen City Council. Various reports had been produced which identified progress and further areas for improvement, with associated action plans which had been acted on. Internal file auditing had been carried out, however, progress in addressing the required, identified changes had been slow with significant omissions in the information used to support young people **(see 'Quality of care and support' in this report).**

Partnership working with external agencies and professionals was positive with the manager of the service establishing clear expectations and developing positive relationships with key individuals. The local authority particularly had provided support and training opportunities, in addition to those provided by the organisation itself.

Incident notifications had not been made to the Care Inspectorate as required, despite an internal recording process which identified that this should happen. This should be immediately rectified and notifications made as stated in the Care Inspectorate publication "Records that all registered care services (excluding childminding) must keep and guidance on notification reporting". **(See recommendation 1.)**

Regular assessment of staffing levels and deployment should be made (also as detailed in the above Care Inspectorate document). This is particularly important prior to the admission of any new resident and would ensure that staffing numbers were sufficient to promote good care and safeguard young people. **(See recommendation 2.)**

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 2

1. Incidents should also be notified to the Care Inspectorate as detailed in the Care Inspectorate publication "Records that all registered care services (excluding childminding) must keep and guidance on notification reporting".

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that "I experience high quality care and support based on relevant evidence, guidance and best practice" (HSCS 4.11)

2. Regular assessment of staffing levels and deployment should be made to ensure that there are always enough staff to meet the needs of the young people, and meet the expectations detailed within the Care Inspectorate "Records that all registered care services (excluding childminding) must keep and guidance on notification reporting".

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that "I experience high quality care and support based on relevant evidence, guidance and best practice" (HSCS 4.11)

Grade: 4 - good

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

Previous requirements

Requirement 1

The provider must ensure that all service users have a written plan which details how their support needs will be met. Support plans should be reviewed regularly to ensure the information is accurate and relevant.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, No 210: 5(1) - A requirement in relation to personal plans.

Timescale: Within 14 days of receipt of this report.

This requirement was made on 2 February 2018.

Action taken on previous requirement

Support plans and risk assessments had improved considerably. The requirement had been deemed met, with a recommendation in place for continued improvement.

Met - within timescales

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

Previous recommendations

Recommendation 1

Documentation which would inform the care and support young people need should be in place, and updated as required. This includes relevant healthcare information, accurate risk assessment and chronologies.

National Care Standards Care Homes for Children and Young People - Standard 4: Support arrangements

This recommendation was made on 2 February 2018.

Action taken on previous recommendation

There has been progress in relation to this recommendation, however, it has been restated to allow for continued progress.

Recommendation 2

The organisation should continue to consider how best to ensure that all young people live in an environment which ensures their safety and wellbeing.

National Care Standard Care Homes for Children and Young People - Standard 5: Your environment

This recommendation was made on 2 February 2018.

Action taken on previous recommendation

At the time of the inspection safeguarding issues had been addressed and the environment was pleasant and relaxed.

Recommendation 3

The organisation should ensure that all staff have received core training. This should include the protection of vulnerable people and Strategies for Crisis Intervention and Prevention (proact SCIP).

National Care Standard Care Homes for Children and Young People - Standard 7: Management and Staffing

This recommendation was made on 2 February 2018.

Action taken on previous recommendation

A date was in place for all staff to receive SCIP training (June 2018).

Complaints

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

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

Date	Type	Gradings
20 Dec 2017	Unannounced	Care and support 3 - Adequate Environment 4 - Good Staffing 3 - Adequate Management and leadership 3 - Adequate
22 Sep 2017	Unannounced	Care and support Not assessed Environment Not assessed Staffing Not assessed Management and leadership Not assessed
23 May 2017	Unannounced	Care and support 2 - Weak Environment 4 - Good Staffing 2 - Weak Management and leadership 2 - Weak
26 Jul 2016	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 3 - Adequate Management and leadership 4 - Good
16 Jan 2016	Unannounced	Care and support 3 - Adequate Environment 3 - Adequate 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.