

# **Aberlour Sycamore Service** Care Home Service

44 Whyteman's Brae Kirkcaldy KY1 2LE

Telephone: 01592 592124

**Type of inspection:** Unannounced

**Completed on:** 23 May 2018

**Service provided by:** Aberlour Child Care Trust.

**Service no:** CS2010272726

Service provider number: SP2010011118



# About the service

Aberlour Sycamore Service is a care home for children and young people based at 44 Whyteman's Brae, and is part of Aberlour Sycamore Services, Kirkcaldy. The service comes under the auspices of Aberlour Childcare Trust, a registered Scottish Charity, working in the fields of:

- parenting and young children's development
- children and families affected by drug and alcohol misuse
- children and families affected by disability
- young people at risk.

Aberlour Sycamore Service, 44 Whyteman's Brae, is one of four residential resources within the Sycamore Project in Kirkcaldy. There is a further residential unit in Dunfermline. The service can provide residential care for up to seven young people ranging in age from 8-18 years.

Young people have their own single rooms, and public space consists of a large sitting room, a separate dining area and a large hall. The service has an enclosed back garden and an enclosed garden area to the front.

There is a flat adjacent to the main building. This is used to accommodate occasional overnight stays for service users' families, as part of the family work undertaken by the service. In addition, it can accommodate one young person at a time, who is undertaking an Independent Living Programme prior to moving on from the service to their own independent accommodation. There is a separate building for 'creative therapy' which is also within the grounds.

The house is situated in a residential estate and allows for good access to local amenities, local schools, shops and leisure facilities.

The conditions of registration are:

Number(s) and Age(s) of person(s) to whom service may be provided:

1. To provide a 24 hour care service to a maximum of 7 young people aged between 8 years and 18 years. Staffing will be increased as appropriate to meet the needs of the children and young people and may include waking night shift if required.

Any other conditions unique to the service:

2. To provide a support service for service users, their families and former service users, in the Family Resource Centre, (flat adjacent to the care home).

3. To comply with the current staffing schedule attached dated 20 September 2010, which must be displayed together with the certificate.

The aim of the service is:

- 'To provide a quality, safe, therapeutic living environment where young people can grow and develop physically and emotionally.'

We check services are meeting the principles of Getting it Right for Every Child (also known as GIRFEC). Set up by the Scottish Government, GIRFEC is a national approach to working in a consistent way with all children and

young people. It is underpinned by the principles of prevention and early intervention. The approach helps services focus on what makes a positive difference for children and young people - and what they can do to improve. GIRFEC is being woven into all policy, practice, strategy and legislation that affect children, young people and their families.

There are eight wellbeing indicators at the heart of GIRFEC. They are: safe, healthy, achieving, nurtured, active, respected, responsible and included. They are often referred to as the SHANARRI indicators. We use these indicators at inspection, to assess how services are making a positive difference for children. Information on SHANARRI can be found at: <u>http://www.scotland.gov.uk/Topics/People/young-People/gettingitright</u>.

There were five young people living at the service at the time of the inspection; three aged 13, one aged 14 and one aged 15.

# What people told us

We were assisted by a young inspection volunteer during this inspection. She was shown round by one young person and met individually with three young people to obtain their views. We also joined the group informally over two mealtimes, and observed the interactions between young people and the adults caring for them throughout the inspection.

We also issued five Care Standards Questionnaire (CSQs) which were completed and returned to us. In these three young people indicated that they 'strongly agreed' and two 'agreed' with the statement; 'Overall I am happy with the quality of care I get here.' In the CSQs, one young person indicated that they did not feel they could keep their own things safe; did not feel protected from bullying; did not feel protected from abuse and did not agree that it was a nice place to stay. However, three young people 'agreed' with these statements and one indicated they 'did not know'.

When we spoke with young people they were generally positive about staying at Whyteman's Brae, and spoke highly of the support they had from staff and the manager. They liked the choices of food provided, and felt that there were adults they could speak with, if they were upset or had concerns. They confirmed that they usually had things to do and mostly enjoyed being there. They liked their rooms and said they could put up posters and pictures and choose bedding, to make them their own. One young person suggested that they would like more say in who moved into the service. Another expressed disappointment that agreements which had been made with the resident group had not been kept. We discussed these points with the manager at feedback.

# Self assessment

The Care Inspectorate did not request a self assessment for this inspection. We looked at the service's improvement plan as part of our assessment.

# From this inspection we graded this service as:

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

- 3 Adequate
- 5 Very Good
- 4 Good
- 3 Adequate

# Quality of care and support

## Findings from the inspection

Staff were kind and caring towards the young people. They had built up positive relationships and used these to help the young people feel safe and cared for. We saw that young people were relaxed and confident towards the adults caring for them and shared banter and spontaneous affection towards them.

Care Plans (known as My Plans) had recently been redesigned in a more child friendly format and staff were working towards using them effectively. The plans allowed for staff and young people to recognise progress being made towards achieving agreed goals. In addition, the service had implemented a system of assessment against wellbeing indicators, which provided a means of measuring outcomes and achievements. These were shared with placing social workers, along with monthly reports. Young people confirmed that their views were central to the plans for their care. Likely behaviours for each young person were identified, along with strategies to help manage these behaviours, and individual risk assessments were recorded. We discussed the need for more clarity within these plans about behaviour management strategies, including safe holds and the circumstances under which police would be called. We were concerned that the risks recorded for one young person included a reliance on police intervention, which had a potentially negative impact on the young person concerned and the other young people within the house. Not all staff within the service had been trained in techniques for holding safely to the level which had been identified as necessary for one young person. **(See recommendation 1).** 

Systems for storing records electronically were being transferred to a new system (Dynamics) and it was anticipated that this would provide a more seamless means to access and share information. The service should continue to support staff in becoming familiar with the new systems, ensuring accuracy in recording, and in building on the progress made in the system for measuring outcomes.

Staff had been given training in child protection, including child sexual exploitation. They were aware of their role in keeping young people safe; of the hazards from the use of social media and the internet, and put measures in place to minimise the risks. We discussed issues regarding one young person, and the negative impact on the wellbeing and safety of the other residents. While we saw that this move was well supported by the organisation, including relocation of staff known to the young person, it was agreed that there could have been a better assessment of the impact of this placement prior to the move. **(See recommendation 1).** 

Young people's physical and mental health and wellbeing needs had been assessed, and ways to support these were identified in their My Plans. They were registered with the local doctor, dentist, optician and pharmacy services and were referred appropriately to specialist health services. Systems for medication, including controlled medication, were used effectively and audited regularly to make sure any discrepancies were identified and rectified promptly. We saw that young people were encouraged to develop healthy lifestyles, eating nutritious meals and fresh fruit, and taking part in energetic outdoor activities. Young people were encouraged and supported to take part in a range of age appropriate games, activities, hobbies and sports and to develop social relationships. They were supported to maintain friendships and contact with people who were important to them.

Young people had opportunities to make suggestions or pass on their views directly to staff, their keyworker or the manager, as well as through young people's meetings. They had been involved in drawing up the service's development plan and were confident in passing on suggestions.

### Requirements

### Number of requirements: 0

#### Recommendations

#### Number of recommendations: 1

1. We recommend that the service:

Implements an effective system to always carry out and record a comprehensive assessment of the risks presented before any young person is placed in the service. In doing this they must consider the likely impact on the safety and wellbeing of the current group of young people living there. In addition, they must review their behaviour management strategies, clarifying the circumstances under which police are called, and then ensure that all staff have the training they need to hold safely any young person to the level required to match the assessed needs for that individual.

# This is in order to ensure that care and support is consistent with the Health and Social Care Standards which states;

'If I experience care and support in a group, the overall size and composition of that group is right for me' (HSCS 1.8).

'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20).

'If I might harm myself or others, I know that people have a duty to protect me and others, which may involve contacting relevant agencies' (HSCS 3.24).

'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).

Grade: 3 - adequate

# Quality of environment

### Findings from the inspection

Entry to the premises was secure, and visitors were requested to sign-in. This ensured that the service were aware of who was on the premises and could track who had visited, if necessary.

The house was clean, tidy, secure and safe. The communal areas had been redecorated and recarpeted throughout, and young people's photographs were attractively displayed. Young people personalised their rooms as they wished, and chose bedding and soft furnishings to make them homely. We advised that in order to prevent the spread of infection, the practice of sharing hand towels should be discouraged, and suggested ways the service could achieve this.

There were areas within the house and garden where young people could take part in age and stage appropriate games and activities, and there were plans to create another area where young people could spend time away from others in the group.

A range of health and safety checks, fire safety checks and legionella checks were undertaken routinely and recorded. Repairs and maintenance were carried out by a local housing contractor, to keep the premises in a good state of decoration and repair. The organisation ensured that vehicles were maintained safely and drivers' journeys logged, to maintain safe travel for young people. We saw that staff had a good awareness of issues of safety and security, and took appropriate steps to maintain safety.

Young people told us that they liked the way the house was decorated, and their rooms were comfortable and to their liking. We suggested that as all the room doors had been painted the same colour, the service might consider applying photographs or artwork to help personalise the doors.

Since our last inspection, the service had made use of one of the outbuildings for gym equipment, to encourage young people to take part in physical activity. We saw that the gym equipment was popular with young people and advised that the service made sure it was stored safely to prevent accidents or injuries.

#### Requirements

Number of requirements: 0

#### Recommendations

Number of recommendations: 0

Grade: 5 - very good

# Quality of staffing

# Findings from the inspection

Aberlour used safe recruitment practices for employing staff. We saw that the manager was given written confirmation that the necessary checks were satisfactory, and they then had consideration of references given, prior to posts being offered. The organisation had strengthened their induction processes following feedback from newly recruited staff. They should continue to develop their practice for induction to ensure that new staff were confident and had the supervision necessary to help them become competent, with opportunities for senior staff to observe practice and lead by example.

Staff were registered with the Scottish Social Services Council (SSSC) and had opportunities to take up training they needed in order to achieve qualifications to meet conditions on their registration.

The staff team demonstrated an openness and willingness to reflect on their practice. They met weekly, giving them opportunities for updates on the service and the young people. They also assessed where progress was being made on care plans, or where more support was needed. Day-to-day updates, plans for the shift and relevant information was shared through handovers, which also allowed for reflection on the outcomes from the previous shift and support for staff from colleagues.

It was evident that there was a learning culture within the service, and staff took up training opportunities both for their professional development, and in relation to the work they were doing with young people. From training records the manager could identify when essential training was due for individual staff, as well as through discussion at supervision. Supervision was scheduled regularly and had been taking place recently, however there had been a period when this had been less frequent than planned. While we recognised that the vacancies for assistant manager had impacted on the programme for supervision, we advised that the service now maintain regular, recorded one to one support and supervision, particularly for new staff and including regular relief staff. Staff confirmed that they felt well-supported by their colleagues, the assistant manager and the manager and were confident in approaching them for advice or if they had a concern. They told us that they had opportunities to learn from the practice example set by the manager and the assistant manager.

Most of the staff team had been given training in Dyadic Developmental Practice (DDP). This was an intervention for children who have experienced emotional trauma as a result of early experiences within the care giving relationship. The primary goal of DDP is to support children in developing the ability to maintain attachment-based relationships with parents and caregivers. The service should continue to work with the staff team to help them link strategies explored through DDP training to care planning, and helping young people manage their behaviour. Through this they could help the staff team develop confidence in using the care plans effectively. The service should also support staff to become familiar with Health and Social Care Standards (HSCS), and compliance with legislation for data protection and duty of candour.

We advised that particularly when there was a period of change, the management team should continue to work alongside the team in order to lead by example, identifying where staff may need more support and helping develop their confidence.

Staff linked effectively with other agencies who were involved with the young people, and advocated on the young people's behalf, where necessary. They supported young people to gain education, and extended their learning through providing activities and outings.

#### Requirements

Number of requirements: 0

#### Recommendations

Number of recommendations: 0

Grade: 4 - good

# Quality of management and leadership

### Findings from the inspection

There was a strong sense of leadership within the service. The manager and assistant manager had a clear vision for the service, and had shared this with the staff team. They had carried out an analysis of the service at recent development days, identifying where they thought they showed strengths, where they needed to improve and agreeing their aims for the service they wanted to provide. The service development plan was shared with the staff team and the young people, so that all knew what the plans for the service were. This included the action plan drawn up following our last inspection. Following some changes to the agreed plans, the service

may need to revisit these with young people to help re-establish a trusting relationship. As there were planned changes in management due to be happening in the near future, we advised that there was a need for increased support from external managers.

Quality assurance processes were in place within the service, leading to action plans to ensure areas for improvement were followed up. Systems of overview, via the electronic database, were also available to external managers, and we saw that this was enhanced through the transfer to the new system (Dynamics). It was evident that very thorough investigations were carried out by the organisation following any complaints made; action points identified, and followed up.

The manager, assistant manager and staff team worked in partnership with multi-agencies to achieve outcomes for young people. We advised that following recent events, where the level of risk had increased within the service, with a negative impact on outcomes for young people, a review of the service was needed as a matter of urgency, in order to meet all the young people's needs, and ensure their safety and wellbeing. Issues of risk and the negative impact young people's wellbeing, identified in Quality of Care and Support, have had an impact on the grade awarded for this statement.

In our previous inspection report we said; 'In discussion about the service's development, we advised that in order to allow the staff team to grow in confidence and develop their skills, while providing safe care for the current residents, the service would need to consider very carefully the impact of introducing another resident should they decide to offer another placement.' We would reiterate this at this inspection.

#### Requirements

Number of requirements: 0

### Recommendations

Number of recommendations: 0

Grade: 3 - adequate

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

# **Previous requirements**

There are no outstanding requirements.

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

# Previous recommendations

#### **Recommendation 1**

It is recommended that in order to establish the service's agreed ethos and culture, the management team should regularly work alongside the team in order to lead by example. Through this they should build staff confidence and identify where staff may need more support to develop their practice.

National Care Standards for care homes for children and young people. Standard 7: Management and staffing.

#### This recommendation was made on 21 July 2017.

#### Action taken on previous recommendation

The service had gone some way towards meeting this recommendation, which is discussed in Quality of Staffing. They should continue to develop their practice in this area.

# 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	Туре	Gradings	
14 Jun 2017	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good
13 Feb 2017	Unannounced	Care and support	Not assessed

Date	Туре	Gradings	
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
20 Mar 2017	Re-grade	Care and support	Not assessed
		Environment	4 - Good
		Staffing	Not assessed
		Management and leadership	Not assessed
18 Apr 2016	Unannounced	Care and support	4 - Good
		Environment	3 - Adequate
		Staffing	4 - Good
		Management and leadership	4 - Good
3 Jul 2015	Unannounced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
2 Jul 2014	Unannounced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
28 Aug 2013	Unannounced	Care and support	4 - Good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
27 Sep 2012	Unannounced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	6 - Excellent
		Management and leadership	6 - Excellent
26 Jan 2012	Unannounced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	5 - Very good
13 Sep 2011	Unannounced	Care and support	5 - Very good

# Inspection report

Date	Туре	Gradings	
		Environment Staffing Management and leadership	5 - Very good 5 - Very good 5 - Very good

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