

Bridgeway Care Service Care Home Service

Kirkcaldy

Type of inspection:
Announced (short notice)

Completed on:
22 February 2021

Service provided by:
Bridgeway Care Services Ltd

Service provider number:
SP2015012486

Service no:
CS2015337258

About the service

Bridgeway Care Service is a residential care home for up to five young people aged 15 to 20 years. At the time of inspection, the service could also provide care for two named young adults. These two young adults were the only people living in Bridgeway at the time of the inspection.

The service operates from a large, two storey building situated in its own grounds. It has two comfortable lounge/dining areas, two small kitchens and a seating area in the entrance hall.

There are a range of individual living spaces for young people including self-contained flats and en-suite bedrooms. At the time of inspection, one young adult was living in a self-contained flat within the service. The flat was spacious and provided a lounge space with kitchen and room for a small dining table. There was a separate bedroom and a shower room. The other young adult had an en-suite bedroom and used the kitchen facilities in the main house.

Public transport links are a short walk away and there are good links to the town centre. The service's aims and objectives state the home provides a safe and caring environment for young people to develop and grow into their early adult life.

What people told us

During our visit we spoke with two young adults who used the service. Both told us that they were very happy with the quality of care and support they received. Young adults told us they felt safe and had good relationships with staff. They told us they had someone to talk to when needed.

Young adults told us they had the opportunity to personalise their bedroom/flat and could make choices in relation to how they spent their time and everyday decisions such as what to wear and eat.

One young adult knew they had a personal plan and what it included. The other did not have a written plan as they had chosen not to; however, they were able to tell us how staff helped them to achieve their goals.

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

4 - Good

Young people had developed meaningful and respectful relationships with staff, and staff knew them well. There was a warmth in how both young people and staff described their relationships. While both young people were living very independently, they had a sense of belonging promoted by opportunities provided to come together. Both young people told us they enjoyed having take-away food together on a Saturday night and Sunday lunch every week.

All staff demonstrated a commitment to holding the young people at the centre of all aspects of their work by encouraging them and providing opportunities to share their views and wishes. Views and wishes were considered respectfully and realised whenever possible. Staff used their awareness of the views and wishes of young people to advocate for them when necessary.

Young people also benefited from access to independent advocacy services to support them in understanding and exercising their rights.

Young people exercised a high degree of choice in their everyday lives and received regular encouragement and support to do so in a positive, well-informed way. While restrictions due to the pandemic had limited access to opportunities to be active, young people told us they had enjoyed activities such as football and horse riding and could meet with friends in the community when restrictions were eased. Young people benefited from support and opportunities which were focused on developing life skills to enable them to enjoy as independent a life as possible whilst recognising they will require ongoing support into adulthood.

Young people told us they felt 'loved' and 'cared for' by the staff and had confidence that staff would keep them safe and were 'on their side'. Staff were able to tell us how they would report any safety or protection concerns to the manager. Staff would benefit from further training to fully understand their role and the role of others in both child and adult protection processes.

All staff identified relationships and nurture as being the key principles underpinning their practice. Some staff told us of plans to develop a social pedagogy approach. This deeper understanding would promote positive outcomes for young people by providing a framework for shared and consistent practice.

Young people were supported to maintain good physical and mental health and access health services when required. When it was right for them, young people were encouraged to contact services independently. Both young people took responsibility for cooking for themselves and, sometimes, for a staff member they invited to join them for a meal. Sensitive interactions encouraged young people to plan a balance of healthy meals.

In conclusion, we saw important strengths which, taken together, outweighed areas for improvement. Strengths were having a positive impact on people's experiences and outcomes.

This has resulted in a grade of good.

How good is our leadership?

3 - Adequate

There had been significant changes to the management structure and personnel since the last inspection. Changes have resulted in a clearer strategic management structure and more effective line management for the registered manager of the service. The development of formal support and supervision for the registered manager had begun and plans were in place to ensure she has a professional development plan which meets her needs as well as those of the service.

Plans to develop a quality assurance system are at an early stage and there is currently a reliance on external scrutiny to identify improvement needs. Both the registered and external managers told us they had plans to use the outcome of this inspection as a starting point to update their service improvement plan. However, the manager had already informally identified some areas for improvement such as the development of a philosophy of practice - 'the Bridgeway Way' of providing care. Some auditing of tasks and processes had begun; however, this was not based on any benchmarking quality criteria and the manager recognised the need to evaluate the service against a recognised quality framework such as the Health and Social Care Standards and the Care Inspectorate's quality framework. See area for improvement 1.

There had been some activity to engage young people and visiting professionals in evaluation of the service. This should be further developed to ensure the impact of the quality of care provided and outcomes for young people are considered, recorded, and used to inform service development.

The new manager demonstrated a commitment to improvement and has developed an enabling culture in which staff felt confident to openly reflect on practice. Staff told us they had a sense of coming together for a common purpose and were being encouraged to share practice and learn from each other. Staff felt listened to and that their views were respected and considered when decisions were being made.

The positive changes in management structure and organisational culture provide an ideal opportunity to reflect on the strategic direction of the service and review the vision, aims and objectives to ensure they reflect this. This will promote a consistent shared vision for the service which, in turn, can be used to inform staff development and training plans as well as guiding decisions about future admissions. See area for improvement 2.

A range of policies and procedures were available; however, these should be reviewed to ensure they reflect relevant legislation and national guidance. Strong and transparent policies and procedures will provide clear guidance for staff and promote safe and consistent practice.

Priority should be given to the review of child and adult protection, the management of medication and risk assessments for young people and the environment. See area for improvement 3.

In conclusion, we identified some strengths but these just outweighed weaknesses. Strengths were still having a positive impact on the experiences and outcomes for young people; however, improvements are necessary to address those elements of practice that did not. This is reflective of the major transition the service has been going through and the stage of development the service is now in.

Areas for improvement

1. It is recommended that a robust and transparent quality assurance system should be developed and implemented.

This is to ensure practice is in line with the Health and Social Care Standards which state: I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes (HSCS 4.19).

2. It is recommended that the vision, aims and objectives of the service are reviewed to ensure they reflect the strategic direction of service development and promote a shared understanding of service provision.

This is to ensure practice is in line with the Health and Social Care Standards which state: I use a service and organisation that are well led and managed (HSCS 4.23).

3. All policies and procedures should be reviewed to provide clear guidance for staff, promote safe and consistent practice, and ensure they are in line with national and local guidance, and relevant legislation. Priority should be given to policies and procedures for:

- a. child protection
- b. adult support and protection
- c. Management of medication
- d. Risk assessments for young people
- e. Risk assessment for the service environment

This is to ensure practice is in line with the Health and Social Care Standards which state: 'I experience high quality care and support based on relevant evidence, guidance and best practice (HSCS 4.11).'

How good is our staff team?

4 - Good

The range of staff experience was a key strength of the service alongside the team's commitment and motivation to develop and improve. A culture of reflection was developing, and staff told us how they used reflection to better inform how they interacted with young people to promote positive outcomes. Staff had developed warm relationships with young people and genuinely cared for them. Staff knew young people very well and used this understanding to inform the approaches they used to support them.

Training plans had been impacted by the pandemic; however, there was a positive approach to professional development and staff had regular opportunities for learning internally. Good use was made of team meetings to reflect on guidance documents and how these should shape practice. There had also been presentations on topics such as the Health and Social Care Standards and the role of the Care Inspectorate. These learning opportunities were appropriate to the stage of development of the team. Staff told us how they felt confident in actively engaging in the training.

Support and supervision records demonstrated regular formal sessions with a manager or senior which had a clear focus on professional development, set clear targets and reflected on progress. The frequency of formal sessions fluctuated according to the needs of individual staff with more regular sessions for newer staff. Staff told us that they highly valued informal support from the manager, seniors and peers. There was a sense of positive peer evaluation and reflection which will support the team in working towards their collective and individual goals, and, in turn, promote positive outcomes for young people.

Staffing levels were based on the needs of the young people and considered specific skills of staff. There was a high degree of flexibility which enabled staff to be responsive to the needs of the young people. One young person told us how arrangements were made to allow a specific member of staff they had a good relationship with to support them to attend an appointment.

The process of assessing staffing levels should be documented and formally reviewed on a regular basis. See area for improvement 1.

In conclusion, we saw important strengths which, taken together, outweighed areas for improvement. Strengths were having a positive impact on people's experiences and outcomes.

This has resulted in a grade of good.

Areas for Improvement

1. The system for assessing the staffing levels, skills and deployment that are required in the service throughout the day should be formally implemented and recorded, taking into account young people's physical, emotional, and social needs. This should be reviewed and recorded this on a four-weekly basis in line with Care Inspectorate guidance.

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

How good is our setting?

4 - Good

We saw that young people were benefiting from good care and support in a setting which met their needs. The availability of self-contained flats and access to the shared kitchens and laundry ensured young people had opportunities to experience increasing independence at a pace which was right for them.

Staff were respectful of the privacy of young people and had agreed boundaries for accessing young people's personal spaces while maintaining safety and security. Young people were able to individualise their flats/en-suite bedrooms by changing decoration and moving furniture.

One young person was benefiting from the positive effects of being able to have their pet in their flat.

There was two comfortable lounge areas and a seated area in the entrance hallway to spend time with others. Restrictions due to the pandemic meant that visitors or friends were not currently allowed in the house; however, when restrictions are eased, the communal lounges and seating area could be used for this purpose.

Soft furnishings, ornaments and wall-hung pictures gave some areas of the service a homely feel; however, there were other aspects of the accommodation which were less so. The building had a number of flats and bedrooms well in excess of the conditions of registration. This resulted in large areas of the house being unused. The long corridors of unused rooms, large metal staircase and two kitchens side by side portrayed a more commercial feel to the property.

Some improvements had been made externally to the front of the house including some garden fencing which made this a more attractive and homely area. The areas to the side and rear of the property were not maintained. Flat and bedroom windows overlooked these areas.

Improvements would enhance the outlook from the window and would reflect a more home like environment. Fencing was in place to restrict access and ensure safety. See area for improvement 1.

Young people were encouraged to make use of the local community when pandemic restrictions were eased. They were supported to make plans for independent travel and to participate in social and leisure opportunities.

While the accommodation and services currently provided support for positive outcomes for the two young adults currently living there, Bridgeway is registered as a care home service for children and young people. This has resulted in a blurring of the function of a children's care home and a housing support service. We will have further discussions with the provider following this inspection.

We assessed that strengths in this area were having a positive impact on young people's experiences. Some improvements were needed to maximise wellbeing to ensure consistently positive experiences. We evaluated this quality indicator as good.

Areas for Improvement

1. It is recommended that adaptations to the building and grounds be considered to make the property more fit for purpose in respect of the current service and any future development.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state: The premises have been adapted, equipped and furnished to meet my needs and wishes (HSCS 5.16), and If I live in a care home, I can use a private garden (HSCS 5.23)

How well is our care and support planned?

4 - Good

There were good examples of multi-agency working to promote consistency in plans and ensure the person with the appropriate skills and knowledge provided the relevant interventions and support. Staff felt involved in the admission process and were confident that they received the appropriate information to allow them to plan care and support during a young person's early days in the service.

A review of personal planning processes and recording documentation had recently taken place. A comprehensive assessment process was now in place for young people placed in Bridgeway. To date, this six week assessment has only been used with one young person. It provided good information about the wishes and needs of the young person and set out how these would be met. The young person's voice was evident throughout and their input was central to the process. The information was then used to form the personal plan for the young person which supported staff to adopt agreed approaches to care and support. The service called this the pathway plan.

One young person did not have a detailed pathway plan, due to having requested not to have this.

Appropriate recording was in place to ensure staff were aware of the young person's needs and wishes and maintained a consistent approach. This recording reflected the requirement of a personal plan.

When fully embedded in practice, the new framework for planning could support young people to lead a positive, healthy, enjoyable and meaningful life. However, the current example did not reflect the good work both staff and the young person shared with us. Staff need time to develop their skills and understanding in using the framework.

Further development is required to ensure the six week assessment is critically analysed and information used to form achievable outcome based plans, which enable young people to experience success and celebrate even the smallest of achievements. While this was being done informally, it was not well documented. Consideration should also be given to the purpose of recording tools and documentation to minimise duplication and the time spent on paperwork. See area for improvement 1.

Areas for Improvement

Areas for improvement

1. It is recommended that the framework for planning is fully implemented to ensure they reflect the needs and aspiration of young people and strategies to meet these.

Supporting written records should have a clear purpose, be analytical and framed in appropriate language being mindful of young people's rights to access them currently and in the future. Staff should be supported to achieve this with relevant training, support and supervision.

This would ensure care and support is in line with the Health and Social Care Standards which state: My care and support meets my needs and is right for me (HSCS 1.19), and As a child or young person, I am helped to develop a positive view of myself and to form and sustain trusting and secure relationships (HSCS 3.5).

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

Requirements

Requirement 1

To ensure that young people can be confident in the organisation, the service must take appropriate action to record, investigate and respond to all complaints made.

This is in order to comply with:

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 No. 210 Complaints 18.-

(1) A provider must establish a procedure ("the complaints procedure") for considering complaints made to the provider.

(2) The complaints procedure must be appropriate to the needs of service users.

(3) The provider must ensure that any complaint made under the complaints procedure is fully investigated.

(4) The provider must, within 20 working days after the date on which the complaint is made, or such shorter period as may be reasonable in the circumstances, inform the complainant of the action (if any) that is to be taken.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state: "I am protected from harm abuse, neglect, bullying and exploitation by people who have a clear understanding of their responsibilities" (HSCS 3.20)

Timescale: This must be achieved by 7 July 2019

This requirement was made on 4 April 2019.

Action taken on previous requirement

The complaints procedure has been reviewed and now provides appropriate timescales and with contacts.

A leaflet for service users has been developed which explains the procedure in simple language.

Met - within timescales

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

To ensure young people have confidence in the service providing their care and support the service should develop and implement an improvement plan and effective systems for auditing and learning from records of accidents, incidents, administration of medication and complaints.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes" (HSCS 4.19).

This area for improvement was made on 4 April 2019.

Action taken since then

Some auditing of tasks has been implemented, however, further work is required to ensure robust analysis of data and consideration of impact on service users. This is reflected in this report.

Previous area for improvement 2

To ensure that young people can have confidence in the people who support and care for them, the service should ensure that all staff are appropriately trained and qualified to carry out their roles well.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state "I have confidence in people because they are trained, competent and skilled, are able to reflect on practice and follow their professional and organisational codes" (HSCS 3.14)

This area for improvement was made on 4 April 2019.

Action taken since then

There has been significant change in the staff team since the previous inspection. The current staff team have a good mix of skills and experience. This is reflected in this report.

Complaints

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

Detailed evaluations

How well do we support children and young people's wellbeing?	4 - Good
1.1 Children and young people experience compassion, dignity and respect	5 - Very Good
1.2 Children and young people get the most out of life	4 - Good
1.3 Children and young people's health benefits from their care and support they experience	4 - Good

How good is our leadership?	3 - Adequate
2.2 Quality assurance and improvement are led well	3 - Adequate

How good is our staff team?	4 - Good
3.2 Staff have the right values, skills and knowledge to care for children and young people	4 - Good
3.3 Staffing levels are right and meet children and young people's needs, with staff working well together	4 - Good

How good is our setting?	4 - Good
4.1 Children and young people experience high quality facilities	4 - Good
4.3 Children and young people can be connected with and involved in the wider community	4 - Good

How well is our care planned?	4 - Good
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5.1 Assessment and care planning reflects children and young people's needs and wishes	4 - Good
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Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

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Twitter: @careinspect

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