

Rendall Road Care Home Service

Kirkwall

Type of inspection:
Unannounced

Completed on:
13 April 2021

Service provided by:
Orkney Islands Council

Service provider number:
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Service no:
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About the service

Rendall Road residential services are situated over two properties within Orkney. The first is a new purpose-built, six bedroom detached property and is registered to accommodate four young people. The second property is a three bedroom semi-detached property which is situated in St. Margaret's Hope and is registered to accommodate two young people.

The aim of the service is to:

- Provide a structured and stimulating residential environment for young people that is free from prejudices.
- Treat young people with dignity and respect.
- Provide a safe, warm, nurturing, and empowering environment for young people to live in and move on from.
- Have a consistent, motivated, and qualified staff team.

This service has been registered since 1 April 2002.

We carried out remote scrutiny of the service over a two-week period during March and April 2021, using the Care Inspectorate's Quality Framework for Care Homes for Children and Young People and School Care Accommodation. Six young people were living at both services during this time. As we did not carry out a site visit as part of this scrutiny, we have not graded the environment of service.

What people told us

In order to reduce the risk of infection during the pandemic, we did not visit the service. However, we were able to interview four young people, and speak with and observe young people outside the service. The young people interviewed all indicated that they were satisfied with the service. It was evident that they all had good relationships with staff and enjoyed the activities with staff. They indicated that they went out most days and enjoyed the time they spent with staff. The children stated that they felt safe in the service and that staff were all very good. They felt well cared for and indicated that they felt listened to.

We did obtain the views from social workers, independent reviewing chair, Who Cares? Scotland, education, counselling, health services, and other stakeholders. We also reviewed a range of evidence, showing young people's views about the service generally and about their individual plans. We have taken this into account in the findings contained in this report.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support children and young people's wellbeing?	4 - Good
How good is our leadership?	4 - Good

How good is our staff team?	3 - Adequate
How well is our care planned?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

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

4 - Good

All interviewed young people experienced strong relationships with most staff. We heard that most staff were fun and that staff cared for them to a high standard.

Young people stated they had an opportunity to be listened to and had an opportunity to express their opinions on how best to support them. The service had numerous strategies where young people were involved in offering their opinions, such as menu planning and care planning, and we saw young people involved in choosing day-to-day activities. There were occasions for young people to take part in young people's meetings within the house. These had been limited due to difficulties engaging older young people. The service should continue to develop an approach which encourages and supports regular participation in the service.

The service had access to external advocacy. Direct face-to-face contact had been hampered due to the pandemic. However, young people were still able to access support for their important meetings and they could have appropriate advice. Young people were made aware of their rights when they were admitted to the service and staff were committed to ensuring that their rights were upheld.

Young people were involved in choosing aspects of care which supported them to have an active life. The service's approach was focused on a therapeutic PACE ethos which encouraged playfulness and acceptance. We observed young people actively being involved in this playfulness in both services.

All young people were able to have regular opportunities to connect with their friends and families. Young people were also supported to take part in being active citizens within the community. Although many activities had been hampered due to the pandemic, young people were still able to visit friends and have contact outside. We also saw them taking part in activities that they enjoyed, for example going to play parks, swimming, and fishing. The young people indicated that they had fun with staff and staff were good at doing activities with them.

One young child had been supported to achieve a Hi5 Award which is a Scottish Qualifications Authority (SQA) award for younger children. This was a major achievement for this young person. Most staff were committed to ensuring young people had access to exploring new activities and taking part in a wide range of experiences. It was evident that young people received lots of praise and encouragement to take part in a variety of interests and hobbies. It was acknowledged that staff had some difficulty in ensuring older young people were actively engaging. However, staff continued to explore opportunities with this group.

The service has worked hard with all schools that young people attended. This ensured that young people had access and appropriate support to attend school and be successful learners. We saw that older young

people were supported to maintain employment and others were supported to attend or access college courses.

The service was continuing to address practices and supports which help develop young people attaining a wide range of life skills. They have recently introduced focused goal meetings to take forward a new approach to develop life skills. The service should continue to promote development of these skills so that young people can move towards being independent.

Young people indicated that they felt safe and that staff were responsive to their concerns. We saw staff actively working in partnership with a range of agencies to ensure young people were safe. This includes education, Police Scotland, and health services. Young people indicated that staff spoke to them about risk and how to keep themselves safe.

Most staff had a real understanding of the therapeutic PACE approach. This was not consistent throughout the whole team and the management team of the service acknowledged that this had to be addressed. There is further rolling out of training on this approach to ensure that staff were all committed to working with this ethos. (See requirement 1 contained in the section 'How good is our staff team?'.)

The service has no incidents where they have had to use restraint. They were committed to de-escalation strategies as the best way to support young people to regulate their behaviour. There was training on this method planned. This would provide additional resources to skill staff on specific needs of young people.

The service has made appropriate referrals to access a range of support for young people to assist them with specific issues. They had good links with mental health services and a range of counselling services within the area. All of which have been involved in supporting young people to cope with the trauma that they had experienced.

The service had a robust system for managing medication. The service acknowledged that there was a need for all staff to have undertaken the competency-based training. This was planned over the next few months. The service is continually reviewing the way that it encourages and supports older young people to manage their medication, this is so that they can safely manage this process themselves. The service was updating the risk assessments for medication for older young people.

How good is our leadership?

4 - Good

The service had a range of quality assurance tools which helped them deliver a quality service. These audits occurred regularly and covered a range of aspects, such as care and support, staffing, and environment. The service had a development plan which was hindered due to the COVID-19 pandemic. We had a discussion with the management team on expanding several aspects of evaluation and widening the opportunities for all stakeholders to have the opportunities to raise improvement areas.

The external manager had, prior to the pandemic, regular opportunities to listen to young people. This was an area which the service will improve once restrictions are lifted. Children were aware of how to make a complaint, had access to the complaint system, and were aware of who to contact if they had a concern.

Staff were encouraged to take a lead and were supported to take change forward. Recently, senior staff organised external providers taking part in team meetings. There were also several new innovations, such as focused goal meetings and the introduction of doing Saltire Awards with young people.

There were regular opportunities for staff to discuss issues and receive support through effective changeovers and team meetings. Team meetings did not occur as regularly as in previous years. They had been re-established with the primary function to improve the service and reflect on practice.

There had been a decrease in the amount of accidents and incidents. We felt that it was necessary for the service to regularly analyse these and reflect on how to learn from these events and alter practice to reduce these reoccurring (**see area for improvement 1**).

Areas for improvement

1. The provider should ensure that there is a systematic process for analysis of incidents over time, so that any learning can be identified.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes" (HSCS 4.19); and "My care and support meets my needs and is right for me" (HSCS 1.19).

How good is our staff team?

3 - Adequate

There was a high reliance on relief staff due to the service operating on two sites. The service acknowledges the need for a staffing review so that there was sufficient and consistent staff across both sites. There is a need for the service to produce a four-week assessment of staff required throughout the day and night, which takes account of the needs and risks of young people and the support that they need (**see requirement 1**).

Most staff were found to be committed to ensuring that young people's outcomes were positive and most were enthusiastic and motivated. However, not all staff were committed to the PACE approach to supporting young people. Although training was planned to address this, it was apparent that it was having an impact on staff morale. The service needs to address this as a matter of urgency before it has an impact on the outcomes of young people (**see requirement 1**).

We found that all young people had SMART (specific, measurable, attainable, relevant, and time-bound) care plans which gave an overview of how they would be best supported within the service, school, and within the community. These were found to be underpinned by appropriate risk assessments. The service has also used safety plans on occasion and used external expert advice to ensure that these were sufficiently robust.

Requirements

1. In order to ensure that children and young people have continuity of relationships and consistent, stable care and support, the provider must review staffing throughout both sites. There was a need for service to provide a four-week assessment of staffing to ensure they are meeting the needs of young people. This should occur before the end of July 2021.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "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).

It is also necessary to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(a) - Welfare of users.

How well is our care and support planned?

4 - Good

We found that all young people had SMART care plans which gave an overview of how they would be best supported within the service, school, and within the community. These were found to be underpinned by appropriate risk assessments. The service has also used safety plans on occasion and used external expert advice to ensure that these were sufficiently robust.

Young people indicated that they felt listened to had the opportunity to influence their plans. Most plans were found to be up to date and recently reviewed. However, there was slippage in one plan. The service was reminded that there is a need to ensure that reviews are in keeping with legislation (**see area for improvement 1**).

All young people had meaningful targets which staff and young people were focused on achieving.

The service had recently started key team meetings, where it brought together all stakeholders and then reviewed young people's progress. In most cases, we saw that there was a commitment to multi multi-disciplinary involvement in care planning.

Plans regularly involved young people, their families, and external advocacy, when and where required.

We had a discussion with the management team about developing the daily case notes to reflect the SMART goals. This would ensure that these were recorded regularly and monitored young people's progress.

There was some slippage auditing case plans and chronologies. The service acknowledges that these could be improved and were putting in place an action plan to reduce omissions and eradicate errors.

Areas for improvement

1. The provider should improve the auditing and recording of chronologies. To ensure that plans accurately reflect young people's needs, ensure effective interventions, and lead to positive outcomes.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) 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); and "My future care and support needs are anticipated as part of my assessment" (HSCS 1.14).

How good is our care and support during the Covid-19 pandemic?

We did not examine this key question during this inspection.

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	4 - 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?	4 - Good
2.2 Quality assurance and improvement are led well	4 - Good
How good is our staff team?	3 - Adequate
3.3 Staffing levels are right and meet children and young people's needs, with staff working well together	3 - Adequate
How well is our care planned?	4 - Good
5.1 Assessment and care planning reflects children and young people's needs and wishes	4 - Good
How good is our care and support during the COVID-19 pandemic?	not assessed

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

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