

The Red House Care Home Service

Johnstone

Type of inspection: Unannounced

Completed on: 26 July 2021

Service provided by: Young Foundations Ltd

Service no: CS2007149014 Service provider number: SP2007009027



About the service

It should be noted that this inspection took place during the Covid-19 pandemic restrictions and therefore followed a revised procedure for conducting inspections in these circumstances.

The Red house provides 24 hour residential care support to a maximum of five young people between the ages of 12 and 19 years with a range of acute mental health difficulties and complex needs. The house is a large detached building situated in a residential area of Johnston, Renfrewshire. The accommodation is furnished to a high standard and provides a very comfortable living environment. The service accepts children from throughout the United Kingdom.

At the time of inspection, the Red House was the provider's only service in Scotland and five young people were living in the service.

Mission statement: the mission of the Red House is to care, support, develop and empower children with complex difficulties and associated behavioural difficulties and/or communication difficulties to enjoy their childhood, reach their potential and achieve a positive sense of self worth.

"To improve the lives of children, we believe that children have the right to a safe and fun childhood and one that creates happy memories"

What people told us

We spoke to four of the young people living at the red house. All expressed feeling safe and happy. comments included:

This is a better placement; overall there is more support and better staff which is more beneficial for me.'

"The staff are more supportive and very well trained, genuinely interested."

"Here I have an actual bedroom and it's more like an actual home. It is less independent and there are positives and negatives but there are more positives."

"I feel safe and cared for here. You can speak to staff any time, if your worried about anything"

"I have been from one extreme to another (in respect of types of accommodation) and it's been a hard adjustment for me but the staff are here for me 24/7 and it is much better for me"

How well do we support children and young people's wellbeing? 5 - Very Good

We saw that young people were cared for with warmth and kindness by staff who knew them well. Young people told us that they felt safe and secure in the house, and they could trust and talk to staff at any time.

We observed that one young person with complex needs held the hand of a staff member throughout a mealtime and was gently and sensitively encouraged to eat food of her choice.

Staff were knowledgeable about the range of complex health difficulties experienced by the young people living at the red house and had employed a range of skills based on trauma informed care.

For example, incidences of heightened behaviour were responded to in a calm and consistent manner which ensured that boundaries were adhered to, and the young person was supported to regulate their behaviour and then address the source of their anxiety.

We noted that there were sufficient staff on duty and private space within the house to respond fully to their individual needs as expressed. We thought that this demonstrated a regard for young people's dignity and ensured that their privacy and confidentiality was respected.

We found that young people's choices were supported in relation to a wide range of issues which included, regular contact with carers and professional involved out with the house.

We considered that the above measures had empowered young people to have greater control of their daily routines which had helped to ensure positive mental health outcomes.

Young people were respected and included in decisions affecting group living. For example, young people had contributed to their care plan, regular house meetings had been held and recorded, and young people had been involved and included in the refurbishment of the house and their bedrooms.

In response to restrictions related to the pandemic, young people had been involved and included in plans for home based activities. While new technology-based games had been chosen, other, more traditional more board games and arts and crafts activities had also been introduced, some of which were new to them and which they have continued to enjoy. We saw that these activities had been augmented by making full use of the extensive outdoor space to go on walks and play games in the garden.

Summer holidays and breaks for young people had been carefully planned with them; these ranged from holidays with staff within Scotland to outings for young people with friends, family, and carers. We noted that these had included short breaks to amusement parks in England, for example, which staff had helped to arrange and support.

Moreover, we noted that the service had taken full advantage of the recent easing of restrictions, with frequent visits made by young people, either with staff or alone, to encourage their Independence. We saw that these had involved meeting with friends in the community, fishing trips, visits to the gym and swimming in the local nearby leisure centres.

A "celebration tree" provided young people with a visual image of their successes in all aspects of their lives. We were pleased to see that further opportunities in this regard, for example the involvement of young people in the provision of photographs in communal areas, would be completed as part of the refurbishment of the house. We look forward to seeing this at the next inspection.

We noted young people whose risk-taking behaviours had been a cause for concern were supported to understand and address these. We saw that while essential measures to ensure their safety and health were established, positive efforts to improve were met consistently with meaningful rewards and encouragement.

Young people should receive high quality support to make transitions in their lives.

A large majority of young people had left school during this inspection year and had applied to further their studies at local colleges. One young person had plans to continue to study at school. We saw that young people had experienced high levels of success in acceptance for their first choice of study.

All young people had been well supported in planning for this transition this by staff and external agencies, which had included "Skills Development Scotland" We heard that staff had helped young people further with practical issues; transport links had been planned as had visits their chosen establishments and any anxieties and concerns addressed.

We considered that the above measures had maximised the potential for good outcomes for young people as they made this important transition in their lives.

Healthy living was promoted within the house, with freshly cooked meals being prepared by staff and young people within the large and welcoming kitchen. Some young people had experienced significant challenges in relation to food and nutrition. We saw that the service worked closely with professionals such as a dietician and psychologists, to ensure that each young person enjoyed a balanced diet. Individual choice and involvement in food shopping was evidenced and we felt that this multi-disciplinary approach had helped to further promote the physical and mental health needs of the young people at the red house.

We noted that all young people were fully registered with a local doctor dentist and, if necessary, optician, with regular check-up appointments being in place.

Young people were registered with a Looked After and Accommodated Nurse (LAAC) as appropriate to their age and legal requirements.

Positive mental health was promoted within the service. We saw that all who needed specialist care had ongoing involvement with a range of professionals such as the Community adolescent mental health service (CAMHS) dietician, counselling, and psychiatric care.

We spoke to a range of professionals involved and noted and all had positive views of the service in relation to working closely with staff to achieve positive outcomes for the young people living at the red house.

We noted that all young people were encouraged to make use of their advocacy services; we saw examples of positive practice in this regard. We were aware that some young people refused to engage with the service, but we were confident that this service's efforts would continue to be made in relation to the promotion of the role of advocate with staff and young people in the service.

We saw that the service had revised their medication policy and procedures over the past year and noted that robust, safe, and streamlined system was in place.

We observed that young people were working towards administering their own medication and while supervision remained essential, this was arranged with the young person's consent and carried out in an unobtrusive and sensitive manner.

Young people told us that they had small pets to care for within their own rooms; they were able to make a choice of pet and had taken pride in looking after them. We felt that this had helped to increase self-reliance and self-esteem for the young people involved.

How good is our leadership?

The provider is Young Foundations, based in England. The Red House is their single service in Scotland. Following a complaint upheld by the Care inspectorate in January 2021, the provider, had, together with the managers of the service, commissioned an independent agency to complete a comprehensive review of quality assurance and risk assessment within the organisation. The report and the subsequent action plan were made available to the inspector.

4 - Good

We are confident that it's recommendations were robust and have now been fully implemented.

We found that the manager and depute manager of the service were fully experienced in residential care provision for young people and had worked successfully together in a similar setting previously.

We received a high level of positive feedback, both written and verbal, from staff we spoke with, who told us that they felt valued and listened. Staff told us that they had confidence in their leadership team and were motivated to work with them to complete the process of improvements to the service to ensure the best possible outcomes for young people to at the service.

Improvements in communication over the past year implemented by the provider, had included the registered manager's attendance at regularly held regional and operational team meetings which had promoted a wider understanding of respective roles, policies, and procedures. We noted that, in addition, a new external manager had been visiting the service frequently and provided regular supervision and support to the registered manager.

We saw that child protection and safeguarding was further enhanced by the providers "REVO" system, which used technology to alert the national operations team to all incidents and accidents within their services. This system allowed for immediate advice and support to managers as well as scrutiny and review of prominent incidents at monthly operations meetings, with changes implemented where required.

We thought that the above measures provided a further layer of support, scrutiny, and audit for young people living at the red house. We saw the managers had taken full advantage of these mutually agreed initiatives to progress important and positive changes to promote a safe secure environment which promoted small family group living.

We noted that there was a robust system of audit and oversight of all records, which was undertaken by the managers of the service. However, we saw some examples of written documentation, such as minutes of internal meetings, which could be improved in relation to content and clarity of purpose.

Though detailed and reflective, we found that the services "workforce development plan" was not completed in accordance with Specific, Measured, Achievable, Realistic and Timed (SMART) objectives, and thus gave little sense of focus, tasks completed, or outcomes of the areas identified for improvement.

We discussed this with the managers and were pleased to see that both were aware of and in agreement with the points raised. We were told that a new "development and improvement" plan for the coming year was in progress, and we are confident that this would be progressed.

This will form area for improvement 1.

Overall, we noted that significant improvements had taken place over the past year by the new managers who had used their leadership skills positively to help motivate staff and to provide for positive outcomes for young people. It is fully acknowledged by the managers that further improvements require to be made and others consolidated to ensure that young people have outcomes which are as positive as possible.

Areas for improvement

1. The managers of the service should develop an improvement plan based on (specific, measured, achievable, realistic and timed (SMART objectives)

This is to ensure that care and support is consistent with the health and social care standards which state that:

I experience high quality of care based on relevant evidence, guidance and best practice.

(Health and Social care standards 4:11)

How good is our staff team?

5 - Very Good

It was acknowledged that there had been some disruption to the young people in the service due to a change in the management team and subsequent leaving of the service of some members of staff in the second half of 2020. However, as noted, experienced and highly motivated staff had been recruited and we saw that relationships with young people had been developed using their skills and practice experience.

Through observation and staff feedback, it was clear that staff worked well together in a flexible and supportive manner; knowledge and specialist skills and interests of team members had been shared to help young people to revisit happy memories or to help them to have experiences, missed in childhood. For example, one staff member was able to use his interest in fishing to encourage a young person to take this up as it was an activity he had previously enjoyed.

Another member of staff had arranged to watch all Disney films with a young person who had experienced these stories before. We considered that this helped young people to form stable and enduring relationships with staff.

We saw that staff had welcomed new opportunities for recognition and advancement within the team. For example, senior residential care staff had been supported to undertake supervisory roles and had been members of the service's "leadership team" which had comprised internal and external representatives. Moreover, greater responsibility had been given to residential care staff to represent the young people at key planning meetings. For example, we noted that one residential care worker had been invited by the manager to accompany him to a matching meeting to contribute her specialist knowledge of the issues experienced by the young person and help assess her suitability for admission to the house.

We thought that the above approach, embraced fully by staff, had helped them to build the professional confidence and skills required to ensure consistently positive outcomes for the young people living at the red house.

We noted that there had been positive and welcome changes to the duty rota, which had allowed staff to have set work times and plan ahead to achieve an improved work-life balance. We considered that this had helped staff to feel refreshed and better able to continue to provide compassionate care and support to the young people living at the red house.

We saw that attempts had been made to ensure that shifts had included staff members who each young person had identified as being particularly well known to them; a gender balance had also been assured with service having at least two female members of staff on each shift. We felt that these measures had helped to ensure stability and consistency for young people while they continued to establish relationships with staff newer to the service.

How good is our setting?

One of its kind, the Red House is a large and characterful two storey red brick building with extensive, well equipped garden grounds. The house is set in a quiet peaceful street near to the town and with good public transport links.

5 - Very Good

Built as a large family home, staff have made as few modifications as possible to allow the house to maintain its warm and relaxed atmosphere: the house had ample, well-furnished spaces for visitors and professionals, and for leisure activities.

We noted that the provider had contributed to the on-going refurbishment and renewal of communal areas. We saw that young people had contributed fully to this process, and had made choices, in respect of soft furnishing and the decorations in their bedrooms for example

We thought that the above approach created a homely an inclusive setting which meant that young people were able to stay connected to family and friends in the home setting, while they made use of public transport to enjoy activities in the local community.

We considered that the above measures had supported the young people to develop a sense of trust, responsibility, and self-reliance while they enjoyed the benefits of living in a homely setting with full access to technology and leisure facilities.

How well is our care and support planned?

We saw that the service was in the process of changing their care planning process and were able to have access to the new and the existing system.

4 - Good

We noted that existing care plans were thoroughly completed and provided a good understanding of the young person, their background experiences, and goals, most of which recorded positive outcomes and reflected the progress some reflected the views of the young person who had signed their notes on a regular basis.

We saw that good quality risk assessment were in place and written material, such as handover notes, were informative for staff coming on duty. All files we read were audited and reviewed on a regular basis by senior staff and managers. We felt that provided a good overview of the quality of work undertaken.

However, we found duplication in the large volume of records which at times were confusing and difficult to navigate and we felt that this made the task of gaining an overall understanding within a reasonable period quite difficult.

We saw an example of the new pilot file completed on one young person and noted considerable improvements. The recording system had been significantly streamlined which we considered would allow staff new to the service to get to know the young people and their needs with ease. Importantly, we found that the layout of the information was more attractive for the young person to contribute actively.

Staff spoken to confirmed that the new system of care planning, supported by further training, helped them both in terms of time spent on recording and ease of communication. Managers acknowledged that this system was yet to be implemented for all young people and we look forward to assessing the fully developed system at the next inspection.

A minority of social work and professional staff we talked to did have concerns in respect of the quality and consistency of communication from staff at the red house. For example, we heard that weekly updates could be improved. We were told that these lacked further detail or explanation and we noted that there had been occasion where staff had not responded to frequent requests to return calls.

We thought that such difficulties in communication had occasionally given rise to concerns that the service had not been as pro-active in ensuring plans were in place for young people, as had been expected.

We spoke to managers who fully acknowledged that further training, particularly with newer members of the staff group, was required, to ensure consistently effective multi-agency communication within the service. This will form area for improvement 1.

Areas for improvement

1. The service should ensure that it actively seeks and enables effective communication with external staff to promote multi-agency involvement in the planning process.

This is to ensure that care and support is consistent with the health and social standards which state that:

If I am supported and cared for by a team or more than one organisation, this is well coordinated so that I experience consistency and continuity. (Health and Social Care Standards: 4.17)

And:

I benefit from different organisations working together and sharing information about me promptly, where appropriate, and I understand how my privacy and confidentiality are respected. (Health and Social Care standards: 4.18)

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

Arrangements should be put in place to ensure that young people are referred to the LAAC nurse as part of the admissions process to ensure that they benefit from this service.

This area for improvement was made on 19 December 2019.

Action taken since then

We were satisfied that the service had met this area for improvement as stated.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Detailed evaluations

How well do we support children and young people's wellbeing?	5 - Very 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	5 - Very Good
1.3 Children and young people's health benefits from their care and support they experience	5 - Very 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?	5 - Very Good

3.3 Staffing levels are right and meet children and young people's needs, with staff working well together	5 - Very Good

How good is our setting?	5 - Very Good
4.2 The setting enables chidren and young people to thrive and develop their independence	5 - Very Good

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

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Care Inspectorate Compass House 11 Riverside Drive Dundee DD1 4NY

enquiries@careinspectorate.com

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