

Thor House (Care Home) Care Home Service

Provost Cormack Drive
Thurso
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Unannounced

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Service provided by:
Highland Council

Service provider number:
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CS2003008449

About the service

Thor house is situated in Thurso, close to the community and shops. It is currently registered to provide care to a maximum of four children or young people with learning disabilities, additional and/or complex needs in respite. Two of these placements can be longer term.

Currently the respite service has been unable to operate due to Covid-19, and these placements have been used on a longer term basis.

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.

This service has been registered since 2002.

What people told us

During the inspection we talked with the young people and staff. We also received feedback from questionnaires which were shared with staff, young people and professionals. Some of comments were as follows:

"They try to understand where behaviours are coming from, the reasons for them and are solution focused in their approach."

"The food is good."

"I get good support."

"Staff are really nice."

"I love working at Thor House."

"I enjoy going for walks with staff."

"I enjoy school and have made some friends."

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

5 - Very Good

Nurturing and empathetic relationships were at the forefront of the care provided by the adults at Thor House. External professionals and the young people in the house told us about the positive relationships they had with the adults; and how they were well supported. This was evidenced in the commitment of adults in supporting the young people to achieve at school. There were contingency plans in place to help the young people attend school full-time; as well as supporting them at lunch times if required to provide them nurture and reassurance. We also observed the adults playing with the young people and using games to prevent situations from escalating. It was lovely to observe the young people look for comfort from the adults around them, who embraced this.

The adults had an understanding of trauma, and how this may manifest for the young people. Daily notes and weekly summaries were written to the young people; which took this into consideration and had good reflection on the support to give to the young person. Through reading these it was clear the young people were encouraged to share their views, and were respected.

The young people experienced many opportunities to help them lead active lives and promote family relationships. This was evidenced with one young person being part of a local football team and another being supported to experience a camping trip with his friends. Family relationships were at the forefront, as we saw that trips had been arranged some hundreds of miles away to promote family relationships regularly. These were well planned and the itinerary was shared with the young person, to help relieve any anxieties they may have about the trip.

How good is our leadership?

3 - Adequate

There was clear evidence the depute manager, had promoted a trauma informed way of working within the team. This was clearly beneficial for the young people in the service, with them receiving a high level of care and support.

However, the service was caring for young people on a much longer term basis than outlined in the aims and objectives. We heard from the staff and young people how this had impacted on them. Staff had voiced they felt the building was quite restrictive for young people on a long term basis. A young person shared they wanted to stay at Thor House. However, they aware they were in the respite placement despite being there for several months and were anxious about this. This had been raised with senior management, as there was recognition this wasn't the aim of the service.

The aims and objectives of the service were also not in keeping with the conditions of registration. This also raised some anxieties for staff, as they were wondering when it would operate as a respite service again and how this would be achieved. A good ethos of care was embraced in the service, and this would be useful to be captured in the aims and objectives. **(See area for improvement 1.)**

There had been an in depth report compiled with participation and feedback, from professionals, families and young people. On the whole the feedback received was positive, which was a good tool to identify themes for the improvement plan. Even so the information in the improvement plan wasn't specific. **(See area for improvement 2.)**

Thor House is required to report significant events to the care inspectorate involving young people. Although there had been very few incidents or accidents this hadn't been completed. **(See requirement 1.)**

Requirements

1. The provider must ensure that they notify the Care Inspectorate of all events within the service, this should be completed by 21 October 2021.

In order to achieve this the provider must ensure that they notify the Care Inspectorate via eforms within 24 hours of anything set out in the criteria in particular incidents, accidents and restraints. Also submit a variation request to reflect the service being provided currently.

This is in order to comply with Regulations 4(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which states that:

'I benefit from a culture of continuous improvement, with the organisation having a robust and transparent quality assurance qualities.' (HSCS 4.19).

Areas for improvement

1. Thor House should re-evaluate their aims and objectives to capture the service being provided. This should also focus on a trauma informed approach of care.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which states that:

'If I am supported and cared for by a team or more than one organisation, this is well co-ordinated so that I experience consistency and continuity.' (HSCS 4.17).

2. A more SMART (Specific, Measurable, Achievable, Realistic, Time-bound) improvement plan should be developed, detailing specific improvements, how they will be achieved and in a realistic timeframe.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which states that:

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19).

How good is our staff team?

This key question was not assessed.

How good is our setting?

This key question was not assessed.

How well is our care and support planned?

2 - Weak

There were no individual care plans in place for the young people. However, we heard from the depute manager that these were developed for the young people in the respite service, when it was operating. We were able to look at these care plans, which were informative and specific to the young people. The depute manager was in agreement she would develop these for the young people using the service on a longer term basis also. **(See requirement 1.)**

There were many positive outcomes observed being achieved in Thor House, in regards to education, relationships and emotional wellbeing. The care plans developed should ensure there is meaningful

involvement from the young people and include goals, so that the young people can celebrate their successes and be able to look back at their achievements.

Risk assessments in place were informative and identified pro-active strategies as well as contingency strategies. These were specific to the young person, and identified supports to help the young person understand the risks and develop.

Requirements

1. The provider must ensure that they develop individual care plans for the young people in their service by 21 November 2021.

In order to achieve this these documents should be SMART (Specific, Measurable, Achievable, Realistic, Time-bound) and have a focus on the young people's views, goals, routines, and reviewed regularly.

This is in order to comply with Regulations 4(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that the care and support is consistent with the Health and Social Care Standards (HSCS) which states 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 choices.' (HSCS 1.15).

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?	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?	3 - Adequate
2.1 Vision and values positively inform practice	3 - Adequate
2.2 Quality assurance and improvement are led well	3 - Adequate
2.3 Leaders collaborate to support children and young people	3 - Adequate

How well is our care planned?	2 - Weak
5.1 Assessment and care planning reflects children and young people's needs and wishes	2 - Weak

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