

Calton House Care Home Service

Edinburgh

Type of inspection:
Unannounced

Completed on:
2 February 2023

Service provided by:
City of Edinburgh Council

Service provider number:
SP2003002576

Service no:
CS2005099728

About the service

Edinburgh Secure Services Close Support Unit is a care home service for children and young people, provided by the City of Edinburgh Council. The registration permits Calton and Chalmers houses to provide care to a total of five people each aged 10-17 years. Alison Throughcare is registered to provide care to a maximum of nine young people over the age of 16.

The service operates from two houses and a block of interconnected flats within the local authority area.

Alison Throughcare provides accommodation for up to six young, unaccompanied asylum seekers as well as young people from the local authority area. Alison Throughcare also provides outreach for young people living in their own tenancies. The outreach function is currently not registered as part of Edinburgh Secure Services Close Support Unit.

About the inspection

This was an unannounced which took place on 11, 12, 13, and 16 January and 10 February 2023. The inspection was carried out by two inspectors from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with six people using the service;
- spoke with 14 staff and management;
- observed practice and daily life;
- reviewed documents; and
- reviewed feedback from visiting professionals.

Key messages

- Risks were not identified for some young people.
- Care plans did not take into account young people's views.
- Family time was not clear to young people, or families.
- There was no clear oversight of incidents.
- Not all young people were supported through a trauma informed approach.

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 rights and wellbeing?	2 - Weak
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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 rights and wellbeing?

2 - Weak

We made an evaluation of weak for this key question. Whilst some strengths could be identified, these were compromised by significant weaknesses. As these weaknesses concerned the welfare and safety of children and young people, we made several requirements for improvement.

There were inconsistencies across the three houses we inspected. We found that in one house in particular, young people were not well supported to keep themselves safe. There were concerns regarding the management and support to young people when they were at risk. The risk assessments in place to support this were not clear and lacked key information (see requirement 1). We found this led to young people at times being put at risk and not kept safe.

We found plans that were put in place to address potential bullying were not robust. The plan which had been implemented appeared to put the young person at greater risk. It also appeared that this had tried to be implemented, however had been unsuccessful due to other challenges within the house. We found this had not been reviewed to ensure young people were well supported or kept safe (see area for improvement 1).

One of the houses we inspected had developed a trauma informed approach. When talking to staff they were able to share the approach they used and understood "The Promise." Within the other two houses we did not find the same level of understanding. In the documents we read we were concerned about the approach towards young people, when they were upset or distressed. We found the language used showed a lack of understanding of the young people and the support they needed. This led to young people not receiving emotional support or be helped to understand their past experiences (see area for improvement 2).

Within one house we could see clear links to the support young people received externally. This had been well documented and updated regularly to capture the appointments attended. Within one of the other houses this was not consistent. It was not clear the level of support young people were receiving from external agencies. We read care plans and risk assessments, where significant health concerns had not been discussed or recognised as a concern. This impacted on the young people's physical and mental health (see requirement 2).

There were not clear plans for young people to see their family. When we spoke to staff, they were unclear of the arrangements and how to support the young people when they asked to see their family or they came to visit. This led to family members and young people being confused and at times frustrated (see area for improvement 3).

We found that some young people were thriving and had been successful in achieving employment and further education. This was not the consistent with all young people. There was a lack of routine and structure for some young people, leading to a lack of school attendance. We felt this impacted on the young people's self esteem and self-worth.

The service needed to consider the admissions process for young people moving into the service. We found there had not been consideration to the needs of those within the service and how these would be supported. We heard from staff how it had been challenging to manage the dynamics in the house and this could have been considered prior to admission (see requirement 3).

Managers did not have a good oversight of incidents. There were multiple recordings which managers had not had oversight of. This led to a lack of reflection and learning for staff on how to support the needs of the young people. We also found that these incidents had not been reported consistently to the Care Inspectorate. This is a crucial process to ensure young people are well supported, and that staff can reflect on the incident (see requirement 4).

Care plans and risk assessments for the young people were not reflective of their needs or risks. We also found young people were not involved in this process. The document was not SMART (Specific, Measurable, Achievable, Realistic, Timebound) when setting goals for the young people. We found that one house had some good examples of these documents and are hopeful that the service can use these to ensure there is consistency across all houses. This ensures there is a clear plan for young people and their needs are met (see area for improvement 4).

Requirements

1.

By 31 May 2023, the provider must ensure risk assessments and care plans are accurate and reflective of the care the young people need. To do this, the provider must, at a minimum:

- a) review risk assessments ensuring they are reflective of the risks the young person is presenting;
- b) ensure there are specific primary and secondary strategies on how to support these risks should they arise; and
- c) ensure care plans are reflective of the care the young people receive and their daily routine.

This is to comply with Regulation 4 (1) (a) 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 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)

2. By 31 May 2023, the provider must ensure young people receive the appropriate support for their health. To do this, the provider must, at a minimum:

- a) educate the young people on the risks they place on their health;
- b) ensure young people receive the support they need to support their mental health; and
- c) ensure this is documented within their care plan clearly along with records of appointments.

This is to comply with Regulation 4 (1) (a) 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 the Health and Social Care Standards (HSCS) which state that:

'I am supported to make informed lifestyle choices affecting my health and wellbeing, and I am helped to use relevant screening and healthcare services.' (HSCS 1.28)

3. By 10 June 2023, the provider must ensure the admissions process considers the ability of the service to be able to meet the young person's needs and keep them safe. In particular the provider must:

- a) ensure there is a comprehensive assessment of the needs of the young people using the service, underlining how the service will meet these needs and evidence regular reviews of the assessment;
- b) ensure there is an assessment of the impact on young people in the service and the referral, when a new admission is considered; and
- c) ensure the service has the staff skills and training to meet the needs of the young person.

This is in order to comply with Regulation 4(1)(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 the Health and Social Care Standards (HSCS) which states that:

'My care and support meets my needs and is right for me.' (HSCS 1.19)

4. By 31 May 2023 the provider must ensure there is effective analysis and oversight of incidents. To do this, the provider must, at a minimum:

- a) review the incident, reflecting what could have been done differently;
- b) ensure all staff are debriefed following the incident;
- c) ensure there is management oversight of the incident; and
- d) ensure all incidents are reported to the Care Inspectorate.

This is to comply with Regulation 4(1)(a) (welfare of users) 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 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).

Areas for improvement

1. To support children's wellbeing, learning and development, the provider should ensure any concerns of bullying are addressed.

This should include, but is not limited to, a plan which is clear to support the young person, and a clear risk assessment.

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

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

2. To support children's wellbeing, learning and development, the provider should ensure staff access training appropriate to their role, and apply their training in practice.

This should include, but is not limited to, training in trauma informed practice.

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

'I have confidence in people because they are trained, competent and skilled' (HSCS 3.14).

3. To support children's wellbeing, learning and development, the provider should ensure there are clear plans in place for young people to stay connected to family.

This should include, but is not limited to, clear plans for each young person, a collective understanding of how time with family should be supported, and a risk assessment if appropriate to manage any potential risks.

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

'I am supported to manage my relationships with my family, friends or partner in a way that suits my wellbeing.' (HSCS 2.18)

4.

To support children's wellbeing, learning and development, the provider should ensure there are comprehensive care plans in place for all young people implemented by the service.

This should include, but is not limited to, clear care plans detailing daily routines, goals and support which the young people require.

This is to ensure that 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 wishes and 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 rights and wellbeing?	2 - Weak
7.1 Children and young people are safe, feel loved and get the most out of life	2 - Weak
7.2 Leaders and staff have the capacity and resources to meet and champion children and young people's needs and rights	2 - Weak

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