

Dala Care Home Service

Lockerbie

Type of inspection: Unannounced

Completed on: 24 August 2023

Service provided by: Radical Services Ltd

Service no: CS2007155419 Service provider number: SP2003002568



About the service

Dala is a care home situated in a small village in Dumfries and Galloway, close to Lockerbie. The service is provided by Radical services Ltd. Although set in a rural location there are close access to motorways and train links. There were two young people using the service at the time of this inspection.

Dala aims 'to provide a familiar environment where children and young people who cannot remain at home can be cared for in a way that allows them to experience a strong sense of nurture matched by clear boundaries and routines'.

About the inspection

This was an unannounced inspection which took place on 15th and 16th of August 2023. The inspection was carried out by an inspector from the Care Inspectorate, assisted by a young inspection volunteer.

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 two people using the service
- spoke with four staff and three members of management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals
- assessed feedback from professionals
- received feedback from young inspection volunteer

Key messages

• It was clear that staff and young people shared close tactile relationships, young people valued this.

• Matching processes for young people was good, but would benefit from an additional layer of scrutiny to ensure all necessary information to make decisions is received.

•The manager had plans to upskill staff members to write care plans. In addition we identified some areas in which the care plans for young people could be strengthened.

•For certain risks for young people, improvement is needed to have clearer steps on exactly what is required from staff.

• Young people attended lots of activities, accompanied at times by staff. This was something that encouraged their views, wishes and sense of identity.

•The provider had taken appropriate steps to address allegations of misconduct and ensured learning and preventative measures were put in place to prevent reoccurrence.

•Quality assurance systems were effective and led to improvements.

• Staff and leaders had good access to training. The provider had plans to increase managerial oversight and access to training data.

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

rights and wellbeing?	How well do we support children and young people's rights and wellbeing?	4 - Good
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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 4 - Good people's rights and wellbeing?

Quality Indicator 7.1: Children and young people are safe, feel loved and get the most out of life.

We made an evaluation of good for this key question. The service demonstrated a number of important strengths, which taken together outweigh areas for improvement. However, improvements are required to maximise wellbeing and ensure that young people consistently have experiences and outcomes which are as positive as possible.

At the time of the inspection there were two young people using the service. The service had assessed their ability to care for a young person who had recently moved into the service. We found that there was good evidence of assessment. We suggested that there should be some element of oversight and scrutiny, as there was some information that the provider viewed as essential to making informed decisions which had not been received. This was something the provider was happy to consider.

It was clear that staff and young people shared close tactile relationships. This was encouraged by leaders within the service. The current manager had oversight of these relationships and ensured that these were beneficial to young people. Young people told us that staff were always keen to get involved and do activities with them. Young people told us this was something that was particularly important as the house was in a rural location.

Young people told us that they felt able to speak with staff within the service. Although they did feel listened to, we did find representation of their views difficult to find in care plans written by the service. Whilst goals within this were important, they seemed at time adult focused and at the time of inspection were written by the manager. (See Area for Improvement 1)

This was similar with the providers risk management plans. We found that the staff team seemed to have a good general awareness of risk for young people, but for some specific need's details of how and when staff should respond was less clear. (See Area for Improvement 2)

There had been some positive developments within the house under the current management. Young people told us that they were able to be involved in far more activities and groups. This was something that really helped them to express their individual needs and preferences. They told us this helped them feel connected, and to make friendships.

The service supported young people to stay in touch with those close to them where appropriate. We saw clear evidence of this taking place in line with arrangements set by Social Work. The service was prepared to travel as often as needed to facilitate this.

The service worked well with external education as well as the providers own school setting nearby. This meant that young people had good access to education and adults encouraged them to be ambitious. Where there were difficulties there was evidence of the team supporting this to be resolved quickly.

Quality Indicator 7.2: Leaders and staff have the capacity and resources to meet and champion children and young people's needs and rights.

We made an evaluation of good for this key question. The service demonstrated a number of important strengths, which taken together outweigh areas for improvement

There had been a turnover of staff within the service. Young people told us that this had been difficult as people they knew well left. This had been at a similar time to the provider dealing with allegations of misconduct for some staff. We found that the provider had taken appropriate steps to address these concerns and had thorough policies in place. The provider had focused on the learning from these instances and had increased external management oversight and visits to the service. External managers felt confident that these supports could quickly identify any issues that arose, and ensured all staff were aware of their roles and responsibilities in this.

We heard that staff felt well supported by the current manager. Supervision that had been received was both regular and of good quality. Staff felt supported and experienced this support as empowering. There were some areas of practice where the current manager had assumed responsibility such as care planning and risk management plans and supports for young people. We highlighted to the service that this was an area of practice that needed developed in the team, so that everyone had the skills and abilities to make these assessments on a day-to-day basis, and in the managers absence. The service agreed this was something they had awareness of and had plans to begin to address.

Quality assurance systems within the service worked well. We saw evidence of these picking up minor issues, and further evidence of leadership within the service taking appropriate steps to address these. External management audits were also undertaken which gave and added layer of oversight. We did feel that the service would benefit from developing its service improvement with clearer time lines, roles and responsibilities of each person to achieve this.

The staff team, including leaders, had good access to training. This included child protection procedures. We found there to be additional training opportunities for staff and saw evidence of these being accessed by staff. The provider had plans to move to a new and improved system which will allow managers to improve their oversight of current dates. This is something we felt would be a valuable addition.

Staff had benefitted from the providers new trauma training, we found that this helped staff relate to young people's experiences. This made them consider how they approached and supported young people. The house manager highlighted this was an area they planned to further develop. There was also improved induction training for both staff and leaders. This was something that felt well received by the staff and management we spoke with, allowing them time to develop skills before direct work with young people and staff.

There was a reflective culture within the service. The house manager led this area of practice and made sure that staff reflected on responses both during shift and by conducting formal debriefs routinely. We did find that debriefs did not always include critical reflection of staff responses. We suggested the service further develop this to ensure that preventative reflection is given, and the outcomes of this inform young people's care plans and assessments.

Areas for improvement

1. To support the young people's wellbeing, outcomes and choice the service should review their care planning. This should include but is not limited to:

a) Ensuring young people are actively consulted on deciding their goals, and that these are clear and visible to them.

b) Ensuring that goals are SMART (specific, measurable, achievable, realistic and timely). These should be reflective of young people's words, and should clearly describe the supports required to achieve these. Goals should be actively tracked and subject to regular review.

c) Ensuring that all staff are aware of the needs and focus of work for all young people within the service and know exactly what is needed from everyone to support young people to reach their goals.

d)Ensuing that staff are trained and able to write effective care plans for young people, and that the manager has oversight and analysis of this.

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 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. To support the young people's wellbeing and outcomes the service should review their risk assessment processes.

To do this, the provider must, at a minimum, but not exclusive to:

a) Ensure that risk assessments explain clearly the roles and supports required by staff to minimise risk, and support young people. This should be especially the case with higher risk situations

b) Ensure that all staff are aware of all possible risks for young people, and the supports required from them to minimise these.

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

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

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

The service provider should continue to develop and implement an approach to care planning which takes account of trauma pathway work and other assessment information in a way which informs staff approaches and helps young people to feel listened to and taken seriously.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: That users of care services should have a care plan which is right for them and sets out how their needs will be met as well as their wishes and choices. (HSCS 1.15)

This area for improvement was made on 18 December 2019.

Action taken since then

The provider had changed its method of trauma training for staff. We found that on this inspection staff had a good knowledge of trauma informed practice from the training they received.

This manager of the service was writing care plans for young people, so the content of these was also trauma informed. There was plans and supports in place for staff to begin to take the lead in writing plans and developing their knowledge of trauma informed interventions further.

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 vellbeing?	4 - Good
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7.1 Children and young people are safe, feel loved and get the most out of life	4 - Good
7.2 Leaders and staff have the capacity and resources to meet and champion children and young people's needs and rights	4 - Good

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Care Inspectorate Compass House 11 Riverside Drive Dundee DD1 4NY

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