

Northern Lights Care Home Service

Inverness

Type of inspection:
Unannounced

Completed on:
9 October 2023

Service provided by:
Barnardo's known as Barnardo's
Scotland

Service provider number:
SP2003003405

Service no:
CS2009195687

About the service

Barnardo's Northern Lights is a modern, detached house situated in the outskirts of Inverness. It has a large garden and has local shops relatively nearby. It is registered to care for five young people up to the age of 21.

The service state their staff are committed to the following Barnardo's values:

- Respecting the unique worth of every person
- Encouraging people to fulfil their potential
- Working with hope
- Exercising responsible stewardship.

About the inspection

This was an unannounced inspection which took place on Tuesday 3 and Wednesday 4 October 2023.

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 young people living at the service
- spoke with staff and managers of the service
- spoke with a social worker and received questionnaires from seven external professionals
- observed practice and daily life
- reviewed documents
- reviewed questionnaire responses from young people and staff.

Key messages

- Staff understood the young people they cared for and were nurturing and trauma informed in their approach.
- Young people felt that staff were interested in their views and that change had, or would, come about from their active participation.
- There were comprehensive processes to support the development of the service.
- Quality assurance systems needed to improve to ensure that all staff were registered with an appropriate professional body.

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?	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 people's rights and wellbeing?

4 - Good

We made an overall evaluation of good for this key question, as there were a number of important strengths, which taken together clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a positive impact on the young people's experiences and outcomes.

Young people benefitted from warm compassionate care, which promoted their emotional and physical safety. Staff had a good understanding of the individual risks present for each young person, with a consistent approach in place to manage these concerns. A nurturing, non-punitive approach toward young people led to a culture where young people could share their experiences and be supported to make safer choices.

Staff were not overly risk averse and understood acceptable risk, proportionate to each young person. A multi-disciplinary approach promoted security and shared responsibility for the considerable risk posed for some young people in the wider community.

Young people were safe in the house. Where there was any hint of bullying this was discussed and young people sensitively educated to expand their understanding. Staff received child protection training as part of ongoing core training and were clear about what to do if they had a concern.

There was very limited use of restrictive practices. Staff were trained in CALM (Crisis aggression limitation management) and were committed to an approach of de-escalation and the minimisation of restrictive practice. The culture of relationship-based practice reduced the likelihood and incidents, with risk assessment and safety planning informing a consistent approach to young people's care.

Staff worked hard to build and maintain meaningful, respectful and trusting relationships with young people. They respected their individuality and were available when young people needed them. There was a real sense, both from observation and discussion, that they knew young people well, wanted the very best for them and were proud of their achievements. This increased the confidence and self-esteem of the young people being cared for.

Staff understood the young people they cared for and were nurturing and trauma informed in their approach. Most of the team had completed training in Dyadic Developmental Psychotherapy (DDP) which helped staff better understand young people's past trauma and how to respond to their needs. The service development plan detailed continued plans for further DDP training which will further promote a trauma informed approach to young people's care.

The house was homely and relaxed, providing a caring nurturing environment. Young people had been central to decisions about changes and refurbishment making it very much feel like their home. At the time of the inspection there was some damage to the house awaiting repair. The response to a young person in crisis had been sensitive and non-punitive and demonstrated an understanding of past trauma and genuine concern.

Young people had a number of people outwith the service who could advocate for their rights. Their voices were present in most aspects of their care and support. There were a range of formal and informal ways they were able to contribute their views and opinions. In discussion young people felt that staff were interested in their views and that change had, or would, come about from their active participation. The

(fairly) new promise implementation worker will extend the opportunities for young people's voices to be heard and their rights upheld.

Young people had access to a range of activities and were encouraged to develop new interests which helped promote self-esteem and confidence. A recent holiday had been a real success in developing relationships and having fun. Staff had developed very proactive strategies to support young people to be safer in the community, with regular trips to the town to ensure young people's wellbeing.

Young people were appropriately registered with healthcare services. Where they had specific healthcare needs, they were supported to access services such as Children and Adult mental health services (CAMHS). Staff consultancy sessions from CAMHS were very helpful to staff having a greater understanding of young people's needs.

Family contact was very well supported. It was encouraging to see how welcome friends and family were made to the house, including overnight stays and staying for meals.

Young people's goals and ambitions were recognised and supported. While some were in fairly limited education it was positive to see that various options had been explored to keep them engaged in positive activity. A number of the young people had jobs thereby promoting their financial independence and useful skills for life.

Leadership was strong. Most staff commented very positively on the support they received, and about an individual flexible approach to meeting the needs of the young people. There were very positive comments from external providers about a caring, committed team working for the best interests of the young people in their care.

Supportive structures were in place for staff to grow and develop in their role. Most staff had regular formal supervision, however, the purpose of the recently introduced group supervision needed further explanation as it was not fully understood within the team. Team meetings provided a forum for discussion and development with the CAMHS input described as invaluable support for the team, who were therefore able to provide informed consistent support to young people.

Staff were safely recruited and inducted to the service, however, quality assurance systems needed to improve to ensure that all staff were registered with the Scottish Social Services Council (the professional register for social services/ social work staff). **(See area for improvement 1.)**

Staff had received training to ensure they could deliver quality support and therapeutic trauma informed care. Support plans and risk assessments were generally good with clear strategies of support. The service had identified the need to evaluate outcomes to ensure the progress of young people was explicit and this would clearly be of benefit. Care should be taken to ensure that where young people's views were included these were represented accurately.

There were comprehensive processes to support the development of the service. These included internal audits and inspections and continuous improvement plans. Plans were SMART (specific, measurable, achievable, realistic and timely) and ambitious. Young people's involvement was at the heart of improvement with the service looking at how outcomes could be captured. A promise implementation manager had been recruited to support services (including Northern Lights) to implement developments and harness opportunities to embed 'The Promise'. As this was a fairly new post it will be interesting to see developments at the next inspection.

Areas for improvement

1. Effective systems should be in place to ensure that all staff are registered with an appropriate professional body.

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).

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?	4 - Good
7.1 Children and young people are safe, feel loved and get the most out of life	5 - Very 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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