

Care service inspection report

Aberlour Sycamore Services – Frankfield House

Care Home Service Children and Young

People

Frankfield House 22 Carlyle Road Kirkcaldy KY1 1DB

Inspected by: Lynn Ellison Type of inspection: Unannounced Inspection completed on: 16 April 2014



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Service provided by:

Aberlour Child Care Trust.

Service provider number:

SP2010011118

Care service number:

CS2012308613

Contact details for the inspector who inspected this service:

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Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

We gave the service these grades

5 Very Goo	5	Quality of Care and Support
5 Very Goo	5	Quality of Environment
5 Very Goo	5	Quality of Staffing
5 Very God	5	Quality of Management and Leadership

What the service does well

These were the service's key strengths in the areas inspected:

- a very child-centred home with skilled and committed staff who developed positive, nurturing relationships with children;
- a spacious, pleasant and well-maintained environment;
- very good support for children's health and well-being, including lots of opportunities for play, energetic activity and fresh air;
- very good support for staff, including regular supervision and training and development opportunities.

What the service could do better

The service has largely very effective quality assurance systems and is committed to continuous improvement.

What the service has done since the last inspection

The service had made some improvements to the way they managed medication. They had also developed a new leaflet for children ('Living at Sycamore'). Managers had completed the service's first annual review to reflect on the preceding first year of registration and look forward to future developments. At a corporate level, the new

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system for assessment, planning, monitoring and review had continued to be implemented across the Sycamore services. The implementation of the IT system to support this was also being rolled out following further training for staff. There were plans to further develop and improve external management oversight of care homes.

Conclusion

The service is now approaching the first 18 months of registration and has successfully established very good systems for care and support of children with a range of emotional and developmental needs. Despite the appointment of a number of new staff, managers and the core group of more established staff have maintained high standards and maintained a good level of continuity for children. The programme of training for the new starts is continuing. The service's first annual review has provided a good opportunity for managers and staff to reflect on the challenges and successes of the first year of operation and plan for the future.

Who did this inspection

Lynn Ellison

1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at www.careinspectorate.com

This service registered with the Care Inspectorate on 28 September 2012.

Requirements and recommendations

If we are concerned about some aspect of a service, or think it could do more to improve, we may make a recommendation or requirement.

- A **recommendation** is a statement that sets out actions the care service provider should take to improve or develop the quality of the service, but where failure to do so will not directly result in enforcement. Recommendations are based on the National Care Standards, relevant codes of practice and recognised good practice.

- A **requirement** is a statement which sets out what is required of a care service to comply with the Public Services Reform (Scotland) Act 2010 and Regulations or Orders made under the Act or a condition of registration. Where there are breaches of Regulations, Orders or Conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Inspectorate.

Aberlour Sycamore Services - Frankfield House is a care home service for up to six children of primary school age and up to 13 at one time. It is provided by Aberlour Child Care Trust, a registered Scottish charity and company limited by guarantee working with children, young people and their families. The Trust has a total of 23 registered care services throughout Scotland, including fostering, care homes, day care of children services and support services. This home is one of six similar services, also known as Sycamore Services, which provide community and residential support for children and young people who are unable to live at home.

The home is situated in a residential area of Kirkcaldy within walking distance of a range of community facilities. It is a Victorian house with six single bedrooms, a living room, kitchen-diner, communal lounge and office space. It has a large walled garden at the rear and its own parking facilities.

The service aims to provide a safe, therapeutic environment in which children can live and grow together.

When we did this inspection the home had six children living there.

Based on the findings of this inspection this service has been awarded the following grades:

Quality of Care and Support - Grade 5 - Very Good Quality of Environment - Grade 5 - Very Good Quality of Staffing - Grade 5 - Very Good Quality of Management and Leadership - Grade 5 - Very Good

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0845 600 9527 or visiting one of our offices.

2 How we inspected this service

The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What we did during the inspection

We wrote this report following an unannounced inspection by Lynn Ellison, Inspector and Gordon Brown, Nurse Consultant, Child & Adolescent Mental Health Services. It took place on the following days:

- Wednesday 9 April 2014 between 11:00 and 17:30;
- Thursday 10 April 2014 between 10:10 and 16:30;
- Sunday 13 April between 10:50 and 13:15;
- Wednesday 16 April 2014 between 09:50 and 14:50.

We made an additional visit on Sunday morning because when we started the inspection all the children were away on holiday. We gave feedback to the external manager, manager and assistant manager on 16 April 2014.

As part of the inspection, we took account of the completed annual return and selfassessment forms

that we asked the provider to complete and submit to us. We sent three care standards questionnaires to the manager to distribute to children: these were returned but were unfortunately not available to refer to by the time the inspection took place.

During this inspection process, we gathered evidence from various sources, including the following:

We spoke with:

- five of the children (two in private and the others during brunch);
- the manager and assistant manager;
- two external managers;
- two staff in private and others during the course of the visits.

We looked at:

- the service's aims and objectives;
- the corporate strategy and operating plan;
- the home's annual review dated September 2013;
- the service's improvement plan;
- children's records, including assessments and personal plans;
- records of accidents and incidents, including the use of restraint;
- a range of policies and procedures including complaints, medication and child protection;
- records of children's meetings;
- records of staff meetings;
- the training plan and training records;
- managers' reports;
- the external manager's report;
- the latest health and safety inspection;
- the repairs log;
- the environment and equipment;
- the Scottish Social Services Council's register.

Grading the service against quality themes and statements

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

Inspection Focus Areas (IFAs)

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

Fire safety issues

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to

take. You can find out more about care services' responsibilities for fire safety at www.firelawscotland.org

What the service has done to meet any requirements we made at our last inspection

The requirement

The provider must implement a safe and effective system for managing children's medication, as outlined in this report. This is in order to comply with SSI 2011/210 Regulation 4(1)(a)Timescale for implementation: within one week of receipt of this report

What the service did to meet the requirement

See quality theme 1. 3 for details.

The requirement is: Met - Within Timescales

The annual return

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

Annual Return Received: Yes - Electronic

Comments on Self Assessment

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate. We received a fully completed self-assessment document from the manager. We were satisfied overall with the way this had been completed and with the relevant

information provided for each heading that we grade the service under. The manager identified what they thought they did well, some areas for development and any changes they had planned.

Taking the views of people using the care service into account

We spoke briefly to all the children present when we visited, though they were eager to make the most of the nice weather and spend as much time as possible outside playing football! Nevertheless we shared a very pleasant brunch with them and found them to be a lively group who had good relationships with staff. There was lots of laughing and joking and a relaxed atmosphere. Some of the boys rated the

Inspection report continued

service for us: 10 out of 10, 1000 out of 10 and 100 million out of 10! One said he liked everything about the home; another said he liked the food even when it was burnt! Another said he felt safe there.

Taking carers' views into account

We did not have the opportunity to speak to any of the children's parents or carers during the inspection. We asked all the children's social workers about their views and received one response. This was very positive and we have incorporated the feedback into the evaluation for each quality statement in this report.

3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service strengths

The service performed very strongly in this area. They continued to encourage children to express their views about their own plans and on the running of the home in general. We took into account evidence from children's records, their meetings, and discussions with them and staff.

We identified the following strengths:

- the service had a very good framework for participation which formed the basis for their approach to this key area. Aberlour recognised the need to be accountable, responsive and informed and implemented a range of methods to obtain the views of children and others. They regularly audited their performance;
- Aberlour maintained a contract with Who Cares? Scotland, which provided a worker for children at the home to promote participation and provide independent advocacy support. After a gap in provision they had begun to reengage with the service and to visit children;
- the service maintained an effective complaints procedure and responded sensitively when children raised concerns;
- children had regular opportunities to influence areas of their day-to-day lives. Examples included activities, food, clothes and haircuts;
- the service provided child-friendly information about complaints and rights and responsibilities, and told children who they could contact if they needed to talk to someone or felt unhappy, for example a children's helpline.

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The Sycamore services had developed a new leaflet entitled 'Living at Sycamore' to inform children about what to expect from their time there;

- meetings of the 'Jedi Council' (group meetings) had continued, though less frequently at their request. These provided opportunities to discuss the life of the home and out forward ideas. One of the added benefits of this was to support children to practise new skills, sometimes using games;
- to the extent that they were able, children had opportunities to discuss and develop their personal plans and to attend reviews or have their views put forward in their 'My Point of View' forms. We were told that arrangements had been made for reviews at the home to make the child more confident about attending and taking part;
- the social work feedback we received confirmed that staff kept both them and the parent informed of the child's progress on a regular basis.

Areas for improvement

Staff in the home had not taken part in training on children's rights and participation (this was identified in the latest audit). The external manager explained that the corporate participation strategy was under review and that training would probably be put in place by the learning and development team in the future.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

We ensure that service users' health and wellbeing needs are met.

Service strengths

The service's performance had major strengths (representing an improvement since the last inspection) and reached a very good standard.

We identified the following ways in which the service promoted health and achieved positive outcomes for children:

- staff knew children very well and were therefore more confidently able to anticipate and meet their needs. The use of chronologies (of significant events in children's lives) helped them to understand the experiences that had influenced their development and behaviour;
- arrangements for children to receive primary health care were effective: they saw the doctor, dentist and optician regularly for example, both for preventative checks and for treatment;

- children had regular fresh air and exercise. They played in the garden and went to organised sports and activities;
- staff recognised the importance of links with the community and making friendships outside the home, and promoted this as much as possible;
- the quality of support for young people to attend school and reach their potential educationally was very good. For example, staff went to parents' evenings, attended meetings and gave presentations to familiarise staff with the approach used by Aberlour;
- management of medication had improved: children received it when they
 needed it (with the exception of some creams), and the service kept copies of
 most prescriptions. They made sure that children who might need emergency
 medication had it with them when they were away from the home;
- staff were committed to supporting children to maintain contact with important people, including parents and carers. They recognised the benefits of continuing contact even when there were no plans for children to return to parents' care. Staff had worked to develop greater trust with parents;
- arrangements for keeping children safe from harm were effective;
- staff showed affection to children, including the appropriate use of touch and humour, to make them feel nurtured;
- there was very effective advance planning for children. This applied for example to planning ahead for transition from primary to secondary school;
- there was continuing emphasis on providing predictable but flexible routines for children, including bedtimes and mealtimes. This gave opportunities for choice, limited where appropriate in line with development and behaviour. This approach promoted a nurturing and stable environment as well as helping children to develop personal responsibility and decision-making skills;
- the service used effective risk assessment and management to keep children safe, for example when taking part in activities or learning new skills;
- the incident records we reviewed showed more emphasis on supporting children to reflect on incidents and the use of physical restraint. Where this was not appropriate or possible, staff used 'lifespace' work to help children to express their feelings.

Areas for improvement

Whilst the service had raised the quality of management of medication there was still room for further improvement:

- management of topical treatments (creams and lotions) was inconsistent: it
 was difficult to know whether this was simply a recording issue or indicated
 staff were not applying them as instructed;
- children's records did not contain a full list of medications with details of the conditions for which they were prescribed. These improve staff awareness of medication for individual children;

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• the service maintained a very large supply of homely remedies. This was costly but also made the medicine cabinet cluttered. We will give advice on this.

(See Recommendation 1, Quality Theme 1.1)

It was difficult to establish whether children had received all the appropriate immunisations and vaccinations (local authorities did not routinely share this information). We suggest that the service seek confirmation of this and maintain a record.

The service had applied for befrienders for all the children and was waiting for Aberlour to recruit new ones.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The provider should continue to make improvements to the quality of management of medication.

National Care Standards Care Homes for Children and Young People: Standard 12 - Keeping Well - Medication

Quality Theme 2: Quality of Environment

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the environment within the service.

Service strengths

The strengths recorded under quality theme 1, statement 1 are also relevant strengths for this quality theme.

In addition, children at Frankfield House had all had a say in how their rooms were decorated and furnished. This made them all distinctive and helped children develop a sense of belonging. Staff encouraged them to do light chores around the house, as would happen in many homes. Again, this encouraged them to develop a sense of ownership and respect for their surroundings.

Areas for improvement

See quality theme 1, statement 1.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 2

We make sure that the environment is safe and service users are protected.

Service strengths

The service's performance had major strengths and reached a very good standard. Staff kept the home safe for children by:

- keeping it clean, free of clutter and smells and in a very good state of repair and decoration. When we arrived, they were cleaning carpets and some rooms were being repainted;
- reporting the need for any repairs. Records showed these were completed promptly;

- storing food safely, for example by covering and refrigerating it and checking that fridge and freezer temperatures were within the correct limits. Staff also checked the temperature of cooked food before serving it;
- giving new staff training in safe food preparation during their induction;
- checking the home's car to make sure it was in a roadworthy condition;
- managing children travelling in the car to keep them safe;
- storing medication in a suitable locked cabinet;
- protecting computerised information and limiting access to it;
- maintaining an emergency kit for children who might need medicines urgently when away from home;
- having a comprehensive annual inspection of the premises, as a result of which an asbestos survey was arranged (which confirmed its absence in the fabric of the building).

Areas for improvement

We asked the provider to complete a premises risk assessment after the last inspection.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 1

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service strengths

The strengths recorded under quality theme 1, statement 1 are also relevant strengths for this quality theme.

In addition, children had been involved in staff recruitment by giving feedback to managers about the candidates they had met. They also had opportunities to give their views on staff when they completed questionnaires and completed their 'My Point of View' forms for reviews.

Areas for improvement

See quality theme 1, statement 1.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Service strengths

The service's performance was very good and had major strengths. In reaching this conclusion we took into account our observations of staff working with children, training information, information about supervision, team meeting records, a check of the Scottish Social Services Council's register, attendance at a staff meeting and feedback from staff, children and a social worker.

We identified the following strengths:

- the staff we spoke to felt their views were valued and that they were part of a supportive team with approachable managers. Good quality support is essential for the challenges of this type of work;
- those staff who had been in post the longest had taken part in a month's induction period before the home opened and benefited from a consistent introductory period of preparation. Newer staff had also had a foundation induction and opportunities to shadow more experienced staff. They had formal supervision sessions with a manager as part of the process of support and monitoring during their probationary period;
- the manager ensured that staff had protected time to obtain the qualifications they needed to register with the Scottish Social Services Council (SSSC) and demonstrated a commitment to professional development. Staff were registered on the appropriate part of the SSSC register;
- managers encouraged staff to be reflective in their work and to make use of professional research and knowledge. They used this approach when monitoring incident records, for example identifying learning opportunities and alternative approaches. During meetings it was clear that managers wanted staff to use their assessment skills and knowledge of individual children and take part in decision-making. Confident staff are better able to support children and provide stable, predictable care and act as good role models, particularly in the face of challenging behaviour and heightened emotions. There were also clear expectations about staff conduct;
- there was a systematic process for performance management and support. This included regular supervision and very good training opportunities that provided staff with the relevant skills and knowledge;
- staff meetings provided regular opportunities for staff to discuss their work and keep up-to-date with individual children's progress.

A social worker told us that staff 'had a variety of skills and high level of knowledge regarding the type of difficulties that each child may have'. In addition 'set shift patterns (mean that) each child is aware of when staff start and finish. This ... allows them to settle with those working and know when they can approach them'.

Areas for improvement

Staff turnover had increased recently with the departure of a number of staff. Given the potential for this to affect continuity of care, this is something the service will need to continue to monitor.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Service strengths

The strengths recorded under quality theme 1, statement 1 are also relevant strengths for this quality theme.

In addition:

- children's involvement in recruitment and selection meant they could have a say in the appointment of new managers and supervisory staff;
- feedback from complaints, children's meetings, reviews and surveys provided feedback on aspects of service management;
- external managers had opportunities to take feedback directly from children during visits and monitored records of incidents.

Areas for improvement

See quality theme 1, statement 1.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide

Service strengths

The service performed very well in this area, using a range of quality assurance methods to promote continuous improvement. In addition to the methods outlined in quality statement 1.1, these included:

- the service's first annual review. This provided a reflection on the service's first year of operation, an overview of feedback from children and a selection of stakeholders, and some recommendations for improvement;
- a business plan. This reported on the service's performance in the preceding year and looked ahead to the next, concluding with an improvement plan;
- annual health and safety inspections by the healthy and safety officer, which provided a detailed check of the environment and systems;
- quarterly progress reports by managers, which kept external managers informed of service performance and significant events;
- annual audits of performance in key areas: child protection and participation;
- regular visits by external managers, who also provided their own monitoring reports. External managers also reviewed records of incidents and restraints;
- the service notified the Care Inspectorate of significant events, which allowed regulatory oversight to be maintained between inspections;
- regular operational managers' meetings provided opportunities for ongoing discussion and allowed external managers to maintain oversight of service quality;
- Aberlour had consulted staff about the new 'outcomes framework it has developed and most recently, the IT system set up to support it.

Areas for improvement

The provider has been reviewing its systems for quality assurance by external managers. Part of this will involve them meeting with all staff and seeing children in advance of the service's annual review being completed.

We felt there was scope for the service to further develop its systems for reviewing incidents. Doing this periodically in a focussed way can help managers to identify whether there are particular patterns or issues recurring, from which lessons can be learned. This will supplement the work managers already do for individual children.

The service did not have a closure strategy but Aberlour was in the process of developing one.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

4 Other information

Complaints

No complaints have been upheld since the last inspection.

Enforcements

We have taken no enforcement action against this care service since the last inspection.

Additional Information

Not applicable.

Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in the Care Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme being re-graded as unsatisfactory (1).

5 Summary of grades

Quality of Care and Support - 5 - Very Good					
Statement 1	5 - Very Good				
Statement 3	5 - Very Good				
Quality of Environment - 5 - Very Good					
Statement 1	5 - Very Good				
Statement 2	5 - Very Good				
Quality of Staffing - 5 - Very Good					
Statement 1	5 - Very Good				
Statement 3	5 - Very Good				
Quality of Management and Leadership - 5 - Very Good					
Statement 1	5 - Very Good				
Statement 4	5 - Very Good				

6 Inspection and grading history

Date	Туре	Gradings	
29 May 2013	Unannounced	Care and support Environment Staffing Management and Leadership	4 - Good 5 - Very Good 5 - Very Good 5 - Very Good

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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