

Inspection report

Rosslyn Avenue Care Home Service

Rosslyn Children's Unit
17-19 Rosslyn Avenue
East Mains
East Kilbride G74 4BP

Inspected by: Rick O'Dowd
(Care Commission Officer)

Type of inspection: Announced

Inspection completed on: 1 August 2006

Service Number

CS2003001375

Service name

Rosslyn Avenue

Service address

Rosslyn Children's Unit
17-19 Rosslyn Avenue
East Mains
East Kilbride G74 4BP

Provider Number

SP2003003481

Provider Name

South Lanarkshire Council

Inspected By

Rick O'Dowd
Care Commission Officer

Inspection Type

Announced

Inspection Completed

1 August 2006

Period since last inspection

5 months

Local Office Address

Hamilton

Introduction

Rosslyn Children's unit is owned and managed by South Lanarkshire Council. The service aims to provide young people with "positive and enjoyable experiences. There were eight young people being looked after and accommodated at the time of inspection. There were a range of holiday programmes in which the young people were participating and consequently there were on three present in the house, ranging from twelve years to fifteen years, during the inspection.

Basis of Report

The report was written following an announced inspection. The service completed an inspection return before the inspection.

The Care Commission Officer wrote to the service informing when the visit would take place.

During the visit which took place on 1 August 2006 between the hours of 1.00pm and 6:00pm and on 2 August 2006 between 11:00am and 6:00pm, the Care Commission Officer spoke with:

- The Manager
- Four Social Care Workers
- One Social Care Assistant
- Three Young People
- Three external social workers

The Care Commission Officer looked at a range of policies, procedures and records including the following:

- Care plans
- Fire records
- Incident reports

The Care Commission Officer took all of the above into account and reported on whether the service was meeting the following National Standards.

Care Homes for Children and Young People:

- Standard 2: First Meetings
- Standard 4: Support Arrangements
- Standard 6: Feeling Safe and Secure

with particular focus on the following themes:

- Child protection
- Safe Holding
- Care Planning
- Fire Safety

During the inspection account was also taken Standard 7.4 Management and staffing in relation to recordkeeping.

The inspection included examination of the premises

A Care Commission Practice Learning Assessor was also present at the Inspection to observe the Care Commission Officer who is undertaking the Regulation of Care Award.

Action taken on requirements in last Inspection Report

There was one requirement from the previous report relating to methods of physical intervention. Appropriate action had been taken to meet this.

Comments on Self-Evaluation

The self-evaluation had been completed and helped to inform the inspection process.

View of Service Users

Three young people were spoken with during the inspection. All of them stated that they felt safe and had positive relationships with staff. They stated that there were no issues of bullying in the unit and they had confidence in the ability of the staff team to deal with any behavioural difficulties.

They cited the main strengths of the unit currently as being the quality of holidays provided, the friendly and safe atmosphere and the food. Suggestions for improvement were a review of how keys to the bedrooms were managed and changes to the garden to create a better play area.

View of Carers

There were no carers present during the inspection.

Regulations / Principles

Regulation :

Strengths

Areas for Development

National Care Standards

National Care Standard Number 2: Care Homes for Children and Young People - First Meetings

Strengths

When admissions were planned young people and their carers or representatives would be encouraged to visit the unit and see their bedroom before moving in. In these conditions they could meet with their keyworker and suitable arrangements would be made among staff and other young people to make the move as friendly and comfortable as possible. Good links were maintained with families and their representatives, and young people were supported in keeping important contacts. Where admissions were short notice planning meetings were arranged very quickly with a view to ensuring an appropriate assessment was made of the young person's needs. Efforts were made to keep young people informed about developments in family life out with the unit and about how long they would stay there and next steps.

Areas for Development

Despite the fact that the unit was intended as a long term accommodation, the majority of admissions were unplanned in response to emergencies. This could be disruptive to the young people accommodated on long term placements and limited the extent to which admissions could contribute positively to the experiences of young people being looked after and accommodated. (See recommendation 1).

National Care Standard Number 4: Care Homes for Children and Young People - Support Arrangements

Strengths

The service was delivered to young people in a holistic manner which addressed basic care, health, education, family life and social circumstances, and the individual needs and wishes of young people. Staff worked in conjunction with a wide range of other services and agencies. Information in relation to this was recorded in the care plans. Young people were encouraged to participate in care planning. Good links were kept with other services and significant people in circumstances where the unit was considered not to be meeting the needs of an individual.

A new care planning system was being introduced and staff were currently transferring information into the new format.

Areas for Development

None identified at this time

National Care Standard Number 6: Care Homes for Children and Young People - Feeling Safe and Secure

Strengths

Minimum staffing levels were adhered to. Staff demonstrated an understanding of child protection issues. There were effective procedures in the event of young people going missing. Reasonable measures were in place to monitor visitors to the unit. Fire records were kept and evacuations were carried out regularly. Young people were confident that staff could keep them safe and appropriately manage challenging behaviour within the unit.

Staff had a specific strategy in dealing with physical restraint, supported by on-going training, and there were very few occasions where incidents resulted in such intervention. There were systems in place in relation to managing incidents and accidents. Vehicles were maintained properly and in good condition. All bedrooms had appropriate locking systems and young people could lock their doors when they left the rooms. Visitors were controlled in a reasonable manner to maximise safety and to ensure young people had the opportunity to have contact with friends and family.

Young people had access to the internet and although staff has experienced some difficulty in controlling access to sites which were considered inappropriate they closely monitored and supervised young people to maximise safe use of this facility.

Areas for Development

Although staff had confidence in their knowledge of child protection issues, they had no formal training in operational procedures for a significant period of time. (See recommendation 2).

There was a copy of "Holding Safely" but staff were not aware of this or how to access it. (See recommendation 3).

The unit did not have a current documented fire risk assessment and a procedure to review this. (See requirement 1). There was no documented Fire Safety Policy and Emergency Fire Action Plan. (See requirement 2). There was a need for Fire Safety training for all staff members which is delivered a minimum of twice per year and records kept of this. (See requirement 3). There was no record of suitable maintenance on all electrical ventilators and extractor fans. (See requirement 4).

National Care Standard Number 7: Care Homes for Children and Young People - Management and Staffing

Strengths

The unit had been inspected against this standard previously. The issues relevant to this inspection relate to record keeping and are addressed in “Areas for Development” below.

Areas for Development

There was a need to establish a greater understanding among staff about what constitutes an “incident” and how and where this should be recorded. The format of incident reports could be developed to create a more specific account of how incidents have been managed and concluded. (See recommendation 4) There was also a lack of clarity about the reporting of incidents and accidents to the Care Commission. (See recommendation 5)

Similarly the recording of complaints and “issues and concerns” was fragmented and it was not always clear what the outcome had been for the young person raising the issue. These records were not indexed and consequently difficult to establish of an exhaustive account was being maintained. (See recommendation 6)

Records of pocket money given to young people were kept but their continued to be occasions where staff had signed the sheet on behalf of the young person without having this countersigned by a colleague. (See recommendation 7)

Enforcement

There has been no enforcement action taken on this service.

Other Information

Appropriate action had been taken to address the previous recommendations other one which related to pocket money records. This is addressed in Standard 7.4 in this report.

The unit continued to offer a high standard of accommodation and the young people enjoyed a stable and nurturing environment.

Requirements

1. A documented fire risk assessment must be undertaken by a competent person and a procedure introduced to review this. In order to achieve this the manager must:

Ensure that the assessment :

1. identifies people at risk,
2. identifies fire hazards,
3. evaluates the risk and decide if existing fire safety measures are adequate,
4. documents the assessment and action
5. is regularly reviewed

This is in order to comply with:

SS1 2002/114 Regulation 10 – a requirement to ensure the fitness of premises.

Time Scale for implementation: 4 months from the publication of this report.

2. A written Fire Safety Policy and Emergency Fire Action Plan must be developed. In order to achieve this the manager must:

Ensure there is a clearly defined fire safety policy for all persons using the premises

Identify arrangements for planning, organisation, control, monitoring and review of fire safety measures

Develop a plan for post-evacuation procedures.

This is in order to comply with:

SS1 2002/114 Regulation 19 – a requirement to ensure the appropriate records are kept

Time Scale for implementation: 4 months from the publication of this report.

3. Fire Safety training must be given to all staff members a minimum of twice per year and records kept of this. In order to achieve this the manager must:

Ensure that the training will support the fire safety strategy and emergency action plan.

This is in order to comply with:

SS1 2002/114 Regulation 13(c)(i) – a requirement to ensure that staff have training to the work they perform.

Time Scale for implementation: 4 months from the publication of this report.

4. Suitable maintenance must be carried out on all electrical ventilation and extractor fans and records kept of this. In order to achieve this the manager must:

Ensure that maintenance is completed by a competent person and that records are kept of this.

This is in order to comply with:

SS1 2002/114 Regulation 10 – a requirement to ensure the fitness of premises.

Time Scale for implementation: 4 months from the publication of this report.

Recommendations

The service should explore ways of reducing emergency, unplanned and short notice admissions. National Care Standards Care Homes for Children and Young People Standard 2 First Meetings

2. All staff should be given formal training to ensure that they are familiar with operational procedures in relation to Child Protection.

National Care Standards Care Homes for Children and Young People Standard 6 Feeling Safe and Secure.

3. A copy of "Holding Safely" should be made available to staff.

National Care Standards Care Homes for Children and Young People Standard 6 Feeling Safe and Secure.

4. An exercise should be conducted to raise awareness among staff about the definition of an "incident" and how these should be recorded. The format of incident reports should be developed to more clearly identify outcomes. National Care Standards Care Homes for Children and Young People Standard 7 Management and Staffing.

5. Action should be taken to ensure that there is a clear understanding of the nature of incidents and accidents of which the Care Commission must be informed. National Care Standards Care Homes for Children and Young People Standard 7 Management and Staffing.

6. The format of records of complaints, issues and concerns should be developed to more clearly identify outcomes and the records should be indexed. National Care Standards Care Homes for Children and Young People Standard 7 Management and Staffing.

7. Financial records should be signed by two members of staff or by the individual young person receiving money. National Care Standards Care Homes for Children and Young People Standard 7 Management and Staffing.

Rick O'Dowd
Care Commission Officer