

Inspection report

The Elms Close Support - Dundee Care Home Service

The Elms - Close Support Unit
317 South Road
Dundee DD2 2RT

Inspected by: Linda Paterson
(Care Commission Officer)

Type of inspection: Announced

Inspection completed on: 19 March 2008

Service Number

CS2003034640

Service name

The Elms Close Support - Dundee

Service address

The Elms - Close Support Unit
317 South Road
Dundee DD2 2RT

Provider Number

SP2003004034

Provider Name

Dundee City Council

Inspected By

Linda Paterson
Care Commission Officer

Inspection Type

Announced

Inspection Completed

19 March 2008

Period since last inspection

2 months

Local Office Address

Central East Region
Compass House
11 Riverside Drive
Dundee
DD1 4NY

Introduction

The Elms Close Support Unit is located in the Lochee area of Dundee. The unit shares a building with the secure unit and secure education unit, but operates as a separate facility, having its own entrance and dedicated staff team. It has five bedrooms, all of which have en-suite facilities. In addition there is a spacious living/dining room and a multi-purpose recreation room, a laundry, meeting room and a general office.

The stated aim of the unit is "to provide young people whose behaviour is a threat to their wellbeing with a safe, supportive and stimulating environment in which it is hoped that they can achieve their full potential, develop respect for themselves and others, and understand the skills and attitudes they will require when they move on from the unit."

At the time of the inspection, four young people were living in the Close Support Unit

Basis of Report

This report is based on an announced inspection visits to The Elms Close Support Unit on 19, 20 and 27 March. The inspection was carried out by Care Commission Officer Linda Paterson.

This inspection was conducted as part of a small number of pilot inspections. The Care Commission is using these pilot inspections to develop and improve the inspection process.

Some pilot inspections may also be reported in a pilot report format. These developments form part of the Care Commission's Regulating for Improvement Project and the Care Commission is grateful to this service for volunteering to take part in a pilot inspection.

Regulation Support Assessment

This service was inspected after a Regulation Support Assessment (RSA) was carried out to determine the intensity of inspection necessary. The RSA is an assessment undertaken by the Care Commission Officer (CCO) which considers: complaints activity, changes in the provision of the service, nature of notifications made to the Care Commission by the service (such as absence of a manager) and action taken upon requirements. The CCO will also have considered how the service responded to situations and issues as part of the RSA.

This assessment resulted in this service receiving a medium RSA score and so a medium intensity inspection was required as a result. The relevant Inspection Focus Areas and associated National Care Standards for the particular service type were inspected during an unannounced inspection of this service in January 2008. This inspection focussed on recommendations and requirements from previous inspections, complaints or other regulatory activity, and the Quality Assessment Framework themes of:

Quality of Care and Support

Quality of Environment

Quality of Staffing

Quality of Management and Leadership

During the inspection, evidence was gathered from a number of sources including:

Discussion with;

The Manager

members of staff

service users

Examination of service user care files
Examination of Policies and procedures & staff training records
Tour of the building
Observation of staff practice

Fire Safety Issues

The Fire (Scotland) Act 2005 introduced new regulatory arrangements in respect of fire safety, on 1 October 2006. In terms of those arrangements, responsibility for enforcing the statutory provisions in relation to fire safety now lies with the Fire and Rescue service for the area in which a care service is located. Accordingly, the Care Commission will no longer report on matters of fire safety as part of its regulatory function, but, where significant fire safety issues become apparent, will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Further advice on your responsibilities is available at www.infoscotland.com/firelaw.

Action taken on requirements in last Inspection Report

There were three requirements from the last inspection of the service in January. As these requirements were made recently, progress in respect of these requirements will be followed up at the next inspection of the service.

Comments on Self-Evaluation

The manager completed a detailed self assessment as part of the Quality Assessment Framework, details of which are incorporated into the main body of this report.

View of Service Users

Three service users were spoken to individually during the course of this inspection. They were generally positive about the support offered by staff at The Elms.

View of Carers

The views of carers were not sought for this inspection.

Regulations / Principles

National Care Standards

National Care Standard Number 5: Care Homes for Children and Young People - Your Environment

Strengths

QAF Standard Number 2: Care Homes for Children and Young People - Quality of the Environment:

This report does not include comments on all of the statements in this theme. Evidence to support the following statements was examined during the visit;

2.2 The home is safe and young people are protected

2.5 I have involved service users and carers in determining the gradings for this theme.

The service evidenced some key strengths in relation to this statement.

Robust staff recruitment and disciplinary procedures, together with a positive staff training and development strategy, ensured that staff were fit, qualified and skilled to support vulnerable young people.

Child protection procedures and complaints procedures were in place, and young people had ready access to external agencies, including the Children's Rights Officer and Who Cares.

All staff were trained and accredited in the use of CALM, and the service was continuing to develop its recording system in line with the best practice document "Holding Safely".

The building itself was secure, and staff were aware of the importance of maintaining the security of the young people without unduly restricting their freedom, an issue which was a particular challenge in this situation. The manager was in the process of carrying out a review of security arrangements for the building, and some procedures had been revised. Risk assessments for the premises, activities and for individual young people were in place, and young people said that they felt safe.

The service had established positive relationships with community police officers who maintained informal contact with the staff and young people within the unit.

The communal areas of the building were furnished and maintained to a high standard and provided a comfortable environment in which young people could relax and engage in a range of activities.

Young people indicated that they were generally happy with their environment. On an individual basis, they were consulted about the decoration of their bedrooms.

Areas for Development

The service depended heavily on regular sessional staff to maintain staffing levels. However, none of the sessional staff had had child protection training. (See Recommendation 4)

The manager indicated that plans to develop and enhance the physical environment were

sometimes hampered by a lack of flexibility within the organisation which delayed or prevented the development of a more homely environment, for example, limited choices in fabric and furnishings for the bedrooms detracted from the ability of the service to involve young people in determining the quality of the environment. (See Recommendation 5)

As with Quality statement 1, the involvement of young people in the evaluation of the service was at an early stage and had not yet had an impact on service delivery. (See Recommendation 3)

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

Strengths

The service had in place a well-developed staff training programme which was enabling all staff to achieve the qualifications required for registration with the SSSC within the proposed timescales. In addition to the above training programme, staff had access to a range of non-statutory training to further develop their practice.

Throughout the inspection, staff demonstrated a high level of commitment to caring for and supporting the young people in their care

Areas for Development

Although staffing levels had improved, and the unit was not operating at capacity, the fact that staff had been working with minimum staffing levels over a period of time, had had a negative impact on the functioning of the staff team. For example, staff were not in the habit of applying for training, supervision and team meetings were irregular and inconsistent. The service Although staffing levels had improved, and the unit was not operating at capacity, the fact that staff had been working with minimum staffing levels over a period of time, had had a negative impact on the functioning of the staff team. For example, staff were not in the habit of applying for training, supervision and team meetings were irregular and inconsistent. The service must ensure that it prioritises the recruitment and retention of staff within this service to enable the development of appropriate structures to support the work of the staff team. (See Requirement 1)

The service depended heavily on regular sessional staff to maintain staffing levels. These staff were seen to be competent and caring. However, despite some of them having provided a service for several years, they were not included in the training programme, other than for CALM training. For example, none of the sessional staff had had child protection training. (See Recommendation 4)

While there were some very good examples of direct work being done with young people, some staff appeared to be less clear about the expectations of the key worker role within the service. (See Recommendation 6)

National Care Standard Number 11: Care Homes for Children and Young People - Keeping Well - Lifestyle

Strengths

QAF Standard Number 1: Care Homes for Children and Young People - Quality of Care and Support

This report does not include comments on all of the statements in this theme. Evidence to support the following statements was examined during the visit;

1.3 I ensure that children and young people's health needs are met and that access to a full range of health services is available

1.5 I have involved service users and carers in determining the gradings for this theme.

Good arrangements were in place to make sure that young people's health needs were met, and that they had access to a range of health services.

All children were registered with a GP, and their health needs were assessed on admission by the LAAC nurse. The LAAC nurse ensured that medical records were collated so that there was continuity of care in relation to health matters. Young people were able to consult the LAAC nurse confidentially for advice and guidance on a range of health issues.

Staff were proactive in supporting young people to attend medical and dental appointments. They also pursued access to more specialist services when this was felt to be necessary.

Staff were sensitive to the impact of separation and loss on young people, and there was evidence that young people who were bereaved were well supported by staff.

The service had policies in place which promoted a healthy lifestyle, such as a strict no-smoking policy, and a nutritional policy. Some young people had been encouraged to attend gym sessions, accompanied by staff.

There was substantial evidence from care plans that young people were continuously consulted about all aspects of their lives, informally on a day-to-day basis, and more formally in one-to-one meetings and planning meetings and reviews. The involvement of young people in these circumstances was respectful and meaningful.

Young people's meetings were held on a fairly regular basis with the agenda being set by the young people and by staff. Issues raised were discussed at staff meetings, and some evidence of feedback was seen.

A system of evaluating the service through the use of questionnaires had recently been introduced.

Areas for Development

It was felt that staff could adopt a more proactive approach to promoting healthy lifestyles for young people, for example by encouraging them to drink water as an alternative to diluted juice, and identifying and encouraging them to access these. (See Recommendation 1)

While there was a process in place to enable the issues raised by young people at their meetings to be communicated through the staff team, the lack of regular staff meetings meant that issues were sometimes lost, or were fed back inconsistently. (See Recommendation 2)

A system of formally involving young people in the evaluation of the service was at an early stage and had not yet had an impact on service delivery. (See Recommendation 3)

National Care Standard Number 18: Care Homes for Children and Young People - Concerns, Comments and Complaints

Strengths

This report does not include comments on all of the statements in this theme. Evidence to support the following statements was examined during the visit;

4.4: I have developed a quality assurance process which involves children and young people in the self assessment of the quality assurance process

4.5 I have involved service users and carers in determining the gradings for this theme.

The service was developing its approach to self assessment using a system developed by the Open University.. Feedback from stakeholders including placing social workers and visiting professionals was welcomed and used to some extent to inform developments in the service. The manager of the service was involved with the external manager and other residential managers in the sector in an ongoing evaluation of service provision.

The service had used the findings from previous Care Commission inspections of the service to improve service provision, and had responded positively to the opportunity and challenge presented by their involvement in this pilot inspection process.

Areas for Development

The process of self-evaluation and quality assurance involving young people and their parents and carers, staff and stakeholders was at an early stage of development. (See Recommendation 7)

Enforcement

There has been no enforcement action against this service since the last inspection.

Other Information

None noted

Requirements

Requirement 1: The service must ensure that it prioritises the recruitment and retention of staff within this service to enable the development of appropriate structures to support the work of the staff team.

This is to comply with SSI/2002/114 Regulation 13(a) – a requirement to ensure that at all times sufficient numbers of suitably qualified and competent persons are working in the service as are appropriate for the health and welfare of service users.

Timescale for implementation: by 31 July 2008

Recommendations

Recommendation 4: The service should ensure that sessional staff receive training appropriate to the task, including child protection training - Standard 6 - Feeling safe and secure

Recommendation 5: The service provider should review the arrangements for the decision-making and approval processes for minor environmental developments within this service, and ensure that the manager has the necessary authority to effect positive change within the environment – Standard 7 – Management and staffing arrangements

Recommendation 6: the service should ensure that staff have a clear understanding of their responsibilities in the key worker role - Standard 7 - Management and staffing arrangements

Recommendation 1: Staff should be provided with suitable training in issues related to the promotion of a healthy lifestyle – National Care Standards for Care Homes for Children and Young People – Standard 11 – Keeping well – lifestyle

Recommendation 2: The service should evidence that issues raised by young people at their meetings are recorded and responded to consistently – Standard 18 – Concerns, comments and complaints

Recommendation 3: The service should ensure that it continues to develop ways of involving young people in the evaluation of all aspects of the service, taking into account their views about their care, the environment, and issues to do with the management and staffing of the service – National Care Standards for Care Homes for Children and Young People – Standard 7 – Management and staffing

Recommendation 7: The service should continue to develop and systematically implement a quality assurance system which takes account of the views of young people and their parents and carers, staff and stakeholders – Standard 7 – Management and staffing

Linda Paterson

Care Commission Officer