

# Short Breaks for Children Care Home Service

15 Burgh Road Lerwick Shetland ZE1 OLA

Telephone: 01595745245

Type of inspection:

Unannounced

Completed on:

8 February 2024

Service provided by:

Shetland Islands Council

Service no:

CS2003009602

Service provider number:

SP2003002063



## Inspection report

## About the service

Short Breaks for Children provides a short breaks service for young people in two separate properties close to the town centre of Lerwick, Shetland.

The service at Laburnum House provides residential care for a maximum of six children and young people with learning difficulties and multiple complex needs, with a further two young people being cared for at a smaller property at Haldane Burgess Crescent.

## About the inspection

This was an unannounced which took place on Sunday 4 and Monday 5 February 2024. The inspection was carried out by one inspector from the Care Inspectorate.

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 people using the service and two parents
- · spoke with staff and management
- · observed practice and daily life
- · reviewed documents
- received feedback via questionnaires from parents, staff and external professionals.

## Key messages

- The team, including key staff and managers, worked really well alongside families and genuinely included and respected them as partners in their child's care.
- Young people and families receiving support from short breaks benefitted from a clear vision that was inspiring and promoted equality and inclusion for all.
- A strong cohesive staff team communicated effectively to ensure the young person was always at the centre of decisions and ensure a clear and consistent approach.
- The fabric of one of the properties needed to improve significantly to ensure young people had the best possible experience.

## 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

Young people were kept safe both emotionally and physically. Staff knew the young people very well and used risk assessments and support plans to inform their care and support. They worked well together to discuss plans and the practicalities of safety. Parents we spoke to felt that staff would keep their children safe as they understood their personalities and needs.

Staff were aware of child protection processes and procedures, had undertaken training and felt confident in their actions. They advised that there was always a senior member of staff available for discussion and guidance and to ensure best practice, however, this may not always be a person with any depth of knowledge of the young people living at Short Breaks. The organisation had considered this arrangement and felt it was adequate, however, it may be useful to engage with staff and parents to review this arrangement.

There was a clear culture of relationship-based practice, sensitivity and understanding which meant the staff used the least restrictive practices possible, for the shortest time possible and only to ensure safety. A strong cohesive staff team communicated effectively to ensure the young person was always at the centre of decisions to ensure a clear and consistent approach. This had been very effective in supportively managing challenging situations in the best possible way for young people.

We observed warm, trusting, and nurturing relationships between staff and young people. Staff clearly had the right value base required to provide compassionate care. All of the staff spoke with warmth and respect about the young people they supported (and their families). They clearly wanted the best for them. Plans were made around the young people's wishes and needs, being mindful of important routines and planning to minimise anxiety and distress. Young people were at the forefront of all decisions.

There had been a real improvement in accessing resources to make the environment as welcoming and inviting as possible, however, the fabric of one of the properties needed to improve significantly to ensure young people had the best possible experiences. (See area for improvement 1.)

The young people using the service were given as much choice as possible. They were supported to communicate their wishes and views using various communication styles and aids, and also benefitted from established relationships with a staff team who knew their interests and promoted new experiences. A young person we spoke with gave some brilliant examples and was clearly involved in sharing ideas and planning. Newsletters shared with families allowed them to see the adventures and fun experiences their children were having and to share news about forthcoming events.

Young people had very individual and specific needs in relation to their positive health. Staff were knowledgeable and took great care to promote young people's wellbeing. Medication systems had been reviewed and improved to ensure good practice. Mealtimes sensitively promoted choice and independence while also extending experiences and promoting skills.

The team, including key staff and managers, worked really well alongside families and genuinely included and respected them as partners in their child's care. Events had been held where the whole family share timed and had fun together. Families felt relaxed and welcomed and very well supported by everyone. Their feedback was extremely positive.

Young people were understood by those looking after them and their rights were championed. The aims and objectives of the service had clear links to the United Nations convention for the rights of the child (UNCRC). There were strong examples of the staff advocating on behalf of young people to ensure their rights were upheld.

Young people and families receiving support from Short Breaks and benefitted from a clear vision that was inspiring and promoted equality and inclusion for all. We found that leaders were aspirational, actively seeking to achieve the best possible outcomes for young people.

Staff described a knowledgeable and approachable manager who would passionately stand up for the service, taking their views into account. Plans for senior staff to better use their skills to work alongside the team and offer guidance and had been halted by their need to spend the majority of their time on organisational tasks. A further plan for the near future will be very helpful to them better using their skills to the benefit of the team.

Good leadership and the commitment of a caring and enthusiastic staff team to flexible and responsive working had greatly minimised the reduction of short breaks for young people and their families in response to situations requiring an immediate response. The team understood the impact on families and were keen to look for solutions to support this, however, the organisation should reflect and learn from the situation and develop strategies which will prevent this recurring in the future. (See area for improvement 2.)

Young people benefitted from a confident staff team who delivered quality support and trauma informed care. This was underpinned by regular, support and supervision, training and an opportunity to reflect on practice. Staff commented very positively on the support they received, about an empowering culture, and a highly individual flexible approach to meeting the needs of the young people.

The service had an improvement plan which incorporated organisational and service objectives and identified key changes and how these would be met. Developments were guided by the Health and Care Standards, where 'Promise' focussed and considered how and who would be involved in meeting identified objectives. The plan would be strengthened by ensuring it incorporated the views of parents and young people. (See area for improvement 3.)

Quality assurance processes had improved considerably since the last inspection with auditing processes generally well used to ensure high quality support plans and risk assessments which were reviewed regularly. This was beneficial to ensuring young people's support met their current needs and wishes.

#### Areas for improvement

1. The provider should review whether the current property at Laburnum continues to meet the needs of the service users and ensure any remedial work required to ensure their comfort and safety is carried out promptly.

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

'I experience a high quality environment if the organisation provides the premises' (HSCS 5); and

## Inspection report

- 'My environment has plenty of light and fresh air and the lighting, ventilation and heating can be adjusted to meet my needs and wishes' (HSCS 5.19).
- 2. The organisation should review the current arrangements to support families in crisis to ensure there is minimal disruption to service provision.

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

- 'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event' (HSCS 4.14).
- 3. The service should consider how they gain the views of families and incorporate these into plans for the future.

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

'I am actively encouraged to be improving the service I use, in a spirit of genuine partnership (HSCS 4.7); and

'I am supported to give regular feedback on how I experience my care and support and the organisation uses learning from this to improve' (HSCS 4.8).

## What the service has done to meet any requirements we made at or since the last inspection

## Requirements

#### Requirement 1

By 30 September 2022 the provider must ensure that all young people have a support plan within 28 days of using the service. This should detail how the young person's health, welfare and safety needs are to be met.

This is to comply with Regulation 5(1) (Personal plans) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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 a 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).

This requirement was made on 27 September 2022.

#### Action taken on previous requirement

All young people had support plans within 28 days of receiving short breaks.

Met - within timescales

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

Medication procedures should be improved to ensure that, at all times, it is clear what medication is held on-site and that procedures follow best practice. Effective auditing should be in place which will identify any discrepancies and prevent over ordering and storage.

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

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'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

This area for improvement was made on 27 September 2022.

#### Action taken since then

Medication systems had been reviewed to meet best practice.

This area for improvement has been met.

## Previous area for improvement 2

The organisation should ensure that all staff feel valued, receive regular supervision and use team meetings and development days to effectively take forward the areas identified in the service's improvement plan

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

'My care and support is consistent because people work well together' (HSCS 3.19); and

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

This area for improvement was made on 5 August 2022.

#### Action taken since then

All staff received formal and informal supervision and attended regular team meetings.

This area for improvement has been met.

#### Previous area for improvement 3

The service should complete a staffing needs assessment to ensure the right amount of staff are available to meet the needs of young people, and as required by the Care Inspectorate (In the document 'Guidance for providers on the assessment of staffing levels').

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

'My needs are met by the right number of people' (HSCS 3.15).

This area for improvement was made on 27 September 2022.

#### Action taken since then

Systems were in place to ensure there were the right amount of staff to meet young people's needs.

This area for improvement has been met.

## Previous area for improvement 4

Effective auditing procedures should be in place to ensure that support plans and risk assessments are current, reviewed and updated as required. Guidance documents for staff should be reviewed to ensure they reflect best practice and legal requirements.

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); and

'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

This area for improvement was made on 27 September 2022.

#### Action taken since then

Effective auditing procedures were in place to ensure plans were current and relevant.

This area for improvement has been met.

## 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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