

East King Street children's house Care Home Service

50 East King Street
Helensburgh
G84 7QR

Telephone: 01436 670 385

Type of inspection:
Unannounced

Completed on:
13 March 2024

Service provided by:
Argyll and Bute Council

Service provider number:
SP2003003373

Service no:
CS2003000426

About the service

50 East King Street is a residential service for children and young people. The service is owned and managed by Argyll and Bute Council. The service is registered to provide a care service for up to eight children and young people. This includes another property, at a separate location, which can accommodate up to two young people.

Both properties are close to local transport routes and amenities.

About the inspection

This was an unannounced inspection which took place on 13 February and 23 February 2024 between the hours of 11.30am and 19.45pm. The inspection was carried out by one inspector and one young inspection volunteer 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 five young people using the service
- spoke with eight members of staff and management
- observed practice and daily life
- reviewed documents
- spoke with four visiting professionals.

Key messages

- New leadership had impacted positively on the performance of the service.
- A few young people remained at high risk of harm.
- The provider had taken action to address concerns about young people's safety and wellbeing.
- Staff were more effective in promoting positive practices, but additional training would support continued development.
- The service could be more ambitious for young people.
- Links with adult mental health services should be developed.
- The quality of the living environment had improved.
- The approach to improvement planning and quality assurance had improved.

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?	3 - Adequate
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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?

3 - Adequate

We made an overall evaluation of adequate for this key question, as strengths just outweighed weaknesses.

Over recent months, new leadership had begun to influence the vision and values of the service. As a priority, the service collaborated with partners to protect young people and optimise their experiences and outcomes. Where this worked well, young people were developing and maturing in their ability to make informed choices and decisions. However, where young people experienced an established pattern of high risk behaviours, they continued to be at high risk. This was despite their strong emotional connections with staff and incidences of harm being less frequent. For other young people who remained isolated from wider society and whose wellbeing was of concern to all involved, a lack of a well developed plan had impacted upon the likelihood of them achieving positive outcomes. Although very recently there was an improved chance of success. The provider should continue to optimise every opportunity to secure an appropriate transition into adulthood for those due to leave the service. **(See area for improvement 1)**

Young people told us that staff were kind and supportive to them. We observed this during our visit. Nevertheless, we were made aware of one instance where the provider viewed it as necessary to address concerns expressed about staff practice, relating to the safety and wellbeing of young people. The provider will advise us of the outcome of their investigations.

During this inspection, it was evident that as staff developed more understanding of young people's emerging needs and interests, they had been more effective in promoting responsive practices. Some staff training had helped to educate and empower staff to better meet the needs of young people, but we felt this could be further developed. **(See area for improvement 2)**

Some staff communicated how passionate they were about the wellbeing of those in their care, and we observed where humour, best demonstrated these emotions. This warmth was extended to young people who had previously moved on from the service and who had chosen to visit for lunch and a catch-up. We were joined on this inspection by a young inspection volunteer, who spoke with several young people about their experiences of the service. Whilst each felt safe and respected, some suggested that it would be good if there was more for them to do in and around the house. They enjoyed party and pizza nights, which were fun, but they felt that planned activities were infrequent. We also advised the service that by being more ambitious for young people, this would increase opportunities for personal growth and development. **(See area for improvement 3)**

More recent progress in the performance of the service was also acknowledged by partners who observed a more confident and informed staff group. They commented about a staff team supportive of young people attending college and encouraging them to benefit from a range of supports to assist their growth and familiarity with expectations of young adulthood. Examples included, independence skills which were actively encouraged including travel, budgeting, shopping and preparing meals. Young people told us that they had access to their own monies and that these could be used to fund positive purchases. Young people attended school, while others had paid jobs which they had actively sought for themselves. This provided an opportunity for those young people to self fund activities of their choice.

We spoke with partners across a range of services. Advocacy supports continued to try to find ways to explore young people's views and wishes, and other specialist services provided additional safeguards for young people. Where risk was high, social work colleagues had offered enhanced inputs to support young people to understand and navigate their perceptions of life beyond the service. Some partners told us, that more recently they had felt there was a renewed sense of purpose in the service and an improved outlook. We acknowledged that proactive leadership over recent months had inspired a clearer vision for the service, with almost all staff advising of a more positive morale and an improved ability to overcome challenges which previously impacted upon performance.

For many of the young people who were approaching adulthood, access to adult mental health services presented new challenges for both young people and the service. As with other transitions, there were challenges to making and sustaining new relationships to secure continuity of support. To ensure mental health care continues to inform risk assessment and safety plans for young people aged 18+ in need of specialist treatment, the provider should consider ways in which services can work together during transitions for young people which are known to increase risk for those most vulnerable. **(See area for improvement 4)**

Young people were supported to speak with, and spend time with those who were important to them. Whether family or friends were nearby or farther away, they were encouraged to maintain connections where it was in their best interests. Renewing contact with family, for some young people had brought happiness and a sense of belonging, while for others, staying over at friends offered opportunities to develop relationships with people outwith the service.

Respect for young people was also reflected through a range of improvements to the quality of the environment, including additional resources to facilitate the specific needs of young people. Significant investment and decorative improvements helped to create a welcoming and homely atmosphere. Young people's involvement in aspects of this work was also reflective of positive approaches to listening to, and meeting the needs and wishes of young people.

With a focus on improvement, the new manager adopted a systematic approach to address the concerns from the last inspection. This offered assurance of commitment to establish, inform, strengthen and implement robust practices. Staff training on the PACE model of care (Playfulness, Acceptance, Curiosity and Empathy) provided the basis on which therapeutic trauma informed care guided practice, while the evolving language of care also took precedence to promote how staff perceive, think about, and behave towards young people in their care. Much of this work was at an early stage and we will review progress at the next inspection.

Quality assuring the provision for young people was evidenced in a range of ways. Daily observation and role modelling by the management team was beginning to effect positive change in attitudes and practices. Additionally, staffing levels and skill mix was more effectively managed than before. Staff recruitment was more robust, and understanding of ways in which personal planning could be better supported and evidenced were beginning to emerge through positive leadership.

Areas for improvement

1. To ensure successful transitions, the provider should optimise every opportunity to involve young people in future plans before they leave the service.

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

'I have enough time and support to plan any move to a new service' (HSCS 4.13).

2. To ensure a full understanding of the needs and wishes of all young people, additional staff training should be implemented.

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

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

3. To ensure increased opportunities for personal growth and self development, the provider should be ambitious for young people.

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

'I get the most out of life because the people and organisation who support and care for me have an enabling attitude and believe in my potential' (HSCS 1.6).

4. To ensure mental health care continues to inform risk assessment and safety plans for young people aged 18 + in need of specialist treatment, the provider should consider ways in which services can work together during transitions for young people which are known to increase risk for those most vulnerable.

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

'If I am supported and cared for by a team or more than one organisation, this is well co-ordinated so that I experience consistency and continuity' (HSCS 4.17).

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

Requirements

Requirement 1

With immediate effect, the provider must ensure the health, welfare and safety of all young people in their care.

To do this, the provider must, at a minimum:

- a) ensure a cohesive approach and effective decision making to risk management and safety planning for those young people most at risk;
- a) ensure appropriate review of all young people's care and support needs; and
- c) ensure that staff recruitment practices follow safer recruitment guidance.

This is to comply with Regulation 4(1)(b) (Welfare of Users) 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:

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

and

'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event' (HSCS 4.14).

Action taken on previous requirement:

We found the service had accessed external support to review the care plans and risk assessments of young people. However, these had not yet been implemented. We found that a number of young people did not have care plans and their risk assessments had little information in them, despite significant risks being identified. For those who did have these documents in place, there was not clear guidance on how best to support young people when they were upset or distressed.

The service had made some changes to their recruitment procedure to ensure that safer recruitment processes were implemented. We were unable to assess how effective these had been as there was no new staff members which had begun employment since we had last inspected.

Not met

This requirement was made on 26 October 2022.

Action taken on previous requirement

A follow up inspection took place between 8 March and 3 April 2023. During that inspection, progress towards this requirement was evaluated as not met.

We evaluated it at this inspection, and with consideration to the effectiveness of partnership working, regular review of young people's care, and improved staff recruitment procedures, we concluded that it was met.

Met - outwith timescales

Requirement 2

With immediate effect, the provider must ensure that to support effective scrutiny of the service, managers submit notifications of serious and significant events in accordance with guidance, and that sufficient detail is added to accurately reflect the incident and provide assurance to the Care Inspectorate that the service is responding appropriately to the level of concern.

This is to comply with Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SS1 2011/210).

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

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

This is to ensure that practice is consistent with 'Records that all registered children and young people's care services must keep and guidance on notification reporting' (Care Inspectorate, January 2022).

This requirement was made on 26 October 2022.

Action taken on previous requirement

A follow up inspection took place on 8 March and 3 April 2023. We found at that time, that the provider had been more consistent when notifying the Care Inspectorate. We reviewed progress at this inspection and were satisfied that notifications were being submitted in line with guidance, and further discussion regarding the threshold for notifying was clarified.

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

To promote the rights, views and wishes of young people, the provider should ensure that all young people's access to advocacy provision is optimised to promote their voice in decisions affecting their care.

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

'I am supported to understand and uphold my rights' (HSCS 2.3).

This area for improvement was made on 26 October 2022.

Action taken since then

At a follow up inspection on 8 March and 3 April 2023, we found there to be regular visits conducted by Who Cares, who played a key role in advocating for some of the young people in the service. We were able to see how young people's views had been listened to and this had been shared with management in the service. We did find that some of the issues raised could have been responded to more promptly by management to give clarity to the young people.

At this inspection, we were satisfied that all young people continued to have access to advocacy.

Previous area for improvement 2

To promote high quality care and support for all young people within a culture of continuous improvement, the provider should ensure that robust quality assurance processes are in place to promote improved outcomes for young people.

This is to ensure that care and support is consistent with 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).

This area for improvement was made on 26 October 2022.

Action taken since then

At a follow up inspection on 8 March and 3 April 2023, we found that some young people experienced positive outcomes. However, we felt that opportunities could be further developed to focus on additional achievements.

We have identified a similar area for improvement at this inspection (**See area for improvement 3**)

Previous area for improvement 3

To ensure that improvement planning addresses the key issues arising from this inspection, the provider should ensure meaningful involvement of young people, staff, external managers and partner agencies, in exploring ways in which the service can be improved.

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

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

This area for improvement was made on 26 October 2022.

Action taken since then

At a follow up inspection on 8 March and 3 April 2023, the service had made limited progress, with high levels of staff absence impacting improvement.

At this inspection, we were satisfied that pro-active leadership was ensuring meaningful involvement in improvement planning.

Previous area for improvement 4

The service should explore ways in which it can more effectively involve young people in their personal plans. The provider should consider the current approach to personal planning and key working, to ensure that opportunities for supportive discussion with young people takes place more regularly and informs personal planning SMART objectives.

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)

and

'I am fully involved in developing and reviewing my personal plan, which is always available to me' (HSCS 2.17).

This area for improvement was made on 26 October 2022.

Action taken since then

At a follow up inspection on 8 March and 3 April 2023, the provider had made some progress with young people's involvement in their plans. The provider had also secured external inputs to improve the process of personal planning, and at this inspection we found that new plans had been implemented. Continued review of the effectiveness of plans and young people's involvement, demonstrated commitment to getting it right for each young person.

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?	3 - Adequate
7.1 Children and young people are safe, feel loved and get the most out of life	3 - Adequate
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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