

Netherlethame Care Home Service

Nether Lethame House
Strathaven
ML10 6RW

Telephone: 01357 523 878

Type of inspection:
Unannounced

Completed on:
2 April 2024

Service provided by:
Common Thread Ltd

Service provider number:
SP2005007437

Service no:
CS2020379357

About the service

Netherlethame is a care home for children and young people. The service provider is Common Thread Group, and is registered to care for three children and young people. Netherlethame is a large rural property near Strathaven, South Lanarkshire, with a substantial outdoor area. This service has been registered with the Care Inspectorate since December 2020.

Each young person has their own bedroom and there is good sized communal areas with large kitchen, dining and living room areas. There is also dedicated office and sleep over space for staff.

At the time of inspection, there were three young people living at Netherlethame.

About the inspection

This was an unannounced inspection which took place on 13 March 2024 from 09:15 to 18:30, 15 March 2024 from 09:15 to 17:15 and 20 March 2024 from 09:15 to 18:00. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information from the service. This included registration information, information submitted by the service, and intelligence.

To inform the inspection we:

- spent time and spoke with three young people living at Netherlethame
- spoke with six members of staff including managers
- observed practice and daily life
- reviewed documents
- spoke with five external professionals and one parent and
- accessed feedback questionnaires completed by staff and external professionals.

Key messages

- At times, young people at Netherlethame did not feel safe.
- The organisation's child and adult protection policies and procedures should be strengthened.
- There were positive examples of the young people benefitting from warm and nurturing relationships with staff members.
- Young people were supported to participate in education opportunities.
- The service was meeting the health needs of the young people.
- Quality assurance processes should be strengthened to continually evaluate young people's experiences.
- The service and organisation as a whole had worked hard to provide a more stable staff team so that young people could develop secure and trusting relationships.
- The organisation had not consistently taken positive action regarding staff practice concerns.

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?	2 - Weak
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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?

2 - Weak

We made an evaluation of weak for this key question. Whilst some strengths could be identified, these were compromised by significant weaknesses. As a result of concerns regarding safety of young people and risks to achieving positive outcomes, we made several requirements and areas for improvements. The organisation expressed their willingness to address the areas identified.

At times, young people at Netherlethame did not feel safe. There had been a cumulation of high risk situations over a period of time, including staff misconduct matters, resulting in young people not routinely experiencing therapeutic care. Consequently, the safety of young people had been compromised with examples of bullying behaviour being unsuccessfully challenged. We were not confident that the views of young people were consistently taken into consideration to shape their support, impacting on their experiences and emotional wellbeing (requirement 1).

The organisation's child and adult protection policies and procedures should be strengthened. Clarity of protection roles and decision making processes at all management levels could be improved. Therefore we were not assured that young people were being effectively safeguarded at all times (requirement 2).

Despite significant changes to the staff team, there were some positive examples of young people benefitting from strong and nurturing relationships with staff members, and they could identify individuals to approach for support and to discuss concerns. All young people had access to responsible adults outwith the service, and advocacy was being prioritised to support young people to have their rights and views promoted.

The organisation had taken steps to ensure that the quality of the external environment was being enhanced, however this had been a lengthy process, impacting on the homely and welcoming atmosphere of Netherlethame. We look forward to the progress in this area at future inspections (area for improvement 1).

Levels of engagement by young people in their care and support varied. Young people did make decisions regarding time spent with family/friends, meal options, design and decoration of the house and there was some meaningful involvement by young people in various multi agency meetings. The staff team were considering creative methods to more effectively capture young people's feedback.

The service was meeting the health needs of the young people and staff were generally alert to the young people's changes in mood. In addition to the usual primary services, Netherlethame was contributing to specialist interventions such as CAMHS and substance reduction support, with input available from Common Thread therapeutic services. Connections to family, siblings and friends were being supported where possible; encouraging young people to maintain their identities.

There were examples of young people being involved in activities and opportunities, but this varied considerably. The service recognised that young people were not frequently participating in community activities, and were introducing more meaningful ways to include them in planning for activities.

Education and life skills were being positively promoted for young people. School attendance for two of the young people had been individually tailored to support them to participate fully and maximise attainment.

The organisation had a vision and enthusiasm to provide safe, therapeutic care to young people, however to achieve this a number of improvements were necessary.

Staff were overwhelmingly positive about the support they received from leaders and colleagues and, although external managers were actively involved with the service, there was not a consistently strong evaluation of young people's experiences and outcomes. There was evidence of some quality assurance processes, but these were not being formally undertaken to a level that could evidence planned improvements for young people (requirement 3).

We were not confident that the organisation had an effective admissions and matching assessment process, and given the complexities of the needs of the young people, staff did not always have the knowledge, skills and experience to be responsive at all times. This contributed to young people's outcomes being adversely impacted (requirement 4).

The service and organisation as a whole had worked hard to provide a more stable staff team so that young people could develop secure and trusting relationships. There was an organisational commitment to ensuring staff had opportunities to learn and develop, however consistent, safe and trauma informed practice still required to be embedded. This will support the service to improve outcomes for young people.

The organisation had not consistently taken positive action regarding staff practice concerns, resulting in times when young people's safety was comprised with therapeutic, trauma informed care not being delivered (area for improvement 2). Additionally, staff had not always felt confident to raise safeguarding concerns; placing young people at risk of harm and further trauma. The provider had plans to implement additional training for staff, including revisiting whistleblowing processes, to support the development of a more open and transparent culture.

Opportunities to achieve best outcomes for young people were not maximised, as care planning did not fully inform practice or guide risk. The service had a fairly new online recording method, and care planning documents lacked clarity, were not always current or linked to the risk assessments, making it difficult to measure young people's progress and identify future support needs (area for improvement 3).

More effective use of incident information and analysis of incidents at all levels of leadership was necessary to support staff to reflect on practice, develop skills and sufficiently understand and manage risk.

Requirements

1. By 9 May 2024 the provider must assess the safety of the young people receiving care to ensure their needs are being effectively met. In particular, you must:
 - a. take account of young people's views regarding their placement at Netherlethame
 - b. ensure social work and other relevant services are consulted regarding the assessment
 - c. put in place the required measures to protect the safety of the young people.

This is in order to comply with Regulations 3 and 4(1)(a) 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 care and support meets my needs and is right for me (HSCS 1.19) and I am listened to and taken seriously if I have a concern about the protection and safety of myself or other, with appropriate assessments and referrals made. (HSCS 3.22)

2. By 9 May 2024 the provider must ensure there is a review of child and adult protection policies and procedures. In particular, you must:

- a. revise and update your child protection policy and procedures and create a separate adult protection policy, taking into consideration national guidance and best practice
- b. ensure all staff understand what to do if they become aware of a child or adult protection concern
- c. reinforce protection roles within the organisation, including the role of management and the protection lead officer
- d. review processes used internally to ensure the recording of protection concerns and actions taken.

This is in order to comply with Regulation 4(1)(a) and Regulation 15(b) 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 have confidence in people because they are trained, competent and skilled. (HSCS 3.14)

3. By 23 May 2024 the provider must ensure quality care, support and evaluation of young people's experiences through effective quality assurance processes. In particular you must:

- a. consistently implement effective quality assurance systems and activities
- b. ensure that the response to, and analysis of incidents results in actions which minimise risks to young people's and staff wellbeing.

This is in order to comply with Regulation 4(1)(a) and Regulation 7(2)(c) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) and section 53(6) of the Act.

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)

4. By 9 May 2024 the provider must ensure the risks and needs of young people can be effectively managed. In particular you must:

- a. ensure an effective admissions and matching process is in place, determining the capability of the service to meet the needs of the young people coming into the service and those placed in the service. This process must also be used when young people transition within the organisation
- b. implement a comprehensive system for assessing staffing levels, consistency and skill mix at all times, matched to the needs of young people using the service.

This is in order to comply with Regulation 15(a) 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 care and support meets my needs and is right for me. (HSCS 1.19)

Areas for improvement

1. To support young people's wellbeing, the provider should ensure the quality of the external environment is prioritised.

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

I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment. (HSCS 5.22)

2.
To support children and young people's wellbeing, the provider should ensure that all concerns regarding staff conduct are investigated in an open and transparent manner.

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

I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities. (HSCS 3.20)

3. To support young people's ongoing development, the service should review their care plans, including risk assessments to ensure young people's views are being represented and they are in accordance with SMART principles.

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

My personal 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)

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 support young people's wellbeing, the service should ensure that young people feel consistently safe at Netherlethame and in the wider community.

This area for improvement was made on 9 March 2023.

Action taken since then

There continue to be ongoing concerns relating to this area for improvement, so this inspection has put a Requirement in place.

Previous area for improvement 2

To support young people's wellbeing and development, the service should ensure staff are knowledgeable regarding the support that young people are entitled to through to adulthood. This should include, but is not limited to continuing care.

This area for improvement was made on 9 March 2023.

Action taken since then

This inspection highlighted areas of further improvement to ensure greater understanding on this subject, including reference to their continuing care commitment.

Previous area for improvement 3

To develop and enhance the service for young people, the organisation should review and develop their service improvement plan to have more specific timescales, methods and outcomes.

This area for improvement was made on 9 March 2023.

Action taken since then

The service has a service improvement plan in place which will likely be further strengthened by this inspection.

Previous area for improvement 4

To ensure young people are cared for by the right number of staff who have the required experience and skill mix to meet their changing needs, the provider should enhance their staffing analysis process.

This area for improvement was made on 9 March 2023.

Action taken since then

This requires further enhancement so has been included as a requirement for this inspection.

Previous area for improvement 5

To ensure young people are supported and cared for by staff with the appropriate skills and training for their role, the manager should establish clear oversight of training requirements for each member of staff and as a team.

This area for improvement was made on 9 March 2023.

Action taken since then

The service has this in place and is being updated regularly.

Previous area for improvement 6

To ensure young people benefit from staff who provide high quality support, the service should ensure that the Care Inspectorate is being alerted, within the appropriate timescale, of notifiable events. including all staff misconduct matters.

This area for improvement was made on 9 March 2023.

Action taken since then

There continue to be gaps in reporting; the quality assurance processes requirement for this inspection will support this area.

Previous area for improvement 7

To ensure young people achieve the best outcomes, the service should strengthen the learning and reflective opportunities for staff with consistent debriefing following incidents.

This area for improvement was made on 9 March 2023.

Action taken since then

A Requirement has been put in place for this inspection relating to learning from incidents to manage risk more effectively and improve outcomes for young people.

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?	2 - Weak
7.1 Children and young people are safe, feel loved and get the most out of life	2 - Weak
7.2 Leaders and staff have the capacity and resources to meet and champion children and young people's needs and rights	2 - Weak

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