

Benrig Children's House Care Home Service

1 Baird Place
New Farm Loch
Kilmarnock
KA3 7RL

Telephone: 01563 536 191

Type of inspection:
Unannounced

Completed on:
29 May 2024

Service provided by:
East Ayrshire Council

Service provider number:
SP2003000142

Service no:
CS2003000743

About the service

Benrig is a local authority provided, purpose-built care home for children and young people. The service is located in a residential area of Kilmarnock in East Ayrshire. It provides en-suite accommodation for a maximum of seven young people aged between 0 and 20 years.

The accommodation comprises individual rooms with ensuite for the young people, a large kitchen, a dining room, a large lounge, an education/games room, two staff offices and staff washroom facilities.

Benrig is situated within its own grounds and has outdoor facilities including a barbeque area, seated decking area and garden.

At the time of the inspection there were seven young people resident with the service.

About the inspection

This was an unannounced inspection which took place on 22nd and 23rd May 2024. The inspection was carried out by two inspectors 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 people using the service and three of their family and two of their representatives
- Spoke with ten staff and management
- Observed practice and daily life
- Reviewed documents
- Spoke with two visiting professionals

During our inspection year 2024-2025, we are inspecting against a focus area which looks at how regulated services use legislation and guidance to promote children's right to continuing care and how children and young people are being helped to understand what their right to continuing care means for them. Any areas for improvement will be highlighted in this report.

The provider of this service is a corporate parent, with statutory responsibilities to look after and accommodate children. This may mean that the duty to care for children and young people on an emergency basis, or with highly complex needs, is their highest safeguarding priority.

In these circumstances our expectations, focus on outcomes and evaluations remain identical to those of all other providers. We may, however, provide some additional narrative in the body of the report to reflect the impact of these duties, should it be relevant to this particular service.

Key messages

- Some young people were making good progress through their plans.
- The service was providing care to some of the young people under continuing care arrangements.
- Staff were working hard to build and maintain positive relationships with the majority of the young people.
- Some young people had not been successfully engaged by staff and were subsequently exposed to significant risks.
- Young people's risk assessments and plans require review to ensure there is the required support to meet young people's needs.

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

This inspection considered our Key Question 7: How well do we support children and young people's wellbeing?

This key question has two quality indicators associated with it.

We found the service to be performing at an adequate level. This is because we found some strengths but these just outweigh weaknesses. The strengths may still have a positive impact but the likelihood of achieving positive experiences and outcomes for people is reduced significantly because key areas of performance need to improve.

Positive relationships between staff and most young people had been developed and maintained. Young people experienced warm, trusting, nurturing care and support through these relationships. Individual preferences were respected and acknowledged which helped develop these young people's sense of wellbeing and self-esteem. This level of support provided young people a sense of safety and security within a safe base.

The establishment of positive relationships was not consistent with all young people, however. Although the staff team were trying to engage all young people some, were not accepting the staff's guidance and support. Some young people were consequently placing themselves at considerable risk of harm. Staff recognised they were challenged in trying to influence positive change for these young people and acknowledged there were some poor outcomes. We have discussed this further below in relation to risk management.

There were aspects of good practice noted for some young people with clear progress made in their care plans. Young people's individual talents and interests were promoted and involvement in related activities supported. This provided young people with a sense of achievement whilst developing their skills in addition to providing new experiences to enjoy.

Some young people had decided to remain in the service after turning sixteen years of age, under continuing care arrangements, due to the level of care and support they experienced. These arrangements provided them ongoing stability and support until they could identify their chosen next steps.

Young people engaged in education were achieving good outcomes in college and in school. We heard from young people about the college courses they had accessed, attended or completed in progressing toward their aspirations for employment. This provided these young people with confidence and hope for their plans and ambitions.

Education was not being attended by those young people not effectively engaged with the staff. Plans to reengage the young people with their education had been unsuccessful. In addition to missing out on education, there were clear risks to these young people's wellbeing.

The service had continued to reduce the number of incidents resulting in restraint. Young person-centred incident recording procedures were used to gather essential information to allow for reflective practice and analysis. Information gathering during these recording procedures offered staff opportunities to discuss with young people alternative ways to reach more positive outcomes. However, we found that these discussions were not informing effective risk management strategies and risk appeared to be increasing.

Appropriate connections to family members were supported by staff. This provided young people and their families with assurances that these important relationships would be nurtured and maintained.

Staff were appreciative of the manager's leadership and support. They benefited from regular advice and guidance through supervision, team meetings and a supportive team of peers. The external manager was a frequent visitor to the service providing further assurances to young people of the support offered. Young people were comfortable talking with the managers, approaching them confidently in asking questions.

Staff training was being tracked by the manager. Training was identified and offered relevant to young people's needs and residential care work. Staff were recruited through Safe Recruitment practices with all statutory checks being completed and relevant qualifications, experience and skills sought. Staff received a thorough induction process and the staff we spoke with felt that this had given them the skills and confidence to do the job well.

The staff team was very stable with limited changes of personnel. This aimed to provide stability, familiarity and security for young people through them knowing who was there to care for them. External stakeholders were of the view that there were times where insufficient staff were on shift. This, they stated, was impacting on staff's ability to positively influence young people's decision making and engagement. It is recognised that consistent, positive, trusting relationships are crucial in supporting young people impacted by trauma. On raising this matter with managers, we understand that there are plans to review and address this situation. We will therefore look at this matter further during the next inspection.

External management oversight played a role in monitoring the quality of young people's experiences and aimed to drive improved outcomes. In addition to the manager's weekly audits the external manager carried out additional monthly audits. The manager had introduced some processes to record important information for analysis and evaluation of the service provided. We could see clear benefits in these and discussed with the manager where we considered these could be further enhanced.

We did not find there to be continuous robust evaluation of the service in relation to risk assessment. The service was not meeting the needs of all the young people living in the home. We were informed by staff, social work managers and social workers that they did not consider the service to be meeting the needs of some of the young people. Some young people intermittently engaged with staff, with significant concerns raised on occasion. It was concerning that risk assessments were not fully completed, with significant omissions to assessments. The impact of this was that not all risk factors were being considered within assessments. This then had potential for poor outcomes for young people. There was subsequently a lack of effective clear strategies to minimise risks. We had made a requirement in relation to risk assessments after the previous inspection. Not all elements of this have been met and we have repeated this requirement. (See requirement 1.)

Three requirements were made at the previous inspection and since then the service had put an action plan in place to manage the improvements needed. The service met two of the three requirements. The first of these was in relation to ensuring staffing levels and skills were appropriate to the young people's needs and the second was in relation to matching assessments. (see 'what the service has done to meet any requirements we made at or since the last inspection'.)

Concerns remained about how the service assessed young people's risk and implemented strategies to manage and /or minimise the risks. We have restated this requirement with a new timescale of 29th July 2024. (See requirement 1.)

Requirements

1. By 14th January 2024 the service provider must ensure that young people's health and wellbeing are fully assessed with risks and effective strategies to address risk identified. To do this the service provider must ensure that all young people's risk assessments inform strategies to address risk, are fully completed, up to date and reviewed in accordance with their own policy.

This is necessary to comply with the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 SOCIAL CARE No. 210 regulation 4 and 5 and to ensure care and support is consistent with the Health and Social Care Standards, which state: 'I am helped to understand the impact and consequences of risky and unsafe behaviour and decisions. (H&SCS 2.25) and 'I am protected from harm because people are alert and respond to signs of significant deterioration in my health and wellbeing, that I may be unhappy or may be at risk of harm'.(H&SCS 3.21)

An extension to this timescale has been agreed to 29th July 2024.

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

Requirements

Requirement 1

By 14th January 2024 the service provider should ensure that there are at all times suitably qualified and competent individuals are working in the care service in such numbers as are appropriate for (a)the health, wellbeing and safety of service users (b)the provision of safe and high-quality care.

This requirement was made on 2 October 2023.

Action taken on previous requirement

The manager was developing a staffing assessment tool. A training tracker was used to ensure all staff had completed mandatory training and also identified additional training for staff in accordance with young people's needs. External staff had commented that there were not always enough staff for young people, however young people did not complain of this. The service managers were further exploring staffing arrangements. **This requirement has been met.**

Met - within timescales

Requirement 2

By 14th January the service provider must ensure the matching process and ongoing placement reviews consider whether the service can effectively meet and continue to meet the needs of young people. The service provider should review and improve the quality of admissions assessments and matching for children and young people to assure that they receive the support they need to grow, thrive, achieve their potential, and experience placement stability.

This requirement was made on 23 October 2023.

Action taken on previous requirement

Matching assessments were being completed. These included full impact assessments that considered the impact to current residents of any proposed admissions to the service. **This requirement has been met.**

Met - within timescales

Requirement 3

By 14th January 2024 the service provider must ensure that young people's health and wellbeing are fully assessed with risks and effective strategies to address risk identified. To do this the service provider must ensure that all young people's risk assessments inform strategies to address risk, are fully completed, up to date and reviewed in accordance with their own policy.

This requirement was made on 2 October 2023.

Action taken on previous requirement

The service continued to assess young people for risks and completed assessments. However we found that there continued to be significant gaps in the information recorded in the risk assessments. **This requirement has not been met and will be repeated.**

Not met

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

The service provider should have a system in place to ensure that the information required from services is notified to the Care Inspectorate, per the guidance document 'Guidance for providers of care homes for children and young people on the emergency relaxation of conditions of numbers.

This area for improvement was made on 2 October 2023.

Action taken since then

Notifications were being submitted in accordance with the Care Inspectorate guidance document. We did identify one notification that was not submitted under the appropriate category, however the incident was notified to the relevant external professionals.

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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Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

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