

South Lodge Care Home Service

South Lodge Walkerton Drive Leslie Glenrothes KY6 3BT

Telephone: 07747785266

Type of inspection:

Unannounced

Completed on:

10 July 2024

Service provided by:

Radical Services Ltd

Service provider number:

SP2003002568

Service no: CS2021000117



Inspection report

About the service

South Lodge is a care home, registered to care for children and young people. The property is a large detached house situated near the village of Leslie, close to the town of Glenrothes. The provider is Radical Services Limited and the service has been registered with the Care Inspectorate since June 2021.

The house is a two storey property, with young people having their own bedroom and bathroom. There is a communal living room/dining room, along with a modern kitchen area and staff space for an office and sleep-in room. There is also an outdoor area for the house.

About the inspection

This was an unannounced inspection which took place on 3 July 2024 from 10:00 to 18:30, 4 July 2024 from 09:30 to 17:45 and 5 July 2024 from 09:15 to 14:30. 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 with the young people living at South Lodge
- spoke with seven members of staff including managers
- observed practice and daily life
- reviewed documents
- spoke with two external professionals and one parent and
- accessed feedback questionnaires completed by staff, young people and external 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.

Key messages

- Risks for young people were not always being managed safely and effectively.
- Young people benefitted from some strong and nurturing relationships with staff.
- The service should prioritise their links with independent advocacy.
- The organisation had worked hard to rebuild a staff team including a new manager and deputy manager.
- Key information relating to health needs was not always fully known at the time of admission.
- South Lodge encouraged young people's connections to family and friends.
- There continues to be significant concerns regarding the admissions and matching process.
- The service should develop an improvement plan to drive the future direction of South Lodge.

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

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 risks to young people achieving positive outcomes, we made several requirements and areas for improvements. The organisation expressed their willingness to address the areas identified.

The extent to which young people at South Lodge were protected from harm was compromised. Although staff were striving to understand young people's needs, risks were not always being managed effectively. At times the staff team were not confident in supporting the complex needs of the young people; leading to a degree of uncertainty for young people and staff.

The service had collaborated with some external partners to support the management of specific areas of risk; however, young people continued to be involved in some particularly unsafe circumstances resulting in less positive outcomes (requirement 1).

Despite South Lodge experiencing significant changes to the staff team, there were some positive examples of young people benefitting from strong, respectful and nurturing relationships with staff members. Young people could identify trusted individuals to approach for support and to discuss concerns, feeling listened to at times.

Staff were appropriately advocating on behalf of young people, and some additional networks of support had been established for the young people. The service should prioritise their links with independent advocacy to ensure young people's rights are being championed from the initial stages (area for improvement 1).

The staff team were clear about the culture and focus in South Lodge being on least restrictive practices, with a commitment to identifying individualised strategies to support young people. Additionally, the management team was working hard to establish analysis, learning and reflection of incidents to enhance staff practice.

Some young people had experienced a lack of stability and predictability from those caring for them at South Lodge. The organisation had worked hard to rebuild a staff team including a new manager and deputy manager. The knowledge and understanding of trauma amongst the developing staff team varied, however, the service recognised that stable, therapeutic care is fundamental to young people having positive experiences.

On the whole, the importance of young people's health was supported by the service. However, key information relating to health needs was not always fully known at the time of admission; leading to delays in accessing specialist support services and assessments for young people (area for improvement 2).

Although challenging at times, South Lodge encouraged young people's connections to family and friends where possible; supporting young people to maintain their identities. There were examples of young people being involved in activities and opportunities in the local area, but this varied considerably.

Some young people had valuable experiences developing life skills outwith formal education, however, school attendance did not support young people to participate fully in learning or to maximise attainment.

Due to a number of unplanned transitions at South Lodge, young people have not stayed in the service into adulthood. To ensure young people's rights, and the organisation's commitment to continuing care, the inspection highlighted the importance of clearly reflecting this in planning and relevant policies (area for improvement 3).

The organisation plans to revise their personal planning documents to ensure they are more person centred, that there is an increased staff understanding of the plans and that the young people's views are clearly detailed. This will support staff and young people to review progress and ensure goals are being supported in a timely manner.

Due to gaps in the stability of leadership within South Lodge, the service as a whole has lacked direction at times, resulting in young people receiving periods of inconsistent care. Despite these challenges, the new staff team were overwhelmingly positive regarding the support they were receiving from management, and the team was beginning to build the foundations of stable and therapeutic care.

There continues to be significant concerns regarding the effectiveness of the organisation's admissions and matching process. 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, and an increase in transitions (requirement 2).

At the time of inspection, the service had made progress in providing a more stable staff team - this followed a period when staffing levels had lacked consistency and continuity. The majority of staff were in their probationary period, developing their skills and beginning to strengthen effective practice as a team. To improve the service approach to ensuring young people's needs are fully met at all times, South Lodge should review their staffing assessment (area for improvement 4).

There were a number of quality assurance processes in place at various management levels; routinely undertaken and identifying areas of strength and vulnerability. Despite this, young people did not experience the best outcomes. Moving forward there requires to be the development of a dynamic improvement plan to successfully drive the future direction of South Lodge in a way that is sustainable (requirement 3).

Requirements

1.

By 30 August 2024, the provider must ensure young people are being kept safe. In particular you must:

- a. ensure indicators of concern are promptly recognised and effectively responded to
- b. ensure risk management measures are established
- c. collaboratively agree risk management measures along with relevant other agencies.

This is in order to comply with Regulation 3 of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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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 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 (HSCS 3.21).

2. By 30 August 2024 the provider must ensure young people are experiencing care and support they require. In particular, you must:

a. ensure that comprehensive admission and matching processes, and ongoing assessments, are being used to accurately and correctly determine the capability of the service to meet the needs of the young people coming into the service.

b. ensure young people are only admitted to the service when matching and admission processes evidence that the needs of young people can be met

c. ensure that matching and admission processes evidence that the additional external supports required to meet the needs of children and young people are in place.

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).

- By 30 August 2024, the provider must ensure young people are benefitting from a service that has an effective development plan which improves and sustains good outcomes for children and young people. In particular, you must:
- a. ensure the development plan identifies all the necessary improvements required for the service to meet the needs of children and young people
- b. develop and enhance the service development plan to have SMART objectives which reflect the urgency of improvements required
- c. implement the improvements identified and then review their effectiveness.

This is in order to comply with Regulation 3 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 benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes (HSCS 4.19).

Areas for improvement

1. To ensure young people's rights, views and choices are supported, the provider should have independent advocacy for all young people from the initial stages of placement.

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

I am supported to use independent advocacy if I want or need this (HSCS 2.4).

2. To support young people's wellbeing, the provider should ensure all health needs are fully known so that appropriate and specialist services are put in place in a timely manner.

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).

3. To support young people's progress into adulthood, the provider and service should ensure all relevant policies reflect their commitment to providing continuing care. This should include, but is not limited to policies, aims and objectives, admissions guidance and placement agreements.

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

My human rights are central to the organisations that support and care for me. (HSCS 4.1)

4. To ensure young people are cared for and supported by an appropriately skilled staff group at all times, the provider should strengthen their staffing needs assessment.

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

My care and support meets my needs and is right for me (HSCS 1.19).

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

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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	3 - Adequate
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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