

# Action for Children - Hillcrest Care Home Service

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Telephone: 01851 700 099

Type of inspection:

Unannounced

Completed on:

25 July 2024

Service provided by:

Action for Children

Service provider number:

SP2003002604

**Service no:** CS2003009713



### About the service

Action for Children - Hillcrest is a care home service provided by Action for Children. The service operates from a two-storey home. The service provides care for up to a maximum of five young people, including a flexible use bedroom for short breaks. It is located in Stornoway, on the Isle of Lewis, and is centrally located with access to local amenities.

The house has its own driveway at the front and landscaped gardens to the rear of the property. It has five bedrooms with en-suite facilities. There are two living rooms and a kitchen dining area. The living areas are in the process of being upgraded.

### About the inspection

This was an unannounced inspection carried out by one inspector from the Care Inspectorate. The inspector visited on 16 July 2024 between 12:00 and 21:00 and 17 July between 10:30 and 21:30. Feedback was provided on 25 July 2024.

To prepare for the inspection we reviewed information about the service. This included previous inspection findings and registration information. We also reviewed information submitted by the service and information gathered throughout the inspection year.

To inform our evaluation we:

- Met with two young people using the service and spoke to six family members
- Spoke with nine members of staff and management team
- Spoke to representatives from social services, health and education
- Reviewed survey responses received from young people, family, staff and external professionals
- Observed practice and daily life
- Reviewed key documents.

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

- Staff were committed to caring for young people, and treated young people with dignity and respect.
- Additional staff had been recruited which improved young people's consistency of care, their relationships with staff and the atmosphere in the house.
- The service was now implementing admissions and matching processes to support young people with their transitions.
- The service had improved its response to child protection, however it was not consistently notifying the Care Inspectorate of incidents.
- The service had improved its risk assessments and care planning documents to be SMART-er (specific, measurable, achievable, relevant and timebound), however strategies to support young people could be developed further.

### 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	o we support children and young people's vellbeing?	4 - Good

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

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 evaluated the key question as good, as there was a number of important strengths which taken together, outweighed areas for improvement.

Observations of some young people indicated that young people felt safe in the service. All young people had access to independent advocacy. The service had improved its response to child protection, including implementing child protection training, adult protection training, and development days to facilitate staff reflection and learning. We had made a requirement in relation to child and adult protection after the previous inspection. This requirement has been met. However, practice around incident recording was inconsistent. On some occasions, incidents were not notified to the Care Inspectorate, or notifications lacked important information. This meant that the strategies used to support young people were at times absent or unclear (see requirement 1).

There was a varied level of staff skills, experience and expertise, therefore trauma-informed care was not yet embedded in staff practice. We found that there was a lack of therapeutic work undertaken with young people, and strategies used to support young people could be improved to ensure consistent sensitive care responses. It was pleasing to see that the service had identified this as an area for development, and staff had commenced specialist training. We look forward to seeing the impact of this at future inspections.

Young people were supported to access services including health and education. Young people were also supported to maintain connections to people important to them. One family member commented, "[the service] is amazing, I'd be lost without it."

Staff were committed and knew young people well, treating young people with dignity and respect. Young people's individual talents and interests were promoted, and involvement in activities was supported by staff. This included cycling, walking, playing badminton or going to the gym, which meant young people were supported to access new experiences to enjoy. This respect was also reflected in the quality of the environment. The garden had been recently landscaped, and included a new custom made trampoline. There were also plans to develop a sensory area and make upgrades within the home.

All young people had care planning and risk assessment documents. It was pleasing to see that these had been developed since the last inspection. The service had created dedicated support teams, and planned to reintroduce child meetings to improve communication consistency of care. We had made an area for improvement in relation to care plans and risk assessments at our last inspection. This area for improvement has been met. However, care planning documents could be developed further to be more child friendly and support therapeutic care, by considering the length of documents, use of language, and use of strategies used to support young people.

Children and young people's views were sought and continuing care was supported, however understanding around The Promise, children's rights, and how to support young people's rights could be developed further. It was pleasing to see that the service had identified this as an area for development, and we look forward to seeing the impact of this at future inspections.

The staff team had experienced significant changes and a period of instability. It was pleasing to see that recruitment had been successful and additional staff had been recruited. We found that this improved the availability of staff, relationships, the atmosphere in the house, and young people's consistency of care. We heard that there were times when more staff were required to support young people. It was pleasing to hear that the service had developed a staffing needs assessment since the last inspection, and the service plans to closely monitor staffing arrangements.

Staff commented that they felt supported by the leadership team, and that they felt increasingly listened to, and suggestions were welcomed. All staff reported that they benefited from regular advice and guidance through effective supervision, team meetings, development days, training, staff handovers and a supportive team of peers.

The service supported young people's transitions to Hillcrest. It was pleasing to see that the service was completing impact assessments. We had made an area for improvement in relation to admissions and matching after the previous inspection. This area for improvement has been met.

Staff training was tracked, identified and development days held, relevant to the young people's needs. Staff were recruited through safe recruitment practices with all statutory checks completed.

There were some quality assurance processes in place to monitor aspects of service delivery. This included self-evaluation which was being undertaken by the service to support improvement and to inform the service's development plan. Some external audits were also being undertaken to monitor young people's outcomes. Quality assurance could be more robust, to ensure that children and young people's outcomes, experiences and the setting are subject to ongoing evaluation (see area for improvement 1).

One requirement was made at the last inspection, and the service has met this requirement. This was to ensure the safety of children and young people by consistently implementing child and adult protection procedures. See What the service has done to meet any requirements we made at or since the last inspection.

Two areas for improvement were made at the last inspection. The service met both of these areas for improvement. The first of these was to ensure that decisions about admissions were fully informed by a robust, clearly evidenced assessment and matching process. The second was to ensure that young people have the best possible outcomes and experiences by ensuring effective plans and risk assessments are implemented. See What the service has done to meet any areas for improvement we made at or since the last inspection.

### Requirements

1. With immediate effect, the provider must ensure that to support effective scrutiny of the service, managers submit notifications 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.

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).

### Inspection report

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).

### Areas for improvement

1. 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 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).

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

### Requirements

### Requirement 1

By 7 November 2023, the provider must ensure the safety of children and young people by consistently implementing adult and child protection procedures. This must be informed by effective reflection on safeguarding issues.

To do this, the provider must at a minimum:

- a) Ensure effective training is in place and has been undertaken to ensure staff who have lead responsibility for safeguarding have a demonstrable understanding of implementing appropriate procedures and young people and children are protected.
- b) Ensure there is reflection and learning from the protection concerns highlighted.
- c) Ensure that child and adult protection and safeguarding concerns are reported to the appropriate agencies, within the appropriate timescales, including the Care Inspectorate, social work department, and any other relevant agencies.

This is in order to comply with Regulation 4(1)(a) (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 am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities" (HSCS 3.20).

This requirement was made on 2 October 2023.

### Action taken on previous requirement

The service had implemented child protection training, adult protection training and held development days to facilitate reflection on safeguarding issues. Safeguarding concerns have been notified to the relevant agencies within appropriate timescales.

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

In order to ensure young people have the service that is right for them, the provider should ensure that decisions about admissions are fully informed by a robust, clearly evidenced assessment and matching process.

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 in the right place to experience the care and support I need and want" (HSCS 1.20).

This area for improvement was made on 2 October 2023.

#### Action taken since then

The service had introduced matching assessments to inform decisions around admissions.

This area for improvement has been met.

### Previous area for improvement 2

In order that young people have the best possible outcomes and experiences, the provider should ensure that the service implements effective plans and risk assessments.

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).

This area for improvement was made on 2 October 2023.

#### Action taken since then

The service had implemented care plans and risk assessments for all young people.

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	4 - 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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