

54 Oxgangs Avenue Care Home Service

54 Oxgangs Avenue Edinburgh EH13 9JP

Telephone: 01316 649 997

Type of inspection: Unannounced

Completed on: 13 September 2024

Service provided by: City of Edinburgh Council

Service no: CS2003010922 Service provider number: SP2003002576



About the service

54 Oxgangs Avenue is a Local Authority care home for children and young people situated in Edinburgh. The service and staffing are provided by City of Edinburgh Council.

The home cares for a maximum of seven children and young people, aged 12 to 20 years. At the time of inspection there were five young people living in the service.

The house is spacious with a high standard of accommodation and furnishing. There is also a semiindependent flat attached to the main house which was being used at the time of the inspection.

About the inspection

This was an unannounced inspection which took place on the 10 and 11 of September 2024. The inspection was carried out by an inspector 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 three young people using the service and three of their family/representatives.
- Spoke with nine staff and management.
- Observed practice and daily life.
- Reviewed 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 requirements or areas for improvement will be highlighted in this report.

Key messages

•The provider/service had greatly improved their matching of young people coming to the service, leading to better outcomes for young people.

•Care planning and risk assessment processed required further improvement to ensure young people are safe and their needs consistently met.

•Advocacy remained a strength of the service, there were numerous examples of staff and managers championing the rights of young people.

•The service supported young people to stay in touch with those close to them.

•We found the service to be led by skilled and empowered managers and staff.

•Improvement was needed to staffing needs assessment processes to ensure staff had training to meet young people's needs

•The service had a clear service improvement plan in place, which was subject to regular review and discussion.

• Continuing care was prioritised and young people were aware of the supports they would expect.

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?	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 4 - Good people's rights and wellbeing?

We made an evaluation of good for this key question. A number of important strengths could be identified, which taken together clearly outweighed areas for improvement and had positive outcomes for young people.

Quality Indicator 7.1 Children and young people are safe, feel loved and get the most out of life.

The provider had updated its matching process for young people coming to the service. This meant that there was far greater consideration of the needs of both existing young people and those coming to the service by the services managers. External managers placed more importance on this process, leading to less emergency admissions. This meant the likelihood of young people experiencing positive outcomes was improved, with less unplanned placement endings.

We found that the service had made good progress in ensuring that all managers and staff had a good knowledge of child, and recently adult protection processes. This had strengthened the services ability to identify need and risk for young people, and to work collaboratively with external agencies to reduce risk.

Staff and managers were knowledgeable and passionate, and it was clear that the safety of young people was prioritised. Risk assessments held good, generalised descriptions of risks for young people, but at times lacked the specificity to ensure staff responded consistently. Similarly, after incidents debriefs routinely took place, however we highlighted the need to further develop reflection to ensure that this influenced future practice and supports from staff, to ensure a reductionist approach to known risks for young people.

The provider had made changes to their care planning processes following the last inspection. Despite changes, we found that the views of young people were not represented clearly in plans, and goals for young people did not follow SMART (specific, measurable, achievable, realistic, and timely) principles. **(See Area for Improvement 1)**

Advocacy remained a strength of the service. There were numerous examples of staff and managers championing the rights of young people. When external, independent advocacy was required staff would support young people to access this. This ensured young people's views could be expressed in decisions important to them. We did suggest it would be good to offer this in a more ongoing nature. This was something the service agreed to explore.

Staff have a good understanding of trauma and the impacts of this on young people. This is an area of practice that has been developed by the provider, but further imbedded through managers and leaders within the service. There had been some important progress in renewing the services aims and objective to ensure these followed the ethos of the 'promise' we could see how these themes would benefit young people over time.

The service supported young people to stay in touch with those close to them. Staff would ensure that all opportunities to meet with family members were prioritised. We found evidence of effective communication and updates between the service and families. This meant where appropriate, families felt involved. We heard of positive steps to improving family relationships, with the service also offering outreach support to young people who had returned to their families helping them to remain at home.

Education was an area of concern for young people. For many young people educational attendance had been an issue long before moving to the service. Despite efforts from the service to attempt to work with educational establishments and schools, there was little progress in this area. We suggested that the service should develop clearer goals for young people around educational supports and that they should work collaboratively with partner agencies to achieve these. **(See Area for Improvement 2)**

Quality Indicator 7.2 Leaders and staff have the capacity and resources to meet and champion children and young people's needs and rights

We found the service to be led by skilled and empowered managers. There was clear visibility of managers and organisational senior leadership had a good awareness of the service, with a shared ethos of care. Young people told us they felt well supported by managers within the service, and they were very approachable. All staff reported that they felt supported, they had regular supervision both formal and informal. There had been some important steps to ensure that all staff, including awaken night staff, had the same experience of feeling involved and supported. It was clear that there was an ethos of leading by example. This meant that young people were supported at all times by people well briefed and informed of their needs.

The service had clear quality assurance measures in place, these helped ensure that both internal and external managers had a good awareness of any issues that arose. We found the service took quick and clear steps to address any issues identified. We did suggest that quality assurance methods should be further developed to ensure the improvement in the quality of care plans and risk management plans for young people.

The service had benefitted from a stable staff team since the last inspection. Staff were well trained in the providers e-learning modules. Staff did speak about their preference for face-to-face training and the benefits this had in sharing experiences between teams. There was ongoing consideration of staffing levels through the services rota planning. We did suggest that the service should further consider the needs of young people coming to the service and identify through ongoing assessment the changing training needs of the staff team to keep young people safe, and work towards positive outcomes. **(See Area for Improvement 3)**

The service had a clear service improvement plan in place, which was subject to regular review and discussions, this helped shape improvement activity and outlined clearly the numerous areas in which the service was improving its provision of care. This included development of a continuing care policy which outlined what young people could expect from the service/provider.

Areas for improvement

1. To support young people's wellbeing, outcomes and choice the service should review their care planning, and risk assessment processes. This should include but is not limited to:

a) Ensuring young people are actively consulted on deciding their goals, and that these are clear and visible to them.

b) Ensuring that goals are SMART (specific, measurable, achievable, realistic and timely). These should be reflective of young people's words, and should clearly describe the supports required to achieve these. Goals should be actively tracked and subject to regular review and quality assurance processes.

c) Ensuring that all staff are aware of the needs and focus of work for all young people within the service and know exactly what is needed from everyone to support young people to reach their goals.

d) Ensuring risk assessments are fully up to date, and included the specific supports required from staff to help reduce risk for young people.

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 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 protect form harm, neglect, abuse, bullying and exploitation by people who have clear understanding of their responsibilities' (HSCS 3.20).

2. To support young people's right to education, the provide should ensure that planning and decision making around mainstream, alternative education, or provider learning support is decided in partnership with the local authority education provider. This should include, but not limit to:

a) Shared decision making about the appropriate educational/learning path for individual young people.

b) Care plan focused educational goals and supports including what is expected from care staff to help consistently progress educational goals.

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

3.

To support the young people's wellbeing the service should ensure that they support a safe environment for young people and staff. The service should ensure the correct numbers, experience, and skills mix are working within the service at all times. The service should include but not limit to:

a) Recording their assessment of staffing needs in accordance with 'Records that all registered care services (except childminding) must keep and guidance on notification reporting'.

b) Ensure that training requirements for staff to support young people are reviewed, and where these are not in place the service takes steps to mitigate risk whilst these are accessed. This should include at a minimum drug/alcohol awareness, self-harm, and suicide awareness training.

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

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

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

Requirements

Requirement 1

By 1 February 2024 the provider must ensure that they follow 'Matching Looked After Children and Young People: Admissions Guidance for Residential Services', published by the Care Inspectorate.' The service should include but not limit to:

a) Ensuring their admissions guidance and policy is fully reflective of the guidance and followed at all times.

b) Ensuring they have all information required to consider their ability to meet the needs of the young people using the service, as well as proposed young people. This should include up to date assessment of current dynamics within the service.

c) Ensuring they consider staffing levels, skills, and mix prior to young people moving to the service. This should include review of overnight arrangements.

This is to comply with Regulation 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: 'I am in the right place to experience the care and support I need and want' (HSCS 1.20).

This requirement was made on 8 November 2023.

Action taken on previous requirement

The provider has reviewed the way in which it assesses its ability to meet the needs of young people in a group environment. We found evidence of consistent application of assessment processes. We heard that managers had more involvement in processes and their views were valued by senior management. This meant that young people were safer within the service and that unplanned placement endings were far less likely to happen.

There were some aspects of the staffing assessment relating to matching that we outlined that the service could further develop, but we were satisfied that this requirement had been met.

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 support the young people's wellbeing, outcomes and choice the service should review their care planning and support plan processes. This should include but is not limited to:

a) Ensuring that goals are SMART (specific, measurable, achievable, realistic and timely). these should be reflective of young people's wishes and needs, and should clearly describe the supports required from staff to achieve these. Goals should be actively tracked and subject to regular review.

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 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).

This area for improvement was made on 8 November 2023.

Action taken since then

The provider had made some changes to its care planning processes since the last inspection. We found the impact of the changes had limited impact on this inspection. The service acknowledged that it had a way to go with this improvement point.

We heard of plans to further develop this, with the service using resources to help upskill staff on the process. Senior managers outlined their commitment to the process. As a result the area of the improvement has been varied slightly to match this, and continued on this report.

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
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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	5 - Very Good

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