

Millholm School Care Accommodation Service

Millholm
Sevenacres
Kilwinning
KA13 7RG

Telephone: 01294 551 564

Type of inspection:
Unannounced

Completed on:
25 October 2024

Service provided by:
Spark of Genius (Training) Ltd

Service provider number:
SP2006008009

Service no:
CS2009233253

About the service

Millholm is registered for school care accommodation. The service is registered to care for a maximum of five young people.

The service is provided by Spark of Genius (Training) Ltd and operates a 24-hour service, 52 weeks of the year.

Millholm is a detached property set in a rural setting outside Kilwinning in North Ayrshire. Millholm provides the residential living accommodation for the young people while their educational needs are met through attendance at learning centres also provided by Spark of Genius, or at other educational provisions, whichever is identified in care plans.

At the time of the inspection, there were five young people living in at Millholm.

About the inspection

This was an unannounced inspection which took place on 1 October 2024 between 11:00 and 20:00 and 3 October 2024 between 07:00 and 16:00. The inspection was carried out by one 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 people using the service
- spoke with two of their family members
- spoke with five staff and three managers
- reviewed additional survey responses from staff members
- spoke with three visiting professionals
- observed practice and daily life
- reviewed documents.

During our inspection year 2024-2025 we will introduce a focus area which will look at how regulated services are continuing to use legislation and guidance to promote children's rights and how children and young people are being helped to understand what their right to continuing care means. This focus area will apply to care homes for children and young people, fostering agencies, and adult placement services linked to fostering agencies.

Key messages

- Staff worked hard to promote trusting relationships to ensure young people felt safe in their home.
- Inconsistencies in the approach to care and support impacted on young people's outcomes.
- Restraint did not always follow best practice and was not fully minimised in the culture in the service.
- Leadership lacked the necessary stability and direction to ensure a consistent approach to care.
- Staffing needs assessments did not always ensure the safety and support of young people.
- Improvements were required to staff support systems so they felt supported and valued in their role.

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

Quality indicator 7.1 ('Children and young people are safe, feel loved, and get the most out of life') was evaluated as adequate, where strengths only just outweighed weaknesses. Due to concerns relating to quality indicator 7.2 ('Leaders and staff have the capacity and resources to meet and champion children and young people's needs and rights'), it was evaluated as weak. Whilst we identified some strengths, these were compromised by significant weaknesses. This results in an overall evaluation of weak.

Risk in the service had not always been responded to proactively and this had compromised young people's safety. There had been some positive outcomes around developing young people's insight and management of risk. However, identified strategies for de-escalation and support were not always followed and may have contributed to escalated incidents.

Young people reported feeling safe emotionally and physically at the time of the inspection as they had trusting relationships with staff who cared for them. The service worked hard to ensure that young people had access to safe adults who could advocate and uphold their rights.

Staff understood and had utilised the service's process for raising and responding to safeguarding concerns. Safeguarding concerns, which had been raised by some staff, had not been responded to by management. This resulted in compromised safety for young people and a lack of trust between staff and management.

Young people did not experienced consistent therapeutic and stable care. Further developments were required to ensure an approach which fully supported their emotional wellbeing (see requirement 1).

Restraint did not always follow best practice. The culture and practice did not sufficiently minimise the likelihood of young people being subject to restraint. This impacted on their emotional wellbeing and safety. Debriefs were not always carried out or recorded, which impacted on the learning taking place around restraint (see requirement 2).

Young people felt that staff knew them well and this contributed to them feeling supported. Further developments were required around the approach to care, to ensure a consistent understanding and approach to trauma.

Staff were empathetic of young people's life experiences and how this impacted on their current presentation. Some approaches to care didn't sufficiently prioritise supporting recovery and building resilience.

Young people had opportunities for fun with staff who knew them well. Professional boundaries were not always managed carefully and this impacted on a consistent safe approach to care.

Young people were actively involved in identifying goals for their support plans. They were supported to engage meaningfully in the wider decisions made around their care. Young people's rights, sense of wellbeing, and identity were upheld through their care planning and support.

Routines were not established in the service and this impacted on young people engaging in offered activities that promoted their physical and emotional health.

Young people were supported to maintain meaningful connections to family. Family members felt well supported by the staff team. This meant they felt confident that these connections were being promoted and championed.

All young people were enrolled in education or alternative learning. However, the lack of structure in the service impacted young people's attendance and attainment.

Leadership in the service did not promote a consistent approach to care and this impacted on the confidence for some staff. Staff did not believe that practice was accountable or transparent, which impacted in their trust of leaders.

Disputes in the service regarding approaches to care with certain young people also led to mistrust between the staff and managers. This created tension and inconsistency within the staff team and created uncertainty for young people.

External managers were not visible and did not effectively contribute to improving outcomes. The current management structure did not ensure effective monitoring or oversight. The provider had identified this and was taking steps to ensure a more effective approach.

Transitions into the service for young people were not consistently supported in a way that reduced trauma and promoted successful outcomes (see area for improvement 1).

Despite staff working hard in their role, staffing needs assessments did not always ensure the safety and support of young people (see requirement 3).

Systems for ensuring staff were individually equipped to successfully meet the needs of all young people were not consistently or effectively implemented. This impacted on staff feeling confident and valued in their role (see requirement 4).

There were systems in place to monitor service delivery, which had been effective in identifying some poor practice impacting on people's outcomes. However, leaders in the service had not addressed these issues effectively and the support of young people was impacted by this.

A development and improvement plan was present for the service, which sought to improve the aspects of care impacting on young people's outcomes. However, limited progress had been made.

Requirements

1. By 30 December 2024, the provider must ensure that young people experience care and support that meets their needs and promotes their outcomes.

To do this, the provider must, at a minimum:

- a) Ensure that the approach to care in the service is individually assessed and consistently implemented.
- b) Ensure that staff have the right knowledge, skills, and experience to effectively implement care and support.

c) Ensure that the approach in the service is guided by trauma-informed principles and is in line with current theory and best practice.

d) Ensure that a reflective culture supports effective review and implementation of care and support.

This is in order to comply with Section (8) of the Health and Care (Staffing) (Scotland) Act 2019 (HCSSA).

This is in order to comply with Regulation 4(1)(c) (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: 'My care and support meets my needs and is right for me' (HSCS 1.19); and 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice, and follow their professional and organisational codes' (HSCS 3.14).

2. By 9 December 2024, the provider must ensure that no young person is subject to restraint unless it is the only practicable means of securing the welfare and safety of that or any other service user.

To do this, the provider must, at a minimum:

a) Ensure de-escalation strategies are consistently implemented and trauma-informed.

b) Ensure young people's personal plans comprehensively guide staff on de-escalation strategies and practice.

c) Ensure that restraint practices are effectively overseen by management and analysed to ensure that best practice is being followed.

d) Ensure that debriefs and life space interviews take place to support and promote a reflective culture that recognises restraint is a serious form of intervention.

This is in order to comply with Regulation 4(1)(c) (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: 'My care and support meets my needs and is right for me' (HSCS 1.19); and 'If my independence, control, and choice are restricted, this complies with relevant legislation and any restrictions are justified, kept to a minimum, and carried out sensitively' (HSCS 1.3).

3. By 25 November 2024, the provider must maintain staffing levels are sufficient to ensure the support and safety of children and young people.

To do this, the provider must, at a minimum:

a) Ensure that staffing assessments are present and effectively analyses required staffing levels on a four-weekly basis.

b) Ensure that there are processes in place that review staffing levels when there are changes in presenting risk or need of young people.

c) Ensure that there are processes in place to consider the appropriate skill mix of staff so that young people are appropriately supported.

This is in order to comply with Sections (7) and (8) of the Health and Care (Staffing) (Scotland) Act 2019 (HCSSA).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My needs are met by the right number of people' (HSCS 3.15); and 'People have time to support and care for me and to speak with me' (HSCS 3.16).

4. By 30 December 2024, the provider must ensure there are systems in place to support staff so they feel confident in responding to and supporting the needs of all young people consistently and effectively, as well as feeling confident and valued.

To do this, the provider must, at a minimum:

a) Ensure that inductions are carried out in a way that supports staff to feel confident commencing and carrying out their role.

b) Ensure that supervision is carried out regularly and in a way that promotes reflection, learning, and development.

c) Ensure that decision making by leaders is accountable and transparent.

d) Ensure that systems of support are monitored and evaluated by managers on an ongoing basis.

e) Ensure that support systems for staff promote a reflective culture.

This is in order to comply with Regulation 4(1)(c) (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 have confidence in people because they are trained, competent and skilled, are able to reflect on their practice, and follow their professional and organisational codes' (HSCS 3.14).

This is to ensure that care and support is consistent with the Scottish Social Services Council's (SSSC) Code of Practice for Employers of Social Service Workers which state that the employer will 'provide effective, regular supervision to social service workers to support them to develop and improve through reflective practice' (3.5).

Areas for improvement

1. The service should ensure that decisions around transitions and arrivals are based on children and young people's needs and best interests. Matching and admissions assessments should ensure that all transitions are supported in a way that reduces the likelihood of trauma and promotes successful outcomes.

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).

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

Young people benefit from access to adults outwith the home and within the local community who can actively advocate on behalf of them ensure they are getting their needs and rights upheld.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My human rights are protected and promoted and I experience no discrimination' (HSCS 1.2).

This area for improvement was made on 13 December 2023.

Action taken since then

The service had worked hard to ensure that young people had access to safe adults who could advocate and uphold their rights.

This area of improvement has been met.

Previous area for improvement 2

Young people benefit from a consistently applied model of care which means they get the same approach from everyone who has a role in caring for them. This approach is focused on an understanding of how each young person needs help.

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 is consistent and stable because people work together well' (HSCS 3.19).

This area for improvement was made on 13 December 2023.

Action taken since then

There were concerns in relation to this area of practice at this inspection.

As a result, along with previous areas for improvement 3 and 4, it has been combined into one requirement, which has been detailed within this report.

This area for improvement has not been met.

Previous area for improvement 3

Young people get the best possible care and support because they are looked after by people who have the right values, skills, and experience. They can reflect on their work, analyse any negative outcomes, and improve how they undertake their supportive role.

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, are able to reflect on their practice, and follow their professional and organisational codes' (HSCS 3.14).

This area for improvement was made on 13 December 2023.

Action taken since then

There were concerns in relation to this area of practice at this inspection.

As a result, along with previous areas for improvement 2 and 4, it has been combined into one requirement, which has been detailed within this report.

This area for improvement has not been met.

Previous area for improvement 4

To assist young people in the process of recovery, the service should ensure that staff have skills that are tailored to the needs of each young person. These skills should continually develop and be in line with current theory and best practice.

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, are able to reflect on their practice, and follow their professional and organisational codes' (HSCS 3.14); and 'I experience high quality care and support based on relevant evidence, guidance, and best practice' (HSCS 4.11).

This area for improvement was made on 22 October 2022.

Action taken since then

There were concerns in relation to this area of practice at this inspection.

As a result, along with previous areas for improvement 2 and 3, it has been combined into one requirement, which has been detailed within this report.

This area for improvement has not 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?

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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