

Cherry Blossom Children's Residential Home Ltd Care Home Service

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Stuartfield
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Type of inspection:
Unannounced

Completed on:
18 October 2024

Service provided by:
Cherry Blossom Children's Residential
Home Ltd

Service provider number:
SP2021000002

Service no:
CS2021000003

About the service

Cherry Blossom is registered to provide a care home service for a maximum of four young people. The service is provided from a well maintained and decorated detached house in the village of Stuartfield, Aberdeenshire. The young people have access to two communal areas in the house and an enclosed garden. There is a good-sized dining kitchen and other utility and storage rooms. All areas of the house are maintained to a high standard.

The stated aims of the service are:

- Providing a safe and psychologically secure environment which offers structure and consistency of boundaries within a homely living space.
- Listen to young people's opinions and rights, encouraging them to be involved in all aspects of their care.
- Provide an open and honest environment for young people and staff allied to promote and develop respect for one another and positive relationships.
- Individually tailored care and support plans which ensure the collaborative practises between care, therapy and staff provide the young people with consistency, love and security.
- Focus on young people's strengths and use these as a basis to create achievable targets that address difficulties.
- Safeguard children and young people in a proportionate manner which finds the balance between minimising risk of harm but also allows them to experience positive growth and development.
- Provide realistic expectations of behaviour and sensitive measures of control.
- Work directly and closely with family links and promote where appropriate the maintenance of family relationships for the young person.

About the inspection

This was an unannounced inspection which took place on Monday 14, Tuesday 15 and Friday 18 October 2024. 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 young people living at the service
- spoke with staff and management
- observed practice and daily life
- reviewed documents
- received feedback (via MS questionnaires) from external professionals, young people and staff.

Key messages

- Young people experienced warm, trusting, nurturing and respectful relationships with those caring for them.
- Considerable emphasis had been placed on supporting staff to understand risk, with external support and training for staff.
- Young people's goals and ambitions were recognised and supported. They had the opportunity to develop new skills and have new and exciting experiences.
- There had been a number of significant changes. These included a change to culture and practice aimed at providing a more consistent approach to young people's care.

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

At this inspection the quality indicator 7.1 (Children and young people are safe, feel loved and get the most out of life) was graded as good. Quality indicator 7.2 (Leaders and staff have the capacity and resources to meet and champion children and young people's needs and rights) was graded as adequate.

Overall the evaluation for this key question was adequate, where strengths only just outweighed weaknesses.

Young people experienced relational nurturing care which, for most, promoted their emotional and physical safety both in the house and the community. Young people said there was no bullying and most liked the (generally) relaxed household.

Previously there had been a lack of direction around the approach to risk which had had an impact on safety and consistency for young people. Considerable emphasis had been placed on supporting staff to understand risk, with external support and training for staff. At the time of the inspection young people benefitted from clearer expectations, though this had initially been quite difficult for some. A more consistent approach to all aspects of young people's care had led to a more settled and nurturing environment for young people.

The service positively promoted young people's engagement with responsible adults out with the service, including children's rights services. This ensured young people who wanted independent advocacy to uphold their views and rights could have this.

The staff team had an understanding of child protection procedures. An identified child protection officer ensured safeguarding concerns were appropriately reported. The service needs to develop adult protection policies to ensure staff were aware of their responsibilities to safeguard adults in their care. **(See area for improvement 1.)**

Staff had carried out some online training to support young people whose lives were impacted by the trauma they had experienced. This had upskilled individual staff but was not a cohesive whole team approach. Significant changes to the team had impacted on any development of this model of care, however, the Directors of the service had sourced high quality training with a clear plan for the whole team to complete DDP training (Dyadic developmental psychotherapy).

Young people experienced warm, trusting, nurturing and respectful relationships with those caring for them. Staff were really interested in young people and knew about every aspect of their personality and interests. They very definitely wanted what was best for all young people and wanted to spend time with them. Observation and feedback from young people was very positive.

Children and young people experienced spontaneity and fun. They were active in the local community and encouraged and supported to join clubs and activities which interested them and developed their self-esteem and confidence. At the time of the inspection everyone was excited about a European holiday which would give most of the young people new and fun experiences.

The house was homely and well maintained. There had been a very positive emphasis on the balance between young people's rights and privacy and creating an environment of nurture and care. The change in

approach had been difficult for some young people initially, however, they had been supported to understand why the changes were positive for their physical and mental health.

Young people were well supported to have meaningful contact with various people in their family. This was very individual to each young person. The staff team understood how important this was and offered encouragement and support.

Young people's goals and ambitions were recognised and supported. Young people were encouraged and supported to be in school, or further education. Communication with education partners was good. There were great examples of young people developing skills and confidence.

The format of young people's support plans and risk assessments had changed, with varying examples of how much young people were involved (sometimes linked to what was age appropriate). The newly appointed manager and an identified senior had taken a lead role in developing plans which would reflect young people's needs and aspirations.

There had been a number of changes which had affected the stability of the team, including managerial changes. Culture and practice had impacted on security and stability for young people. In order to support team development and learning the Directors of the service had engaged the support of external consultants with considerable and relevant skills and experience. This was ongoing and the team were still developing as a cohesive team.

A new manager had been appointed shortly before the inspection. Other senior members of the team had key responsibilities, and the Directors had a greater level of 'hands on' involvement. It was therefore a time of significant change for the team. There were plans in place for supervision and further developing the (known) skills of the team. These will be examined further at the next inspection as it was too early to assess any sustained improvement.

The service had considered the implications of young people moving into the group, however, there was no formal matching policy or impact assessment. Guidance from the Care Inspectorate was shared to support the development of these documents. **(See area for improvement 2.)**

There was a good understanding of the needs of young people. Staff were flexible and responsive to ensure young people had key staff when they needed them, however, there was no formal staffing needs assessment. Care Inspectorate 'guidance for providers on the assessment of staffing levels in premises-based care services' was shared so the required document can be developed. **(See area for improvement 3.)**

Directors of the service had accessed training for the staff team and had additional plans for further training. A training plan which considered the individual and collective skills, training and learning needs of the team would be beneficial to promoting team development and managerial oversight. **(See area for improvement 4.)**

Significant focus on meeting previous requirements and areas for improvement had ensured these had been successfully met. The service now needed to develop an improvement plan which focused on continued improvement. The improvement plan should include quality assurance systems which will measure outcomes and ensure policy documents are regularly reviewed. **(See area for improvement 5.)**

Areas for improvement

1. In order to ensure that staff have the knowledge needed to protect adults in their care from harm, the provider should develop an adult protection policy which follows local and National guidelines.

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).

2. In order to ensure that consideration is given to the needs of anyone new moving into the service, and the needs of those already living there are fully considered, the provider should:

- a) develop an admissions policy and procedure
- b) complete an impact assessment.

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' (HSCS1.19).

3. In order to ensure that staffing levels and skills are right to meet the needs of young people, the provider must develop a formal staffing needs assessment.

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 amount of people' (HSCS 3.15).

4. To ensure that the staff can effectively meet the needs of the young people they care for, the provider should develop a formal training plan.

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).

5. To support the continuous improvement of the service, the provider should ensure there is a development plan in place.

This should include but is not limited to:

- effective quality assurance
- reviewing and updating policy documents
- reviewing and updating the aims and objectives of the service.

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 assurances process' (HSCS 4.19).

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

Requirements

Requirement 1

By 27 July 2024, the provider must ensure that children and young people receive quality care that is based on good risk management principles and approaches. To do this, the provider must, at a minimum:

- a) review all young people's assessments and plans and ensure that they have accurate risk information and interventions
- b) review all risk documents and ensure that they follow good risk management and reduction principles
- c) review quality assurance and decision making processes to ensure that they follow good risk management approaches
- e) provide risk training to all staff that includes risk assessment and analysis, risk management, and direct work with young people
- f) provide evidence to the Care Inspectorate that the service has an effective risk management approach and that staff are suitably equipped to support young people.

To be completed by: 27 July 2024

This is in order to comply with:

Health and Social Care Standard 1.24: Any treatment or intervention that I experience is safe and effective.

Regulation 15(b)(i) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011 No. 210 Social Care).

This requirement was made on 22 April 2024.

Action taken on previous requirement

The provider had delegated time and resources to all aspects of the requirement - and continued to do so at the time of the inspection. Individual staff had been deployed to focus on risk and risk assessment. Training and consultancy had been commissioned to support team understanding. Improvement was ongoing, however, is sufficient to deem this requirement as met.

Met - within timescales

Requirement 2

By 27 July 2024, the provider must ensure that children and young people receive quality care and support to meet their health needs. To do this, the provider must, at a minimum:

- a) review all young people's support plans and ensure that health needs and supports are accurately recorded and are being implemented
- b) produce guidance on how the service will support and manage young people with a smoking addiction
- c) provide training to all staff on that guidance, to ensure consistency of practice
- d) provide evidence to the Care Inspectorate that the requirement has been met.

To be completed by: 27 July 2024

This is in order to comply with:

Health and Social Care Standard 1.19: My care and support meets my needs and is right for me.

Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011 No. 210 Social Care).

This requirement was made on 22 April 2024.

Action taken on previous requirement

The provider had reviewed and significantly improved their practices and expectations in relation to young people smoking. Support and education for young people had been accessed. Support plans and expectations reflected the change in culture and a focus on positive health. All staff had completed training.

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

Young people would benefit from staff having a greater understanding of trauma informed care. Plans to source dyadic developmental psychotherapy, or similar training in trauma informed care, should continue.

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

This area for improvement was made on 10 August 2023.

Action taken since then

Staff had completed online training which to support their understanding of trauma informed care. Further training had been sourced and would be delivered to staff in 2025.

Previous area for improvement 2

Documentation, including policies and support plans, should be more individualised and better reflect the voice of young people and the language and values of 'The Promise'.

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

'I am fully involved in reviewing and developing my personal plan, which is always available to me' (HSCS 2.17); 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 10 August 2023.

Action taken since then

Support plans had been revised and were also being further developed by the newly appointed manager.

Previous area for improvement 3

In order to ensure that children and young people receive effective support, staff should have access to training about child and adolescent development and how adverse experiences affect children and young people at each key stage of growing up, and prevention and de-escalation strategies.

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

This area for improvement was made on 19 April 2022.

Action taken since then

Appropriate training had been provided to staff.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

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	4 - Good
7.2 Leaders and staff have the capacity and resources to meet and champion children and young people's needs and rights	3 - Adequate

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