

Options Fife McNally House (Residential) Care Home Service

GLENROTHES

Type of inspection:

Unannounced

Completed on:

23 January 2025

Service provided by:

Aberlour Child Care Trust

Service provider number:

SP2010011118

Service no: CS2021000065



Inspection report

About the service

McNally House is a care home which supports three people with additional support needs. Their home is located in a residential area of Glenrothes where they all have their own bedroom and share a spacious kitchen, living/dining room and a sensory room and private garden. Their home is well maintained and there is easy access to the local community.

About the inspection

This was an unannounced inspection which took place on Monday 20th and Tuesday 22nd January 2025. 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:

spent time with three young people spoke with staff and management spoke with parents reviewed documents reviewed questionnaire responses from eight external professionals and six staff.

Key messages

- All of the young people were supported to maintain very significant relationships with their families. Parents were very positive about communication with the team and enjoyed daily message and video updates about their child's day.
- Young people were safe at McNally House. Staff knew each person really well and used strong relationships, risk assessments and support plans to inform their care and support.
- People experienced relational nurturing from a team who knew their needs well and who were committed to supporting positive outcomes.
- People benefited from a much more consistent team than previously. The organisation needs to
 prioritise core training and professional qualification to ensure the team can meet the needs of the
 people they care for.

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
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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?

4 - Good

Overall, we evaluated this key question as good, where numerous strengths impacted positively on outcomes for people and clearly outweighed areas for improvement. Some aspects of the care and support were very good.

Young people were safe at McNally House. Staff knew each person really well and used strong relationships, risk assessments and support plans to inform their care and support. Formal and informal communication across the team throughout the day ensured everyone was fully aware of anything relevant and had the opportunity to reflect on what was working well or might be done differently. Attentive supervision and practical safety measures supported high levels of safety inside the house and in the wider community.

Restrictive practices were well considered, highly individualised and only used to ensure safety. Strategies and decisions were dynamic and thoughtful, being consistently considered to see how they could be reduced to give young people as much choice and freedom as possible. Some staff were trained to support people through the use of CALM (crisis and aggression limitation and management) however not all of the team had completed this core training. (See area for improvement 1).

Staff were aware of child protection processes and procedures, had received training in this area and knew what to do if they had any concerns. There were significant gaps in adult protection training which need to be addressed to ensure the ongoing protection of adults at the service. (See area for improvement 1).

The team were compassionate and hugely positive about the people they supported, however none of the team had completed the professional qualification required to ensure they had a comprehensive understanding of the people they support. The organisation had plans to deliver this professional qualification, and while encouraging, had not yet become a training plan for the staff team. (See area for improvement 1).

We observed warm, trusting and nurturing relationships between staff and young people. Staff spoke with respect and compassion about the young people they supported. Since the last inspection, the staff team was far more consistent which meant they knew young people well, and used their knowledge and relationships to provide stable and predictable care within a safe environment. Families also commented on improvements, which they attributed to stability of the team, and strong leadership.

The young people using the service were given as much choice as possible. The team understood the need for robust planning and structure, whilst being flexible to changing need, to ensure experiences were maximised. The use of various forms of communication ensured everyone was involved in making decisions about their care, and that they enjoyed activities and new experiences in the community, widening their social experiences and ensuring they were having fun.

The house was homely, and young people's rooms highly individualised. The sensory room and garden provided additional spaces for young people to relax and develop new skills. Young people were observed to be comfortable in their surroundings and to be with staff who were attentive to their needs.

Young people had access to external advocacy, in addition to staff championing their rights. The team had varied understanding of 'The Promise' and how this linked to young people's rights however were very focussed on young people being at the centre of their care and decisions being in their best interests.

Young people's health was given priority, with strong and established links with local health care services. Great attention was given to young people's personal care, diet and exercise. Appropriate referral and discussion with health services had been pursued when there were lengthy waiting times for assessment and appointments. Medication processes followed good practice.

All of the young people were supported to maintain very significant relationships with their families. Parents were very positive about communication with the team and really enjoyed the daily updates, including photos or videos of what their child had been doing that day. There was a very clear commitment to the people who lived there 'staying put' for as long as the care and support allowed them to flourish.

People were well supported through information and strategies detailed in support plans and risk assessments. There was scope consider whether some of the plans could be amalgamated to minimise repetitive recording however this did not impact on their effectiveness. The service continued to develop goal setting and how this was promoted and reviewed. This ensured young people's skills and talents were continually developing.

Areas for improvement

1. In order to ensure the staff team can understand the needs of the people they care for they should:

Complete the core training required by their Organisation, particularly (but not exclusively) CALM and adult protection training.

Have a training plan which ensures that the staff team are professionally qualified to the training requirements expected by the Scottish Social Services Council (SSSC).

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).

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 ensure young people benefit from staff who provide high quality support, the service should ensure that the Care Inspectorate is being alerted, within the appropriate timescale, of notifiable events, including all staff misconduct matters.

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 area for improvement was made on 2 February 2023.

Action taken since then

There were no concerns as appropriate notifications had been made to the Care Inspectorate.

Previous area for improvement 2

To ensure young people are cared for by the right number of staff who have the required experience and skill mix to meet their changing needs, the provider should establish a staffing analysis 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 is provided in a planned and safe way, including if there is an emergency or unexpected event (HSCS 4.14).

This area for improvement was made on 2 February 2023.

Action taken since then

The service did not have a staffing needs assessment. This area for improvement has **not** been met.

Previous area for improvement 3

To support staff to deliver effective care and support, the provider should ensure care plans are SMART and goals are regularly reviewed.

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

My personal 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 2 February 2023.

Action taken since then

The service had made demonstrable progress in goal setting for the people they cared for. They continued to focus on this. This area for improvement has been met.

Previous area for improvement 4

Children and Young People's care should be supported by improved incident management and transparency following incidents. In order to achieve this the service should: a. review incident management guidance and agreed thresholds for when an internal investigation is needed;

b. ensure all relevant parties are kept updated on investigations and that they are provided with the outcome.

This area for improvement was made on 2 February 2023.

Action taken since then

The organisation, and service, had given significant attention to all aspects of their incident procedures, including thresholds for investigation and discussion with families. It was too early to determine whether this was embedded practice, however, indications were positive. This area for improvement is deemed met and will be examined at the next inspection.

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?	4 - Good
7.1 Children and young people are safe, feel loved and get the most out of life	4 - Good

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