

## Netherlethame Care Home Service

Strathaven

Type of inspection:

Unannounced

Completed on:

26 February 2025

Service provided by:

Common Thread Ltd

Service no:

CS2020379357

Service provider number:

SP2005007437



#### About the service

Netherlethame is a care home for children and young people. The service provider is Common Thread Group, and is registered to care for three children and young people. Netherlethame is a large rural property near Strathaven, South Lanarkshire, with a substantial outdoor area. This service has been registered with the Care Inspectorate since December 2020.

Each young person has their own bedroom and there are good sized communal areas with large kitchen, dining and living room areas. There is also dedicated office and sleep over space for staff.

At the time of inspection, there was one young person living at Netherlethame.

## About the inspection

This was a follow up inspection to examine progress made in relation to requirements and areas for improvement made at a full inspection in April 2024. This inspection took place on 25 February 2025 between 16:00 and 19:20 and 26 February between 09:15 and 18:00. The inspection was carried out by two inspectors from the Care Inspectorate.

To prepare for the inspection, we reviewed information about the service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

To inform the inspection we:

- spoke with six members of staff including managers
- observed practice and daily life
- reviewed documents
- spoke with one external professional and two family members.

### Key messages

Despite some progress being made in relation to the four requirements set at the last inspection, these were all assessed as not met.

In relation to the three areas for improvement, attention had been given to progressing two of these since the last inspection; however the external environment of the service continues to be of a poor standard.

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

## Requirements

#### Requirement 1

By 9 May 2024 the provider must assess the safety of the young people receiving care to ensure their needs are being effectively met. In particular, you must:

- a. take account of young people's views regarding their placement at Netherlethame
- b. ensure social work and other relevant services are consulted regarding the assessment
- c. put in place the required measures to protect the safety of the young people.

This is in order to comply with Regulations 3 and 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:

'My care and support meets my needs and is right for me' (HSCS 1.19) and 'I am listened to and taken seriously if I have a concern about the protection and safety of myself or other, with appropriate assessments and referrals made'. (HSCS 3.22)

This requirement was made on 2 April 2024.

#### Action taken on previous requirement

The service had developed effective approaches to gathering the views of young people regarding their placement, wishes and needs. These approaches also ensured young people were provided with feedback. There was confirmation that the service was encouraging the use of independent advocacy to promote greater participation and provide young people with additional support.

There was positive collaboration with a variety of external partners to ensure key information was being shared and that risks were being managed in partnership.

Personal plans detailed individual strategies that considered young people's wellbeing; however, these could have been more detailed, with greater connection between risk assessments and safety plans to support staff in their response to crisis situations.

There had been a period of time since the last inspection that young people's safety had been compromised with some poor outcomes identified. The process of risk assessment had been poor, with minimal reflection as an organisation on decision making.

Although we identified some progress, this requirement has not been met and we have agreed an extension until 12 May 2025.

#### Not met

#### Requirement 2

By 9 May 2024 the provider must ensure there is a review of child and adult protection policies and procedures. In particular, you must:

- a. revise and update your child protection policy and procedures and create a separate adult protection policy, taking into consideration national guidance and best practice
- b. ensure all staff understand what to do if they become aware of a child or adult protection concern
- c. reinforce protection roles within the organisation, including the role of management and the protection lead officer
- d. review processes used internally to ensure the recording of protection concerns and actions taken.

This is in order to comply with Regulation 4(1)(a) and Regulation 15(b) 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'. (HSCS 3.14)

This requirement was made on 2 April 2024.

#### Action taken on previous requirement

Despite a review of the child protection policy, this continued to require improvement to ensure current national frameworks were reflected and to provide accurate guidance for staff. The policy remained unclear regarding protection roles within the organisation.

The organisation had not created a separate adult protection policy; this was in draft format, but not available for staff to guide practice in ensuring the safety of young people.

All staff had undertaken safeguarding of young people training, but required to complete more specific training in child exploitation and online protection. The organisation planned to develop separate adult protection training.

There had been some child protection concerns in the service which did not evidence best practice; however, since the new manager had been appointed, recording was clearer with detailed internal chronologies. Child protection concerns had been shared with appropriate agencies and staff felt confident in identifying and reporting any concerns, with expectations being discussed within team meetings.

We identified some progress, however, this requirement has not been met and we have agreed an extension until 12 May 2025.

#### Not met

#### Requirement 3

By 23 May 2024 the provider must ensure quality care, support and evaluation of young people's experiences through effective quality assurance processes . In particular you must:

a. consistently implement effective quality assurance systems and activities

b. ensure that the response to, and analysis of incidents results in actions which minimise risks to young people's and staff wellbeing.

This is in order to comply with Regulation 4(1)(a) and Regulation 7(2)(c) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) and section 53(6) of the Act.

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)

This requirement was made on 2 April 2024.

#### Action taken on previous requirement

There had been delays since the last inspection in appropriate quality assurance being undertaken at Netherlethame. The service had subsequently introduced various quality assurance and audit systems to be undertaken internally and by the external manager, but these required to be sustained and consistent over a longer period of time and will be considered at the next inspection.

This inspection highlighted the importance of the provider undertaking an analysis of the variety of incidents that are recorded, including child protection referrals and occasions when young people are missing from home. This would support staff to capture learning, identify future support needs and more effectively manage risk.

We identified some progress, however, this requirement has not been met and we have agreed an extension until 12 May 2025.

#### Not met

#### Requirement 4

By 9 May 2024 the provider must ensure the risks and needs of young people can be effectively managed. In particular you must:

a. ensure an effective admissions and matching process is in place, determining the capability of the service to meet the needs of the young people coming into the service and those placed in the service. This process must also be used when young people transition within the organisation

b. implement a comprehensive system for assessing staffing levels, consistency and skill mix at all times, matched to the needs of young people using the service.

This is in order to comply with section 7(1)(a)(b) of the Health and Care (Staffing) (Scotland) Act 2019.

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)

This requirement was made on 2 April 2024.

#### Action taken on previous requirement

Matching documentation did not comprehensively identify young people's needs or how the team planned to support identified risk for young people referred to the service. It was difficult to establish analysis around decision making for individual placements, what additional staff input was required to meet specific needs, and whether the organisation had all the required information to make these decisions.

Young people are beginning to benefit from staff consistency and stability at Netherlethame to enable them to build trusting relationships. However, the process for assessing staffing levels, consistency and skill mix requires further development. This would enable planning for the future and an analysis of capacity to meet young people's needs as a team.

This requirement has not been met and we have agreed an extension until 12 May 2025.

#### Not met

# 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 young people's wellbeing, the provider should ensure the quality of the external environment is prioritised.

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

'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment'. (HSCS 5.22)

This area for improvement was made on 2 April 2024.

#### Action taken since then

Internally, the provider has made progress making the house comfortable with new furnishings and decoration. However, externally the property is not welcoming and continues to be in an extremely poor state of repair with minimal progress having been made to structural renovations or to making cosmetic improvements. Additionally, much of the outdoor space was unsafe for children and young people, making it an unsuitable area for them to make use of.

This area for improvement has not been met and will remain in place.

#### Previous area for improvement 2

To support children and young people's wellbeing, the provider should ensure that all concerns regarding staff conduct are investigated in an open and transparent manner.

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 area for improvement was made on 2 April 2024.

#### Action taken since then

Concerns regarding staff misconduct had been investigated in an open and transparent manner, with recordings in place to demonstrate actions taken. Additionally, there was an improved culture of staff sharing concerns. A number of staff had the Shine A Light training to complete which was to be prioritised.

This area for improvement has been met.

#### Previous area for improvement 3

To support young people's ongoing development, the service should review their care plans, including risk assessments to ensure young people's views are being represented and they are in accordance with SMART principles.

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 April 2024.

#### Action taken since then

Young people's views were present in care plans and risk assessments, and these were being regularly reviewed. Behaviour support plans, alongside individualised safety plans had been created. This inspection highlighted where these documents could be strengthened further, including creating timescales for goals and being specific regarding how young people would be supported to reach their goals.

This area for improvement has been met and we will look at this further at the next inspection.

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

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