

Kincairn Residential Childcare Ltd Care Home Service

Tarvit Cottage Tarvit Home Farm Pitscottie Road Cupar KY15 5ST

Telephone: 07818505303

Type of inspection: Unannounced

Completed on: 4 February 2025

Service provided by: Kincairn Residential Childcare Ltd

Service provider number: SP2023000422



Service no: CS2023000380

About the service

Kincairn Residential Childcare Ltd sits on the outskirts of the town of Cupar. The service sits in a rural location, but has close access to the town and amenities. The service can care for up to three young people, but at the time of follow up inspection there were no young people living in the service

The house is spacious and decorated to a high standard. In addition to the bedrooms there were two living areas, and spacious gardens to the front and rear of the building.

About the inspection

This was an unannounced inspection which took place on the 28 January 2025. 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 staff and management
- reviewed documents

Key messages

·Managers within the service were committed to developing the service

•There were no young people using the service which complicated the service's ability to progress some areas.

• Consideration was given to the services ability to meet young people's needs, when referrals were received.

•The service needs to ensure they fully consider each point made within requirements to ensure they fully meet these.

How well do we support children and young people's rights and wellbeing?

This was a follow up inspection which focused on the requirements and areas for improvement identified at the last inspection. We found the service to be committed to making the improvements which we raised.

The service at the time of follow up inspection did not have any young people within the service. This did not allow full assessment of some aspects of improvement in use.

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

Requirements

Requirement 1

To support children's wellbeing, 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 provider must include but not limit to:

a) Ensuring they consider the potential impact on existing young people within the service.

b) Ensuring they have all the necessary information prior to making a decision regarding the new young person being referred to the service.

c) Ensuring they consider staffing levels, skills, mix and any current staff vacancies.

d) Ensuring they fully follow the providers own matching policy, and that matching processes are subject to quality assurance measures from external managers.

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 28 June 2024.

Action taken on previous requirement

The service had added some important steps to the referral process. This has included a referral tracker that allowed managers to track the information they have received allowing them to assess their ability to meet the needs of young people coming to the service.

As there were no young people using the service it was difficult to fully assess these processes in action. Where there had been potential young people coming the provider had insufficient detail in their matching document. Whilst we had confidence that further discussions were happening the provider should ensure that full assessment of needs is displayed to increase the likelihood of placements being successful.

Not met

Requirement 2

By 31 August 2024, you must ensure that the child and adult protection practice is reviewed and developed. This review must be informed by effective analysis of safeguarding issues. The provider must include but not limit to:

a) Ensuring that child protection procedures and policies are reviewed, and updated to reflect current best practice guidance.

b) Ensuring that the service develops an adult protection policy and guidance.

c) Ensuring that staff who have lead responsibility for safeguarding and protection receive appropriate training. This is to ensure that they make appropriate timely decisions and involve all relevant partners to ensure the safety and protection of children and young people.

d) Ensuring all staff are provided with up-to-date child and adult protection training in relation to their roles and responsibilities in the protection of children and young people and are fully supported to embed this training in practice.

e) Ensuring robust oversight by senior managers of child or adult protection concerns which may arise to strengthen reflection within the staff team and support learning for future practice.

f) Ensuring that child protection, adult protection and safeguarding concerns are reported to the appropriate agencies, including the social work department and any other relevant agencies.

This is in order to comply with Regulation 4(1)(a) and Regulation 15(b)(i) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure 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 requirement was made on 28 June 2024.

Action taken on previous requirement

The provider had outsourced Child and Adult Protection policies and ensured that these were read by employees. We highlighted some aspects within the Child Protection policy where updates could be made to ensure these were fully aligned with national guidance. The service agreed to take this forward.

Leaders within the service had accessed lead child protection training, this was an important step to to ensure that those in lead positions were fully aware of their role in the protection of young people.

Whilst there had been increased child protection training, there were numerous staff who had not undergone adult protection training. We asked the provider to take immediate action to address this gap.

The service had introduced a record of concern form which would allow a singular record of any protection concerns. Again, given the fact that there were no young people using the service this was difficult to fully assess in practice.

Not met

Requirement 3

By 31 August 2024, you must ensure that at all times suitably recruited, qualified and competent persons are working in the care service in such numbers as are appropriate for the health, welfare and safety of children and young people. This is to ensure the safety of children and young people. The provider must include but not limit to:

a) Ensuring that the registered manager understands their role in recruitment and follow the organisational recruitment policy consistently.

b) Ensuring that all relevant checks are undertaken, and complete, before any staff member has direct contact with young people

c) Ensuring that all staff have applied to register with appropriate bodies within appropriate timescales.

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

'I am confident that people who support and care for me have been appropriately and safely recruited' (HSCS 4.24).

This requirement was made on 28 June 2024.

Action taken on previous requirement

The service had introduced a recruitment tracker document to ensure that all appropriate checks were undertaken before commencement of employment. This meant that young people using the service would be supported by safely recruited staff.

This document was subject to ongoing quality assurance to ensure that no gaps were evident. Whilst we could see that the service was seeking references for staff coming to the service we highlighted the need to further develop this system, ensuring that a full working history was received, allowing the provider to ascertain gaps, or to seek professional references where possible instead of personal references.

The service had improved awareness of staff registration requirements and had oversight of this.

Managers awareness of their role in ensuring safer recruitment had improved. the service was open to feedback received and agreed to carry these areas forward.

Met - within timescales

Requirement 4

By 30 September 2024, the service must 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 must 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) Conducting a retrospective staffing needs assessment ensure that training requirements for young people are identified and sought, and where these are not in place the service takes steps to mitigate risk whilst these are accessed. The service should create an action plan to address these gaps.

c) Ensuring that all young people get access to the staffing required to meet their needs, at all times, including access to awaken night staff if required.

d) Considering their ability to meet the needs of new and existing young people prior to new young people coming to the service. This should include assessment of staffing levels, and training needs.

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 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 requirement was made on 28 June 2024.

Action taken on previous requirement

The service had created a staffing needs assessment and were completing this regularly. Whilst this was an important process we found that in practice the service focused on collective skill as oppose to ensuring that all staff had the necessary training to ensure that young people using the service would be fully supported at all times no matter who was on shift.

We highlighted the need for the service to further consider their assessment to ensure that any young person coming to the service's needs are fully met by suitably trained staff in a proactive basis. This would allow positive supports to be in place for their arrival to the service.

Not met

Requirement 5

By 30 September 2024, you must ensure there is evaluative scrutiny and oversight of all aspects of the care provision within the service. This is to ensure that children and young people experience high quality, consistent care and support. The service must include but not limit to:

a) Ensuring that the service develops clear quality assurance processes to cover all aspects of care

b) Ensuring that those responsible for completing this have the necessary knowledge and skills to undertake this, and know fully their own roles in this.

c) Ensuring that any areas of improvement identified by third parties are quickly progressed and that managers have oversight and awareness of this.

d) Ensuring that any practice or training issues identified by this process are responded to.

This is to comply with Regulation 3, Regulation 4(1)(a) and Regulation 5 of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/ 210).

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

'I benefit form a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

This requirement was made on 28 June 2024.

Action taken on previous requirement

At the point of follow up inspection the provider had developed a quality assurance monitoring form, and matrix. This outlined the roles and frequency of audits. This was in the early stages of implementation.

Where audits had been undertaken we highlighted the need to focus more on the quality, thus allowing managers to identify practice concerns, and to ensure supports were in place to help improve practice.

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 the young people's wellbeing, and outcomes, the service should review its care planning processes to ensure they fully reflect the wishes and needs of young people, and inform staff fully of their role in supporting them. The service should ensure that:

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

b) 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.

c) 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) Managers and external managers have oversight of plans, and can assess advances and barriers in progressing outcomes 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).

This area for improvement was made on 28 June 2024.

Action taken since then

The provider had been working with the staff team to further develop care planning processes. We were unable to fully assess this in practice as there were no young people using the service.

Where we could assess historic information we identified the need to further develop language to ensure this was trauma informed. The service also needs to further develop their use of SMART goals, to allow managers to assess advances and barriers in supporting young people.

Previous area for improvement 2

The service should develop a continuing care policy to set out its responsibilities to provide continuing care to young people and how it will ensure that young people are aware of their right to continuing care up to the age of 21.

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

"As a child or young person I feel valued, loved and secure" (HSCS 3.5)

And

"My human rights are central to the organisations that support and care for me" (HSCS 4.1).

This area for improvement was made on 28 June 2024.

Action taken since then

The service has implemented a continuing care policy, this was a welcome addition. The policy set out what the service will do to support continuing care. We suggested that this could be further developed by creating a document which helps young people be fully informed of their rights

The service agreed to progress this area further.

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?	not assessed
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