

Achnamara Care Home Service

Saltcoats

Type of inspection:

Unannounced

Completed on:

26 March 2025

Service provided by:

North Ayrshire Council

Service no:

CS2007142322

Service provider number:

SP2003003327



Inspection report

About the service

Achnamara is a residential care service provided by North Ayrshire council. The service is registered to accommodate up to eight children and young people, however, requested a variation in February 2025 to accommodate nine young people.

The service is in a purpose-built building in Saltcoats. The building is detached and on one level with a carpark and garden space. There are eight designated bedrooms within the house and each has en suite facilities.

The provider of this service is a corporate parent, with statutory responsibilities to look after and accommodate children. This means they may have the duty to care for children and young people on an emergency basis, or at times with highly complex needs, due to safeguarding being their highest priority.

In these circumstances our expectations, focus on outcomes, and evaluations remain identical to those of all other providers. We may, however, provide some additional narrative in the body of the report to reflect the impact of these duties, should it be relevant to this particular service.

About the inspection

This was an unannounced inspection which took place on 17 February 2025 between 11:00 and 20:00 and 20 February 2025 between 12:00 and 20:00. 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 six people using the service and one of their family
- · spoke with five staff and management
- · observed practice and daily life
- · reviewed documents
- spoke with visiting professionals.

Key messages

- The team worked hard to promote a warm and welcoming environment, which contributed to young people feeling safe.
- The service worked closely with advocacy to ensure young people always had access to responsible adults outside the service.
- Improvements were required to ensure best practice in child protection was followed.
- Trauma-informed practice needed to be developed to ensure a consistent approach and ethos in the service.
- Meaningful connections for young people were fostered and championed.
- Development of effective oversight systems was required to ensure young people were adequately safeguarded and received the best possible care.
- The service should create a development and improvement plan that identifies how they will fulfil The Promise.

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

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

We evaluated quality indicator 7.1 as good, where several strengths impacted positively on outcomes for children/people and clearly outweighed areas for improvement. We evaluated quality indicator 7.2 as adequate, where strengths only just outweighed weaknesses.

Most young people felt safe at Achnamara because they were looked after by staff who were kind and fair. The multi-agency approach in the service ensured that approaches to risk were proactive.

The service had strong links with advocacy, which ensured that all young people had access to responsible adults outside the service who always act in their best interests.

The service had a detailed Child Protection Policy in place but not all staff had completed initial child protection training or renewed this as expected. Improvements were required to ensure that the service fully implements best practice in response to child protection matters (see area for improvement 1).

The service promoted a culture that prioritised emotional de-escalation through relationships, which minimised the likelihood of young people experiencing trauma from being subject to or witnessing restraint.

Staff were trauma aware and, at times, able to utilise their understand of trauma in supporting young people. However, individual interventions did not always fully promote an approach that recognised the impact of trauma on young people. The overall approach in the service should promote a culture based on compassion and an understanding that all behaviour is communication (see area for improvement 2).

Young people were supported to develop skills in managing risk and building recovery in a way that worked for them. This resulted in increased independence skills and resilience.

Young people experienced fun with staff, where there were lots of laughter and spontaneity.

The house was well maintained and the communal areas were comfortable and cosy. Most young people's rooms were well decorated with items that were important to them.

There was some evidence of young people being engaged in their care and support planning and young people were regularly supported to attend meetings about their care. The service should ensure young people are always able to access personal planning so they can participate meaningfully and easily in all decisions affecting them.

Staff were creative in their approach to ensure that young people's emotional needs were met, supporting an environment that was free from unnecessary stress.

Staff worked hard to promote trusting relationships with family members to ensure young people were well supported to maintain connections with those important to them.

Young people were supported to access new and exciting opportunities that broadened their horizons. Young people attended some hobbies that interested them, though this could be promoted more consistently to encourage more time away from screens.

Young people were well supported to engage fully in learning, with individualised plans to ensure they were able to access education.

The service demonstrated an enduring commitment to young people staying in the service, with appropriate scaffolding in place to support independence as they moved into adulthood.

Young people's personal plans were sufficiently detailed but the service should consider how to incorporate a SMART (specific, measurable, attainable, relevant, and time-bound) approach to ensure that personal planning maximises young people's needs and aspirations.

The culture in the service was supportive and open. Staff felt that they were able to raise concerns with their colleagues and management and have confidence that these would be dealt with.

The staff team worked hard to support one another, where everyone had young people's best interests at heart. A warm and welcoming atmosphere was promoted, which contributed to positive relationships with young people.

Some systems were in place for audit and oversight, though these were not effective monitoring safeguarding or the quality of young people's experiences (see requirement 1).

As the service is part of the council, they have statutory responsibility to respond to safeguarding concerns, which can often result in emergency or unplanned arrivals. Transitions, therefore, cannot always be planned. It was positive to hear that there are wider discussions to consider how this process can be developed to ensure clear and accountable decision making.

The staff team is stable, which allows young people to develop trusting relationships. The ratio of staff to children and justification that this was the right number of staff with the right skills and experience was not assessed or analysed in a staffing need assessment (see area for improvement 3).

Staff had access to a multitude of training. However, had not always completed or reviewed this in appropriate timescales. Staff were trauma aware and empathetic to the young people they cared for. This was supported by regular supervision and team meetings. The service should consider how to further develop and fully embed consistent therapeutic trauma-informed care.

The service utilised staff and young person questionnaires to gather feedback about service delivery but this had not then informed a development and improvement plan. As such, there was no clear plan on how improvement activities will drive forward The Promise (see area for improvement 4).

Requirements

1. By 1 May 2025, the provider must implement effective oversight and quality assurance systems to ensure that young people are kept safe and practice is focused on improving outcomes.

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

- a) Regularly audit young people's risk assessments, personal plans, and outcomes.
- b) Carry out improvement activities when there is practice identified that does not keep young people safe, or is not focused on improving outcomes.

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This is to comply with Regulation 4(1)(a) (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 benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19); and 'I use a service and organisation that are well led and managed' (HSCS 4.23).

Areas for improvement

1. The service must ensure the safety of young people by consistently implementing adult and child protection procedures. This must be informed by effective reflection on safequarding issues.

This should include, but is not limited to:

- a) Staff having an understanding of their roles and responsibilities in respect of safeguarding and protection.
- b) Effective training of staff in relation to safeguarding and protection is undertaken.
- c) Reflection and learning from the protection concerns.

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); and 'I am listened to and taken seriously if I have a concern about the protection and safety of myself, and others, with appropriate assessments and referrals made' (HSCS 3.22).

2. To promote the best possible care for children and young people, the service should ensure that a consistent trauma-informed approach is embedded across the service.

This should include, but is not limited to:

- a) Interventions that recognises young people's needs and development.
- b) Clearly recording young people's view in their personal plans and risk assessments.
- c) Ensuring personal planning is accessible to young people based on their needs and development.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am recognised as an expert in my own experience, needs, and wishes' (HSCS 1.9); and 'My care and support meets my needs and is right for me' (HSCS 1.19).

3. To ensure that children and young people's needs are met by the right number of staff, the provider should implement a system for assessing, reviewing, and recording the number of staff or staff hours, skills, and experience that are required throughout the day.

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).

- 4. To promote the best possible outcomes for children and young people, the service should ensure they complete a comprehensive development plan for the service which includes, but is not limited to:
- a) SMART goals, which are regularly reviewed and updated.
- b) How development and improvement activities are driving forward The Promise.
- c) Assessment of staff training and development.
- c) Self evaluation to help inform developments required in 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 assurance processes' (HSCS 4.19).

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 children's wellbeing, learning, and development, the provider should ensure that young people are supported to feel safe in their home. This should include, but is not limited to, an impact assessment and review when any concerns are raised how young people will be kept safe.

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 27 February 2023.

Action taken since then

Young people felt safe within Achnamara.

There had been no impact assessment or matching processes carried out for new young people transitioning into the service but this was due to the statutory responsibility of the service to support emergency arrivals. We heard that there is a working group to develop this process within North Ayrshire. Risks were well captured in personal plans and these were reviewed and updated regularly.

This area for improvement has been assessed as met.

Previous area for improvement 2

To support children's wellbeing, learning, and development, the provider should ensure that risk assessments are reflective of all risks presented by the young people. This should include, but is not limited to, an up-to-date risk assessment with all the relevant information.

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 27 February 2023.

Action taken since then

All risk assessments reviewed at inspection were up-to-date, reviewed regularly, and reflected all identified risks relating to each young person.

There could be improvement on the level of detail within risk assessments in how staff best respond to young people who were distressed or presenting with behaviours of concern. This could also better reflect young people's voices.

However, sufficient improvements have been made in this area.

This area for improvement has been assessed as 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?	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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