

Pollbreac Care Home Service

Inverness

Type of inspection:
Unannounced

Completed on:
26 March 2025

Service provided by:
Common Thread Ltd

Service provider number:
SP2005007437

Service no:
CS2018371501

About the service

Pollbreac is a residential house, set in the countryside. It is a short drive of about 15 minutes from Inverness. The house can accommodate up to three young people, and has a large garden. All young people had their own bedrooms and a shared bathroom, as well as the living areas in the house being spacious.

About the inspection

This was an unannounced inspection which took place on 25 and 26 March 2025 between the hours of 09:00 and 20:30. 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 two people using the service and two of their family/friends/representatives
- spoke with five staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

- There was good access to advocacy to support young people's views.
- Young people and staff had good relationships.
- Young people were supported to have fun and try new activities.
- Risk assessments needed to be more informative.
- Family time was encouraged and supported by staff.

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

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| 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

We evaluated this key question as good where several strengths impacted positively on outcomes for children and young people and clearly outweighed areas for improvement.

Young people were supported to be kept safe. One young person told us, "I feel safe living here." However, we found risk assessments lacked detail of the supports which were in place to promote safety and reduce risks. This would ensure there was a clear approach to keeping young people safe and reducing risk.

The service promoted the views of the young people it cared for. We found the service was pro-active in involving the advocacy service "Who Cares" to ensure young people's rights were upheld. This helped young people feel listened too and cared for.

The child and adult protection policy needed to provide more clarity. We found staff had up to date training for child protection, however, no adult protection training had been undertaken. The service had also not notified concerns to the Care Inspectorate within the relevant timescales. This would ensure that young people are kept safe from potential harm. **(See requirement 1.)**

There was a commitment to embed trauma informed practice in the service. Staff had undertaken regular training, and told us, "It really helps me understand the young people." We saw how there was also good learning through role modelling and team discussions to help enhance the knowledge and practice of staff.

Young people had good relationships with staff. Young people told us, "They are like my family." Staff understood the importance of building good relationships and supported opportunities for young people to spend time with them. This helped young people feel supported and cared for.

There was good opportunities for young people to have fun. We found there had been trips to concerts, holidays and daily activities. We were able to observe staff asking the views of young people for future holidays and trips. This supported young people to make lifelong memories.

The service needed to better evidence how it supported the health needs of young people. We found where there was a potential to impact on health, the supports which were in place needed to be clearly recorded. There had been some positive outcomes with reviewing medication for young people which supported them to live a healthy lifestyle.

Young people were supported to spend time with their family. We found staff understood the importance of family time, and the support the young people needed. There had been times where staff spent time with parents to repair relationships and work with them to help understand the needs of the young people. This supported lifelong family relationships.

There was individual support in place to promote learning. Some young people were at school, and staff supported them by providing lifts, and communicating regularly with teachers. Other young people were not in any education, and were encouraged to apply for jobs, or attend courses to help build and learn new skills. This supported young people to achieve and learn.

Young people were supported to stay in the service into adulthood. There was a continuing care policy in place, however, the aims and objectives of the service needed to be updated to reflect continuing care.

We found care plans to be written in a nurturing way and informative. Staff knew the young people well and this was reflective in the detail which was in the plan. Goals within the plan could have been more SMART (Specific, Measurable, Achievable, Realistic, Time-bound) to capture the progress young people had made.

Requirements

1. By 31 May 2025, the provider must ensure there is a clear child and adult protection policy in place.

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

- a) there is a clear procedure for reporting child and adult protection concerns
- b) both child and adult protection policies contain clear information.
- c) there is a clear procedure regarding allegations of misconduct with correct guidance referenced
- d) staff undertake adult protection training
- e) ensure notifications regarding protection concerns are made to The Care Inspectorate within the relevant 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 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).

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 development of staff practice and skills and promote their welfare, the provider should ensure that all staff have regular, high quality supervision and appropriate learning and development opportunities.

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).

This is to ensure that practice is consistent with Codes of Practice for Social Service Workers and Employers, which state that employers must 'Provide effective, regular supervision to social service workers to support them to develop and improve through reflective practice' (3.4).

This area for improvement was made on 14 February 2023.

Action taken since then

We found staff were receiving regular supervision. There had also been opportunities for regular training.

Therefore, this area for improvement has been met.

Previous area for improvement 2

To support effective scrutiny of the service, the provider should ensure that managers submit notifications of significant events to the Care Inspectorate in accordance with guidance.

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 is to ensure that practice is consistent with 'Records that all registered children and young people's care services must keep and guidance on notification reporting' (Care Inspectorate, October 2022).

This area for improvement was made on 14 February 2023.

Action taken since then

We found there had been one occasion where a notification regarding a protection concern had not been submitted in the relevant timescales we have included this in a requirement in the report. Other notifications had been submitted on time.

Therefore, this area for improvement has been met.

Previous area for improvement 3

To support young people and staff's recovery and learning after significant events, the provider should ensure that they have opportunities for guided reflection.

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

'I am helped to understand the impact and consequences of risky and unsafe behaviour and decisions' (HSCS 2.25); and

'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 area for improvement was made on 14 February 2023.

Action taken since then

Regular debriefs following incidents were completed and supported staff to reflect on their practice.

Therefore, this area for improvement has been 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

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| 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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