

Midlothian Residential Service for Young People Care Home Service

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Gorebridge
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Type of inspection: Unannounced
Inspection completed on: 1 September 2017

Service provided by:
Midlothian Council

Service provider number:
SP2003002602

Care service number:
CS2003011085

About the service

This service has been registered since 2002.

Midlothian Residential Services consist of three small residential homes in Penicuik, Dalkeith and Gorebridge. At the time of the inspection the house in Dalkeith had been closed for refurbishment but the service was also supporting two young people in a community flat. At the time of this inspection there was a total of 9 young people living in the two houses.

What people told us

We spoke with four young people using the service during the inspection. Their feedback was mixed and is referred to in the report. We did not speak to any family members during this inspection.

Self assessment

No self-assessment was required from the service this year.

From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of environment	not assessed
Quality of staffing	4 - Good
Quality of management and leadership	not assessed

What the service does well

From the evidence we looked at we found that the young people using this service were achieving some good outcomes. This included improved relationships with families, which supported a return home on more than one occasion. All of the young people we spoke with identified key positive relationships with staff and we were satisfied that this meant they were experiencing nurturing care within the services. We also heard that these relationships continued after placement as part of after care support. For some individual young people we found positive achievements in different aspects of their lives; education engagement and attainment, improved social and emotional development, and successful onward placements. Finally, partnership working with colleagues was supporting good outcomes for individual young people in relation to their health for example, support from CAMHS (Child and Adolescent Mental Health Services)..

We feel that the following strengths in relation to staffing and care and support are key in continuing to achieve good outcomes and to improve outcomes in other areas.

Relationships between staff and young people - we found good evidence that staff have been able to develop relationships with young people which have enabled them to provide a high level of emotional care and support. We heard of a 'relational' approach to working with young people from a number of staff and we heard from young people that they had close relationships with individual staff.

Working in partnership with others - with the significant challenges of providing care to young people with varied needs the need to work in partnership with others is obvious. Staff work hard to develop and sustain positive relationships with family members. This has supported transitions home and the work staff have done with families has been key in supporting good outcomes. The complex care needs of young people more recently has been a significant challenge for the staff; who have largely stepped up to this challenge. They have also made good use of the supports and guidance of other professionals to ensure that they provide the best support possible.

Support for staff - we found that most of the team felt well supported in their role. This support comes firstly from colleagues and includes opportunities for reflection at the end of shifts. We also heard that supervision had improved over the last year and team meetings had increased in regularity (although this had slipped more recently). Most of the staff felt they could go to management for support and advice if they needed to. We were also encouraged by recent efforts to improve access to professional development opportunities. It is hoped by staff that this reflects an increased ambition for those in the front line practitioner role and we will look at this again at the next inspection.

Commitment to young people - While there are some concerns about the morale of staff and the uncertainty associated with changes, we were encouraged by what we heard from staff about the role they perform. All were positive about the work they do and were articulate about meeting the needs of young people. Their frustrations about changes were almost always referred to the importance of relationships and the impact this has on young people. We found that most staff were hopeful for the future of the service and positive about the vision of the service. This has encouraged us that areas for improvement will be addressed and their full involvement in this will be both crucial and valuable.

What the service could do better

There was some evidence of potentially poor outcomes for young people. The impact of emergency placements has not been insignificant. We heard of times where young people were regularly exposed to the violent and risk taking behaviours of other young people. The environment was described to us as feeling unsafe at times. Equally, staff have felt that they can't spend the time they would like with young people; affecting the opportunities for further development of relationships but also to take the opportunity to be more active. We have identified the following as areas for improvement.

Beginnings and endings - decisions about young people moving in to the service and moving out of the service were not always being made in the best interests of all young people. While we found that planning subsequent to placement was rigorous and robust, 'matching' (fully considering the needs of the young person, young people already in placement and the knowledge and skills of staff) was not always evident. We heard consistently a view that endings for young people were often abrupt, expedited as a result of resource pressures. We also noted a concern about the locus of decision making; all front line practitioners felt that they were not involved and their views were not valued. Some decisions were not made as part of care planning meetings, there was no formal record of who was involved, and how the young person and their families were consulted.
(Recommendation 1)

Meeting the individual needs of young people - There is a considerable challenge in being a 'catch all' for young people needing to be looked after away from home in a residential establishment. Resources required should reflect all diverse individual needs and ensure that care for one young person does not overly affect the care of another. We heard from young people that opportunities to spend time with staff was reduced by the needs of other young people. Considering the importance of the relational model articulated by staff we felt this

has a potential to affect outcomes for young people. In particular we heard that opportunities to be more active were affected. The provider should reflect on evidence of best practice; consult with young people, family, Residential Child Care staff and others with an interest to consider whether this model is in the best interests of young people.

Involving staff - almost all staff did not feel that they have had a voice in changes affecting this service. This has contributed to a low morale over the past year. Similar to other findings, there was a view from staff that decisions affecting the service did not properly involve them and they did not feel their views were valued. This includes decisions about where individual staff were to be deployed. A number of decisions about services in the last year were viewed as 'top down', reactive and with little consultation with staff. Staff development days have not been as regular as previously and the agenda appears to have been management directed. We were encouraged that staff have a sense of the vision for residential services in Midlothian and want to buy in to the necessary cultural and structural changes but they don't feel involved. We would encourage the service to consider these findings and make plans to ensure that staff are systematically involved in decisions which affect the service. Time also needs to be identified to agree with staff the aims and objectives of the service, how this will be achieved and their part in it. (**Recommendation 2**)

One of the decisions made in recent months was to discontinue the use of a log book and reduce the recording burden on staff. We welcomed the latter objective of this change but shared the concerns of some staff about systems not being robust enough to ensure all important information is recorded and communicated effectively across the team. The provider should ensure that communication systems are fit for purpose and the service meets its statutory obligations with regards to the records it keeps.

(**Requirement 1**)

Requirements

Number of requirements: 1

1. To ensure that the safety and well being of young people is properly monitored and maintained, effective recording and communication systems need to be in place. The provider must reinstate the log book as required and ensure that this and other communication systems are fit for purpose.

This is in order to comply with SSI 1996/3256 Regulation 12

Timescale for implementation: within four weeks of receipt of this report

Recommendations

Number of recommendations: 2

1. To ensure that young people receive the care they need; decisions about moving in and out of the service should involve young people, their family and others normally involved in care planning. These decisions should also consider the best interests of all young people.

National Care Standards, Standards 4 and 17, Support Arrangements and Moving On

2. To improve the involvement of young people, their families and staff in the development of the service, the provider should ensure they arrange an opportunity for all to be involved in any review of the service and make SMART plans for implementing any agreed developments or improvements.

National Care Standards, Standard 7, Management and Staffing

Complaints

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

Inspection and grading history

Date	Type	Gradings
28 Oct 2016	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing Not assessed Management and leadership 5 - Very good
23 Nov 2015	Unannounced	Care and support 5 - Very good Environment 5 - Very good Staffing 5 - Very good Management and leadership 5 - Very good
28 Oct 2014	Unannounced	Care and support 5 - Very good Environment 5 - Very good Staffing 5 - Very good Management and leadership 4 - Good
7 Mar 2014	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and leadership 3 - Adequate

Date	Type	Gradings	
23 Sep 2013	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	3 - Adequate
26 Feb 2013	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	4 - Good
		Management and leadership	3 - Adequate
17 Aug 2012	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	4 - Good
		Management and leadership	2 - Weak
12 Jan 2012	Unannounced	Care and support	5 - Very good
		Environment	3 - Adequate
		Staffing	4 - Good
		Management and leadership	4 - Good
21 Mar 2012	Re-grade	Care and support	Not assessed
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	3 - Adequate
5 Mar 2012	Re-grade	Care and support	Not assessed
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	1 - Unsatisfactory
7 Jun 2011	Unannounced	Care and support	5 - Very good
		Environment	3 - Adequate
		Staffing	4 - Good
		Management and leadership	4 - Good
21 Dec 2010	Unannounced	Care and support	5 - Very good
		Environment	2 - Weak
		Staffing	Not assessed
		Management and leadership	Not assessed

Date	Type	Gradings	
18 May 2010	Announced	Care and support Environment Staffing Management and leadership	5 - Very good 4 - Good Not assessed Not assessed
10 Feb 2010	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good 4 - Good Not assessed Not assessed
16 Sep 2009	Announced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good
31 Mar 2009	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
11 Feb 2009	Announced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 2 - Weak 2 - Weak

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