

Spark of Genius Woodside Care Home Service

Woodside Farm
Dalrymple Road
Coylton
Ayr
KA6 6HQ

Telephone: 0141 587 2710

Type of inspection: Unannounced
Inspection completed on: 2 August 2016

Service provided by:
Spark of Genius (Training) Ltd

Service provider number:
SP2006008009

Care service number:
CS2015342800

About the service

The service has been registered with the Care Inspectorate on 26 January 2016 and is registered to provide residential care for up to five young people.

The service is situated in a rural location approximately 6 miles from the town of Ayr.

The accommodation consists of five bedrooms, shared kitchen, bathroom and laundry facilities. There are several unused outbuildings and a large garden area. The service aims to 'offer therapeutic care placements for children and young people with a range of needs'.

What people told us

There were four young people in the service on the day of the inspection. Some of the young people had recently arrived at Woodside. From our observations staff interacted positively with young people and were attentive to their needs; providing appropriate guidance and boundaries. We were encouraged by the way staff engaged young people, de-escalated situations and responded to presenting risks and challenges.

The young people we spoke with stated they were happy in the service and felt safe.

Social workers told us of the good relationships staff had quickly built with young people and how this had helped settle young people during the initial days at the service. One social worker told us that this approach had led to 'massive improvements' compared to previous situations.

Parents we spoke with were very happy with the positive impact the care provided at Woodside had on their children.

Feedback in the care standards questionnaires indicated that staff were happy overall working within the service, however there were identified areas for improvement. We have reported on these in Quality of Staffing within the report.

Self assessment

The Care Inspectorate received a fully completed self-assessment from the manager.

The self assessment document identified what the manager thought the service did well and gave examples of improvements in meeting young people's needs and staff practice areas.

The self-assessment clearly identified some key areas that the manager believed could be improved and suggested how the service intended to do this.

From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of environment	4 - Good
Quality of staffing	4 - Good
Quality of management and leadership	4 - Good

Quality of care and support

Findings from the inspection

The service had experienced a difficult time shortly after opening with several changes of staff and managers. This had an unsettling impact on the young people and their care. In response, the service provider had reviewed and restructured the staff team and appointed a new manager. Young people, parents, social workers and staff noted a clear improvement in the service following these positive changes. Social workers commented that staff had become more settled, which subsequently had a positive impact on the young people.

Staff demonstrated a good understanding of the young people's needs and preferences.

The aims of the care plans for young people were clearly linked to the wellbeing indicators - safe, healthy, achieving, nurtured, active, respected, responsible, and included - of Getting it right for every child (GIRFEC) - Scotland's national approach to improving outcomes and wellbeing for children and young people. Young people benefited from sharing in the planning of goals to achieve and timescales to work toward. This process engaged young people in their care plan and provided structure and daily routine. There was evidence of young people achieving in their goals for education and in developing skills for independent living, for example.

Young people's views were sought in relation to aspects of their care; for example meal choice and activities. Healthy dietary choices were promoted through a very good range of fresh fruit and vegetables with each meal. Young people's health was further promoted through staff enabling access to physical activities and young people told us of their participation in community activities such as swimming, skateboarding, basketball and trampoline disco's.

Parents we spoke with had positive views of the service. One parent told us they were 'delighted' with staff and felt very reassured through regular, clear communications from staff updating them on their child's progress.

Staff had sought advice and guidance from Health Service professionals to assist in understanding the particular needs of some young people and the group relationships within the home. The outcome of this consultation was not available during our visit and we will review this during the next inspection.

During the inspection, we noted that medication sheets had not been completed accurately and procedures for administering medication not followed on two occasions. We acknowledge that action was taken in relation to this issue however the service manager and external manager should continue to monitor this issue and ensure accurate medication records are maintained. We have made a recommendation in relation to this matter. See recommendation 1 of this Quality Theme.

In the 2016/17 inspecting year the Care Inspectorate is scoping child sexual exploitation (CSE) practice in children and young people's services. This is part of our contribution to 'Scotland's National Action Plan to tackle Child Sexual Exploitation' and focusses on frameworks of CSE practice, staff understanding and care planning outcomes.

The service's child protection policy included a section relating to child sexual exploitation (CSE). A comprehensive child protection training plan for all staff members was in place and most staff had attended this.

Managers and staff members spoken with demonstrated a good level of knowledge in regard to identifying the risk and vulnerability indicators of CSE and evidenced a clear understanding of the actions required of them in order to protect young people from potential or further harm. There was clear evidence of staff effectively implementing the procedure to protect young people in their care.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. Spark of Genius Limited should ensure that all staff are fully conversant with the medical administration policy/procedure and that accurate medication records are maintained at all times.

National care standards for care homes for children and young people; 12: Keeping well - medication.

Grade: 4 - good

Quality of environment

Findings from the inspection

Young people had the opportunity to develop their own personal style and create a homely feel to their living space. The bedrooms were comfortably furnished and some young people had decorated their rooms with pictures and personal items. Each young person had a key to their room thus ensuring their privacy and promoting ownership of their living space.

All staff were trained in a recognised approach to managing challenging behaviour. Reviews were conducted of any incident where young people had required to be physically restrained to identify with young people and staff what could be done differently to avoid such situations. Staff told us of the benefits of this practice and we noted a marked decrease in the numbers of these incidents.

Young people we spoke with confirmed they had learned alternative methods to cope with their emotions as a result of these discussions. This encouraged young people to feel safe, protected by staff, and maintained the positive relationships between them.

The environment was maintained to a good standard and the staff conducted regular safety checks on the environment and equipment to maintain young people and staff's safety.

Good attention to detail was given to vehicle safety and the service cars were regularly checked. Any repairs or faults identified were addressed in aiming to ensure the continuing safety of staff and young people whilst travelling. This was particularly important given the rural location of the service and staff transporting of young people to education and community activities.

Staffing levels were maintained at the required number to provide safety and security for young people. Where the manager had identified additional need, staffing levels were increased and this had been beneficial in maintaining an effective level of care. The service provider should continue to monitor staffing levels to ensure the needs of the young people using the service are met at all times.

Internet access was available to young people in accordance with individual risk assessments and staff were aware of the young people's individual preferences with regard to this activity.

To enable young people to maintain positive relationships that are important to them the staff and manager should continue to monitor internet use and ensure safe internet practices are employed.

The manager had identified several options for the use of the service out buildings. The development of these spaces should be progressed in consultation with the young people to provide additional leisure and recreational facilities and enhance the quality of life within the service

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 - good

Quality of staffing

Findings from the inspection

During our discussions with staff we heard of the challenges that they had experienced shortly after the service opening, and of the impact these had on staff morale. Staff we spoke with described the situation being considerably different since the arrival of the new manager. The service was described as now being settled with a consistent approach by the manager and staff. Staff morale had subsequently improved significantly. To emphasise this point one staff member stated 'I feel happy coming to work now'.

Staff were qualified to HNC level and SVQ 3 or working toward these qualifications. The service recruitment process includes reference checks from previous employers and background checks through the PVG scheme. We inspected recruitment records and found that references were sought for staff applying to take up care positions and information sought on relevant skills and experience. These processes aimed to ensure that staff were suitably experienced, and had the ability to develop the necessary skills to effectively support and care for young people.

Staff undertake an induction period following appointment and complete this with the support of an allocated mentor; an experienced member of staff. This induction period includes completing a range of mandatory training in areas such as Child Protection, Health and Safety and Self harm Awareness. This induction ensured that staff had the basic knowledge required to support the safety and well being of the young people cared for.

Staff evidenced a good knowledge of the young people's care plans and risk management arrangements. We observed the interaction of staff and young people and noted how staff showed good understanding of the young people's backgrounds, needs and experiences in offering advice and guidance.

We noted that the self assessment identified developing staff's knowledge of service policies at team meetings as an action for area for improvement. Some staff we spoke with were continuing to develop their knowledge of the National Care Standards and the manager should also consider discussion of these at team meetings or explore other methods to develop greater knowledge of these. Developing knowledge in these subjects will enhance staff's understanding of skills and values in aiming to provide excellent levels of care for young people to achieve positive outcomes. We have made a recommendation in relation to this matter. See recommendation 1 of this Quality Theme.

The manager recognised that the supervision of staff had not been occurring as regular as the service policy states. We understand that there have been challenges in maintaining a consistent staff team from the opening of the service and that this had impacted on staff supervision. However, the service provider should continue to ensure that staff are provided with regular supervision and appraisal as per the organisations policy. We have made a recommendation in relation to this matter.

See recommendation 2 of this Quality Theme.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 2

1. Spark of Genius should develop a system which, through staff supervision and appraisal, evaluates the outcomes of training for staff practice.

National Care Standards, care homes for children and young people, Standard 7: Management and staffing

2. Spark of Genius should ensure that staff receive supervision in line with the services policies and procedures.

National Care Standards, care homes for children and young people, standard 7: management and staffing.

Grade: 4 - good

Quality of management and leadership

Findings from the inspection

As stated previously we found that staff were appreciative of the changes that the current manager had brought to the service. Young people, parents and social workers were similarly positive about these developments.

One notable strength was the leadership provided by the manager. Staff commented on how approachable the manager was and the stability introduced by their consistent approach and knowledge.

Parents were impressed with the positive changes within the service and one commented that they were 'delighted' with the manager and staff.

The manager and assistant manager appear to be forming a good working relationship and achieving a consistency with staff that is reported to have not been present previously. As a result of this we were informed that staff felt more settled and confident.

Quality improvement processes included a quarterly audit of the service. We inspected the records of these audits and noted very good observations of areas for development and improvement. Actions had been identified for the manager and staff to complete. However, we recognise that the current manager is relatively new to the post and that there has been limited time to develop and make significant progress in relation to this quality theme.

In discussion with the manager and external manager we heard that the service continued to work toward completing the service action plan and that although progress was being made there remained several areas to develop. We saw evidence of the progress being made and learned of the areas under development. Following the receipt of evaluation questionnaires the service should work to use the information gathered from staff, young people, parents and social workers to implement a service development plan. We are satisfied that this work continues to be progressed through the efforts of the manager and staff however we will continue to monitor this matter at the next inspection

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 - good

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

Previous requirements

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

Previous recommendations

Complaints

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

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

This service does not have any prior inspection history or grades.

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