

# Care service inspection report

Full inspection

## Calderstone Care Home Service

Drumbank House  
610 Old Dalkeith Road  
Edinburgh



HAPPY TO TRANSLATE

Service provided by: Spark of Genius (Training) Ltd

Service provider number: SP2006008009

Care service number: CS2014332161

Inspection Visit Type: Unannounced

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and set out improvements that must be made. We also investigate complaints about care services and take action when things aren't good enough.

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## Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

### We gave the service these grades

Quality of care and support	5	Very Good
Quality of environment	5	Very Good
Quality of staffing	4	Good
Quality of management and leadership	5	Very Good

### What the service does well

The staff are focussed on the needs of the children and young people in their care.

Senior staff, including external managers, provide good informal support to all staff.

The service is committed to continuous improvement.

### What the service could do better

Retention of staff and the establishment of the 'team'.

Full implementation of the supervision and appraisal policy.

Consultation and agreement with staff on scheduling in the best interests of service users.

## **What the service has done since the last inspection**

There has been a significant turnover of staff over the last 12 months. A core group of staff remain and the service has been well supported by senior staff through the recruitment and induction of new staff and progress to a full team.

The last six months have been particularly challenging but the service has continued to look for improvement opportunities. During this visit we found that the high standard of care identified at the last inspection has been largely maintained but the loss of staff has had an impact on the young people.

## **Conclusion**

With the probability of further changes the service will need to work hard to ensure that the young people continue to receive the best care they can and achieve good outcomes. The organisational structures appear to be firmly in place but the development of a team culture is a work in progress. This inspection report recognises the strengths which have been sustained and areas for further improvement.

# 1 About the service we inspected

This service was registered by the Care Inspectorate on 9 February 2015.

Calderstone is operated by Spark of Genius Limited. The service provides close support and care aimed to help vulnerable young people who for a variety of reasons are unable to reside with their families.

The service is registered to provide care to a maximum of four children and young people between the ages of ten and eighteen years (the maximum age gap between the youngest and oldest will be 6 years).

Calderstone is a large house situated in extensive gardens on the outskirts of the city of Edinburgh. The home has good transport links into the city and has access to local services by bus and car.

The overall aim for Spark of Genius is to provide care which:

- Helps a young person to make sense of and develop coping strategies to deal with past experiences.
- Provides young people with positive stimulating and enjoyable experiences.
- Helps young people (and wherever possible their families/networks) to plan towards and achieve a positive and successful future.

## Recommendations

A recommendation is a statement that sets out actions that a care service provider should take to improve or develop the quality of the service, but where failure to do so would not directly result in enforcement.

Recommendations are based on the National Care Standards, SSSC codes of practice and recognised good practice. These must also be outcomes-based and if the provider meets the recommendation this would improve outcomes for people receiving the service.

## Requirements

A requirement is a statement which sets out what a care service must do to improve outcomes for people who use services and must be linked to a breach in the Public Services Reform (Scotland) Act 2010 (the "Act"), its regulations, or orders made under the Act, or a condition of registration. Requirements are enforceable in law.

We make requirements where (a) there is evidence of poor outcomes for people using the service or (b) there is the potential for poor outcomes which would affect people's health, safety or welfare.

Based on the findings of this inspection this service has been awarded the following grades:

**Quality of care and support - Grade 5 - Very Good**

**Quality of environment - Grade 5 - Very Good**

**Quality of staffing - Grade 4 - Good**

**Quality of management and leadership - Grade 5 - Very Good**

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website

www.careinspectorate.com or by calling us on 0345 600 9527 or visiting one of our offices.

## 2 How we inspected this service

### The level of inspection we carried out

In this service we carried out a high intensity inspection. We carry out these inspections where we have assessed the service may need a more intense inspection.

### What we did during the inspection

We wrote this report following an unannounced inspection that took place on 25th and 26th April 2016. We gave feedback to the manager and the area manager on the 3rd of May 2016. The service also sent us additional information following the inspection visit.

We looked at various records including: care plans and young people's files, participation materials, medication records, meeting minutes, incident records. We also sampled a variety of policies and procedures.

We met four young people during the inspection. We also had access to feedback the service had gathered themselves from young people and other stakeholders.

During the inspection we spoke with ten members of staff including the manager and the external manager.

We did not get any direct feedback from family and at the time of writing we had no feedback from other professionals.

### Grading the service against quality themes and statements

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

## **Inspection Focus Areas (IFAs)**

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

## **Fire safety issues**

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at [www.firescotland.gov.uk](http://www.firescotland.gov.uk)

## **The annual return**

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

**Annual Return Received:** Yes - Electronic

## **Comments on Self Assessment**

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

No self assessment had been completed since the last inspection.

## **Taking the views of people using the care service into account**

We spoke with one young person and met all young people currently living at Calderstone. We also had access to feedback young people had given to the service and other documentation presenting their views.

## **Taking carers' views into account**

We did not speak to any family members or carers during this inspection although we had access to feedback provided to the service and other documentation reflecting their views.

### 3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

#### Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 5 - Very Good

##### Statement 2

“We enable service users to make individual choices and ensure that every service user can be supported to achieve their potential.”

##### Service strengths

This statement was examined after an examination of: the previous inspection report, service user surveys, other agencies feedback and any notifications and complaints we received.

The service was performing to a very good standard for this statement. The following strengths were evidenced on the inspection and we could also see that outcomes for young people using the service were good. People using the service feel included, respected and listened to.

The young people have good relationships with staff. We observed a busy environment where young people responded positively to staff and staff were comfortable displaying affection and in challenging negative behaviours.

From observing the routines of the day and in examining case files there was extensive evidence of young people making a range of choices and plans made to support young people to do their best. There was evidence of very good partnership working with education staff to improve engagement at school - all of the young people reported improved outcomes in this area despite recent dips in attendance. We also saw significant efforts made in collaboration with social work staff to help improve relationships with family and we could see evidence of improved outcomes in this area also.

Day-to-day planning and individual care planning is very good and benefits from the overview of experienced staff. From case files we could see the agreement and development of plans for individual young people, how these related to the broader care plan and how young people contributed to the reviewing and planning processes.

### Areas for improvement

The records we keep for young people need to provide them with clear information both as a contemporary accessible record and as part of a coherent story of their care experience should they want to access them in the future. In this context we would highlight the following issues with recordings:

- The records of admissions from the last year did not always record the views of young people, without any explanation for this omission.
- Linkage between the child's plan and the service care plans could be more explicit.
- the agreement of young people was often evidenced by their signature on relevant documents (e.g. risk assessments) but there was inconsistent practice across files.

There was a general agreement across all staff that residents meetings were viewed as a positive mechanism for getting the views of young people, encouraging involvement and building confidence. We heard of plans for further effort in this area and accepted that formal meetings may not be the best route forward. We will look at this at the next inspection.

### Grade

5 - Very Good

**Number of requirements - 0**

**Number of recommendations - 0**

### Statement 3

“We ensure that service users' health and wellbeing needs are met.”

#### Service strengths

This statement was examined after an examination of: the previous inspection report, service user questionnaires, other agencies feedback and any notifications and complaints we received.

The service was performing to a very good standard for this statement. The following strengths were evidenced on the inspection.

All of the staff spoke confidently about their role in supporting the health and wellbeing of the young people. They articulated a healthy recognition that they required the support of other professionals to meet a range of health needs and we saw evidence of collaboration with other agencies in the case files we examined.

This service has maintained a high level of care and support to the young people through a period of change. They have also been able to make further improvements, including the further development of relationships with other health professionals and the improvement of recording and management of medication in collaboration with local services.

The SHANARRI wellbeing indicators permeate the care planning processes and ensure that the work of the staff is generally focussed on improvement for young people across the indicators. This is best supported by the existence of nurturing relationships with those people caring for the young people and we were able to observe and hear about these relationships at Calderstone.

We were confident from examining case files and through further discussion with staff that where specific health issues were identified prior to admission great efforts were made to ensure that the service had all of the information it required. The service ensured this by being proactive in contacting other professionals who may have additional information or advice.

### Areas for improvement

We would note that the turnover of staff had been difficult for young people and there was some recognition of the loss experienced by individual young people when specific members of staff moved on. We also heard of the on-going concern for one of the young people that others would be moving on. We were satisfied that the service had worked hard to reassure young people about this latter issue whilst also being honest about the reality of staff moving on. The service should reflect on the experience over the last six months and consider whether improvements are required for the management of similar endings. We would highlight the need to reflect on how these are communicated to both staff and young people.

### Grade

5 - Very Good

**Number of requirements - 0**

**Number of recommendations - 0**

## Quality Theme 2: Quality of Environment

Grade awarded for this theme: 5 - Very Good

### Statement 2

“We make sure that the environment is safe and service users are protected.”

#### Service strengths

This statement was examined after an examination of: the previous inspection report, service user questionnaires, other agencies feedback and any notifications and complaints we received.

On balance the service was performing to a very good standard for this statement. Whilst there were specific incidents of concern since the last inspection we heard of improved outcomes for young people in relation to their safety and risk taking behaviours both within the house and in the community. Feedback from young people and others has consistently reported a feeling of safety in the service.

The service has well established systems for keeping service users safe and protected. These include: a rigorous matching process for young people referred to the service, detailed risk assessments for each individual young person and individual activities, health and safety procedures for the management of a safe living environment, monitoring by external management and regular review of young people as appropriate in partnership with other professionals.

We would reiterate the importance of staff relationships with young people in developing the sense of safety. In addition to this the knowledge and experience of staff is also key. The appointment of new staff with substantial experience was reassuring and the staff we spoke with were confident in their role and focussed on meeting the needs of young people. This included keeping them safe and we saw evidence of staff effectively working with young people when they were distressed to minimise harm and protect the safety of others.

Training for staff is extensive and includes child protection, first aid, health and safety and food hygiene. All staff complete physical intervention training and

all are encouraged to attend refresher training over and above accreditation requirements. We also heard of a specific focus on child sexual exploitation and efforts made to improve the knowledge and understanding of staff.

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) but they also have separate guidance for staff on CSE. The service has a coherent training plan for all staff to improve their knowledge of CSE and understanding of company policy and procedure.

The managers and staff members spoken with demonstrated some knowledge in regard to identifying the risk and vulnerability indicators of CSE and evidenced an understanding of the actions required of them in order to protect young people from potential or further harm.

Case files evidenced that young people at risk had been appropriately identified. This included clear communication with local authorities about the assessed risks and agreements about managing these. These plans were regularly reviewed in partnership with other agencies.

There have been incidents over the last year where the safety of young people has been compromised by the actions of staff. We considered the evidence and concluded that this had been dealt with quickly and effective action taken. Following these incidents, and the subsequent turnover of staff, the support of management has been very good.

Evidence of learning from incidents through debriefing and in supervision reflected a general commitment to on-going improvement in this service. Following incidents new information was learned used to both update risk management plans for individual young people and suggest development areas for individual staff members.

## Areas for improvement

The scheduling of staff is very important to ensure the right level of support for young people. Some felt that the long shifts were a potential issue of risk, especially where staff stayed on beyond the end of an already long shift when young people were distressed. Some staff reported being tired and questioning whether this affected safety. Others did not share this concern. We would ask the provider to reflect further on these contradictory views on staff.

Continuity of staff is also an issue which affects the feeling of predictability and safety within residential child care services. (See areas for improvement at Statement 1.3)

## Grade

5 - Very Good

**Number of requirements - 0**

**Number of recommendations - 0**

### Statement 3

“The environment allows service users to have as positive a quality of life as possible.”

#### Service strengths

This statement was examined after an examination of: the previous inspection report, service user questionnaires, other agencies feedback and any notifications and complaints we received.

The service was performing to a very good standard for this statement. Young people using this service benefitted from a well maintained and spacious environment. The privacy of young people is respected and they have all been allowed to choose how this space looks. Calderstone offers an environment where young people can be active, develop skills and learn.

Staff reported the environment as a real strength and we could see that this enabled the young people to be active and healthy. The environment itself is maintained to a high standard, there are sports facilities within the grounds and the house has gaming and computer access for all young people. There are large communal areas and spaces where young people can be on their own, as well as their own private bedrooms. Damages are dealt with promptly to maintain the environment.

Access to local facilities is very good and the location of the service gives direct access to the city and also to the Pentland Hills. Young people have good opportunities in their leisure time and also have space for doing homework and studying.

Contact with family and friends is important for the wellbeing of the young people. The service works hard in promoting contact with friends and family and they do this in collaboration with families and other professionals. This is a challenge for some young people who are far from their home communities.

#### Areas for improvement

No areas for development were identified during the visit.

**Grade**

5 - Very Good

**Number of requirements - 0**

**Number of recommendations - 0**

## Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 4 - Good

### Statement 2

"We are confident that our staff have been recruited, and inducted, in a safe and robust manner to protect service users and staff."

#### Service strengths

This statement was examined after an examination of: the previous inspection report, service user questionnaires, and any notifications and complaints we received.

The service continues to perform to a very good standard for this statement but should now make sure that the retention of staff is seen as a priority. The following strengths were evidenced on the inspection and we could also see that outcomes for young people using the service were good. Young people feel that staff are able to care for them and keep them safe.

The provider has robust policies and procedures in place and we saw evidence of these being effective in recruiting staff with the right skills, knowledge and experience for working in this service. This ensures that young people are looked after by staff who are able to provide a safe nurturing environment.

We heard from staff recruited recently of their determination to work at this service and the advice given by the provider to gain more experience following previously unsuccessful applications. We felt that this reflected well on the providers ability to attract staff and to recruit people with a commitment to the service. We also saw evidence of the consistent involvement of service users in the recruitment of staff.

The induction process has been further developed over the last year to include a process specifically for managers. All staff who had been recruited recently described a detailed induction process including the interesting use of 'quizzes' to test knowledge.

We heard of a concerted effort to recruit a full team at Calderstone and they were close to achieving this. We will look at the outcomes of this effort at the next inspection.

### Areas for improvement

The regularity of formal supervision was set at lengthy intervals and there was some evidence that this wasn't being met. For new staff this appeared too lengthy to offer the regular formal overview of progress. We accepted that informal processes were in place and discussions where appropriate were recorded. However we would ask the service to review the policy in consultation with all staff and consider whether more regular supervision would be of benefit. We would also add that a number of supervision records were not signed by the supervisee.

### Grade

5 - Very Good

**Number of requirements - 0**

**Number of recommendations - 0**

## Statement 4

“We ensure that everyone working in the service has an ethos of respect towards service users and each other.”

### Service strengths

This statement was examined after an examination of: the previous inspection report, service user questionnaires, and any notifications and complaints we received. We also had access to feedback from others gathered by the service.

On balance, and on further consideration of the evidence provided at the inspection we evaluated that the service was performing to a good standard for this statement.

The following strengths were evidenced on the inspection and we found that, on the whole, young people felt that they were treated with respect.

The staff we spoke with were clear about the commitment they have to the service and achieving good outcomes for the young people living there. They spoke of young people with warmth and fondness which was also reflected in discussions between staff and in most of the records we viewed.

Participation and involvement of young people as outlined at statement 1.2 also evidences the respect given to young people by staff working in the service.

As already stated, during the inspection visit we observed relationships between staff and young people as being positive and respectful. The staff we met during the inspection were child focussed and committed to their role.

The vision and aims, policies and procedures, recording systems, job descriptions and training provided to all staff all variously guide and direct staff on what is expected of them in how they relate to young people.

## Areas for improvement

From examining case files we found that there were occasions where staff used judgemental language with regards to young people. We noted that this had been previously identified through an auditing process but this was clearly an issue which required further action. The provider should consider how it is reassured that actions identified at auditing have been taken forward. The service should also consider the guidance it gives to staff on recording in case files. We were satisfied that senior staff were aware of this issue and the need to address it. We will look at this at the next inspection.

We heard of plans for a staff development event and we would suggest that this is a crucial opportunity for the service to look at the development of the new team. We heard some contradictory evidence from staff about the morale of the whole team and the relationships between staff. There was a general view that team relationships had improved but there was a split between those who felt that it was in need of further improvement. The service should consult with all staff on relationships and morale across the team and consider what developments are needed.

## Grade

4 - Good

**Number of requirements - 0**

**Number of recommendations - 0**

## Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 5 - Very Good

### Statement 2

“We involve our workforce in determining the direction and future objectives of the service.”

#### Service strengths

This statement was examined after an examination of: the previous inspection report, service user questionnaires, other agencies feedback and any notifications and complaints we received.

The service was performing to a very good standard for this statement.

The service has some systems and processes where staff have the opportunity to raise their views about the direction and objectives of the service, including: team meetings, supervision and external management visits. The latter includes quality assurance visits from which an action plan is agreed.

Informally, senior management are available on a very regular basis and all staff know their external manager and how they can contact her. Equally all staff have a direct line to the chief executive should they have any concerns.

The staff survey is well established and this offers staff to provide direct feedback to the provider on a number of issues including job satisfaction and training.

While there was inconsistent feedback from staff about the influence they can have we were satisfied that they had all used the formal and informal systems to have their voice heard.

#### Areas for improvement

Team development should be a priority for the service. The service should consult with staff as suggested at Statement 3.4 and consider how it best

supports them in the further improvement of the service. This effort should be oriented in the best interests of children but consideration should be given to the views of staff particularly on scheduling and formal supervision. We will look at this statement again at the next inspection to see what progress has been made.

### **Grade**

5 - Very Good

**Number of requirements - 0**

**Number of recommendations - 0**

## Statement 4

“We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide”

### Service strengths

This statement was examined after an examination of: the previous inspection report, service user survey, other agencies feedback and any notifications and complaints we received.

The service was performing to a very good standard for this statement. The following strengths were evidenced on the inspection and we could also see that, with regards to the involvement of service users they continued to feel included, respected and listened to.

During the inspection visit we were provided with good evidence of systems and processes being used which ensure that the service involves others in assessing the quality of service they provide. These systems and process include:

- \* surveys for young people and staff
- \* team meetings
- \* care review meetings
- \* external management visits/audits
- \* supervision of staff
- \* care inspection processes - annual returns, notifications, inspection visits

Some of this evidence (surveys for young people, notifications to care inspectorate and external managers audits) had been further developed since the last inspection visit and we also heard of plans for further improvement with regards to the implementation of appraisal of all staff and the use of development days.

We saw specific evidence of the involvement of stakeholders in other service developments e.g. the service had sought the advice from one local authority on the development of its child protection policy.

With a significant turnover of staff in a short period, the last few months have been focussed on maintaining the standard of care provided to young people. Audits were not undertaken and development plans were not progressed as they should have been. We accept the need to prioritise care at this time but we would expect to see evidence of progress against plans at the next inspection.

### **Areas for improvement**

The self assessment was not completed for this inspection. The self assessment should be viewed as an important part of the inspection process and we would encourage the service to consider how it involves young people, staff and others in preparing this for the next inspection.

The overall monitoring of incidents could be improved by keeping an anonymous log of all incidents which can give management an instant overview.

See also areas for improvement at Statement 4.2

**Grade**

5 - Very Good

**Number of requirements - 0**

**Number of recommendations - 0**

## 4 What the service has done to meet any requirements we made at our last inspection

**Previous requirements**

There are no outstanding requirements.

## 5 What the service has done to meet any recommendations we made at our last inspection

**Previous recommendations**

There are no outstanding recommendations.

## 6 Complaints

A complaint was made in January but no elements of the complaint were upheld. However the complaint report did make a recommendation with regards to medication. The service had taken action to rectify this at the inspection visit.

## 7 Enforcements

We have taken no enforcement action against this care service since the last inspection.

## 8 Additional Information

There is no additional information.

## 9 Inspection and grading history

Date	Type	Gradings								
29 Jul 2015	Unannounced	<table> <tr> <td>Care and support</td> <td>5 - Very Good</td> </tr> <tr> <td>Environment</td> <td>5 - Very Good</td> </tr> <tr> <td>Staffing</td> <td>5 - Very Good</td> </tr> <tr> <td>Management and Leadership</td> <td>5 - Very Good</td> </tr> </table>	Care and support	5 - Very Good	Environment	5 - Very Good	Staffing	5 - Very Good	Management and Leadership	5 - Very Good
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