

# Rendall Road Care Home Service

Rendall Road  
Kirkwall  
KW15 1ZS

Telephone: 01856 873 135

**Type of inspection:**  
Unannounced

**Completed on:**  
20 October 2023

**Service provided by:**  
Orkney Islands Council

**Service provider number:**  
SP2003001951

**Service no:**  
CS2003009091

## About the service

Rendall Road residential services are situated over two properties within Orkney. The first is a new purpose-built, six bedroom detached property and is registered to accommodate four young people. The second property is a terraced house, situated in St. Margaret's Hope and is registered to accommodate two young people.

## About the inspection

This was a short notice inspection which took place between 5 - 6 October, during the hours of 9.15am - 7.00pm. 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 four young people using the service.
- Spoke with nine member of staff and management.
- Observed practice and daily life.
- Reviewed documents.
- Spoke with visiting professionals.

**Key messages**

- Some risk assessment was not fully considered.
- Effective work with partner agencies supported positive outcomes for young people.
- There were outstanding requirements and area for improvement from the previous inspection. Where necessary, we have repeated those at this inspection.
- Home cooked foods provided a nurturing environment for young people.
- External managers were required to improve oversight of the service to quality assure the experiences and outcomes for young people.
- Development planning and self evaluation remain a priority for improvement.

**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
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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?

### 3 - Adequate

We made an evaluation of **adequate** for this key question, where strengths only just outweighed weaknesses.

Levels of support during day time hours was sufficient to meet the needs of young people. However, the absence of waking nightshift carers, compromised their safety and wellbeing. Leaders must enable all young people's care and support to be tailored to their needs, including the management of presenting and known potential risk behaviours. We were pleased, that during this inspection, leaders were responsive to review of risk assessment, resulting in the decision that waking night shift carers would be put in place immediately. We were aware however of the challenges to resourcing this, but advised that the manager must have the full support of the local authority in consistently achieving this outcome (**see requirement 1**).

A range of other safeguards were well evidenced. Throughcare support ensured that young people's views informed decisions about their future and regular independent review of care plans, assured opportunities for young people to flourish, through education, college and work experience. With a clear focus on raising attainment, young people's interests and aspirations were at the forefront of their experiences.

To further promote the safety and wellbeing of young people, carers must receive training in relation to their role. At the previous inspection, Promoting Positive Behaviour, was already identified as an appropriate framework by the local authority. They accepted that this provided recognised and consistent approaches to support effective team work and enable positive contributions from young people. The provider must therefore ensure that all carers receive certificated training in positive behaviour strategies. We have repeated the requirement made at the last inspection (**see requirement 1**).

A stable group of carers provided consistent and compassionate supports, through familiar and anticipated practices. This helped young people to know what to expect from those around them. The impact of trusting relationships, meant that there was an improved ability for young people to manage their emotions and behaviours. Carers were passionate in advocating for those in their care, at school, in the community and through planning for their future. In almost all instances, thoughtful approaches ensured young people felt loved and well cared for, by carers who were keenly aware of their needs. However, young people could have been more fully supported when making decisions which had a significant impact on their future. This would have reduced the possibility of experiencing poor outcomes (**see area for improvement 1**).

To promote young people's sense of identity and wellbeing, they were encouraged to participate in activities and opportunities that they felt best suited their needs and interests. For a few, this included spending time with friends and family. Complimentary school reports and certificated achievement for excelling in preferred sports, also highlighted the importance of achieving positive outcomes. For others, work experience meant that they could learn more about their own abilities and develop skills for the future. College courses also offered meaningful learning outcomes, to support development toward a desired career and life beyond the service.

Home cooked foods within a nurturing environment, helped to encourage healthy eating. The culture around mealtimes however, could be improved by setting some parameters around expectations of young people to be present at the table, if in the house at that time. More structured mealtimes will help to embed the importance of developing positive approaches to food preparation and the social aspects of living and eating together (**see area for improvement 2**).

There were several good examples of leaders working effectively with partners. This ensured that young people's needs and wishes helped to inform supports which were important to their health and wellbeing. Similarly, external managers were committed to accessing resources, intended to improve experiences and outcomes for young people. However, the safeguarding role of external managers was less well developed. At the previous inspection, we highlighted an area for improvement with regard to the referral and admissions procedure. We asked the provider to ensure a robust procedure. This included ensuring all relevant information about young people was received and understood by the manager and carers, prior to young people's arrival. As there had been very limited improvement to this practice, we have made a requirement at this inspection **(see requirement 1)**.

The need for external manager oversight, extended to the quality of the living environment for young people. Whilst Rendall Road provided a homely and reasonable standard of accommodation, the property at Braeburn Court offered a less satisfactory experience for younger children, despite the best efforts of carers. Both internal and external space was very limited, to meet the individual needs of children. Additionally, the internal environment was in need of investment, to bring the quality of furnishings and décor up to an acceptable standard. Leaders, within their role of quality assuring the experiences of children and young people, should make certain that the home is maintained to a high standard and that space is optimised to the benefit of children and young people **(see area for improvement 3)**.

To champion the rights, needs and wishes of all children and young people, leaders should commit to improvement, through consultation, planning and self evaluation. The current approach to improvement planning, should be reviewed to consider how the views of young people and others involved with the service, can influence priorities that they believe are important. Despite some progress since the last inspection, we have repeated this area for improvement **(see area for improvement 4)**.

## Requirements

1. By 10 November 2023, the provider must ensure the safety and wellbeing of all young people. To do this, the provider must at a minimum:
  - a) ensure there is a waking nightshift carer each night, in line with risk assessment and where known risk has the potential to cause harm.
  - b) ensure that in each instance, the process for referral and admission to the service is robustly managed and that all known information is submitted through this process, prior to a young person's arrival.
  - c) ensure that all carers receive training appropriate to the work they are to perform. This must include, but is not limited to, implementing training to standardise approaches to managing behaviours and trauma informed practice.

This is to comply with Regulation 4(1)(a)(b) (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 am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS, 3.20) and 'I use a service and organisation that are well led and managed' (HSCS, 4.23).

## Areas for improvement

1. To ensure young people are supported to make informed decisions about their lives, the provider should reflect on their practice and consider how to more fully support young people to become confident young adults, who make good choices to support their wellbeing.

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

'I am supported to participate fully as a citizen in my local community, in the way that I want' (HSCS, 1.10).

2. To ensure a positive experience of group living, where young people share experiences and learn from each other, the provider should promote a culture of eating together and valuing the home cooked foods prepared by carers. This will help young people to develop a positive approach to food preparation and the social aspects of eating with others.

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

'I can enjoy unhurried snack and meal times in as relaxed an atmosphere as possible' (HSCS, 1.35).

3. To ensure children and young people experience a quality living environment, where their individual needs and wishes are met, the provider should optimise space and maintain the home to a high standard.

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

'I can use an appropriate mix of private and communal areas, including accessible outdoor space, because the premises have been designed or adapted for high quality care and support (HSCS, 5.1).

4. To promote improved outcomes for all children and young people, the provider should ensure effective improvement planning and self evaluation. This should include consultation with children and young people and should seek to address requirements and areas for improvement arising from this inspection.

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

'I am actively encouraged to be involved in improving the service I use, in a spirit of genuine partnership' (HSCS 4.7) and 'I use a service and organisation that are well led and managed' (HSCS 4.23).

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

### Requirements

#### Requirement 1

By 31 March 2023, the provider must ensure that children and young people have continuity of relationships and consistent, stable care and support. The provider must review staffing throughout both sites. To do this, the provider must at a minimum:

a) ensure that all carers receive training appropriate to the work they are to perform. This must include, but is not limited to, implementing training to standardise approaches to managing behaviours and trauma informed practice.

b) ensure there is a four-weekly assessment of staffing, taking account of individual needs, including young people's physical, emotional and social needs.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'I am actively encouraged to be involved in improving the service I use, in a spirit of genuine partnership' (HSCS 4.7) and 'I use a service and organisation that are well led and managed' (HSCS 4.23).

This is to comply with Regulation 15(b) (1) and 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 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) and 'My care and support is consistent and stable because people work well together' (HSCS 3.19).

**This requirement was made on 4 November 2022.**

#### Action taken on previous requirement

By 31 March 2023, the provider had implemented a system to record a four weekly assessment of staffing. This part of the requirement was met.

However, by this date, although a few carers had received training relating to managing behaviours and some had completed aspects of trauma informed practice, the provider had not ensured that all carers received accredited behaviour management training. This part of the requirement was not met and we have repeated this at this inspection.

**Not met**

## Requirement 2

By 31 March 2023, the provider must make proper provision for the health, welfare and safety of service users. To do this the provider must at a minimum:

- a) ensure that the management team and carers operate effectively in supporting improved outcomes for children and young people.
- b) ensure that no physical intervention practices are implemented where carers are not trained or refreshed in agreed strategies.
- c) ensure that notifications of incidents are reported to the Care Inspectorate in line with guidance.
- d) ensure that appropriate arrangements are in place regarding support by an external manager, to provide a quality assurance role.
- e) ensure that risk assessment informs decisions regarding nightshift staffing to take account of the needs of all children and young people using the service.

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: 'My care and support is stable because people work well together' (HSCS 3.19) and 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

**This requirement was made on 4 November 2022.**

### Action taken on previous requirement

The management team had developed improved ways of working since the last inspection. There had been no physical interventions since our last visit and the service had notified the Care Inspectorate in line with guidance. These aspects of the requirement had been met.

However, there was limited oversight by external managers, including a lack of well considered risk assessment for waking night shift cover. We have made a requirement at this inspection, to ensure safe and adequate care for young people.

We have also and repeated the requirement in respect of the role of external managers in quality assuring the experiences and outcomes for young people, particularly in relation to referral and admissions processes. We have also continued to suggest that improvement planning and self evaluation, includes consultation with those using the service.

The requirement was therefore not fully met.

### Not met



## 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 promote the safety and wellbeing needs of children and young people, the provider should ensure that admission and matching processes are robustly implemented. This will ensure that the needs of all children and young people inform decisions.

This is to ensure that care and support is consistent with 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 area for improvement was made on 4 November 2022.**

#### Action taken since then

The provider had developed a process for the admission of young people to the service. This had however, not been fully implemented for each young person, prior to their arrival at the service. We have made a requirement at this inspection, to ensure that all known information is shared with the service, prior to young people coming to live at Rendall Road or Braeburn Court.

#### Previous area for improvement 2

To promote improved outcomes for children and young people, the provider should ensure effective improvement planning and self evaluation. This should include consultation with children and young people and should seek to address requirements and areas for improvement arising from this inspection.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'I am actively encouraged to be involved in improving the service I use, in a spirit of genuine partnership' (HSCS 4.7) and 'I use a service and organisation that are well led and managed' (HSCS 4.23).

**This area for improvement was made on 4 November 2022.**

#### Action taken since then

Despite some progress, we have repeated this area for improvement at this inspection. We have advised that consultation with those who use the service, is essential to improvement planning. The views of young people, carers and partners will provide the basis of self evaluation and will help to drive improvement priorities.

### Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://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	3 - Adequate
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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