

Stanmore Care Home Service

Care Home Service

Lanark

Type of inspection:
Unannounced

Completed on:
30 May 2025

Service provided by:
Capability Scotland

Service provider number:
SP2003000203

Service no:
CS2019377305

About the service

Stanmore Care Home Service is owned and managed by Capability Scotland. It provides residential care for children and young people who have a range of care needs which include complex medical conditions, as well as physical and sensory impairments. The service was previously registered as school care accommodation and adjusted its conditions of registration in 2020. The service is now registered as a care home service for children and young people. These changes were made to expand the range of young people who could be cared for at Stanmore. The service is based on a campus which also provides specialist education provision and includes a range of play and leisure facilities.

The accommodation consists of five four-bedded bungalows, with each resident having their own room as well as access to communal areas. At the time of our inspection, there were nine resident young people living in three bungalows and three young people stayed in the service on a short break basis.

About the inspection

This was an unannounced inspection which took place on 28 May 2025 from 10:30 to 19:30, 29 May 2025 from 10:00 to 20:00 and on 30 May 2025 from 10:00 to 16:00. The inspection was carried out by two inspectors 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:

- Spent time with eight young people using the service and spoke to seven of their family member
- Spoke with 12 staff and management
- Observed practice and daily life
- Reviewed documents
- Spoke with two visiting professionals.

Key messages

- Young people were kept safe both emotionally and physically.
- Young people received warm and nurturing care from staff who understood their needs.
- Young people's health needs were well understood and met in a sensitive and passionate way.
- Young people were supported to maintain meaningful connections with those important to them.
- The registered manager was committed to developing a supportive and empowering culture.
- The staff team would benefit from additional training to improve understanding of behaviours and to develop strategies to support complex needs.
- The organisation should improve its understanding of safer recruitment practices and ensure these are followed for all staff.
- We were confident that the registered manager would drive forward 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

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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 kept safe both emotionally and physically by a core staff team who knew them well and understood their needs and risks. Collaborative work with other agencies led to detailed care plans that encouraged a consistent approach to care.

Some young people had support from independent advocacy, however this was not appropriate for all young people due to their communication styles. The service was actively seeking alternative supports. Staff were strong advocates for young people, and we were confident that all young people had at least one person out with the service who would act in their best interests.

All staff were confident in child protection practice and felt supported by leaders. The child and adult protection policies had been updated and included best practice guidance.

There was a relational approach to care where young people experienced warm and nurturing interactions with comfort and reassurance from staff who understood their needs. Core staff members were skilled in the use of a variety of communication methods. This meant young people were responded to promptly, minimising distress. Given the complex physical and health needs of the young people, restraint practice was not used. As noted at the last inspection we suggested that the provider should ensure that all staff have training in safe escape techniques and the impact of trauma (see area for improvement 1).

Young people were able to enjoy some fun experiences both within the service and out with. Resource issues continued to limit the spontaneity and fun that the young people could have, as well as opportunities to broaden their horizons and widen their worlds. The registered manager was aware of this and was working to improve opportunities for young people.

All young people received respectful care. The environments within the bungalows were homely and safe. Young people were involved in their care and support, and they were given choice as far as possible. We saw staff being respectful of young people's rights, however some staff's understanding of children's rights and The Promise could be strengthened.

The staff team worked closely with health services, and this meant that they had an in depth understanding of young people's health needs. Documents had been created to provide a quick guide to understand health needs and communication if young people were admitted to hospital. The sensitive and passionate approach to prioritising health needs minimised distress for young people.

Young people were supported to maintain meaningful connections with those important to them. Families visited the service, video calls were arranged, and staff travelled with young people to ensure they could have family time. Family members told us, they 'have faith in the service' and one family member advised that they were always made to feel welcome. This supported young people's sense of belonging and identity.

Most young people attended Stanmore school and the staff team spoke of the positive working relationships with education staff. They benefitted from the use of the school library, swimming pool and cinema. Some

older young people were supported to develop their skills at the onsite support service. We concluded that young people received individually tailored support to participate fully in learning.

The organisation had developed their continuing care policy, and this clearly detailed their commitment to young people staying in the service as they become adults.

We were pleased to see improvements to care plans and risk assessments since our last inspection, however we suggested further improvement to make these documents more specific, measurable, achievable, realistic and time-bound (SMART).

The registered manager had been appointed since our previous inspection and had a realistic vision for the service. We were impressed with their commitment to developing a supportive and empowering culture through the introduction of pastoral supervision, encouragement for career progression and additional support for staff wellbeing. These supports had helped to improve staff morale and retention across the service.

Transitions in and out of the service were considered and planned. Appropriate information was sought at referral stage and positive working relationships with local authorities and families supported successful transitions. One external professional was impressed with the careful consideration of a difficult transition for a young person. We suggested that admission and matching paperwork could be developed to include clearly recorded decision-making processes.

The service has had difficulty ensuring they have the right number of staff, with the right skills and experience. Most staff felt that the registered manager had taken steps to improve this. Agency workers supporting the service were more consistent, increased support to staff improved retention and there had been a recent successful recruitment drive. The service had developed a staffing needs assessment, and this was being used to consider even deployment of staff across the bungalows. We gave some suggestions as to how the service could further develop this to support effective planning of staffing arrangements with the best mixture of skills to meet young people's needs.

Many staff were impressed with the training available and there was improvement in support to staff including observations of practice and regular supervision. The registered manager was keen to improve induction for new staff. We highlighted the need for additional training in trauma informed practice, therapeutic care, children's rights and escape techniques. We felt that this was a priority for the service to improve understanding of behaviours and to develop strategies to support complex needs (see area for improvement 1).

There was an emphasis on value-based recruitment. Family members had been involved in the recruitment of new staff. We noted however that safer recruitment practices were not always followed. Given the staff turnover that had been experienced, we suggested a need for increased knowledge of safer recruitment practices to ensure these are followed for all staff (see area for improvement 2).

There were systems in place to monitor service delivery, however we suggested the need for development in the oversight of medication, case files and risk assessments. The registered manager and external manager agreed with this, and we were confident more robust systems would be developed.

There was a detailed development and improvement plan that was aspirational and had identified the areas for development that this inspection highlighted. We were confident that the registered manager, with support from the external manager, would drive forward improvement for young people to achieve positive outcomes.

Areas for improvement

1. To promote responsive care and support to young people, the provider should ensure staff have access to training appropriate to their role and apply their training in practice.

This should include, but is not limited to training in trauma informed practice, therapeutic care, children's rights and escape techniques.

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

2. To promote the safety and wellbeing of young people, the provider should increase their understanding of safer recruitment practices and ensure these are always followed.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'I am confident that people who support and care for me have been appropriately and safely recruited' (HSCS 4.24)

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

Requirements

Requirement 1

By 25 November 2024 the provider must ensure that the service have sufficient staffing levels to support the health, safety and welfare of all young people. To do this the provider must as a minimum:

- a) ensure there are processes in place to conduct a staffing needs assessment and this is reviewed this regular intervals
- b) ensure that staff are deployed equally across the three bungalows providing a balance of qualified and experienced staff, able to support the young people in each residence

This is in order to comply with section 7 of the Health and Care (Staffing) (Scotland) Act 2019.

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

"My needs are met by the right number of people" (HSCS 3.15),

"I experience stability in my care and support from people who know my needs, choices and wishes, even if there are changes in the service or organisation" (HSCS 4.15) and

"I am supported and cared for by people I know so that I experience consistency and continuity" (HSCS 4.16)

This requirement was made on 8 August 2024.

Action taken on previous requirement

The service had developed and was using a staffing needs assessment to consider staffing levels and this was being reviewed regularly. We gave additional suggestions to further develop this.

The registered manager had taken steps to ensure that staff were being deployed more evenly across the bungalows to best meet the needs of the young people.

Met - within timescales

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

The service should develop a continuing care policy that sets out its responsibilities to provide continuing care to young people and how it will ensure that young people and their family's are aware of their right to continuing care up to the age of 21.

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

"As a child or young person I feel valued, loved and secure" (HSCS 3.5) and

"My human rights are central to the organisations that support and care for me"(HSCS 4.1)

This area for improvement was made on 8 August 2024.

Action taken since then

The service had developed a continuing care policy that clearly noted their commitment and responsibilities to providing continuing care to young people. We were satisfied that this area for improvement was met.

Previous area for improvement 2

The service should develop their personal plans to ensure that they clearly record agreed actions to achieve positive outcomes for young people and that these are SMART (specific, measurable, achievable, relevant, and time-bound).

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

"My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices" (HSCS 1.15) and

"My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected" (HSCS 1.23).

This area for improvement was made on 8 August 2024.

Action taken since then

The service had made some improvements in the recording of information within personal plans. Although we recognised progress, this area for improvement was not met. The service should continue to improve personal plans to ensure they are SMART and of a consistent quality for all young people.

Previous area for improvement 3

To support young people's wellbeing, safety and development, the provider should ensure that there are effective processes in place for staff development.

This should include but is not limited to, leader's regularly role modelling practice, observation of staff practice, protected time for reflection and support to embed training in practice.

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

"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

"I use a service and organisation that are well led and managed" (HSCS 4.23)

This area for improvement was made on 8 August 2024.

Action taken since then

There was more support to staff including observations of practice, regular supervision and role modelling. We concluded that this area for improvement had been met.

Previous area for improvement 4

The service should review its admissions policy to ensure that it is more specific for Stanmore Care Home Services and includes the service's commitment to providing continuing care.

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

"My human rights are protected and promoted and I experience no discrimination" (HSCS 1.2) and "My future care and support needs are anticipated as part of my assessment" (HSCS 1.14).

This area for improvement was made on 8 August 2024.

Action taken since then

The service had developed its admission policy and we were confident that transitions to and from the service were planned and considered. We concluded that this area for improvement was 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 |
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| 7.1 Children and young people are safe, feel loved and get the most out of life | 4 - Good |
| 7.2 Leaders and staff have the capacity and resources to meet and champion children and young people's needs and rights | 4 - Good |

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