

# Cauvin House Care Home Service

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Edinburgh  
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**Type of inspection:**

Unannounced

**Completed on:**

26 July 2018

**Service provided by:**

Dean and Cauvin Young People's Trust

**Service provider number:**

SP2003002647

**Service no:**

CS2003011205

## About the service

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at [www.careinspectorate.com](http://www.careinspectorate.com)

This service was registered with the Care Inspectorate on 01 April 2011.

Cauvin House is a residential care service which provides accommodation for up to three young parents aged 16 years to 21 years and their children. The service can support a maximum of three babies under 18 months, of whom only two will be aged 9 months to 18 months.

At the time of inspection, there were two young people and one baby living at the service.

The service is located in a residential area in the north east of Edinburgh and is in close proximity to local amenities and public transport.

Cauvin House is one of a number of services provided by Dean and Cauvin Trust.

## What people told us

Prior to the inspection, we received one completed care standard questionnaire from a young person living in the service. They strongly agreed with the statement 'Overall, I am happy with the quality of care I get here'.

During the inspection, we briefly met one young parent and their baby. The parent appeared comfortable with staff and their surroundings and confidently attended to the needs of their baby. The parent had a busy schedule for the week and was unable to spend any length of time with inspectors but was keen to tell us that Cauvin House was a nice place to stay. Another young person had recently come to stay at the service but chose not to meet with the inspector.

## Self assessment

We did not ask the manager to submit a self assessment this year. Instead we looked at the service development plan for evidence of self-evaluation and improvement planning.

## From this inspection we graded this service as:

<b>Quality of care and support</b>	4 - Good
<b>Quality of environment</b>	4 - Good
<b>Quality of staffing</b>	4 - Good
<b>Quality of management and leadership</b>	4 - Good

## Quality of care and support

### Findings from the inspection

The service's performance within the theme of care and support was good and demonstrated important strengths.

Since last inspection, the service had provided support to a range of young parents, including some who had very complex and chaotic lifestyles. Staff had received a variety of training to support the needs of young parents and their babies including child and adult protection training. We have encouraged the service to continue building staff knowledge about child development, trauma and adverse childhood experiences (ACE's). We also suggested accessing the new child development online training resource created by the Scottish Social Services Council (SSSC).

The service had developed a parenting and assessment programme that could be used to support the wellbeing of young people before and after birth with focus on developing necessary skills to care for a new baby safely. We felt the parenting support and assessment framework in place were extremely positive and had strong potential to be developed further.

We spoke with two external professionals visiting the service. We heard of a range of positive benefits of the service including 'creating consistency and structure in lives' and 'building hope for young parents to achieve'. The service maintained good communication with social workers which promoted insight to progress and achievements, as well as any areas of concern in a timely manner. Core group meetings were held regularly to consider placement progress and supports in place.

We could see that positive links were in place with the providers throughcare team and structured plans had been created when young people were ready to move on from the service. This meant, that young people were encouraged throughout the placement to continue building independence skills and transitions processes were supportive and well considered.

In some cases, we felt that young people could benefit from further encouragement to identify and access external supports to help reduce harmful behaviours, including drug or alcohol use and smoking (See recommendation 1). The service should also continue to identify and promote access to community groups for young parents and opportunities to increase their social network of support.

There was good consistency across recording systems. Documents were easily accessible and progress of young people could be tracked and monitored. Risk assessment and care plans were updated regularly. We saw clear audit systems within healthcare files which supported young people and their babies to maintain regular contact with healthcare professionals and for any medication needs to be managed appropriately.

We could see that staff made good efforts to promote participation of young people in planning and reviewing their care. A communal meal, held weekly, helped generate discussion between young people and staff about their experience of the service. Good records were kept of these discussions with any identified actions considered and responded to. The service also gathered feedback via resident questionnaires and post exit interview sheets. We have encouraged the service to consider further, ways to include the views of young people in the service development plan.

### Requirements

**Number of requirements:** 0

## Recommendations

### Number of recommendations: 1

1. In order to promote the health and wellbeing of young parents and their children, the service should further promote the identification of, and access to, external supports to encourage reduction of harmful activities including drug/alcohol use and smoking.

**This is to ensure care and support is consistent with the Health and Social Care Standards, which state 'I am supported to make informed lifestyle choices affecting my health and wellbeing, and I am helped to use relevant screening and healthcare services' (HSCS 1.28) and 'I am helped to understand the impact and consequences of risky and unsafe behaviour and decisions' (HSCS 2.25).**

**Grade:** 4 - good

## Quality of environment

### Findings from the inspection

We have assessed the quality of the environment as good at this inspection.

The service was decorated to a good standard which promoted a welcoming and pleasant environment. Communal areas were clean, warm and provided a range of areas for young people to relax and spend time with their children. The service benefited from an open-plan kitchen and dining area which appeared to be the 'hub' of the house and young people were encouraged to spend regular time with staff and peers, rather than alone in bedrooms. Staff took care to minimise any unnecessary signage or paperwork outwith the office area to ensure that the house remained homely.

The living room was large, well-furnished and provided an informal meeting area as well as an area for general relaxation. During inspection, this room was used to facilitate a core group support meeting for a young person. We could see that the young person benefited from the relaxed atmosphere of the house and the environment to engage with external professionals more fully.

The service had recently gained accreditation as a 'Breastfeeding Friendly Environment' from NHS Lothian and we could see through their parenting support materials that they promoted this in practice although they respected individual choice.

The outdoor space provided a small area for young people to enjoy. Privacy was promoted through use of fencing. We heard how young people had enjoyed the weekly communal meal on the patio in the good weather and had taken part in the young persons' meeting outdoors.

We looked at gas appliances and saw appropriate external systems in place to monitor and test these. We noted that the fire in the living room had been identified as needing replaced and that the service were progressing this. Fire alarm systems were tested regularly.

Environmental risk assessments were in place and had been updated regularly to identify and minimise any risks for young children. A strong emphasis was placed on young people clearing up after themselves and ensuring items were stored correctly and out of reach of children. Maintenance of the property was positive and we could see that young people and staff took pride in their environments. We saw that meeting records included good tracking of any breakages and repairs took place quickly.

Bedrooms were different sizes. We heard from a range of individuals that this could cause difficulty if a young person had a lot of personal belongings or if baby related items and equipment were large and bulky. Storage space was limited within the house. We could see that items sometimes had to be stored in communal areas.

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 0

**Grade:** 4 - good

## Quality of staffing

### Findings from the inspection

We have graded this quality theme as good.

Recruitment processes in sampled files were robust and staff were registered appropriately with the Scottish Social Services Council. We could see that young people were encouraged to be involved in staff recruitment.

Supervision was occurring regularly and staff felt supported by both the manager and the wider Dean & Cauvin Trust. We heard some very positive comments from staff about professional and personal support shown by management which encouraged staff retention and commitment to the service.

We felt that the new team meeting structure and recording format were working extremely well. Actions were clearly identified, with clear paper trail within records kept of any follow up or outcome. This enabled staff who had missed the meeting to have clear insight to discussion and to ensure that necessary information was cascaded effectively.

We discussed with the provider, appropriate staffing levels and their assessment of the risks and needs of young people living within the service. Although the service had adhered to its current staffing schedule and the service was not operating at full capacity, we felt that the support required by current residents could not be met fully if only one member of staff was on shift. We have made a requirement regarding the assessment of individual needs and staffing ratio's (See requirement 1).

Since last inspection, the provider has worked hard to reduce the need for external agency staff to support within the service. We felt that this was very positive progress and the core staff team were benefiting from greater stability and continuity. A management restructure across Cauvin House (and another service operated by the provider) was underway and we could see that career pathways had become available for staff to continue to grow and develop within the service. This had resulted in some internal promotions and opened up other posts which still required to be filled. We discussed with the provider, the impact this has regarding capacity for supporting the needs of current and future residents.

Staffing rotas identified that shift gaps at Cauvin House were still being supported by staff drawn from other services operated by the provider. We discussed with the provider, our concerns that these staff did not have access to the same training courses as core staff which included weaning/nutritional needs of babies and early childhood development. On occasion, the only member of staff on shift at Cauvin House had been drawn from another service. This meant, that the quality of staffing relationship and parenting support provided to young people had potentially been compromised. We have made a requirement regarding this (See requirement 2).

## Requirements

### Number of requirements: 2

1. In order to ensure young people's needs can be met fully, assessment of young people's needs should be undertaken regularly with any adjustments made to staffing levels to minimise risk and promote safe care.

**This is to ensure that care and support is consistent with the Health and Social Care Standards which state 'My care and support meets my needs and is right for me' (HSCS 1.19) and 'My needs are met by the right number of people' (HSCS 3.15).**

**And, in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 4 - Welfare of users.**

**Timescale: 1 October 2018.**

2. In order to ensure the needs of young people and their children can be met fully, continuity of core staffing should be promoted and all staff should have access to training which supports the needs of those receiving care within Cauvin House.

**This is to ensure that 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 am supported and cared for by people I know so that I experience consistency and continuity' (HSCS 4.16).**

**And, in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 4 - Welfare of users.**

**Timescale: 1 October 2018.**

## Recommendations

Number of recommendations: 0

Grade: 4 - good

## Quality of management and leadership

### Findings from the inspection

We have graded the theme of management and leadership as good at this inspection.

Supervision frequency and content had been a focus since last inspection. Staff spoken to, felt fully supported by management. This support was further evidenced across team meeting minutes, shift plans and individual supervision records.

A management restructure across Cauvin House (and another service operated by the provider) was underway. Recent internal promotions meant that there had been some changes within the leadership team. Newly appointed senior staff should be supported fully to ensure they grow and develop within their new roles. We discussed the new structure with the provider and the proposed peripatetic management arrangement for Cauvin House. A variation of conditions of registration request has been submitted to the Care Inspectorate for consideration.

Rota's were planned well in advance and included detail of when the manager was available. We were told by staff that they felt included and their views considered by management in the development of the rota, although the shift pattern could be difficult for some.

The service made good use of development days scheduled throughout the year. We felt that these were being used effectively to consider and reflect on practice, and to build on quality of performance. We heard from staff of the benefit of having reflective discussion and group debrief regarding complex care issues that had arisen in recent months. This had helped staff feel more confident in their support and assessment role of vulnerable young people in their care. Development days had also been used effectively to cascade learning and to review the aims and objectives of the service. A culture of motivation and improvement was evident.

Quality assurance processes included some auditing of systems and care practice. We felt this could be further developed to promote confidence in the quality of work provided and to ensure any improvements needed are identified quickly and progressed.

The provider had created a very clear business plan which we could see influenced the vision and direction of all Dean and Cauvin Trust service provision. We have encouraged the provider to continue developing service specific improvement plans in collaboration with young people, staff and external professionals to continue to improve and build on the quality of experience of those receiving care.

We looked at accidents, incidents and protection matters arising since last inspection. We were satisfied that these had been managed well however we highlighted to the provider, a number of matters that had not been notified to the Care Inspectorate in line with expectations. We shared the document 'Records that all registered care services (except childminding) must keep and guidance on notification reporting' with managers to ensure they are fully aware of their responsibilities in submitting relevant notifications in a timely manner. We will consider progress in this area at 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

### Requirement 1

We found examples of practice where the safety of children and young people were compromised. The provider should review policies on protection of children and adults. Following this the provider must ensure that these are properly implemented to protect children and young people from harm.

This is in order to comply with SS1 210 (2011) Regulation 4 1(a) which states:

4.(1) A provider must - (a) make proper provision for the health, welfare and safety of service users;

Timescale - within eight weeks of this report

**This requirement was made on 4 September 2017.**

### Action taken on previous requirement

Staff spoken with were confident regarding child/adult protection procedures and had received training in these areas. Policies and procedures were available to all staff. We looked at the records kept for incidents occurring since last inspection and were satisfied that protection procedures were being followed.

**Met - within timescales**

### Requirement 2

To protect children and young people from harm the provider must ensure that levels of staffing are adequate to provide a safe environment. The provider must make a robust assessment of the needs of service users and any risks associated with the care of all children and young people. This should be used to inform a decision about levels of staffing required in the service and involve consultation with service users, staff and other professionals.

This is in order to comply with SSI 210 (2011) Regulation 15 which states:

A provider must, having regard to the size and nature of the care service, the statement of aims and objectives and the number and needs of service users -

(a) ensure that at all times suitably qualified and competent persons are working in the care service in such numbers as are appropriate for the health, welfare and safety of service users;

Timescale - within eight weeks of this report.

**This requirement was made on 4 September 2017.**

#### Action taken on previous requirement

Although there has been some progression in this area, we felt at this inspection, that staffing levels did not always reflect the needs of young people using the service. Additionally, we highlighted that relief staff drawn from other services operated by the provider did not necessarily have the training, skills and experience in supporting very young children living at Cauvin House. We have discussed this further within this report.

**Not met**

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

### Previous recommendations

#### Recommendation 1

Cauvin House provide a care home service to older adolescents and their very young children. In order that staff are prepared to meet these diverse needs the provider should ensure that all new staff, including relief staff, are provided with a robust induction, which should include input on early child development.

National Care Standards, Standard 7(8), Staffing and Management.

**This recommendation was made on 4 September 2017.**

#### Action taken on previous recommendation

Induction and staff training opportunities have been developed to include greater focus on supporting the care of very young children. The provider should consider further, the training and development needs of relief staff.

#### Recommendation 2

To ensure that staff are best supported to provide care and support to children and young people the service should consider how to improve supervision for relief staff and the quality and purposefulness of team meetings.

National Care Standards, Standard 7 (2) and (9), Management and Staffing.

**This recommendation was made on 4 September 2017.**

## Action taken on previous recommendation

The structure of team meetings has been revised and we felt, at this inspection, that systems were currently working well. Supervision frequency and content was appropriate at this inspection.

## 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).

## Enforcement

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

## Inspection and grading history

Date	Type	Gradings	
4 Sep 2017	Unannounced	Care and support	3 - Adequate
		Environment	Not assessed
		Staffing	3 - Adequate
		Management and leadership	Not assessed
12 Aug 2016	Unannounced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good
29 Jul 2015	Unannounced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
16 Jul 2014	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
17 Jun 2013	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
5 Oct 2012	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
28 May 2012	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good

Date	Type	Gradings
13 Jan 2011	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing Not assessed Management and leadership Not assessed
9 Sep 2010	Announced	Care and support 5 - Very good Environment 5 - Very good Staffing Not assessed Management and leadership Not assessed
5 Feb 2010	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership Not assessed
7 Sep 2009	Announced	Care and support 5 - Very good Environment 5 - Very good Staffing 5 - Very good Management and leadership 5 - Very good
9 Mar 2009	Unannounced	Care and support Not assessed Environment 5 - Very good Staffing 4 - Good Management and leadership Not assessed
4 Dec 2008	Announced	Care and support 5 - Very good Environment 5 - Very good Staffing 4 - Good Management and leadership 5 - Very good

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