

## PERTH AND KINROSS COUNCIL

## Executive Sub-Committee of Lifelong Learning Committee

4 February 2015

## Care Inspectorate Inspections of Care Homes for Children and Young People

## Report by Executive Director (Education and Children's Services)

**PURPOSE OF REPORT**

This report sets out the key findings following an unannounced inspection of The Cottages carried out by the Care Inspectorate in September 2014. This report also sets out planned improvements arising from the recommendations made within the inspection report.

**1. BACKGROUND**

- 1.1 The Care Inspectorate (also known as Social Care and Social Work Improvement Scotland - SCSWIS) was created by the [Public Services Reform \(Scotland\) Act 2010](#). The Act sets out general principles for the Care Inspectorate's inspection and improvement functions. These are:
- The safety and wellbeing of all persons who use, or are eligible to use, any social service are to be protected and enhanced;
  - The independence of those persons is to be promoted;
  - Diversity in the provision of social services is to be promoted with a view to those persons being afforded choice;
  - Good practice in the provision of social services is to be identified, promulgated and promoted.
- 1.2 The Act places duties on the Care Inspectorate to make arrangements which will secure continuous improvement, to ensure user focus, and to co-operate with other specified scrutiny bodies.
- 1.3 Since April 2008, regulated care services in Scotland have been inspected using a framework of quality themes and quality statements. Services have been given grades based on the findings at each inspection and the written reports and grades are made public via the Care Inspectorate's website.
- 1.4 Services are measured against the [National Care Standards](#) and quality themes:
- Quality of Care and Support;
  - Quality of Environment or Information;
  - Quality of Staffing; and
  - Quality of Management and Leadership.
- 1.5 Each quality theme is graded on a 6-point scale in which 1 = unsatisfactory, 2 = weak, 3 = adequate, 4 = good, 5 = very good and 6 = excellent.

- 1.6 In addition to a visit to each service, inspectors consider evidence from a range of sources when judging a service's performance since it was last graded, including:
- Upheld complaints and whether identified issues have been resolved;
  - Notifiable incidents and how the service has dealt with them;
  - Feedback from people who use the service and carers;
  - Evidence that previous action plans have been implemented; and
  - Information in the annual return.
- 1.7 The Care Inspectorate conducts unannounced inspections for all regulated services as the main inspection method unless there are practical reasons that this is not appropriate. There are longer intervals between inspections for better performing services and a greater focus on risk-based inspections for poorly performing and high-risk services such as those which provide 24 hour residential care.
- 1.8 Following an inspection, the Care Inspectorate may set out a series of:
- **Recommendations:** statements that set out actions the care service provider should take to improve or develop the quality of the service.
  - **Requirements:** statements which set out what is required of the care service provider to comply with relevant legislation.
- 1.9 Care service providers must submit an action plan to the Care Inspectorate addressing any requirements and recommendations identified. Progress against the action plan is monitored by the Care Inspectorate through annual return and self-assessment forms submitted by the care service provider and through subsequent inspection.

## **2 PROPOSALS: RECENTLY PUBLISHED REPORTS**

2.1 This report presents the findings of the inspection of The Cottages in September 2014 by the Care Inspectorate. A progress update is provided on planned improvements resulting from one recommendation highlighted in the inspection report. There were no requirements arising from this inspection.

### **2.2 The Cottages**

2.2.1 The Care Inspectorate carried out an inspection of The Cottages in September 2014. The inspection was unannounced and low intensity. This level of inspection is carried out when the Care Inspectorate is satisfied that services are working hard to provide consistently high standards of care.

2.2.2 The Care Inspectorate identified the following key strengths:

- The service provides a safe, comfortable and homely environment in which children and young people are well-supported by a skilled and experienced staff team.
- Through careful care planning, the service provides children and young people with care which is responsive to their individual needs.

- Staff work effectively with young people, families and carers, and other agencies to promote their health and wellbeing and to support their relationships with family members.
- Staff are provided with very good training opportunities to enhance the work that they do with children and families.

2.2.3 The inspection found all four of the quality themes, Quality of Care and Support, Quality of Environment, Quality of Staffing and Quality of Management and Leadership to be **very good**.

2.2.4 The inspection report does not set out any requirements. It sets out one recommendation which relates to further enhancing the quality of performance and practice within the service. A summary of progress against the recommendation is provided in Table 1 below.

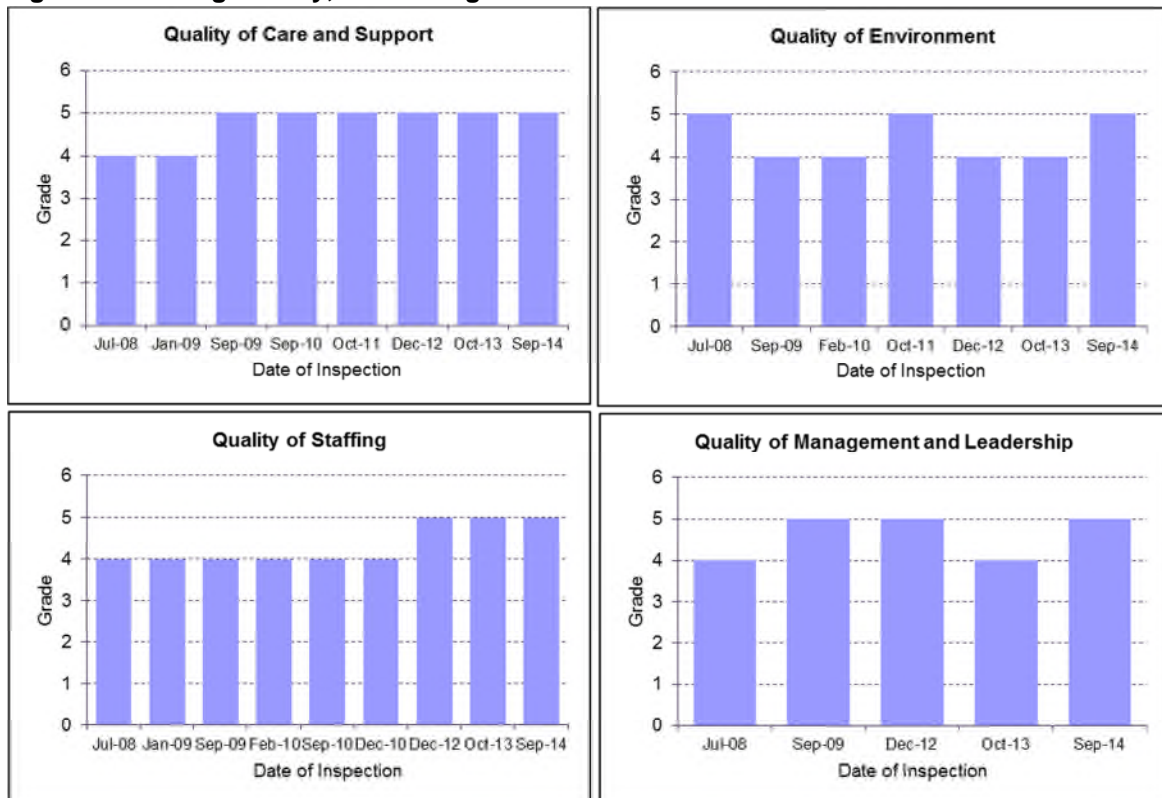
**Table 1: Summary of Progress or Proposed Actions against Areas for Improvement**

Areas for Improvement	Progress/Proposed Actions
<b>Quality of Environment</b>	
<b>Recommendation:</b> The service should provide single use or disposable towels in shared bathrooms. [National Care Standards, Care Homes for Children and Young People]	This recommendation has been implemented and single use towels and laundry baskets are now available in shared bathroom areas.

2.2.5 A copy of the full inspection report is provided in Appendix 1.

2.2.6 The last inspection of The Cottages was completed in October 2013 and reported to the Executive Sub-Committee of Lifelong Learning Committee on 5 February 2014 (Report No. 14/43 refers). The Cottages was first inspected in July 2008 and Figure 1 below shows the inspection and grading history since then.

**Figure 1: Grading History, The Cottages**



### 3 CONCLUSION AND RECOMMENDATION

- 3.1 The reports by the Care Inspectorate provide further information on the standards and quality in our services and set out a clear agenda for continuous improvement.
- 3.2 It is recommended that the Executive Sub-Committee of Lifelong Learning Committee:
- (i) scrutinises and comments as appropriate on the contents of the report.

#### Author(s)

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#### Approved

Name	Designation	Date
John Fyffe	Executive Director (Education and Children's Services)	26 January 2015

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## 1. IMPLICATIONS, ASSESSMENTS, CONSULTATION AND COMMUNICATION

<b>Strategic Implications</b>	
Community Plan / Single Outcome Agreement	<b>Yes</b>
Corporate Plan	<b>Yes</b>
<b>Resource Implications</b>	
Financial	<b>None</b>
Workforce	<b>None</b>
Asset Management (land, property, IST)	<b>None</b>
<b>Assessments</b>	
Equality Impact Assessment	<b>None</b>
Strategic Environmental Assessment	<b>None</b>
Sustainability (community, economic, environmental)	<b>None</b>
Legal and Governance	<b>None</b>
Risk	<b>None</b>
<b>Consultation</b>	
Internal	<b>Yes</b>
External	<b>None</b>
<b>Communication</b>	
Communications Plan	<b>None</b>

### 1. Strategic Implications

#### Community Plan / Single Outcome Agreement

1.1 This report relates to Objective No (i) Giving every child the best start in life.

#### Corporate Plan

1.2 The Perth and Kinross Community Plan 2013-2023 and Perth and Kinross Council Corporate Plan 2013/2018 set out five strategic objectives:

- (i) Giving every child the best start in life;
- (ii) Developing educated, responsible and informed citizens;
- (iii) Promoting a prosperous, inclusive and sustainable economy;
- (iv) Supporting people to lead independent, healthy and active lives; and
- (v) Creating a safe and sustainable place for future generations.

This report relates to Objective No (i) Giving every child the best start in life.

1.3 The report also links to the Education & Children's Services Policy Framework in respect of the following key policy area: Change and Improvement

### 2. Resource Implications

#### Financial

2.1 Not applicable (n/a)

### Workforce

- 2.2 Not applicable (n/a)

### Asset Management (land, property, IT)

- 2.3 Not applicable (n/a)

## **3. Assessments**

### Equality Impact Assessment

- 3.1 Under the Equality Act 2010, the Council is required to eliminate discrimination, advance equality of opportunity, and foster good relations between equality groups. Carrying out Equality Impact Assessments for plans and policies allows the Council to demonstrate that it is meeting these duties.

The function, policy, procedure or strategy presented in this report was considered under the Corporate Equalities Impact Assessment process (Eq1A) with the following outcome: assessed as **not relevant** for the purposes of Eq1A.

However, it is anticipated that the work on the quality indicators will promote equality of access to care and support. Where appropriate, improvement policies, procedures or strategies will require equalities assessments to ensure compliance with our duty to ensure there is no adverse impact on any community group.

### Strategic Environmental Assessment

- 3.2 The Environmental Assessment (Scotland) Act 2005 places a duty on the Council to identify and assess the environmental consequences of its proposals. No further action is required as it does not qualify as a PPS as defined by the Act and is therefore exempt.

### Sustainability

- 3.3 Not applicable (n/a)

### Legal and Governance

- 3.4 Not applicable (n/a)

### Risk

- 3.5 Not applicable (n/a)

#### **4. Consultation**

##### Internal

- 4.1 Relevant Heads of Service and Service Managers within Education and Children's Services have been consulted in the preparation of this report.

##### External

- 4.2 Not applicable (n/a)

#### **5. Communication**

- 5.1 Not applicable (n/a)

#### **2. BACKGROUND PAPERS**

No background papers, as defined by Section 50D of the Local Government (Scotland) Act 1973 (other than any containing confidential or exempt information) were relied on to any material extent in preparing the above report.

#### **3. APPENDICES**

Appendix 1: The Cottages  
Care Service Inspection Report 18 September 2014





## Care service inspection report

# The Cottages

## Care Home Service Children and Young People

Almondbank House

Lewis Place

Perth

PH1 3BD

Telephone: 01738 626 940

Type of inspection: Unannounced

Inspection completed on: 18 September 2014



HAPPY TO TRANSLATE

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**Service provided by:**

Perth & Kinross Council

**Service provider number:**

SP2003003370

**Care service number:**

CS2003015658

If you wish to contact the Care Inspectorate about this inspection report, please call us on 0845 600 9527 or email us at [enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

### 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	5	Very Good
Quality of Management and Leadership	5	Very Good

#### What the service does well

The Cottages provides a safe, comfortable and homely environment in which children and young people are well-supported by a skilled and experienced staff team.

Through careful care planning, the service provides children and young people with care which is responsive to their individual needs.

Staff work effectively with young people, families and carers, and other agencies to promote their health and wellbeing and to support their relationships with family members.

Staff are provided with very good training opportunities to enhance the work that they do with children and families.

#### What the service could do better

The service should take forward its plans to improve the recording system for medication.

It should provide single use or disposable hand towels in shared bathrooms.

It should review the handover meetings to make sure that information is shared properly at the end of each shift.

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

Since the last inspection, the service has improved the safety and security of the premises by installing door alarms.

All staff had regular opportunities to discuss their practice in 1:1 supervision meetings. The external manager had been more actively involved in monitoring the quality of the service.

### **Conclusion**

The Cottages provides children and young people with a very good level of care and support in a warm, nurturing environment.

The management team and staff are skilled and experienced, and demonstrated a high level of commitment to the provision of a very good quality care service.

The service should continue to evaluate and improve the service, taking into account areas identified for improvement in this report.

# 1 About the service we inspected

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 previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 01 April 2011.

## Requirements and recommendations

If we are concerned about some aspect of a service, or think it could do more to improve, we may make a recommendation or requirement.

\* **A recommendation** is a statement that sets out actions the care service provider should take to improve or develop the quality of the service, but where failure to do so will not directly result in enforcement. Recommendations are based on the National Care Standards, relevant codes of practice and recognised good practice.

\* **A requirement** is a statement which sets out what is required of a care service to comply with the Public Services Reform (Scotland) Act 2010 and Regulations or Orders made under the Act or a condition of registration. Where there are breaches of Regulations, Orders or Conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Inspectorate.

The service is registered:

\* To provide care to one child or young person, or two siblings considered suitable to share a room at Skye Cottage, Lewis Place PH1 3BD. Such placements will be on an emergency, short-term, respite service.

\* To provide a care service to a maximum of three non-related children or young people, or two non-related children and young people, and two siblings considered suitable to share a room at Iona Cottage, Lewis Place, Perth PH1 3BD. These placements will be on a respite, assessment or short-stay basis.

The service operates from accommodation near to Almondbank House, known as The Cottages. At the time of the inspection three young people were accommodated at The Cottages.

Continuity of care is provided by two staff 24-hour shift patterns of late and early shifts linked by a sleep-in. Day-to-day arrangements for the main premises are organised by the senior practitioner, who shares supervision of staff with the team leader.

The service aims "to offer planned care by way of a structured support to children and young people" while the vision is that "children can enjoy childhood and succeed in adult life."

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 5 - Very 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](http://www.careinspectorate.com) or by calling us on 0845 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 low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

### What we did during the inspection

We wrote this report following an unannounced inspection of this service which took place on 5 September 2014. We made a second planned visit to the service on 18 September at the end of which we shared our findings with the manager of the service.

Before the inspection the service submitted a self assessment report. We used the information provided in this as a basis for inspecting the service.

We also received completed Care Standards Questionnaires (CSQs) from two young people who used the service, and from three members of staff.

During the inspection, we gathered evidence from a range of sources including:

- \* discussion with two of the three young people who were currently staying at The Cottages;
- \* discussion with the parent of one of the young people;
- \* discussion with a visiting social worker and education link worker;
- \* discussion with the manager, senior practitioner and members of the staff team;
- \* observation of interaction between staff and young people;
- \* inspection of the premises;
- \* inspection of storage arrangements for medication;
- \* we also attended a handover meeting.

We also looked at a range of relevant documents including:

- \* a sample of care plans;
- \* accident and incident records;
- \* medication records;
- \* risk assessments and records of health and safety checks;
- \* a sample of team meeting minutes;
- \* a sample of staff supervision and appraisal records;
- \* records of feedback from young people, parents and other stakeholders.

### **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.firelawscotland.org](http://www.firelawscotland.org)



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

There were three recommendations made at the last inspection. The service had taken appropriate action to address all three as follows:

- 1) Door alarms had been installed;
- 2) The frequency of supervision had improved for all staff;
- 3) The external manager had become more actively involved in the service.

### **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.

The self assessment form was completed to a good standard prior to the inspection. It gave relevant information in relation to each Quality Statement; a realistic approach to evaluating the service performance in respect of each Quality Statement; and showed a reflective approach to areas for further improvement.

For future inspections, the service should provide information about how it has helped to achieve positive outcomes for young people who are placed there.

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

We spoke to two of the three young people who were currently placed at The Cottages.

Both clearly said that they would rather not be at The Cottages. One young person was fairly negative about most aspects of their placement. However, we observed

some very positive interaction with staff, and he was clearly making some progress in relation to his care plan.

The other young person had been admitted relatively recently, and also would have preferred to be at home. However, she felt that she had been welcomed and treated fairly by staff, her room was comfortable and she enjoyed the food.

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

We spoke to the parent of one young person. They felt very positive about the quality of care and support their child received. They felt included in planning, and felt that their views were respected. They were kept well-informed of their child's progress, and were made welcome when visiting the service.

### 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 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

##### Service strengths

We found that the service had very good arrangements in place to enable children and their parents, or carers, to participate in assessing and improving the quality of care and support they received.

From our discussions with young people, their parents and staff; from looking at relevant documents, including care plans; and from our observations during the inspection, we noted the following strengths:

- \* Young people were involved in the development of their care plans, which meant that they knew what was happening and were helped to understand why decisions were being made. The plans were written from the young person's perspective which helped to maintain a focus on how they felt about the issues which were important to them. Young people were supported to take an active part in reviews of their care and to contribute to decisions about their future.
- \* Staff established positive, co-operative relationships with parents and relatives, and worked closely with them to support contact and to help them to rebuild relationships with their children. We found very good evidence of effective family work, with families being supported to play an active role in their children's lives and to contribute to care plans and decision-making.
- \* Young people were involved in the day-to-day life of the service, helping to make decisions about things like menus, activities, and choosing games and play equipment. During the inspection, one young person contributed directly to the health and wellbeing of the house by making and sharing homemade soup with staff and

visitors. We also saw how one young person's views about the layout of their room had been taken into account, which helped him to feel more comfortable and able to settle to sleep at night.

\* The service made very good use of structured questionnaires and post placement interviews to seek feedback from young people and families who had used the service. The post placement interviews asked young people about their experiences in relation to selected National Care Standards (NCS). The records of the interviews were detailed, and reflected a genuine commitment on the part of the service to really listen to young peoples' views. The manager and staff team discussed the feedback at team meetings and used it as a basis for developing the service.

In summary, we found that there were plenty of opportunities for young people to be involved in improving the service they receive, from involvement in their own care plans to helping to contribute to wider service developments. By having a range of formal and informal methods of involving people, the service has created an atmosphere in which children feel that their views about any aspect of their care is welcomed and valued.

### **Areas for improvement**

The service should continue to build on the very good practice we found at this inspection.

**Grade awarded for this statement:** 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**

We found that the service was very good at meeting the health and wellbeing needs of young people.

From our discussions with young people, staff, and social workers; and from looking at a sample of care plans, we noted the following strengths:

\* The service ensured that young people had appropriate access to primary and secondary health care. On admission, young people were referred to the Looked After and Accommodated Children (LAAC) nurse who identified any health issues which needed to be followed up. This system supports the early identification of health issues and appropriate referral to health care services.

Staff made sure that any appointments were appropriately made and recorded in the weekly care plans. They effectively supported young people to attend appointments, for example dental appointments, which was a clear benefit to their ongoing health and development.

\* There was a safe and effective system in place for storing, recording and administering medication. Where appropriate, staff supported young people to manage their own medication where it was assessed that it was safe for them to do so. This helped to encourage young people to take responsibility for their own health and wellbeing. To support their practice in this aspect of care, all staff had passed the Scottish Vocational Qualification (SVQ) medication unit Health and Social Care (HSC) 375.

\* The care provided to young people was highly individualised. Detailed care plans were in place, structured round the SHANARRI national wellbeing indicators, which ensured that consideration was given to ensuring that young people were Safe, Healthy, Active, Nurtured, Achieving, Respected, Responsible and Included. They were written in the first person which focussed attention on meeting their individual needs, and also helped to make them accessible and meaningful for children and young people. Weekly placement plans were in place for each child; these helped both staff and young people to be clear about what was happening and what was expected of them. We could see that this well-planned, structured approach helped young people to settle in to The Cottages.

As described under Quality Theme 1, Quality Statement 1 young people were closely involved in the development of their own plans, which helped them to understand their situation and to begin to develop strategies to manage things for themselves. For example, we looked at one plan which said, "I should go to my room when I feel like I am getting angry" and noted that the young person in question had significantly reduced the extent to which he had needed to be held safely.

\* The staff worked effectively with parents and extended families to help to build and maintain family relationships. They worked with them to develop skills and routines so that young people could return home with appropriate supports in place. We spoke to one parent during the inspection, who told us that he felt that he was benefitting from the advice and support he was receiving from staff. We also spoke to a social worker who had recent experience of working with The Cottages, who praised the staff for their flexible and caring approach to working with families, and described how this had provided one young person and their family with a very positive and productive experience.

\* Young people were supported to lead a healthier lifestyle through the provision of a balanced diet and by encouraging young people to be physically active. The service had invested heavily in training staff in food and nutrition, and during the inspection we were impressed with the way that young people enjoyed making and eating

healthy meals. Involving young people in preparing and sharing food in this way provided opportunities for learning about healthy eating. This also created another place where young people could talk to staff in a relaxed way about the things which were happening in their lives. We also found good evidence which showed that young people had been encouraged to try and enjoy food that they had never tried before.

\* Staff had been supported by the service to develop a range of complementary skills which were of benefit to the health and wellbeing of young people. These included Indian head massages, which helped young people to feel relaxed, and Bushcraft skills which enabled staff to involve young people in a range of outdoor activities which contributed towards their physical and mental health and wellbeing.

One member of staff had undertaken additional training as a trainer in Mental Health First Aid, had delivered the training to the staff team, and was now disseminating this highly relevant training more widely throughout partner agencies.

### **Areas for improvement**

During the inspection, we noted that the form currently being used by the service to record medication didn't help staff to accurately record occasions when children had not taken their medication (for example, if they were on an outing). The service had already identified this as an issue and was in the process of reviewing their record-keeping system.

**Grade awarded for this statement:** 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 1**

We ensure that service users and carers participate in assessing and improving the quality of the environment within the service.

#### **Service strengths**

For information about the service strengths in relation to this Quality Statement, please refer to Quality Theme 1, Quality Statement 1.

#### **Areas for improvement**

Please refer to Quality Theme 1, Quality Statement 1.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 0

#### **Statement 2**

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

#### **Service strengths**

We found that the service provides a safe, secure and comfortable environment for children and young people.

From our inspection of the premises; and from looking at risk assessments and records of health and safety checks, we noted the following strengths:

\* The premises were clean, smoke-free and in a good state of decoration and repair. Minor repairs were carried out promptly, and staff ensured that high standards of hygiene were maintained. A comprehensive risk assessment of the premises had been carried out and recorded.

Since the last inspection, the service had improved the security of the building by installing door alarms which would alert staff if young people tried to leave the building at night.

\* Both staff and young people were taken through fire drills and emergency evacuation procedures to make sure that they knew how to respond in the case of an emergency. Additional training had been provided for staff to clarify roles and responsibilities in the event of a fire alarm being triggered.

\* Young people had access to the internet which is appropriately controlled with blocks and close supervision. Sensible policies and procedures, in line with Child Exploitation Online Protection (CEOP) guidance, helped to promote the safety of young people whilst online.

\* Staff were regularly trained and re-accredited in the use of Crisis, Aggression, Limitation and Management (CALM). They were skilled at de-escalating challenging situations and only used physical intervention as a last resort.

Minutes of team meetings and care plans showed that staff paid close attention to helping young people to develop strategies to help them to manage the challenges they faced.

Incidents of restraint were clearly and appropriately recorded, and provided the basis for discussion and review of incidents by staff team, manager and young person.

\* Young peoples' care plans included individual assessments of risk, and detailed plans were in place to help them to manage risks without unduly restricting them. We looked at one care plan which carefully set out ways in which one young person was gradually being given a greater degree of freedom and independence, at the same time as ensuring that she was safe and appropriately supervised. Very close supervision and support was provided for young people where the assessed level of risk indicated that this was necessary.

### **Areas for improvement**

In line with recent best practice guidance in relation to infection control, the service should provide single use or disposable towels for use in shared bathrooms (**see Recommendation 1**).

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 1

### **Recommendations**

1. The service should provide single use or disposable towels in shared bathrooms.



National Care Standards, Care Homes for Children and Young people - Standard 5:  
Your Environment.

### **Quality Theme 3: Quality of Staffing**

Grade awarded for this theme: 5 - Very Good

#### **Statement 1**

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

#### **Service strengths**

For information about the service strengths in relation to this Quality Statement, please refer to Quality Theme 1, Quality Statement 1.

#### **Areas for improvement**

Please refer to Quality Theme 1, Quality Statement 1.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 0

#### **Statement 3**

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

#### **Service strengths**

We found that this was a professional, well-trained and motivated staff team which operated in line with the NCS, legislation and current good practice guidance.

From our discussions with staff, young people, parents and partner agencies; and from our observations during the inspection, we noted the following strengths:

\* All staff were suitably qualified and were registered with the Scottish Social Services Council (SSSC). They were encouraged to seek ongoing professional development in line with areas identified through supervision, or to develop knowledge and skills which would enhance their work with young people. This was a stable, very experienced staff team which provided continuity of care and support to young people and their families.

\* Staff were well-supported by the senior practitioner and the manager of the service. They had regular 1:1 supervision. We looked at a sample of records and found that 1:1 meetings were used to explore practice and development issues. They also had an annual performance review (employee development review (EDR)) through which training needs were identified. We found good evidence to show that training needs identified in this way were followed through by the organisation. We were impressed with the quality of staff continuing professional development (CPD) folders, which evidenced extensive training, and reflective practice.

\* Staff had access to a wide and varied range of training which supported their work with young people.

Individual staff were encouraged to take the lead on developing particular areas of skill. Examples of this were that recently, different staff had undertaken training in Bushcraft to help to develop outdoor activities for young people, and another had done cycling training which would support the development of cycling activities with young people. As described under Quality Theme 1, Quality Statement 3 one member of the team was now qualified to train others in Mental Health First Aid.

\* Staff worked well together as a team. Team meetings were held regularly and were well-attended. Minutes of meetings showed that staff used these opportunities to develop consistent strategies to help them to support young people.

\* The team benefited from the regular input from an educational psychologist who helped to develop strategies for supporting young people, but also acted as a mentor to support the team in their work.

The staff were also involved in the evaluation and development of the service through participation in regular team development days, and in drawing up the team development plan.

\* Staff felt valued within the service, and were able to contribute ideas for improvement. One example of this was the development of an effective system of updating care plans in red, immediately highlighting where changes had been made; and another was the proposed development of the medication recording system.

### **Areas for improvement**

The staff had a daily handover meeting during which key information about young people was exchanged. During the inspection, we noted that this was a busy time with staff coming and going and interruptions with phone calls. As a result, some information wasn't properly passed on, which caused a degree of confusion about arrangements for one young person. We suggested that it would be useful for the service to review its handover arrangements to make sure that information can be shared more effectively.

Grade awarded for this statement: 5 - Very 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 1**

We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

#### **Service strengths**

For information about the service strengths in relation to this Quality Statement, please refer to Quality Theme 1, Quality Statement 1.

#### **Areas for improvement**

Please refer to Quality Theme 1, Quality Statement 1.

**Grade awarded for this statement:** 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**

We found that the service had a range of quality assurance processes which effectively monitored the quality of the service, and which supported a structured approach to improving the service.

From our discussions during the inspection; and from looking at relevant documents, we noted the following strengths:

\* The manager provided strong leadership for the staff team. Together with the senior practitioner, she was directly involved in planning for children and monitoring the care plans, ensuring that progress was made in line with the plans. They monitored the quality of written records and reports to ensure that these were kept to a consistently high standard.

\* There were very good structures in place to make sure that key activities were carried out to a high standard. For example daily, weekly and monthly task lists provided clear guidance for staff about how and when key tasks and processes should be carried out.

\* There was very good evidence to show that the service was committed to seeking the views of young people, parents and families, and partner agencies to help them to evaluate the quality of the service. The senior practitioner carried out interviews during which she asked young people for their views of the service in the context of the NCS. The records of these interviews demonstrated that the service was genuinely interested in finding out and understanding the perspective of young people. They also used questionnaires to gather feedback from young people, parents and other stakeholders. We looked at a sample of these and found that they reflected a generally very positive view of the service.

\* The service took account of the views gathered and used them as a basis of discussion at team meetings. They were then used to inform the Team Plan and Improvement Plan, which also took account of the local authority aims and priorities. These plans provided evidence of a structured approach to evaluating and planning for the development of the service.

\* The progress of the Team Plans was monitored by the local authority's improvement officer. This helped to ensure that there was effective external monitoring of the quality of the service. Since the last inspection, the external manager had been more actively involved in the service.

\* We found that this staff team was committed to evaluating their practice and developing the quality of the service. The service was very open to feedback from all sources (including recommendations from inspections) and was pro-active in seeking out best practice guidance, and advice and information from other professionals to help to develop the quality of its provision.

### **Areas for improvement**

None noted. The service should continue to build on the very good practice we found at this inspection.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 0

## 4 Other information

### Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

### Enforcements

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

### Additional Information

### Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in the Care Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme being re-graded as unsatisfactory (1).

## 5 Summary of grades

<b>Quality of Care and Support - 5 - Very Good</b>	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
<b>Quality of Environment - 5 - Very Good</b>	
Statement 1	5 - Very Good
Statement 2	5 - Very Good
<b>Quality of Staffing - 5 - Very Good</b>	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
<b>Quality of Management and Leadership - 5 - Very Good</b>	
Statement 1	5 - Very Good
Statement 4	5 - Very Good

## 6 Inspection and grading history

Date	Type	Gradings
1 Oct 2013	Unannounced	Care and support 5 - Very Good Environment 4 - Good Staffing 5 - Very Good Management and Leadership 4 - Good
17 Dec 2012	Unannounced	Care and support 5 - Very Good Environment 4 - Good Staffing 5 - Very Good Management and Leadership 5 - Very Good
27 Oct 2011	Unannounced	Care and support 5 - Very Good Environment 5 - Very Good Staffing Not Assessed Management and Leadership Not Assessed



## Inspection report continued

13 Dec 2010	Unannounced	Care and support Environment Staffing Management and Leadership	Not Assessed Not Assessed 4 - Good Not Assessed
14 Sep 2010	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed 4 - Good Not Assessed
15 Feb 2010	Unannounced	Care and support Environment Staffing Management and Leadership	Not Assessed 4 - Good 4 - Good Not Assessed
29 Sep 2009	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good 4 - Good 4 - Good 5 - Very Good
9 Jan 2009	Unannounced	Care and support Environment Staffing Management and Leadership	4 - Good Not Assessed 4 - Good Not Assessed
18 Jul 2008		Care and support Environment Staffing Management and Leadership	4 - Good 5 - Very Good 4 - Good 4 - Good

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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