

Care service inspection report

Kibble Education and Care Centre

School Care Accommodation Service

Goudie Street

Paisley

PA3 2LG

Telephone: 0141 889 0044

Inspected by: Mark Causer

Susan Barrie

Type of inspection: Unannounced

Inspection completed on: 24 January 2014



HAPPY TO TRANSLATE

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Service provided by:

Kibble Education and Care Centre

Service provider number:

SP2004007042

Care service number:

CS2003001291

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Summary

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

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

We gave the service these grades

Quality of Care and Support	5	Very Good
Quality of Environment	5	Very Good
Quality of Staffing	5	Very Good
Quality of Management and Leadership	5	Very Good

What the service does well

The service has continued to sustain very good grades in terms of performance. We found care planning to be of a high standard with a clear emphasis on measuring outcomes for young people. The service has strong leadership, with staff presenting as professional and committed to the support of young people in their care.

What the service could do better

The service acknowledges that the development of care plans is continuing; the current formula is being piloted in several units and is to be rolled out throughout the whole service in the next six months. We found the need for further risk assessments to be developed for one individual. This is to be developed and this will continue to be monitored and developed throughout the school.

What the service has done since the last inspection

The service had developed a number of quality assurance mechanisms that have ensured that all staff have had supervision in keeping with organisation policy. A similar mechanism had been introduced for team meetings and we found that all staff had regular opportunities to meet as a staff group.

The service has continued to grow as it strives to meet young people's individual needs. They are in the process of opening a new unit in the community which will support young people in the transition between education, work and home.

Conclusion

Kibble Education and Care Centre continues to strive and maintain a high level of performance and utilises the views of young people, their families and the staff group, to inform developments across campus. There is a commitment to supporting young people to achieve positive outcomes, through innovative and meaningful activities.

Who did this inspection

Mark Causer

Susan Barrie

1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Prior to 01 April 2011, this function was carried out by the Care Commission. Information in relation to all care services is available on our website at: www.scswis.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 its service, 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 Reforms (Scotland) Act 2010 and Regulations or Orders made under the Act or a condition of registration. Where there are breaches of the Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Inspectorate.

Kibble Education and Care Centre is administered by a voluntary Board of Trustees on behalf of the Miss Elizabeth Kibble trust.

Kibble is a residential school which provides care, support and education for up to 68 young people between the age of 12 and 18 years, who are experiencing emotional, behavioural and educational difficulties. Since 2010 Kibble has been registered to accommodate both boys and girls.

The service is inspected by us at least twice per year on an unannounced basis. As well as being inspected by the Care Inspectorate, the Centre is also subject to joint inspections by Education Scotland at four-year intervals, and is registered with the Registrar of Independent Schools.

The service is situated within extensive grounds on the north side of Paisley.

The service is a campus style, with community based units, and provides a range of specialised and intensive provision. KibbleWorks which is a social enterprise initiative, is off-site and provides young people with support and assistance into employment.

In addition, Kibble provides an Intensive Fostering Service which is registered separately with the Care Inspectorate.

The campus is divided into eight separate units, with most having en-suite facilities. All units have sufficient space for young people in terms of sitting rooms, games rooms and dining areas. Young people have access to recreational facilities including, swimming pool, gym, and football pitches. The educational centre on campus is a modern facility providing young people with high standard equipment, and an environment conducive to learning.

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 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 medium intensity inspection. We carry out these inspections where we have assessed the service may need a more intense inspection.

What we did during the inspection

We wrote this report after an unannounced inspection by two Inspectors, Mark Causer and Susan Barrie. We visited Kibble Safe Education and Care Centre on 23 and 24 of January 2014.

The focus of this inspection was to evaluate progress made by the service in achieving the requirements and recommendations of the previous inspection in June 2013 and should be read in conjunction with this report.

We gave feedback to the Executive Director, and the Quality Assurance Manager on 24 January 2014.

As requested by us, the provider sent us an annual return and self assessment form. In this inspection we gathered evidence from various sources, including relevant sections of policies, procedures, records and other documents, including:

- * Case files (from 5 units)
- * Complaints records
- * Staff supervision policy & records
- * Staff meeting records
- * Accident/incident records
- * Maintenance Records
- * Certificate of Registration
- * Staffing Schedule
- * Insurance details
- * Quality assurance information
- * The self assessment

We spoke with the following people:

- * Young people
- * Care Staff
- * Duty Manager
- * Operational Managers
- * Service Managers

- * Residential staff
- * Looked After Nurse
- * Quality Assurance Manager

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

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

Quality Theme 1, Quality Statement 1. Recommendation 1: The service should ensure that all aspects of care planning documentation is signed by young people.

The service had fully met this recommendation.

- They had introduced a number of methods to ensure that all care plans were signed by young people.

Quality Theme 1, Quality Statement 3. Recommendation 1: All young people's care plans to be completed within 28 days and contain all aspects of their day to day care arrangements.

The service had fully met this recommendation.

- All young people had a care plan in place and these contain all aspects of their day to day aspects of their care.

Quality Theme 3, Quality Statement 3. Recommendation 1: All staff should receive supervision in keeping with the objectives set out in their Continuous Learning Framework.

The service had fully met this recommendation.

- The service had introduced a number of quality assurance methods to ensure that all staff had regular supervision.

Quality Theme 3, Quality Statement 3. Recommendation 2: All staff should have access to regular team meetings for advice and support.

The service had fully met this recommendation.

- The service had introduced a number of quality assurance methods to ensure that all staff had access to regular team meetings.

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 service had submitted a self assessment prior to this inspection. This was of a high standard. The service had identified what they did well and areas where they could improve. The service had incorporated service users' involvement in the assessment of their service.

Taking the views of people using the care service into account

The Inspectors interviewed 13 young people and spoke to a number in passing. We found that young people were able to speak very openly about the service. They indicated high levels of satisfaction with the care and support that they received. There were many examples where young people had made significant behaviour changes that have assisted to have positive opportunities to move onto. There were many young people who were able to gain both academic qualification and training through KibbleWorks and Skillzone which brought about meaningful jobs.

Young people on the main campus made the following positive comments some of which are listed below:

- "I feel safe in my unit."
- "Staff encouraged me to eat healthy."
- "I always have the opportunity to contribute to my care planning."
- "I'm taken seriously by staff and happy with the service."
- "I have been supported to stop smoking."
- "Kibble gives you a good education."
- "We can put suggestions to managers and do all the time."
- "If we are unwell staff look after us well."
- "Encouraged to try new things. I've been fishing."
- "The support is excellent."
- "We get a handbook when we arrive and the rules are well explained."
- "It's strict but fair."
- "This place helps you turn your life about, it helps you get a home and a job."
- "I would rate the staff 6 out of 6. They're excellent."

We did have some negative comments. These were passed on to the service:

- "Don't think this place is for me. I would like to be in a unit that was less strict."
- "Food is poor."
- "I don't like the food."

We found mixed responses about the quality of food the service provided. The service had a very good system in place where young people were actively involved in a food committee and they could comment directly on the provision. Managers were informed of these comments during the inspection.

Taking carers' views into account

It was not possible to interview carers during this inspection.

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

All aspects of this Quality Statement were met, some aspects were exemplary and the performance of the service was re-graded to excellent. This is characterised by the manner in which the service had positively engaged young people and carers in evaluating and developing service provision.

The service continued to have in place strategies which allowed young people and carers' participation in the assessment of the quality of care provided. These strategies were examined and were reported upon in the previous Inspection Report in June 2013:

"Kibble had developed a systematic approach to participation based on a strategy which encouraged young people and their families to play an active part in maintaining and improving the quality of care. Involvement included weekly unit meetings where young people identified and discussed issues that were important to them. We observed many changes such as units purchasing daily provision from local shops to ensure young people were not de-skilled by living in the school setting. Where necessary these issues were given priority at staff and management meetings to ensure a quick response to issues raised. We found very good examples of high levels of participation with young people taking responsibility for setting the agenda, chairing the meeting and taking minutes. Young people were able to give examples of issues discussed and resolved such as purchasing new games for the unit, changes to the decoration, the personalisation of rooms and changes to activity times to take account for other commitments that young people had undertaken as part of their care plan agreements.

All young people had the opportunity to attend School Council Meetings. These addressed issues across the whole campus. The issues were addressed at Board meetings and there was regular feedback with young people. Young people indicated that they felt that their opinions were valued and that the service took account of decisions when they made changes. There was an ethos at the centre that every young person was valued and should always be listened to.

All young people were aware of the formal complaints procedure. They confirmed that they knew how to make a complaint and that the responses to complaints by staff were always dealt with appropriately. Complaints were reviewed by the Executive Director and a written response was provided to the young person after they had been investigated. We found that young people benefited from the efficient way that the service carried out complaint investigations.

The service had worked hard at incorporating the views of young people, parents and others into their development plans. Young people confirmed that they had appointed a peer representative who signed the unit development plan to acknowledge their agreement with the priorities set by all stakeholders. This allowed young people to feed back on number of issues which resulted in a change or improvement to the service. One young person we spoke with told us that "we are constantly asked our opinions; it's good as we can see changes."

At this inspection we found that all young people had a Kibble Journey which was their individualised care plan. This had been significantly improved and had been developed using the principles of Getting It Right For Every Child (GIRFEC). Young people had regular scheduled time with their key worker to review and update their Kibble Journey. We reviewed these documents and confirmed young people and their families benefited from having the opportunity to have their views recorded on the plans. One parent that we spoke to indicated that they were impressed that they were actively encouraged to fully participate in their young person's Kibble Journey. A key initiative within the service has been the development of the "Kibble Outcomes Framework", an approach to evaluating outcomes for young people in line with SHANARRI indicators and tracking these over time. The design of the system, with combination of graphics and narrative provided a very creative and credible method of measuring progress. The system has a strong visual impact and young people were actively involved.

The service carried out well-structured surveys of the views of young people, parents, staff and stakeholders on an annual basis with the results being analysed and used to inform the improvement plan. The service had a number of different questionnaires that they issued throughout the year. The organisation placed a high value on the feedback it received and gave some examples of developments which had been made as a result of feedback, for example the "Kibble Bugle" newspaper had been developed in response to comments from parents at a parent's evening specifically to keep people up to date with what was happening in school.

Young people confirmed they had regular access to advocacy services through Who Cares? Scotland and that they felt this was a useful resource. We contacted Children Rights professionals who told us that staff were very helpful and supportive of young people who had directed them to Who Cares? for further support.

Overall, the involvement of young people and their families was an integral part of culture of the service. We found young people's opinions were valued at all levels of the organisation and that issues raised were responded to appropriately and positively. "

Areas for improvement

The service had reviewed a number of individual units' handbooks to include advice to young people on "how to make possessions safe?" This will be rolled out throughout the service in the following months. We would welcome this addition to the service's handbook.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

Number of recommendations: 0

Statement 3

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

Service strengths

All aspects of this Quality Statement continue to be met and while there are areas for improvement, the performance of the service was graded very good.

The service continued to have in place strategies which allowed young people to make individual choices and ensured that they were supported to achieve their potential. These strategies were examined and were reported upon in the previous Inspection Report in June 2013:

"We found the Kibble Journey (care plan) document to be well structured and user-friendly. We found very good evidence in the Kibble Journeys that young people were supported to access primary and secondary health care services. Young people told us that they were involved in identifying health targets important to them and were found to be achieving their targets.

We also found that staff in the community houses had established good links with community health services, including those providing sexual health and counselling services. This helped to ensure that young people who would be moving on to live independently were helped to establish links with health services which they could continue to use as they moved on from the service.

The service was trying to address the issue of young people smoking, recognising it as a major issue for their health now and in the future. The entire campus is now designated as a no smoking area, and we found evidence in team and management meeting minutes that staff at all levels within the organisation are actively seeking to establish a no-smoking culture by challenging young people who were smoking, and by providing support, advice and information to help them to stop. Each young person had a "Quit" plan. One young person we spoke to confirmed that he had had "loads of help" to stop smoking, and although he hadn't manage to stop altogether, he had been able to cut down the amount he smoked.

All young people had contact with the on site Specialist Intervention Services (SIS) who conducted an Emotional - Wellbeing interview. This identified potential mental health issues and made recommendations about how young people might best be supported. This was used to inform individual interventions and familial contact. Young people told us they felt fully involved in the programmed work and it assisted them to change their behaviours.

We found some examples of some very effective individual work being done with young people to help them to manage their behaviour. These strategies to help them to do this were recorded in the Behaviour Support Plan.

The service had worked hard to link the benefits of a healthy diet and physical activity in promoting good physical and mental health. A healthy approach to eating was supported and encouraged. Varied and wholesome meals were freshly prepared in the service. The service had continued to review food with a 'Food Diary'. We found that on the whole young people stated that food was good and that they had ample opportunities to communicate their satisfaction levels directly with the Executive Chef. We found most units purchased some of their supplies with the young people, who were able to express choice in what was purchased.

We reviewed the medication system in a number of units. We found a comprehensive system in place which was managed effectively by the service. All staff had been trained in how to administer medication safely and the system was checked and audited by staff on a weekly basis. This ensured young people received the right medication at the right time.

The services were proactive in providing young people with a wide range of health promotion material. These included information about healthy eating, substance misuse, smoking cessation and mental wellbeing. The service also had an extensive health fair for both young people and staff. Young people told us that it helped raise their awareness and encouraged them to take responsibility for their health.

Staff spoken with confirmed that they had ongoing training and practice sessions regarding issues pertaining to health. The service had recently developed in-house

training package on self-harm and suicide. This programme would be rolled out to all staff over the next year. We examined the service staff training database which confirmed continued commitment to training.

The school had a dedicated child protection officer. They had achieved post-graduate training in this field. We found that the service had appropriately referred any issues pertaining to child protection to the relevant local authorities. All staff had child protection training on an annual basis and were aware of their responsibilities to keep young people safe and protected.

Young people had very good access to recreational facilities, there was a gym, a games hall and outdoor basketball court. Staff supported young people taking part in both outdoor pursuits and also more leisurely pursuits such as fishing. The organisation promoted very good health outcomes for all young people."

Areas for improvement

The organisation was still progressing re-formulating the Kibble Journey. The service had reviewed their system and recording several times and were in the process of rolling out. We felt that there was still ongoing work to be done as there were several plans which were not clear or focussed enough and did not provide evidence of a structured approach to the day to day care arrangements for young people. There were also a few examples where young people's plans had taken some time to be fully developed.

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

We did not inspect against this Quality Statement but have included our evaluation of the quality of participation in Quality Theme 1, Quality Statement 1.

Areas for improvement

See Quality Theme 1, Quality Statement 1.

Grade awarded for this statement: 6 - Excellent

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

All aspects of this Quality Statement continue to be met and while there are areas for improvement, the performance of the service was re-graded good. This is characterised by the manner in which the service had positively engaged service users and carers in evaluating and developing service provision.

The service continued to have in place strategies which meant young people had a positive quality of life. These strategies were examined and were reported upon in the previous Inspection Report in June 2013:

"All young people interviewed told us that they felt safe living at Kibble. We observed high levels of staffing and supervision of young people throughout the campus and also within the satellite flats in the community.

The campus had an effective visitor procedure, where all visitors on campus had to be signed in and identified by wearing appropriate identification.

We reviewed incident reports, complaints, safe holds and violence to staff forms. We found interventions to be appropriate to the presenting behaviour of young people. For example, there was consistent use of incentives and sanctions and minimal use of physical intervention.

We found that all staff participated in Safe Crisis Management Training. This was an approach that focused on non-physical interventions in dealing with challenging behaviour displayed by young people. This training was accredited and staff had to update on an annual basis. Evaluation of the impact of this approach was measured externally and the findings were reported back to the service on a bi-annual basis. This allowed for reflection on the success of different aspects of the intervention. In discussion young people stated that where there were incidents staff responded in a fair and consistent manner. They felt that nearly all incidents were well-managed and most young people had never been involved in a safe hold. All staff were found to be well trained and all had annual updates on Child Protection. There was a rolling programme for staff to attend Applied Suicide Intervention Skills Training (ASIST) to support them to feel equipped to do their job.

There was a Physical Intervention Monitoring (PIM) Group which was a cross campus staff meeting which met monthly to analyse SCM intervention. This group also had an external advocate from Who Cares? Scotland as permanent member. They looked at all aspects of interventions and identified any learning issues which was then fed back into individual units.

The service had a Health and Safety Manager who was responsible for safety audits throughout the campus. We looked at a range of these audits and found effective systems to maintaining and ensuring a safe environment for young people.

These included:

- * Monthly reporting of Health and Safety to the Board. Any action points were closely monitored by Executive Directors.
- * All units had a monthly reporting health and safety issues which addressed any concerns.
- * Accident and Incident Register (RIDDOR) which recorded all reportable incidents.

Since the last inspection, the service had continued to refurbish a number of the units.

There had been considerable progress at upgrading kitchen facilities and public areas in individual units. There was a commitment by the organisation to keep the environment well maintained and of a high standard."

Areas for improvement

At the previous inspection we found that a few Behaviour Support Plans and Risk Assessments did not fully reflect all aspects of the young person's behaviour, although the service closely monitored these aspects at regular monthly file audits. We found one young person whose Risk Assessments were not accurate. This was rectified during the inspection. However, we will continue to monitor these aspects of safety at the next inspection. **See Recommendation 1.**

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. All Behaviour Support Plans and Risk Assessments should reflect all aspects of behaviour which are identified in the young person's care plan.

National Care Standards School Care Accommodation Service. Standard 6 - Support Arrangements.

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

We did not inspect against this Quality Statement but have included our evaluation of the quality of participation in Quality Theme 1, Quality Statement 1.

Areas for improvement

See Quality Theme 1, Quality Statement 1.

Grade awarded for this statement: 6 - Excellent

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

All aspects of this Quality Statement were met, some aspects were exemplary and the performance of the service was very good.

The service continued to have strategies which produced a professional, trained and motivated workforce which operates with a knowledge and awareness of best practice. These strategies were examined and were reported upon in the previous Inspection Report in June 2013:

"The organisation was committed to having a professional trained work-force and without exception staff were found to be motivated and displayed child centred values. We found substantial evidence that all staff were registered with the Scottish Social Services Council (SSSC). Staff spoken with confirmed that they had ongoing training and practice sessions regarding issues pertaining to health. The service had recently developed an in-house training package on self-harm and suicide and planned to roll this out to all staff over the next year. We examined the service staff

training database which confirmed continued commitment to training.

Morale within the organisation was found to be very good. The organisation's comprehensive staff survey shows clear positive outcomes for staff:

- * 73% staff said that training had a positive impact on their work.
- * 87% were enthusiastic about being at work.
- * Very few of the staff were seeking new employment.

We found well established systems for supervision on a formal and informal basis. All staff had four formal supervisions every year and an annual appraisal which were recorded on Continuous Learning Framework. This approach allowed managers and staff to clearly evidence progress and evaluate performance. All staff indicated that they found supervision to be supportive. The day to day culture of the service encouraged staff to take additional responsibilities within their units. Staff were delegated extra tasks and built up knowledge, skills and experience. We were impressed at the high levels of leadership across all staff levels.

We found that team meetings were a supportive forum for staff. Staff stated that these weekly meetings were where they could reflect on their practice and further enhanced their learning. These meeting were also used specifically for the development of the staff team and had an element of training; recently a number of units had training on self-harm and suicide.

We found staff were encouraged and supported to access a diverse range of training opportunities. The service had a well established training centre which was committed to the ongoing development of staff through a combination of general and specialist staff training. The organisation had developed in partnership with the University of West of Scotland and created modules relating to social pedagogy. The organisation had already committed 5 cohorts of staff to undertake these modules. Staff indicated that they were supported and encouraged to attend sector leading conferences such as CELCIS (Centre for Excellence for Looked After Children in Scotland) and were encouraged to take leading roles in these events."

Areas for improvement

The service should maintain their commitment to having a professionally trained and motivated workforce.

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

We did not inspect against this Quality Statement but have included our evaluation of the quality of participation in Quality Theme 1, Quality Statement 1.

Areas for improvement

See Quality Theme 1, Quality Statement 1.

Grade awarded for this statement: 6 - Excellent

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

All aspects of this Quality Statement continue to be met and while there are areas for improvement, the performance of the service was graded very good. This is characterised by methods of quality assurance systems which service utilises. The service continued to have in place strategies which meant service users, carers and stakeholders were involved in assessing the service.

These strategies were examined and were reported upon in the previous Inspection Report in June 2013:

"The organisation consistently responded constructively to areas identified for improvement by external regulators, and actively considered national and local policy initiatives when developing the service.

We found that the organisation's approach demonstrated a genuine commitment to taking the views and ideas of all relevant parties into account when planning for

improvement, and had contributed significantly to the continuing growth and development of the service.

There was a well established system of audits carried out by operational, service and night managers within the service which ensured that key tasks such as medication recording, care planning and physical intervention were consistently completed to a high standard.

The Quality Assurance Manager audited the audit process and developed action plans to address areas identified for improvement. We found an effective process that any issue identified for improvement during this inspection had already been identified for action by the service itself. These reports were presented to the Senior Management Team and to the Board, ensuring that all were involved in the quality assurance process.

The service carried out well-structured surveys of the views of young people, parents, staff and stakeholders on an annual basis with the results being analysed and used to inform the improvement plan. The feedback recorded was generally extremely positive, with almost 70% of young people rating their experience as excellent or very good, 100% of parents/main carers rating the service as very good or good, and over 70% of placing authorities rating the service as excellent or very good. The outcomes of the surveys were used as the basis for identifying areas for improvement.

Staff and young people contributed significantly to the self assessment process in preparation for the inspection. We thought that this approach demonstrated the service's commitment to meaningfully involving young people and staff in the self assessment process, and also helped to create a culture in which self-evaluation was an integral part of service provision.

Annual development plans enabled staff to focus on the key areas for development in response to the needs of the young people in their unit, and although the sample we looked at shared some common goals, it was evident that the needs of the particular group of young people influenced the priorities, for example some had an emphasis on particular areas of training, while another was looking at the development of activities. Development plans were signed by staff and young people's representatives, again evidencing a partnership approach.

All aspects of the organisation's approach to quality assurance evidenced an excellent understanding of and commitment to the implementation of national policy, extensive use of research and good practice guidance, and an openness to external influence, all of which provided a solid basis for the continuing development of the service."

Areas for improvement

Although the service had exceptional quality assurance systems and auditing systems, we found some issues where improvement was needed. These issues are pertaining to Risk Assessments and personal plans. The service should continue to build on their commitment to quality assurance and improvement of their service.

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

Quality of Care and Support - 5 - Very Good	
Statement 1	6 - Excellent
Statement 3	5 - Very Good
Quality of Environment - 5 - Very Good	
Statement 1	6 - Excellent
Statement 2	4 - Good
Quality of Staffing - 5 - Very Good	
Statement 1	6 - Excellent
Statement 3	5 - Very Good
Quality of Management and Leadership - 5 - Very Good	
Statement 1	6 - Excellent
Statement 4	5 - Very Good

6 Inspection and grading history

Date	Type	Gradings
21 Jun 2013	Unannounced	Care and support 5 - Very Good Environment 5 - Very Good Staffing 5 - Very Good Management and Leadership 5 - Very Good
19 Mar 2013	Unannounced	Care and support 5 - Very Good Environment 5 - Very Good Staffing 6 - Excellent Management and Leadership 6 - Excellent
3 Sep 2012	Unannounced	Care and support 5 - Very Good Environment 5 - Very Good Staffing Not Assessed Management and Leadership Not Assessed

Inspection report continued

28 Feb 2012	Unannounced	Care and support Environment Staffing Management and Leadership	6 - Excellent 5 - Very Good Not Assessed Not Assessed
8 Feb 2011	Unannounced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed 5 - Very Good Not Assessed
9 Aug 2010	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed Not Assessed 5 - Very Good
22 Feb 2010	Unannounced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed 5 - Very Good Not Assessed
9 Oct 2009	Announced	Care and support Environment Staffing Management and Leadership	4 - Good 4 - Good 4 - Good 4 - Good
24 Feb 2009	Unannounced	Care and support Environment Staffing Management and Leadership	5 - Very Good 5 - Very Good 4 - Good 4 - Good
3 Sep 2008	Announced	Care and support Environment Staffing Management and Leadership	4 - Good 4 - 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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অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

ہے بایتسرد می م وونابز رگی دی روا ولکش رگی دی رپ شرازگ تعاشا ہی

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

ی.رخأ تاغل بو تا قیسن تب بل طلا دن ع رفاو تم روشنم الا اذه

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