

# Forest View School Care Accommodation Service

Kibble Education and Care Centre  
Corsefield Road  
Lochwinnoch  
PA12 4JD

Telephone: 01418 890 044

**Type of inspection:**  
Unannounced

**Completed on:**  
12 May 2023

**Service provided by:**  
Kibble Education and Care Centre

**Service provider number:**  
SP2004007042

**Service no:**  
CS2020379468

## About the service

Forest View comprises of two adjoined residential care homes for primary school children aged between five and twelve, who have experienced trauma. Ness house can accommodate five children and four children in Tay house.

The service is situated on the edge of Lochwinnoch, which is a semi-rural village in the west of Scotland. The service provider is Kibble Education and Care Centre which is a registered Scottish Charitable organisation.

The service sits in extensive woodland area. There is a school set within the grounds also provided by Kibble Education and Care Centre. The service aims to provide a secure and nurturing environment where children and young people are safe.

At the time of inspection four children were living in Tay House, and five children were living in Ness House.

## About the inspection

This was an unannounced inspection which took place on the 3rd-5th of May 2023, and the 9th of May 2023 . The inspection was carried out by an inspector from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. This included registration information, information submitted by the service and intelligence gathered since the registration of the service. In making our evaluations of the service we:

- spoke with nine young people using the service, three of their family members, and three social workers
- spoke with fourteen staff and management
- observed practice and daily life
- reviewed documents

**Key messages**

- All young people felt safe.
- Staff and young people were very active and made use of the grounds and wider area.
- The providers specialist intervention services ensured that the needs of young people were known by everyone involved in their care.
- The views of young people were prioritised and informed care plans.
- Young people were supported to engage in education.
- Staff turnover had an impact on relationships for young people.
- The service was committed to reducing restrictive practices.
- Parents felt involved and informed.

**From this inspection we evaluated this service as:**

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support children and young people's rights and wellbeing?	5 - Very Good
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Further details on the particular areas inspected are provided at the end of this report.

## How well do we support children and young people's rights and wellbeing?

5 - Very Good

We made an evaluation of very good for this key question. The service demonstrated major strengths in supporting outcomes for young people. There are very few areas for improvement

We found that the service managed the safety of all young people well. The service understood that the needs of young people were complex. Plans clearly outlined the role that staff would have in helping young people when they made unsafe choices. They also outlined the need to allow young people to take risks in terms of personal growth, when carefully assessed. We found that the management of risk went deeper in the nurturing interactions and encouragement given by adults to young people helping them throughout the days as anxieties crept in, or reassurance was needed. All young people told us that they felt safe.

Staff and young people spent lots of time on shared activities. There was always a focus on keeping young people active, and the importance of this on their development. Young people attended many different clubs linked to their likes and preferences.

We heard from the service the work that they were undertaking in relation to reducing restrictive practices. We found very good evidence of debriefs happening after any incidents, ensuring that learning to reduce the likelihood of reoccurrence influenced future staff supports.

Leaders carefully considered the individual needs of young people, and the skill set of the staff team, when considering when they could offer care, and in which house the young people's needs would be met. We suggested the service further develop its means of recording the many considerations they made to ensure that young people experienced the best outcomes possible.

Young people and staff told us that there had been a significant turnover of staff, this meant that for some young people relationships with adults had come to an end. Leaders had awareness of this, and we had confidence that they were taking steps to address consistency within the team.

The service worked closely with their own trauma informed mental health team, and additional therapies team. This ensured that all staff involved with young people, families and external professionals had the most in depth understanding of their needs. Family members told us how important and valuable this was in increasing their understanding of their child's needs, but also directly in improving family relationships.

Staff within the service used creative ways to gather the views of young people. These were clearly visible throughout their plans and goals, and young people had knowledge of these. Advocacy was sought routinely for young people ensuring they had a voice both in their own care but also in the direction of the wider organisation.

We found evidence of strong links between the service and external professionals. Very strong links with health services ensured the physical and emotional needs of young people were met. The service also worked closely with their own education provision and external school if involved.

The service placed great importance in communication being excellent, by ensuring the views of families were known. Parents told us that they were informed of all the fun activities that staff and young people had been involved in.

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

### Areas for improvement

#### Previous area for improvement 1

The management should ensure that identified health needs are met. This includes wearing spectacles and medication being administered as prescribed. Records should clearly state if this is not being adhered to and the reasons for this.

This is to ensure that quality of care and support is consistent with the Health and Social Care Standards which state: "My needs, as agreed in my personal plan, are fully met, and my wishes taken into account." (HSCS 1.23).

**This area for improvement was made on 10 June 2021.**

#### Action taken since then

Medication, and health needs were a regular discussion point at team meetings.

Provider has developed new procedures for early years, including new auditing processes. This meant that any issues and concerns were identified early and action taken to address these.

Young people's plans included details about their health needs and supports. These were regularly updated and showed current information.

#### Previous area for improvement 2

The provider should ensure that prior to any child being admitted to Forest View, they should establish that at the very least, an equivalent level of service continues to be available to meet all previously identified need.

This is to ensure that quality of care and support is consistent with the Health and Social Care Standards which state: "I am confident that the right people are fully informed about my past, including my health and care experience, and any impact this has on me" (HSCS 3.4)

**This area for improvement was made on 10 June 2021.**

#### Action taken since then

The provider has developed its matching processes for young people. This included a pre admissions and impact assessment. This aided in identifying existing supports and referencing that against the providers ability to meet the needs.

This process gave the providers internal psychological services the ability to give an in depth shared understanding of needs. This also helped identify what services would need to be accessed externally to meet the needs of young people.

We found for most children this had helped access suitable provisions quickly. For one young person delays in accessing external services had been impacted by NHS wait times, and not by the efforts of the service.

## Previous area for improvement 3

The management should improve their quality assurance processes to ensure practice is influenced by audit findings and records are completed to a satisfactory standard.

This is to ensure that quality of care and support is consistent with the Health and Social Care Standards which state: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19)

**This area for improvement was made on 10 June 2021.**

### Action taken since then

We found evidence of improved auditing processes. This helped ensure that internal and external managers had knowledge of any issues that arose. When issues were identified this led to steps being taken to address the route of issues.

There were also processes in place to review the quality of planning for young people. This would lead to comments from leaders for areas to be addressed.

We did note from the providers own policies that issues when identified should have SMART outcomes, we felt this was something that could be further developed, however had confidence that things were still being addressed.

## Previous area for improvement 4

The organisational quality assurance processes should improve to ensure that the Care Inspectorate and other relevant bodies are notified of matters pertaining to a child as appropriate.

This is to ensure that quality of care and support is consistent with the Health and Social Care Standards which state: 'I benefit from different organisations working together and sharing information about me promptly where appropriate, and I understand how my privacy and confidentiality are respected. (NCS 4.18)

**This area for improvement was made on 10 June 2021.**

### Action taken since then

We found that the provider had robust assurance processes in place for making sure that all notifications were made within timescales.

We could see good evidence of inter-departmental knowledge of this, ensuring that incidents that happened out of hours, or with duty managers were flagged through duty reports to ensure these weren't missed.

### Previous area for improvement 5

To ensure that decisions made about who is admitted to Forest View are in the best interests of all children and young people, persons involved in receiving admissions should ensure that a robust matching process is followed. In addition, the Care Inspectorate's admissions guidance for residential service, 'matching looked after children and young people' should be referred to.

This is to ensure that care and support is consistent with the Health and Social Care Standards, which state that 'My care and support meets my needs and is right for me.' (HSCS 1.19) and 'If I experience care and support in a group, the overall size and composition of that group is right for me.' (HSCS 1.8).

**This area for improvement was made on 10 June 2021.**

#### Action taken since then

The provider has developed its matching processes for young people. This included a pre admissions and impact assessment. This aided in identifying existing supports, and referencing that against the providers ability to meet the needs

This process gave the providers internal psychological services the ability to give an in depth shared understanding of needs. This also helped identify what services would need to be accessed externally to meet the needs of young people.

We heard some good examples of the steps taken to consider the needs of existing young people. We did highlight to the service that they would benefit from ensuring that all their considerations and adjustments were part of their written assessments.

### Previous area for improvement 6

Children and young people should receive the right level of support during periods of distress and crisis. In order to achieve this the service should: - review all young people's support plans and ensure that there is clarity about the level of support they should receive during periods of distress - review the use of transitional holds for children in light of this injury - provide training to staff about the risks involved during transitional holds.

**This area for improvement was made on 16 July 2021.**

#### Action taken since then

We found that care plans and risk assessments identified clearly the supports that young people would need in times of crisis. This was known by staff, and influenced staffing levels within the service. Where needs were greater there was consideration of additional staffing with placing authorities.

We also found evidence of restraint training workshops which ensured that staff considered the real life challenges of this for specific young people and environmental factors such as space.

## Complaints

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

## Detailed evaluations

How well do we support children and young people's rights and wellbeing?	5 - Very Good
7.1 Children and young people are safe, feel loved and get the most out of life	5 - Very Good



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Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

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