

Kibble Education and Care Centre School Care Accommodation Service

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Type of inspection:
Unannounced

Completed on:
27 February 2023

Service provided by:
Kibble Education and Care Centre

Service provider number:
SP2004007042

Service no:
CS2003001291

About the service

Kibble Education and Care Centre is administered by a voluntary board of trustees on behalf of the Miss Elizabeth Kibble Trust.

Since 2010, Kibble Education and Care Centre has been registered to accommodate both boys and girls. The service is inspected by us at least once per year on an unannounced basis. As well as being inspected by the Care Inspectorate, the centre is also subject to joint inspections by Her Majesty's Inspectorate of Education (HMIE), known as 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 houses and provides a range of specialised and intensive provision. The Skills Academy, which is a social enterprise initiative, is off-site and provides young people with support and assistance into employment. In addition, Kibble Education and Care Centre provides an intensive fostering service which is registered separately with the Care Inspectorate.

This registered element of the campus consists of four houses; North which can accommodate seven young people, South which can accommodate six young people, Uist which can accommodate six young people and Wallace where five young people can live. The houses have sufficient space for young people in terms of sitting rooms, games rooms, and dining areas. Young people have access to recreational facilities, including a 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.

About the inspection

This was an unannounced inspection which took place between 13 February 2023 and 15 February 2023. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection, we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with 10 young people who lived in the service;
- reviewed seven questionnaires submitted by young people;
- spoke with staff and management;
- observed practice and daily life;
- reviewed documents; and
- spoke with visiting professionals.

Key messages

- Staff had good relationships with the young people.
- Young people were engaged in formal education and learning pathways.
- There was good access to external resources to help support young people recover from their historical experiences.
- Managers recognised the areas which needed developed and were responsive to promoting positive culture changes.
- There was good support for families, and facilitating time with their children.

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 found significant strengths in aspects of the care provided and how these supported positive outcomes for people; therefore, we evaluated this key question as very good.

Relationships between the staff and young people were very positive. We observed lots of tactility for the young people who needed it and staff appeared to shift their approach depending on what young people wanted. The interactions were full of good humour and fun, and the young people appeared to be enjoying themselves with staff. This meant that young people had someone to turn to when they needed help.

Staff and managers worked confidently with external agencies. We received very good feedback about the role of managers and the influence of Kibble on the outcomes for their young people. The focus on multi-agency working ensured cohesive planning and support for the majority of young people.

Across the four houses we inspected, young people were being kept safe as a result of a more robust approach to the investigation of incidents. Where young people expressed that they did not feel safe, we observed this being taken very seriously by managers and there were clear processes in place to ensure safety.

The young people benefitted from a wide range of therapeutic resources which enabled them to get help and recover from their negative historical experiences. Some young people had repaired relationships with family, others had been able to reflect and move on from difficult experiences. We found that young people got the help that they needed and if Kibble didn't have the resource, the specialist intervention team were quick to source support externally.

The large majority of staff had a strong understanding of trauma and knew how it could adversely impact young people. This led to interactions that were relationship focused and sensitive to each individual young person's needs. Some of the environments were very trauma-informed; South and Uist had made use of sensory changes to create a calming and therapeutic space for young people. The impact was that young people who could be very distressed at times could live there safely and make progress. Managers told us that staff could be further upskilled to deliver even better trauma-informed care.

We were able to see that young people were directing their care and support. The planning for young people was focused on the things that they wanted to achieve. Progress was clearly recorded and there was evidence of regular review. We would have liked to see the shared understanding meetings embedded as core practice for all staff with young people in attendance where possible to support further co-development of planning and a clear focus on young people's views on their own needs.

Advocacy is available to all young people; where young people need additional representation, they can seek this from Who Cares Scotland. There were very heartening examples of young people challenging decisions and making sure their rights were respected. We found that the service had placed a strong emphasis on the rights and views of young people.

Family connections were prioritised. The specialist intervention service had a number of supports available to families and young people if they wished this. We saw young people seeing those that were important to them. There were very positive examples of young people repairing family relationships.

There were positive opportunities for learning. Attending school or alternative education was the norm for the majority of young people. For some of these young people, the educational outcomes were very positive. For young people who found school difficult, the skills academy offered a different type of learning which suited young people's learning styles.

We were encouraged by the view of senior managers around mealtimes. There was an open minded and trauma-informed view on this, which meant that changes in the future would be focused on what young people wanted to eat and where. We look forward to seeing the development of this.

We were really impressed with the developments since the last inspection and how this had supported the houses to improve. We found leaders reflecting honestly and openly about the areas of strength and the areas of development. This gave us confidence in the service's ability to improve.

Managers were clear in their roles and knew their young people. This was reflected in the amount of time managers spent in their houses and with their young people. Young people told us that they knew who the managers were and we could see that managers led by example in modelling the importance of relationships and trauma-informed interactions.

We saw that the service was doing much more to reflect on incidents and to understand why at times, young people still needed the support of a restraint. In the education and care service, the numbers of restraints had been reducing, which meant that the impact of training and support to staff was being evidenced.

Staffing levels had improved but remained an area of focus for young people and staff. In the questionnaires from young people, this was their main focus of improvement with a view that there was not always enough staff. We found that duty managers managed absences and made sure houses were adequately staffed. We found a rolling programme of recruitment and that newer staff were benefitting the culture having been trained with a focus on trauma-informed care and least restrictive practice.

The staff knew young people very well. As teams they worked well together. There was stand out examples of staff pre-emptively doing the right things for young people. This attuned approach should be embedded and embraced by all staff.

The care planning processes that we reviewed were reviewing the outcomes for young people on a regular basis. We found examples where the language was trauma-informed and reflective of the young person's needs. This approach should be encouraged and embedded across all four houses.

The leaders of the service were focused on young people's needs and rights and this ensured they self-evaluated their own work. There was a commitment to listening to young people and embracing a model of care that was focused on giving young people what they needed. Where institutional or outdated practice existed, this was going to change and changes would be led by the views of young people. We look forward to seeing the progress at next year's inspection.

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

Requirements

Requirement 1

The provider must ensure that robust practices are in place to evidence the effectiveness of the service in keeping young people safe. The following should be a priority in terms of improvement:

- Ensure that Child Protection procedures are clear and adhered to at all times. The service must ensure that Public Protection arrangements and national guidance are followed at all times. In addition, the service must ensure clear risk assessments and considerations take place for critical incident reviews of any child protection concerns.
- Ensure that there is a robust process of risk assessment in place for any allegations of abuse or misconduct relating to a member of staff. Decision making regarding a member of staff being redeployed or suspended must be clear and consistent. Consideration of referral to SSSC must also feature in these risk assessments.

This is to comply with Regulation 4 (1) (a) of The Social Care and Social Work Improvement Scotland (Regulations for Care Services) Regulations 2011 (SSI 2011/210). This is to ensure that care and support is consistent with the Health and Social Care standards, which state: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (3.14); 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (3.20) and 'I experience high quality care and support based on relevant evidence, guidance and best practice' (4.11).

This requirement was made on 9 November 2021.

Action taken on previous requirement

The service had actively reflected on this area of practice and embedded changes. A lead safeguarding officer had been appointed and had oversight of all allegations of abuse and misconduct. Together with managers, there was clearer joint working with lead agencies to ensure young people were protected and investigations were completed robustly. Where issues emerged, the service was open to guidance and direction from the Care Inspectorate and acted promptly.

Met - within timescales

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

Areas for improvement

Previous area for improvement 1

In order to ensure that young people receive consistent care which improves their sense of belonging and safety, the service should have in place detailed information to inform the strategies being used for individual young people and they should ensure that restrictive physical intervention is being used as a last resort. More proactive and consistent measures should be implemented across all houses to support improved outcomes for young people.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'If my independence control and choice is restricted, this complies with relevant legislations and any restrictions are justified, kept to a minimum and carried out sensitively' (HSCS 1.3); 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11); and 'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event' (HSCS 4.14).

This area for improvement was made on 9 November 2021.

Action taken since then

The service had rolled out training focused on trauma-informed care. Alongside this, managers were taking a more analytical and reflective approach to restrictive practice. This was resulting in a reduction in the use of restraint and improved strategies for managing young people who were distressed.

Previous area for improvement 2

Young people should be supported to be safe at all times and in order to do so and their safety and wellbeing when out of the service should be strengthened. The service should develop a missing person policy to reflect the current "not at home" process. This should be rolled out to all staff. The service should also ensure that all young people have an up-to-date missing person profile as a matter of urgency.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11); and 'If I go missing, people take urgent action, including looking for me and liaising with the police, other agencies and people who are important to me' (HSCS 3.23).

This area for improvement was made on 9 November 2021.

Action taken since then

Working collaboratively with the police the service had a clear protocol for managing the response when young people went missing.

Previous area for improvement 3

Young people should receive quality care and support by the service who has undertaken a thorough matching process. The service should fully implement the new "Moving In, Within and Moving Out of Kibble"

policy. Young people should benefit from robust matching and there should be evidence and documentation to support this decision making.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'If I experience care and support in a group, the overall size and composition of that group is right for me' (HSCS, 1.8); 'My care and support meets my needs and is right for me' (HSCS 1.19); and 'My care and support is provided in a planned and safe way, including if there is an emergency or unplanned event' (HSCS 4.14).

This area for improvement was made on 9 November 2021.

Action taken since then

Admissions had improved and we saw clear use of the matching process. We found that this process could be further strengthened with an analysis of the impact on the young people already living within the house.

Previous area for improvement 4

The service should ensure that staff, including the managers, have regular opportunities for good quality supervision and that this takes place in line with their supervision policy. We would further ask that systems of staff appraisal are consistently undertaken for all staff.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14); and with the SSSC codes of practice for Employers of Social Service Workers, which state that the employer will 'provide effective, regular supervision to social service workers to support them to develop and improve through reflective practice' (HSCS 3.5).

This area for improvement was made on 9 November 2021.

Action taken since then

Supervision for all staff had been prioritised and we heard that staff felt well supported.

Previous area for improvement 5

The service should continue to undertake an analysis of the individual houses to ensure the needs of the staff and the services are fully understood and that all young people receive a consistently high level of care. Following this, the service should ensure that relevant support is provided by senior managers.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11); and '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 9 November 2021.

Action taken since then

The houses each had their own individualised service development plan based on an individualised self-evaluation. Whilst this ensured services improved, we would like to see consistency across all four houses with a sharing of best practice.

Previous area for improvement 6

The service should support staff development in promoting improved outcomes for young people by ensuring that a staff training needs analysis is undertaken for each house. This would ensure that staff are sufficiently skilled and experienced to look after young people with highly complex needs and to ensure that the specialist nature of individual houses is robust by providing them with training opportunities which reflect the needs of the young people.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I have confidence in people because they are trained, competent and skilled, and are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14); and 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

This area for improvement was made on 9 November 2021.

Action taken since then

The houses each had their own individualised service development plan based on an individualised self-evaluation. Each staff member had an individualised development plan with a focus on their training needs. As mentioned within the report, the roll out of the trauma-informed training had had a positive impact on the ability of staff to provide care and support.

Previous area for improvement 7

The service should ensure that from the point of matching and initial assessment, a program of training is identified to match the specific needs of young people. This would improve consistency of approach in promoting outcomes for young people.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I have confidence in people because they are trained, competent and skilled, and are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14); and 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

This area for improvement was made on 9 November 2021.

Action taken since then

The service has undertaken more needs analysis based on the young people they had historically cared for. We found a more focused approach on matching the needs of young people who moved in against the skills the houses already possessed. Where a learning need emerged, training was sought to address this.

Previous area for improvement 8

The service should undertake a robust staffing assessment for all shift patterns, especially for night shift to make sure that there are always sufficient people to carry out the work required. The assessment should ensure that sufficient levels of staff and skill mix take into account the young people's complex physical, emotional and social needs.

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

This area for improvement was made on 9 November 2021.

Action taken since then

The service had made changes to the rota to ensure a more consistent level of staffing across all times of the day. Managers were aware that further support was required for night shift staff to ensure they received the same training and support opportunities as day time staff.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

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
7.2 Leaders and staff have the capacity and resources to meet and champion children and young people's needs and rights	5 - Very Good

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