

Kibble Intensive Services

School Care Accommodation Service

Kibble Education & Care Centre
Goudie Street
PAISLEY
PA3 2LG

Telephone: 0141 889 0044

Type of inspection:
Unannounced

Completed on:
16 July 2025

Service provided by:
Kibble Education and Care Centre

Service provider number:
SP2004007042

Service no:
CS2022000010

About the service

Kibble Intensive Services is a school care accommodation services for children and young people between the ages of 11 years and over, who are attending or transitioning to secondary education.

The service is registered to care for up to eight young people in the two houses within the service, four living within Buchanan house, and four within Bute house. The services are situated with Kibble's main campus in Paisley. It has close access to supporting services and local amenities.

About the inspection

This was an unannounced inspection which took place on the 14 to 16 July 2025. The inspection was carried out by two inspectors 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 four people using the service, and observed four more
- spoke with four of their representatives
- spoke with twenty one staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals

Key messages

- Young people told us that they felt safe, and we were confident that there were effective measures in place to support their physical and emotional safety.
- Restrictive practices strategies were agreed alongside partner agencies, and subject to regular review.
- A particular strength of the service was its commitment to helping young people maintain important relationships.
- Education was approached sensitively and individually, taking account of past experiences and emotional wellbeing whilst supporting each young person to reach their potential.
- We were impressed by the passion and commitment of the management team.
- The provider had taken appropriate steps to increase oversight of key areas of support, including case file audits, debriefing processes, and notifications to external agencies.
- The provider should ensure that all staff receive formal supervision in line with organisational expectations.
- We recognised a clear drive for continuous improvement, with many improvement objectives identified.

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.

Quality Indicator 7.1 Children and young people are safe, feel loved and get the most out of life

Young people told us that they felt safe, and we were confident that there were effective measures in place to support their physical and emotional safety. We observed robust assessment processes that were reviewed regularly and that considered individual risks. These did not always prevent risk entirely, but they supported young people to develop skills needed to manage risk themselves. Staff teams worked well together, and their strong communication ensured a consistent approach to care.

The service had positive links with advocacy services and encouraged engagement. Each young person had at least one adult outside the service to promote their best interests.

Staff had good knowledge and awareness of safeguarding and child protection, supported by regular training. Experienced staff and managers promoted confidence and encouraged ongoing learning. We suggested improvements to recording practices to ensure that all decision making was evident, and were confident staff were well supported to protect young people from harm and would consider our advice.

Restrictive practices were in use, with strategies agreed alongside partner agencies, and subject to regular review. The provider had sought legal advice on depriving young people of their liberty, which was shared with managers. Managers were working to strengthen staff understanding of the impact of restrictions. While recognising the challenges, we were confident that the approach would continue to develop, reducing the use of restraint and restrictive practice, and supporting young people's wellbeing.

We were impressed by the service's commitment to developing therapeutic support. Staff were learning new skills in body-based and holistic therapies, which were already helping some young people to better identify and discuss their feelings. The specialist intervention service continued to add value, supporting staff to build skills, knowledge, challenge practice and contribute to a family feel and positive outcomes.

Although the service had experienced some staff turnover, efforts were made to ensure consistency for young people. Staff and leaders recognised the importance of enduring and trusting relationships and considered young people's views. Consistent communication across the team gave young people confidence and contributed to their feelings of security and safety. Young people told us they felt that 'all staff treated them the same'.

Young people had opportunity to take part in chosen activities, and explore new experiences. This helped them build relationship beyond Kibble, broaden their horizons, and prepare them for the future.

A particular strength of the service was its commitment to helping young people maintain important relationships. Staff recognised this as an important right, managed challenges well and worked with families to support young people's sense of identity and belonging.

Young people were actively involved in their care, with their views clearly recorded and reflected in plans.

Some young people told us that they felt listened to, and we found evidence of plans being adapted in their response. Personal plans were suitably aspirational, individualised, and tracked progress with a focus on preventative strategies to support positive behaviour and choices.

All young people were either engaged in learning or had plans in place. Education was approached sensitively and individually, taking account of past experiences and emotional wellbeing whilst supporting each young person to reach their potential.

Quality Indicator 7.2 Leaders and staff have the capacity and resources to meet and champion children and young people's needs and rights

We were impressed by the passion and commitment of the management team. Whilst recognising that change can take time for staff to adjust to, we found the process was transparent and did not impact on outcomes. We were confident that as new management becomes embedded, this will further strengthen positive outcomes for young people.

Many aspects of quality assurance remained effective as identified through previous inspections. The provider had taken appropriate steps to increase oversight of key areas of support, including case file audits, debriefing processes, and notifications to external agencies. These measures were a welcome introduction, and decreased likelihood of anything being overlooked. We also found positive examples of learning from audits, which had been used constructively to further improve practice.

Transitions and matching processes for young people were very well considered, with robust planning that ensured a relational approach and supported young people to make successful moves. The service had clearly drawn on learning from previous transitions to embed best practice in this area. It was particularly positive to see young people's views actively sought, listened to and acted upon. Where potential risks were identified, staff were supported by managers and empowered to manage these effectively. This ensured that young people were cared for by confident and skilled staff team able to meet their individual needs.

Recruitment processes were robust. While the skill set of new staff varied, the organisation's effective induction and training programme, alongside learning opportunities through shared understanding reviews and role modelling provided staff with many opportunities to develop their practice. All staff we spoke with reported feeling supported in their roles. We noted improvements in the regularity of formal supervision for some staff; however, this needs to be delivered consistently for all. The provider had plans in place to strengthen this area of practice, and we highlighted the importance of ensuring support for staff is routinely maintained, even during periods when the service is particularly busy. **(See area for improvement 1)**

We recognised a clear drive for continuous improvement, with many improvement objectives identified. The provider had planned development days to consider how best to implement these and we were confident that progress will be made. We look forward to reviewing these developments at our next inspection.

Areas for improvement

1. The service should ensure that they have effective systems in place to provide all staff with formal supervision in line with organisational expectations.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HCSC) 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).

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

Requirements

Requirement 1

By 30 September 2024, you must ensure to review and address any gaps in post incident notification, debrief, and future learning. In particular you must:

- a) Ensure that any use of restraint, staff misconduct, and child and adult protection issues are fully documented, include pertinent detail and are shared timeously with relevant partner agencies including the social work department, the Care Inspectorate and any other relevant agencies.
- b) Ensure that all children and young people's personal plans and risk assessments are appropriately detailed and updated regularly in relation to the use of restraint and restrictive practices. Ensure clear guidance is given to staff about safe strategies to use, based on the individual needs of the children and young people. (This must include assessment of the legal advice sought in Area for Improvement 1)
- c) Ensure that individual de-briefs are carried out with staff following all incidents where restraint has been used and that analysis of the strategies used by staff identifies staff learning to improve future practice, and supports a reductionist approach to restrictive practices.
- d) Ensure that restraint and restrictive practices are effectively overseen by quality assurance systems and managers to ensure issues are identified promptly, allowing the provider to take steps to mitigate against this.

This is in order to comply with Regulation 4(1)(a), Regulation 4(1)(c) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This requirement was made on 11 July 2024.

Action taken on previous requirement

The provider had made changes to their internal reporting systems to ensure that the necessary information was available to allow notifications to external agencies to be made within appropriate timeframes. In addition, there was greater quality assurance measures in place to identify and respond appropriately to any issues or gaps in these.

Staff and young people received regular debriefs following incidents. These focused on staff practice and interventions, and had a learning focus. We found the information from these debrief's was used effectively to update care plans and risk assessments, ensuring staff had the necessary information to support young people in times of crisis.

The providers oversight and analysis of incidents was improved in numerous ways.

Senior managers had increased awareness of incidents as they happened, this allowed dispersal of resources and supports as required. Individual and house specific restraint reduction plans were also in place to ensure that staff, managers, and the providers specialist interventions services could meet review and discuss strategies to support young people, with a reductionist focus on incidents.

The provider was in the process of further developing online systems to give staff and managers improved access to real-time data to support review. This was unable to be assessed on this inspection but will be a welcome addition.

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

To support the young people's wellbeing and outcomes the provider should seek legal advice to ensure that young people are not being unnecessarily deprived of their liberty.

The legal advice should be shared with the Care Inspectorate and care practices should reflect both this advice and article 5 and 37 of the European Convention on Human Rights.

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 are restricted, this complies with relevant legislation and any restrictions are justified, kept to a minimum and carried out sensitively' (HSCS 1.3)

And

'My human rights are central to the organisations that support and care for me' (HSCS 4.1).

This area for improvement was made on 11 July 2024.

Action taken since then

The provider has sought appropriate legal advice that focused on deprivation of liberty. This was appropriately detailed and considered young people's rights, and the service provision appropriately. Whilst this information and legal position was important, so too was staff awareness of this. Managers were upskilled on the content of this legal advice. We found evidence of how this advice was used to ensure that young people's liberty was supported and promoted within care plans.

Previous area for improvement 2

To support the young people's wellbeing, outcome, and choice the provider should review their care planning and risk assessment processes, ensuring these include the views of young people, are kept up to date and include all relevant details.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'My personal plan (sometimes referred to as care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15)

And

'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20).

This area for improvement was made on 11 July 2024.

Action taken since then

Care planning and risk assessment processes were kept under regular review. The views of young people were clearly represented and the content of care plans assessed were suitably aspirational for young people.

Quality assurance processes relating to these documents were in place. This ensured that managers had awareness of these, and ensured updates were made appropriately and timely.

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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