
Report To: Inverclyde CHCP Sub Committee **Date:** 28th August 2014

Report By: Brian Moore
Corporate Director
Inverclyde CHCP **Report No:** CHCP/43/2014/SMc

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Subject: Inspection of Inverclyde Residential Childcare Services

1.0 PURPOSE

- 1.1 This report provides the outcome of the inspection of Kylemore, Crosshill and Neil St Children's Residential Units annual inspections by the Care Inspectorate for 2013/14.

2.0 SUMMARY

- 2.1 Inverclyde Residential Childcare Services are subject to annual inspections by the Care Inspectorate. The Care Inspectorate is an independent scrutiny and improvement body who regulate care services across Scotland ensuring that service users receive a high level of care and support. Kylemore was inspected in September 2013 and Neil St and Crosshill were subject to unannounced inspections conducted in 2014. In conducting the inspections the Care Inspectorate gathered a range of evidence provided by each of the establishments including policies, procedures and other documents along with conversations with a range of staff and young people.
- 2.2 A full public report of the inspections and grades is published on the Care Inspectorate website.
- 2.3 The summary of grades awarded range from excellent to good.

Kylemore Residential Children's Unit

Quality of Care and Support very good
Quality of Environment very good
Quality of Staffing excellent
Quality of Management and Leadership very good

Crosshill Residential Children's Unit

Quality of Care and Support good
Quality of Environment very good
Quality of Staffing very good
Quality of Management and Leadership good

Neil St Residential Children's Unit

Quality of Care and Support very good
Quality of Environment good
Quality of Staffing very good
Quality of Management and Leadership good

3.0 RECOMMENDATIONS

- 3.1 Members are asked to note the outcome of the Inspection reports including the recommendations and requirements.
- 3.2 Members are asked to note the action taken by the service in addressing the recommendations and requirements issued by the Care Inspectorate.

Brian Moore
Corporate Director
Inverclyde Community Health & Care
Partnership

4.0 BACKGROUND

- 4.1 Kylemore Residential Children's Unit opened in March 2013 replacing Redholm. An unannounced inspection by the Care Inspectorate took place between 2nd and 3rd September 2013.
- 4.2 The inspection concluded that young people are looked after in a very homely environment by a very competent stable staff team that provide young people with an excellent level of consistency which results in good outcomes. All aspects of care planning and practice are highly personalised to meet the diverse needs of young people.
- 4.3 It was suggested that an area of the service that could improve related to the current quality assurance systems and processes which involve service users, staff and stakeholders assessing the quality of the service.
- 4.4 The Care Inspectorate issued one recommendation.

Recommendation

All confidential paperwork should be stored securely.

Action Taken

This matter was addressed immediately by the service and staff are aware of the need to ensure all paperwork is stored in locked cabinet. As the CHCP rolls out the programme of Electronic Data Recording Management Systems plans will require to take account of the regulatory recording systems for residential care homes.

4.5 Summary of Overall Grades

Quality of Care and Support Statement 1 graded 6 Statement 3 graded 5	Overall grade 5 very good
Quality of Environment Statement 1 graded 6 Statement 2 graded 5	Overall grade 5 very good
Quality of Staffing Statement 1 graded 6 Statement 3 graded 6	Overall grade 6 excellent
Quality of Management and Leadership Statement 1 graded 6 Statement 4 graded 5	Overall grade 5 very good

- 4.6 Crosshill Residential Children's Unit was subject of an unannounced inspection in March 2014.
- 4.7 Residential staff will continue the practice of notifying the Care Inspectorate of specific incidents and now do so in the format preferred by the Care Inspectorate.

Summary of grades awarded

Quality of Care and Support Statement 1 graded 5 very good Statement 3 graded 4 good	Overall grade 4 good
Quality of Environment Statement 1 graded 5 very good Statement 2 graded 5 very good	Overall grade 5 very good
Quality of Staffing Statement 1 graded 5 very good Statement 3 graded 5 very good	Overall grade 5 very good
Quality of Management and Leadership Statement 1 graded 5 very good Statement 4 graded 4 good	Overall grade 4 good

- 4.8 Service strengths highlighted were staff had very positive and long established relationships with young people. The extensive knowledge of young people meant that young people could rely on staff to provide the right support at the right time. The service demonstrated a strong commitment to ensuring the views of young people influence the work of managers and staff within Crosshill.

The service was issued with one recommendation and one requirement.

Recommendation.

The service should compile a clear risk assessment of young people's needs, where high risk behaviour is an issue and this should incorporate staffing levels that demonstrate that at all times there are enough staff on duty to meet the needs of young people.

Requirement

The provider must ensure that all reportable incidents are submitted as notifications to the Care Inspectorate.

Action Taken

It is established practice that a risk assessment is completed when all young people are accommodated and this is regularly reviewed via the Looked After Review process. In addition to this each of the residential units are able to increase and modify staffing levels in accordance with the needs of the young people by using sessional residential staff.

- 4.9 Neil St Residential Children's Unit had an unannounced inspection commencing on the 16th September 2013 and was not concluded until May 2014 following ongoing dialogue with the Care Inspectorate relating to the inspection process.
- 4.10 The inspection found very good evidence of inter-agency working where strategies and joint practices were agreed in respect of supporting young people with high risk behaviours. The service was noted to provide a supportive environment for young people, where relationships with staff were valued by young people. Young people are provided with opportunities to develop in education.
- 4.11 The service was issued with two specific requirements. These requirements related to a single episode of child protection process.

Requirement

1. The provider should ensure that all policies and procedures in relation to child protection and complaints are adhered to.
2. The provider should ensure that all reportable incidents are submitted as notifications to the Care Inspectorate.

Action Taken

Following the feedback relating to the requirements an audit of child protection procedures and processes was undertaken across all three residential establishments. In line with Inverclyde's Quality Assurance Framework for Child Protection, evidence and evaluation was taken from the experiences of children and young people, parents/carers and residential staff. A systematic review of all relevant information pertaining to every child/young person resident in Neil St, including records of two young people who had left the unit, during the period June 2012 until January 2014 was conducted. This included daily logs, staff comments book, care plans, and risk management plans. The outcome of this audit was presented to the Care Inspectorate along with supporting information relating to the Child Protection Committee's programme of child protection training across all services. This audit supported the view that there is a high standard of child protection practices across all the children's units in Inverclyde.

Whilst across all of Inverclyde's residential children's units staff did make notifications to the Care Inspectorate they now do so in the format preferred by the Care Inspectorate and they have been issued with an extensive list of notifiable incidents that are required.

4.12 Summary of grades awarded

Quality of Care and Support Statement 1 grade 5 very good Statement 3 grade 5 very good	Overall grade 5 very good
Quality of Environment Statement 1 grade 5 very good Statement 2 grade 4 good	Overall grade 4 very good
Quality of Staffing Statement 1 grade 5 very good Statement 3 grade 5 good	Overall grade 5 very good
Quality of Management and Leadership Statement 1 grade 5 very good Statement 4 grade 4 good	Overall grade 4 good

5.0 PROPOSALS

- 5.1 The grades awarded highlights that Inverclyde' residential children's services are good to very good however it is it nonetheless disappointing that grades have reduced from excellent. Dialogue has taken place between the respective Heads of Service and managers from the Care Inspectorate and Inverclyde CHCP with a view to ensuring ongoing service improvement that returns the standard of excellence Inverclyde Council expects for looked after children.
- 5.2 All residential units have been provided with a comprehensive list of all notifiable incidents and the need to report to the Care Inspectorate.
- 5.3 An audit of child protection processes and practice across Inverclyde's residential child care services in its widest context was conducted. The audit concluded that residential staff are aware of best practice for keeping children safe. The staff report confidence in knowing when to raise concerns about a child protection issue, how to raise the concern, and who to raise it with. An area of development was highlighted around the complexity of recording mechanisms within residential settings which results in gaining a coherent account of situations in real time cumbersome. Work will commence in streamlining this process by extending the use of SWIFT case recording to residential units thus allowing information on a young person to be recorded in one place.
- 5.4 The Care Inspectorate made a recommendation that the service should demonstrate that there is adequate staffing levels at all times particularly when there are young people exhibiting high risk behaviour. A risk assessment is completed in respect of every young person when they become looked after and accommodated and this is reviewed and amended regularly via the Looked After Review process. The current staffing schedule was implemented in 2013 when Kylemore opened and provision reduced from 24 residential placements to 18 placements. This saw an increase in staffing ratio to include full nightshift cover as opposed to the practice of staff sleepover. It remains the case that when it is assessed that a young person requires additional levels of support and supervision additional staffing is provided via the sessional register.
- 5.5 Residential staff have and will continue to be provided with a range of training opportunities to enable staff to develop in line the SSSC's post registration learning and development requirements (PRTL), the SSSC Code of Practice and the National Framework for Child Protection Learning and Development in Scotland. Child protection courses are predominantly run under the auspices of Inverclyde Child Protection Committee. This allows staff to learn with participants from other agencies to promote effective interagency work alongside individual and professional responsibility to protect children. The suite of courses is designed to enable staff to pursue learning which is appropriate to their specific developmental needs and to any work they may be undertaking with a particular child. The CHCP subscribes to Care Knowledge, a web based learning resource. This sends staff alerts to new research, policy documents and other learning materials via email. It provides a web link to the learning source (including child protection materials). Staff are also receiving email to relevant e- bulletins that have been sent to the service from sources such as the

Scottish Government, SSSC and IRISS amongst others.

6.0 IMPLICATIONS

Finance

6.1 There are no financial implications in respect of this report.

Financial Implications:

One off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report £000	Virement From	Other Comments
N/A					

Annually Recurring Costs/ (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact £000	Virement From (If Applicable)	Other Comments
N/A					

Legal

6.2 None

Human Resources

6.3 None

Equalities

6.4 Has an Equality Impact Assessment been carried out?

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YES (see attached appendix)

NO - This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy. Therefore, no Equality Impact Assessment is required.

Repopulation

6.5 None

7.0 CONSULTATIONS

None.

8.0 LIST OF BACKGROUND PAPERS

8.1 Care Service Inspection Report : Kylemore Children's Unit.

8.2 Care Service Inspection Report : Neil St Children's Unit.

8.3 Care Service Inspection Report : Crosshill Children's Unit

Care service inspection report

Crosshill Home

Care Home Service Children and Young People

Crosshill Home
1 Crosshill Place
Port Glasgow
PA14 5UF
Telephone: 01475 715635

Inspected by: Janis Toy

Type of inspection: Unannounced

Inspection completed on: 21 March 2014



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Service provided by:

Inverclyde Council

Service provider number:

SP2003000212

Care service number:

CS2003001104

Contact details for the inspector who inspected this service:

Janis Toy

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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	4	Good
Quality of Environment	5	Very Good
Quality of Staffing	5	Very Good
Quality of Management and Leadership	4	Good

What the service does well

The service is committed to involving young people in their care and support. Strong participation methods are embedded in daily practices and by listening to the views of young people, child-centred approaches are routinely practiced by managers and staff within the service.

What the service could do better

The service must ensure that notifications to the Care Inspectorate are made in accordance with regulatory requirements.

The service should evidence discussions with young people, to demonstrate how young people are being supported to manage risk behaviours.

What the service has done since the last inspection

Through a stable and committed staff team, the service continues to provide young people with support aimed at promoting positive outcomes. The service strives to continuously improve upon existing participation methods, which elicit the views of young people, leading to improvements.

Conclusion

Crosshill Home offers young people a safe and comfortable environment in which they can develop and sustain meaningful relationships with staff.

Who did this inspection

Janis Toy

1 About the service we inspected

Crosshill Care Home is registered to provide care and accommodation for young people who are looked after and accommodated by Inverclyde Council, Social Work Services. Over the past year, the provider has reduced the number of young people it looks after from 12 to 6 as part of a wider restructuring by the service provider. A variation to amend its registration to reflect this was approved.

Crosshill is a large house situated in a residential area of Port Glasgow and is deemed to be a 'generic and assessment' unit .

The aim of the service is 'to provide a person centred approach which will incorporate a holistic assessment of needs for each individual young person taking into account their own life experiences.'

Before 1 April 2011 this service was registered with the Care Commission. On this date the new scrutiny body, Social Care and Social Work Improvement Scotland (Care Inspectorate), took over the work of the Care Commission, including the registration of care services. This means that from 1 April this service continued its registration under the new body, Care Inspectorate.

Based on the findings of this inspection this service has been awarded the following grades:

Quality of Care and Support - Grade 4 - Good

Quality of Environment - Grade 5 - Very Good

Quality of Staffing - Grade 5 - Very Good

Quality of Management and Leadership - Grade 4 - 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 low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What we did during the inspection

During this inspection, we gathered evidence from a range of sources including relevant sections of policies, procedures and other documents. These included;

- Certificates of Registration and Insurances
- Support Plans
- Risk Assessments
- Meetings with Young People
- Participation Strategy/Charter
- Medication records
- Individual Behaviour Management Plans(IBM)
- Daily logs
- Quality Audits
- Environmental checks
- Managers meetings
- Menus
- Incident records
- Service brochure
- Improvement Plan
- Staff training records
- Participation events

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

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.

Every year all care services must submit a self assessment form, telling us how they think their service is performing. We check to make sure this is accurate. The provider submitted a completed self assessment and this helped to inform our inspection process.

Taking the views of people using the care service into account

The views of young people are contained within the body of this report.

Taking carers' views into account

We were unable to speak with any parents/carers during this inspection process, but we did see evidence of their views about the service and have provided examples of these within the body of the report.

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: 4 - 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

At this inspection, we found that the performance of the service was very good for this statement. We looked at the Participation Charter, Annual Planning and Consultation calendar, personal plans, service questionnaires, young people meeting minutes and spoke with young people to assess this statement.

The Local Authority has a comprehensive participation strategy, within which the participation charter provides clear information for young people and their families, about what standard of support and involvement they will experience while living at Crosshill. The Charter states a commitment to support young people to build confidence, skills and resilience and we found positive examples of this during this inspection. Personal plans detailed the progress that young people were making, in relation to their self-esteem and abilities. Some young people were living more independent lives and demonstrated increased confidence, developed as a result of stable and established relationships with staff and managers within the service. While others were in the process of establishing trusting relationships, which enabled them to become more resilient in coping with daily challenges.

The service had firmly embedded methods of consultation with young people. These approaches encouraged young people to express their views and in some instances, to agree collectively, decisions about holidays and involvement in community based activities. An annual calendar evidenced that young people had been involved in determining plans for future and past events, and an 'our plans' page, conveyed the ideas that young people had made about their support. Young people told us, "We're always asked what we'd like to do" and " Staff are great. They listen to me and give me support when I need it". By engaging young people in decisions affecting them,

the service demonstrated their strong commitment to listening to young people's views and acting upon these where possible.

We could see that personal plans were written in an accessible format and where young people wished to adapt other documents, they were encouraged to do this and we saw a very good example where young people had improved upon an existing service questionnaire, in order to make it more colourful and engaging. This meant that young people were more encouraged to participate in this consultation. When we reviewed the responses from young people, when asked about the quality of their care and support, these were very positive, with all young people stating that they felt listened to and respected by staff and managers. These views were confirmed during our discussions with young people, when we inspected the service.

The service supported regular collective discussions with young people, and unlike a formal meeting, young people sat with others at mealtimes, around the dinner table to explore their views. To further advance The Authority's awareness of young people's perspectives, external managers were regular visitors to the house and young people took these opportunities to discuss their ideas and concerns with managers. We noted that young people had recently requested WiFi to be installed in the house and had worked on producing a document identifying safe practices for themselves, when accessing the internet. The installation of WiFi was being explored by managers, who feedback to young people in terms of any progress.

Broader developments across all The Authority's residential children's houses, showed a strong commitment to providing opportunities for young people to be involved in wider developments. We found evidence of young people being supported to contribute to the recruitment of staff, by asking questions and scoring performance of prospective candidates at interview. A formal letter was sent to each young person who had contributed to thank them for their involvement. Further to this opportunity, development days for young people, was routine practice within the service and photographs displayed showed their involvement in this event .

We spoke with young people during our inspection visit and we were confident that those who chose to speak with us, were very positive about living at the service. Some comments which helped confirm this view, included, "I get on really well with staff. They're really caring people", and "Staff are great. I like living here. Staff are always there if you need them". "XX is fantastic, so is xx".

Areas for improvement

Although we were told that young people have access to a Children's Rights Officer (CRO), who is currently engaging with young people through education provision, there was no evidence of independent advocacy work being specifically undertaken at Crosshill. The Authority had identified this lack of provision within its 6 monthly monitoring checks and had noted that action was needed. We would encourage

the service to explore additional independent advocacy opportunities, which actively engage young people, in a way that supports their awareness and decision-making. In addition to this, the service should adapt the young people's booklet, given to young people when they first arrive at the service, to include information about contacting independent advocacy, within the narrative of the booklet.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

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

Service strengths

At this inspection, we found that the performance of the service was good For this statement. We looked at personal plans, Individual Behaviour Management Plans (IBMP), risk assessments, incident reports, healthy eating and links with other services to assess this statement.

Young people's personal plans contained clear information relating to their health and well-being. A pen picture of what young people feel is important to them, offered staff insight into how best to support them and with references to the Getting it Right for Every Child (GIRFEC) framework and the well-being indicators of SHANARRI, plans provided guidance on the main objectives and effective interventions, which staff should focus on in practice. Examples of this were noted where smoking cessation had been identified for some young people, and where the service had secured the involvement of external professionals, to support in this instance. Plans also contain key events information and this allows the service to keep track of young people's behaviours.

We found evidence of the service working jointly with education and meetings with representatives from school, ensured that all involved in supporting the effective engagement of young people in their education, was a primary focus. Similarly, strong evidence of positive links with the local police service, meant that where 'soft intelligence' about the whereabouts and presentation of young people, where absconding and/or offending behaviour played a role, then each agency had information to help prevent further risk to young people and provide for a safe return to the service.

A risk assessment approach to supporting young people to lead positive and healthy lifestyles, included a view of evolving risk, as a means of ensuring open and ongoing assessment and promotion of safe behaviour for young people. Aspects of risk were highlighted in personal plans, with some evidence of these being linked to health and well-being. For example where young people were at risk of bullying by others, plans

stated what approach staff should use to minimise the risk and support an improved understanding of cause and effect for young people involved. IBMPs also provided evidence of a staged approach to helping young people resolve their issues.

Links with health services further promoted positive health outcomes, with young people receiving support from specialist mental health services including CAMHS and the LAAC Nursing team. Medical assessments and regular health checks ensured that young people had access to services to support their general health.

The service promoted healthy eating and a dedicated Cook prepared foods, based on a balanced and nutritious diet, while considering the views of young people. Those young people we spoke with during inspection, commented that they enjoyed the food and felt they could influence meals and purchases for the house. On the day of inspection, we joined young people and staff for lunch, where home-made soup, salad and fruit was on offer to all. Our discussion with the Cook, determined that although relatively new into post at the house, there was some evidence of meaningful relationships developing between her and young people, which promoted an improved understanding of good hygiene in the kitchen.

Areas for improvement

Although the service makes some reference to GIRFEC and the SHANARRI well-being indicators, within aspects of young people's plans, we suggest that this is further developed to evidence how young people are being supported to achieve healthy lives and how outcomes influence their overall health and well-being. A lack of written evidence demonstrating that staff discuss the impact of high risk behaviour, with young people, meant that we were unable to fully understand, the impact and outcomes of key working approaches with young people, who were at times involved in absconding and drug misuse behaviours. To further evidence effective interventions with young people, who are involved in such behaviours, the service should risk assess the needs of young people and compile clear individual risk assessments, which incorporate staffing levels, to demonstrate that at all times there are enough staff available to undertake this work (see recommendation 1 under this statement).

The service should ensure that all aspects of young people's plans are signed and dated by young people and others involved in their care and support. This will show that young people are aware of what is contained within their plans.

Individual plans for young people should contain the response given by the service, to instances of imposed 'consequences' to specific behaviours. For example, centrally held information by the manager should be recorded within personal plans and be easily accessible to young people.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The service should compile a clear risk assessment of young people's needs, where high risk behaviour is an issue and this should incorporate staffing levels to demonstrate that at all times there are enough staff on duty to meet the care and support needs of young people. National Care Standards, Care Homes for Children and Young People, Standard 7, Management and staffing.

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

At this inspection, we found that the performance of the service was very good for this statement. We spoke with young people and staff and made observations of the environment.

The provider had ensured that the accommodation was of a high standard, through the purchase of good quality furniture, fixtures and fittings. In addition, young people had been involved in choosing items for their home and this reflected their taste in cushions, lamps and other furnishings. Bedrooms were also personalised, with young people being consulted in their choice of curtains, bedding, rugs and other items which made their rooms welcoming and comfortable. By allowing young people to influence aspects of the environment, the service could demonstrate the value placed on young people's views and preferences.

Young people told us that they liked their home and that they enjoyed living there. They said that it was a nice place to live. We noted that improvements had been made to young people's bedrooms, additional sockets for convenience and new emergency lighting to protect young people from risk of harm.

Areas for improvement

We were made aware by the manager, that some of the furniture requires to be replaced in the coming months. The service intends to involve young people in choosing new items and this will further evidence the service's commitment to taking account of the views of young people.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 2

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

Service strengths

At this inspection, we found that the performance of the service was very good for this statement. We looked at risk assessments, health and safety checks, hygiene standards and food preparation.

The service is entered via a secure entry system and therefore an assessment can be made about any risk associated with permitting someone to enter. A visitors book is located in the foyer and visitors are asked to sign upon arrival and departure. In addition to these security measures, we were asked to show our identification to confirm the purpose of our visit. These measures mean that young people can be safe and secure within their home and where others visit, staff can advise young people as to the reason.

Risk assessments and IBMPs provided information to assist young people and staff to make decisions in the best interests of young people. Individualised assessments were compiled with young people, to help them to understand safer choices, leading to positive outcomes. All staff were trained Therapeutic Crisis Intervention (TCI), a suite of interventions aimed at de-escalating young people's behaviour, in order to support them safely. Child Protection training for staff also allowed for an informed response by staff, to issues concerning young people's safety.

Further assessments were undertaken in line with provider policies, in relation to activities and general health and safety practices. We found that these were of a good standard and incident reporting procedures, ensured managers and external managers were aware of all incidents involving young people, and could therefore monitor the outcomes of any intervention.

The Authority has a dedicated Health and Safety Officer, who through a range of Departments, coordinates audits of the environment at Crosshill. Recent environmental health and Strathclyde Fire and Rescue inspections, help to ensure safe practices in support of young people's well-being. Further to this, the Property Services Department, ensures that the house remains fit for purpose, with repairs and redecoration as required.

All staff had undertaken food hygiene training and we found that good practice was routinely followed in terms of food preparation, cooking and cleaning. Separate areas identified within the kitchen, promoted safe practices where raw and other foods were prepared. This ensured that young people were protected from the risk of cross contamination.

Areas for improvement

The service should continue to risk assess the environment in terms of the current need for an alarm on the upper floor door. This is currently used to alert staff to times when young people are coming downstairs and potentially exiting the building. While we understand the need to ensure staff awareness of young people's whereabouts, young people told us that they find the alarm sound to be very annoying and did not consider that it provides for a 'homely' environment. We agreed with this assessment.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

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

At this inspection, we found that the performance of the service was very good for this statement. We spoke with staff and the manager to assess this statement.

We noted that relationships between staff and young people were very positive and in some instances, were long-established and very important in supporting young people through significant events. Our discussions with staff provided considerable insight into how they view their role in helping young people to make the right choices for them and improve their chances of success. The extensive knowledge that those staff had about young people's history and current need, meant that young people could rely on them to provide the right support at the right time and this was evidenced in several situations during this inspection.

Young people told us that they believe that staff respond positively to their suggestions. Participation methods, including young people and staff development days, allowed for open discussion about how the service and the staff, could continue to meet young people's needs and when appropriate, consider new ways of working. Some comments from young people included, "I get on really well with staff. They are really caring people", and "I like living here. Staff listen to me and try to help when I need it. I know I can speak to staff if I need anything".

The Authority has a strong commitment to involving young people in the recruitment of staff across all residential children's houses. For further evidence of this practice, please see statement 1.1.

Areas for improvement

See statement 1.1

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

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

Service strengths

At this inspection, we found that the performance of the service was very good for this statement. We looked at training records, staff meeting minutes and spoke with staff, young people and managers to assess this statement.

Our discussions with staff, identified that they enjoy working at the service and in particular, with the young people in their care. We were aware that an Authority wide consultation with staff, about the staffing model and number of staff available on each shift, had been underway for a considerable time and this had been a source of some anxiety for some staff over a lengthy period. We were made aware that senior managers across The Authority had held briefing sessions, to further consult on agreeing a model for the future. Those staff who spoke with us during this inspection, told us that they understood the concerns of colleagues, but felt that the current model was operating well at Crosshill and that if there was a need for additional staff support, then this was always made available. This was confirmed by managers who were keenly aware of the views of staff in relation to this consultation.

Managers in the service worked hard to develop the skills and competence of the staff team, in order to promote leadership opportunities. By coaching and upskilling staff, through observations of practice and formal supervision sessions, staff felt supported by managers, who provided a significant amount of direct support in their daily schedule. Staff told us, "The manager is fantastic. So is the deputy".

Training was supported through a dedicated training section within The Authority and a continuous learning framework allowed for e learning courses, Care Knowledge resource website and formal performance management systems, including supervision and appraisal. We noted that training had included TCI, Child Protection, drug awareness, Children's Hearing (S) Act 2011 and a range of safeguarding events focusing on sexualised behaviour and parental drug misuse. These and other opportunities provided staff with the chance to develop their skills and knowledge in support of meeting young people's needs.

Team meetings took place regularly and these offered staff the opportunity to discuss practices and explore new ideas leading to improvement. Night-shift staff also met with managers, including external managers on a twice yearly basis, to promote inclusive approaches to improved communication and consultation with this group of

staff. Managers meetings took place regularly and these involved external agencies such as, the police, who joined meetings to share information, to assist the service in supporting young people and this provided an opportunity to work jointly, in safeguarding young people.

Supervision of staff was undertaken by managers and those staff we spoke with during inspection commented that they valued the support given by managers to their ongoing development. Managers explained that by focusing on the development needs of the staff team, they were improving practices and had noted that many members of the team responded well to their guidance and direction. This was confirmed by staff who stated that they felt supported by an experienced management team.

Young people's views about staff were further evidence of a motivated and skilled staff team. Young people told us, "Staff are always there if you need them", and "XX is great. She'll always make time for you".

Areas for improvement

The service should continue to provide leadership opportunities for staff, to promote positive outcomes for young people.

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: 4 - 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

At this inspection, we found that the performance of the service was very good for this statement. We looked at participation records, spoke with young people and managers to assess this statement.

As stated previously, the service demonstrates a strong commitment to ensuring the views of young people influence the work of managers and staff within Crosshill. Participation methods were embedded in daily practices and the manager and her staff team, promote an ethos of child centred practice. Relationships between managers and young people were a particular strength of the service and comments by young people, were extremely positive about how managers involve them in decisions affecting their lives.

Feedback from parents/carers also presented a positive view of how managers support young people. one family member commented, "The staff are brilliant and are doing a great job".

Areas for improvement

Although circumstances can make it difficult at times, to engage with young people's family members, the service should endeavour to involve parents/carers as much as possible, in gathering feedback about how the service is managed. This will provide additional insight into how families view the quality of the service.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide

Service strengths

At this inspection, we found that the performance of the service was good for this statement. We looked at monitoring practices, development planning and gathered perspectives from a range of stakeholders to assess this statement.

We were confident that the service regularly consults with relevant stakeholders in order to monitor the quality of the service. Managers routinely involve young people and staff, in deciding on future plans and work with colleagues in education, health and police services, further demonstrate a commitment to multi agency involvement. Core Group meetings provide a forum, where different agencies can discuss their work in support of young people. We noted that comments from colleagues in other agencies provided positive feedback on their experience of working with the service. Some comments included, "Staff ensure that communication is regular and the senior management team provide good leadership and ensure the team is consistent", and "I am absolutely delighted with the progress the young person I am working with has made since they arrived at Crosshill. XX appears more relaxed and happier". These comments provide assurances that the service is operating to a good standard and involve stakeholders in assessing the quality of management and leadership.

In consulting with staff, managers routinely undertake an exercise to look at the performance of the service against the Care Inspectorate quality statements. This reflected their views on how the service was meeting the needs of young people in relation to these standards. By engaging staff in this process, managers were evidencing the importance of understanding staff views in forming opinions about how the service should improve. Similar exercises were carried out with young people and feedback helped to inform decisions regarding improvements. By asking young people to suggest and decide upon improvements to the house and which holidays and activities they prefer, the service was demonstrating the importance placed upon young people's perspectives, in reaching decisions.

These participation processes lead to effective development planning and we found evidence of good progress toward identified improvements. These included greater involvement of young people in recruitment processes and improved links with local police. This meant that young people were supported by the work of all agencies, in ensuring their involvement and their safety.

Auditing processes allowed The Authority to be assured that broad aspects of service delivery were operating to a high standard and with evidence of health and safety, fire safety and environmental health practices being regularly monitored by specific council departments, young people were supported safely in their home. The managers also conducted regular audits of case files, staff rotas, medication and monthly reporting and these audits were used to promote improved practices across the staff team. External managers provided further quality assuring of the service through regular visits, record sampling, supervision with the manager

and meetings with staff and young people.

Areas for improvement

In line with regulatory requirements, the service must inform the Care Inspectorate when specific issues arise, with regard to young people and staff working in the service. We did not receive notifications in some instances and we made the manager and external manager aware of our concern. The service must ensure that it submits all notifications required, within identified timescales.

Grade awarded for this statement: 4 - Good

Number of requirements: 1

Number of recommendations: 0

Requirements

1. The provider must ensure that all reportable incidents are submitted as notifications to the Care Inspectorate. This is to comply with SS1/2011 210, Regulation 4 (1) (a) - make proper provision for the health, welfare and safety of service users. Timescale: immediate.

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

6 Inspection and grading history

Date	Type	Gradings	
14 Mar 2013	Unannounced	Care and support	6 - Excellent
		Environment	6 - Excellent
		Staffing	6 - Excellent
		Management and Leadership	6 - Excellent
12 Jan 2011	Unannounced	Care and support	6 - Excellent
		Environment	Not Assessed
		Staffing	Not Assessed
		Management and Leadership	Not Assessed
29 Jul 2010	Announced	Care and support	6 - Excellent
		Environment	Not Assessed
		Staffing	Not Assessed
		Management and Leadership	6 - Excellent

Inspection report continued

3 Mar 2010	Unannounced	Care and support Environment Staffing Management and Leadership	6 - Excellent Not Assessed 6 - Excellent Not Assessed
22 Oct 2009	Announced	Care and support Environment Staffing Management and Leadership	6 - Excellent 6 - Excellent 5 - Very Good 5 - Very Good
2 Mar 2009	Unannounced	Care and support Environment Staffing Management and Leadership	6 - Excellent 5 - Very Good 5 - Very Good 5 - Very Good
14 Oct 2008	Announced	Care and support Environment Staffing Management and Leadership	6 - Excellent 5 - Very Good 5 - Very Good 5 - Very 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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Care service inspection report

Neil Street Childrens Unit

Care Home Service Children and Young People

41 Neil Street
Greenock
PA16 9JA
Telephone: 01475 715809/10

Inspected by: Elaine Allison

Isobel Dumigan

Type of inspection: Unannounced

Inspection completed on: 16 January 2014



HAPPY TO TRANSLATE

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Service provided by:

Inverclyde Council

Service provider number:

SP2003000212

Care service number:

CS2003001105

Contact details for the inspector who inspected this service:

Elaine Allison

Telephone 0141 843 6840

Email enquiries@careinspectorate.com

Summary

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

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

We gave the service these grades

Quality of Care and Support	5	Very Good
Quality of Environment	4	Good
Quality of Staffing	5	Very Good
Quality of Management and Leadership	4	Good

What the service does well

We found very good evidence of inter-agency working, where strategies were shared and joint practices were agreed in respect of supporting risk behaviours. These included consultation with Police Scotland on the service's missing from care protocol. This ensured a joined-up approach to the safety of young people.

What the service could do better

The provider should ensure that all staff members are fully conversant with Inverclyde Council's child protection policy and procedure.

The service should ensure that in accordance with legislation, the Care Inspectorate is notified about reportable incidents.

What the service has done since the last inspection

The service took some of the young people on holiday to Spain and young people told us that they enjoyed this experience. The service had very good risk assessments in place for this trip thus ensuring that young people were kept safe.

The service continued to work closely with parents/carers to facilitate family contact.

Conclusion

The service provides a supportive environment for young people, where relationships with staff are valued by young people. Opportunities are provided, which encourage young people to develop in education and in ongoing contact with family members.

However, this inspection highlighted a significant area for improvement in relation to child protection and . whilst Inverclyde Council has taken immediate action to address this area for improvement, the Care Inspectorate will look at this at the next inspection.

Who did this inspection

Elaine Allison

Isobel Dumigan

1 About the service we inspected

Social Care and Social Work Improvement Scotland (SCSWIS) regulates care services in Scotland. It awards grades for services based on the findings of inspections. These grades, including any that services were previously awarded by the Care Commission, are available on www.scswis.com.

Before April 1st 2011 this service was registered with the Care Commission. On this date the new scrutiny body Social Care and Social Work Improvement Scotland (SCSWIS) took over the work of the Care Commission including the registration of care services. This means that from April 1st 2011, this service continued its registration under the new body SCSWIS.

Neil Street Children's Unit provides a service for a maximum of 6 children and young people who are looked after and accommodated by Inverclyde Council, Social Work Services. The service also supports young people who have moved into their own tenancies.

The service is situated in a residential area of Greenock close to the town centre amenities. All young people have a single bedroom and there are ample social and quiet areas within the home.

The ethos of the service is stated as 'we aim to provide an environment for young people which actively promotes positive growth and change within a caring and structured residential setting with caring and motivated staff.'

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 4 - Good

Quality of Staffing - Grade 5 - Very Good

Quality of Management and Leadership - Grade 4 - 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 low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What we did during the inspection

We wrote this report after an unannounced inspection that took place between 16 September 2013 and 16 January 2014. The inspection was carried out by Elaine Allison, Inspector, and Isobel Dumigan, Team Manager.

In this inspection we gathered evidence from various sources, including the relevant sections of policies, procedures, records and other documents including:

Certificates of Registration and Insurance

Questionnaires - young people

Minutes of meetings - staff

Care Plans

Child Protection records

Individual risk assessments and audits

Medication records

Safety Checks

Premises and risk assessments

Staff supervision and appraisal programme

Staff rotas

Development Plan

We also conducted a tour of the premises and observed staff working with young people.

We also spoke with:

Young people

Social Workers

The Manager/Deputy Manager

Care staff.

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

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 completed a self assessment which informed the inspection process.

Taking the views of people using the care service into account

The views of the young people are incorporated within this report.

Taking carers' views into account

We did not speak with any carers as part of 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

The grade achieved for this statement was 5 - very good. We concluded this after we considered feedback from young people, staff and management and we looked at records and other documentary evidence.

The service had a Participation Strategy. This was found to be person centred involving young people, parents, carers and other stakeholders in developing all aspects of the service. On examination of the participation strategy we saw that the principles of GIRFEC were embedded in the policy.

Examination of a sample of care plans provided evidence that young people had been supported by staff to make important decisions in their lives and that they had been well supported to develop their skills.

Some of these important decisions included:

one young person had help with moving on, housing, claiming relevant benefits
help with college enrolment , which led to college place
working with the young person and school to ensure school attendance.

Every young person had a key worker who worked with young people to develop individualised plans for the young people. The returned CSQ's indicated that 3 of the young people 'strongly agreed' and 2 'agreed' that they had full involvement in their care planning within Neil Street.

The manager and staff had created a positive atmosphere in which children and young people felt that their views were welcomed and valued. Young people we spoke with told us staff listened to their views. They said they could talk to staff about anything and knew they would be listened to. Young people we spoke with told us:

'we get choices in food we like and don't like'

'we get asked what we think'

This shows that young people who are presently resident in Neil Street feel comfortable at airing their views and participate in the ongoing improvement of their own care.

We found staff promoted the use of children's rights officers. They visited the service regularly and met with young people. The service provider also consulted with young people via an online tool called "Viewpoint". Child protection workers were involved in monitoring and assessing information to make sure there were appropriate responses to comments made.

The service continued to make good use of the questionnaires to seek the views of young people and their carers. These were logged and audited and were seen to influence practice. Questionnaires recorded the views of a wide range of professional stakeholders. Each indicated a high level of satisfaction. We saw that children and young people had been involved in the recruitment of new staff members.

The service had developed a brochure which told young people all about staying at the service. This information gave young people a very good insight into the service prior to admission.

Inverclyde Council are currently in the process of reviewing participation within their children's units and are consulting with young people, staff, stakeholders and CELCIS about the most effective and efficient means to ensure views are captured and improvements made on the back of these. They are looking at ways to better capture young people's views by replacing young peoples' meetings with extended 1:1 time. Inverclyde want to ensure that young people are fully involved in the decision making process relating to their specific needs.

Areas for improvement

The current participation policy, development plan and welcome brochure require to be updated to reflect how the service elicits the views of young people.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

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

Service strengths

The grade achieved for this statement was 5 - Very Good.

At this inspection, we looked at personal plans; spoke with the young people and the staff. We also sampled a number of policies and procedures that covered the service's legal requirements to maintain the quality of care and support being provided. Young people had access to various health professionals including GP, Dentist and Optician. Further specialised support was available on an individual basis. This had included access to and advice from the Child and Adolescent Mental Health Service (CAMHS) and additional training for staff members to address individual needs. We saw that the young people had regular appointments with the LAAC nurse this ensured ongoing regular health checks were taking place.

A child protection policy was in place and individual risk assessments were in place for young people. We saw that the service had very comprehensive risk assessments in place for children and young people's trips and holidays, particularly the recent holiday to Spain. This ensured that the children and young people's health and well-being needs were met at all times.

The children and young people being cared for at Neil Street had good personal plans that demonstrated real insight into the health and well-being of their needs. We found that the personal plans included the use of SHANARRI indicators to gather information which ensured that all the young people's plans were individualised. We found good examples where staff members supported young people to remain in mainstream education whereby they were present with young people in the classroom setting.

A placing social worker that we spoke with told us ' children are cared for in an individualised basis in relation to their individual needs'.

We observed the staff and young people interact throughout the visit and it was evident that there were good positive relationships between them and a genuine emotional connection.

There was evidence that the service worked hard to support young people to maintain and improve contact with their families. This included facilitating and supporting contact on a regular basis.

Staff and young people confirmed that healthy lifestyles were encouraged and we found that young people had been involved in a range of activities, including holidays abroad and more locally based breaks. Other young people had attended individualised activities and this had included young people who had moved on from the service and were continuing to be supported by staff in order to promote their confidence through well developed relationships.

Areas for improvement

We noted that the service had not been recording when they had conducted medication audits. The manager rectified this immediately and there is now a system in place to clearly show when medication audits take place.

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: 4 - 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

Please see quality statement 1.1

Areas for improvement

Please see quality statement 1.1

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 2

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

Service strengths

The grade achieved for this statement was 4 - Good.

We were welcomed into the service via a front door entry system, which required staff to let us in and we were asked for identification and to sign the visitors book. By ensuring that access is only through this process, we were reassured that young people were safe and protected.

We reviewed risk assessments which contained detailed information relating to young people and these assessments clearly identified potential risks and guidance on how these should be managed. We found good evidence of inter-agency working, where strategies were shared and joint practices were agreed in respect of supporting risk behaviours. These included consultation with Police Scotland on the service's missing from care protocol. This ensured a joint-up approach to the safety of young people.

There was evidence of policies and procedures on physical intervention, which were in line with recent guidance on, Holding Safely, a guide for residential Child Care

Practitioners and Managers about physically restraining children and young people. (SIRCC, Scottish Executive and SWIA 2005; revised in January 2013). There was also evidence of a child protection policy and risk assessments on all the young people being cared for.

Risk assessments for the building had been carried out and checked on a regular basis. We found that the service had a robust maintenance policy and staff and young people that we spoke with confirmed that some repairs were carried out quickly.

The young people we spoke with during the visit and the returned Care Standard Questionnaires all said they felt safe secure and well cared for. They were also confident that they knew who to speak to if they were unhappy or felt unsafe.

Areas for improvement

During this inspection we found that the local authority's child protection procedure had not been followed. The service must ensure that all policies and procedures in relation to child protection and complaints are adhered to and that the appropriate notifications are submitted to the Care Inspectorate.

(See requirement 1 in quality statement 4.4).

We found that one staff member had not received child protection training although through discussion we ascertained that she had a clear understanding on what to do in the event of a child protection issue. We noted slippage in refresher training for care staff in child protection. This area for improvement has been addressed and all staff have now received updated training in child protection. This area for improvement will be looked at during the next inspection.

During a tour of the home we saw that some repair work was required on the ground floor, which potentially could be a security risk for young people. We discussed this with management and the repairs were addressed immediately.

We saw that hand towels in the kitchen were not placed in a holder and were lying on the work surface. The service should ensure that all paper towels are placed in appropriate dispensers to ensure that cross infection does not take place.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

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

Please see quality statement 1.1

Areas for improvement

Please see quality statement 1.1

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

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

Service strengths

At this inspection, we found that the performance of the service was very good for this statement. The service ensured that the staff team were properly trained and motivated to offer young people a very good standard of care and support.

We sampled written records, which were of a high standard and demonstrated that staff had a very good knowledge and understanding of the needs of young people in their care.

Regular team meetings allowed the staff team opportunities to express their views on how the service could be improved and to discuss consistent approaches to supporting young people. Those staff we spoke with during this inspection, told us that team meetings are important and well attended. They said that they found the culture within the service, to be open and consultative. Staff we spoke with told us 'all staff are singing from the same hymn sheet we are all coherent'.

Staff were very complimentary about the manager and her style of management and commented, "XXXX is a good manager and she is very kind to the children".

We saw that all staff, including sessional staff, had an appraisal plan in place. This ensured that children and young people were looked after by a professionally trained staff team.

We also noted that staff had been involved in development days and these provided further opportunities to influence the quality of service delivery. Discussions relating to the redesign of questionnaires for staff, parents and carers and stakeholders, had been explored, with staff offering their views about how to improve upon existing practices.

Areas for improvement

The service should ensure that the changing needs of the young people are assessed and that staffing levels set accordingly.

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: 4 - 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

Please see quality statement 1.1

Areas for improvement

Please see quality statement 1.1

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide

Service strengths

The grade achieved for this statement was 4 - Good.

The service had involved young people, parents/carers and other stakeholders, when assessing the quality of the service provided.

The service undertakes a range of audits of records and practices in order to quality assure the service. We found that the manager had undertaken a recent audit of violent incidents and safeholds and carried out regular audits on individual care plans. These practices ensure that young people's plans remain current and guide staff when providing daily support.

We found that the service routinely involved young people and staff in determining improvements within the service, through regular discussion, Staff meetings and developments days. These forums allowed all involved to influence how developments are taken forward. In addition, stakeholders that we spoke with, told us that the

service also involves them, through questionnaires and informal discussion, when visiting the service.

Senior managers visited the service regularly and shared information and ideas with young people and staff. Management were fully involved in all aspects of the service and were described by young people, staff, stakeholders and parents as approachable, supportive and professional .

Staff received supervision from the manager and senior staff where they could discuss practice issues, training requirements and develop practice.

A placing social worker reported that they were satisfied with the quality of care and support provided for individual young people. They acknowledged that there was good clear communication with staff responsible for individual young people and that they regarded the houses to be homely and welcoming for young people.

Areas for improvement

During this inspection we found that the local authority's child protection procedure had not been followed. Whilst the service had addressed this issue, the Care Inspectorate will inspect against this area for improvement at the next inspection. (See requirement 1).

Reportable incidents had not been notified to the Care Inspectorate. (See requirement 2).

Grade awarded for this statement: 4 - Good

Number of requirements: 2

Number of recommendations: 0

Requirements

1. The provider must ensure that all policies and procedures in relation to child protection and complaints are adhered to.
This is in order to comply with:
SS1 20111/210 regulation 4 (1) (a) - a requirement that the provider shall make proper provision for the health and welfare of service users.
Timescale - with immediate effect.
2. The provider must ensure that all reportable incidents are submitted as notifications to the Care Inspectorate.
This is in order to comply with:
SS1 20111/210 regulation 4 (1) (a) - a requirement that the provider shall make proper provision for the health and welfare of service users.
Timescale - with immediate effect.

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

6 Inspection and grading history

Date	Type	Gradings
17 Jan 2013	Unannounced	Care and support 6 - Excellent Environment 6 - Excellent Staffing 6 - Excellent Management and Leadership 6 - Excellent
24 Aug 2011	Unannounced	Care and support 6 - Excellent Environment 6 - Excellent Staffing Not Assessed Management and Leadership Not Assessed
28 Jan 2011	Unannounced	Care and support 6 - Excellent Environment Not Assessed Staffing Not Assessed Management and Leadership Not Assessed

Inspection report continued

26 Aug 2010	Announced	Care and support Environment Staffing Management and Leadership	6 - Excellent Not Assessed Not Assessed 6 - Excellent
20 Jan 2010	Unannounced	Care and support Environment Staffing Management and Leadership	6 - Excellent Not Assessed 6 - Excellent Not Assessed
10 Jun 2009	Announced	Care and support Environment Staffing Management and Leadership	6 - Excellent 5 - Very Good 5 - Very Good 5 - Very Good
8 Jan 2009	Unannounced	Care and support Environment Staffing Management and Leadership	6 - Excellent 5 - Very Good 5 - Very Good 5 - Very Good
11 Aug 2008	Announced	Care and support Environment Staffing Management and Leadership	6 - Excellent 5 - Very Good 5 - Very Good 5 - Very 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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ہے بایتسرد می م وونابز رگی دی روا ولکش رگی دی رپ شرازگ تعاشا ہی

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Care service inspection report

Kylemore

Care Home Service Children and Young People

13 Kylemore Terrace

Greenock

PA16 0RY

Telephone: 01475 715789

Inspected by: Elaine Allison

Type of inspection: Unannounced

Inspection completed on: 3 September 2013



Contents

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1 About the service we inspected	5
2 How we inspected this service	6
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5 Summary of grades	20
6 Inspection and grading history	20

Service provided by:

Inverclyde Council

Service provider number:

SP2003000212

Care service number:

CS2003001106

Contact details for the inspector who inspected this service:

Elaine Allison

Telephone 01294 323920

Email enquiries@careinspectorate.com

Summary

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

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

We gave the service these grades

Quality of Care and Support	5	Very Good
Quality of Environment	5	Very Good
Quality of Staffing	6	Excellent
Quality of Management and Leadership	5	Very Good

What the service does well

We found Kylemore to be a very good service providing high quality care for young people.

Young people enjoy strong and positive relationships with staff. All aspects of care planning and practice are highly personalised and tailored to comprehensively meet the individual and diverse needs of each young person. The staff have worked hard to maintain the 'homely' feel to the new premises.

What the service could do better

The service should ensure that the quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service provided are duly stamped or dated. The service should address the recommendations and areas for improvement contained within this inspection report.

What the service has done since the last inspection

The service has moved into a new purpose build home. We saw that the managers and staff worked hard to involve young people in every aspect of the move. We found that the service had consulted with neighbours to ensure that they had an understanding of the service, this ensured the continued safe care for the young people.

Conclusion

Young people continue to be looked after in a very homely environment by a very competent and stable staff team that provides young people with an excellent level of consistency. The level of support given by staff to the young people has continued to result in very good outcomes for young people.

Who did this inspection

Elaine Allison

1 About the service we inspected

Social Care and Social Work Improvement Scotland (SCSWIS) regulates care services in Scotland. It awards grades for services based on the findings of inspections. These grades, including any that services were previously awarded by the Care Commission, are available on www.scswis.com.

Before April 1st 2011 this service was registered with the Care Commission. On this date the new scrutiny body Social Care and Social Work Improvement Scotland (SCSWIS) took over the work of the Care Commission including the registration of care services. This means that from April 1st 2011, this service continued its registration under the new body SCSWIS.

Kylemore is a newly built residential house built in the town of Greenock. It replaced an existing house "Redholm" and is managed by Inverclyde Council. The new building is of bespoke design offering young people individual bedrooms with ensembles, roomy and well designed communal areas and a large garden with an impressive decking area.

The function of the unit is 'to provide a person centred approach which will incorporate a holistic assessment of needs for each individual young person taking into account their own life experiences. In doing so, individual care plans will be tailored to meet these needs effectively within an environment that promotes safe caring.'

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 6 - Excellent

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 low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What we did during the inspection

We wrote this report after an unannounced inspection that took place on 2 and 3 September 2013. The inspection was carried out by Elaine Allison Social Care and Social Work Improvement Scotland Inspector.

At this inspection, we gathered evidence from various sources, including the relevant sections of policies, procedures and other documents including;

Certificates of Registration and Insurance

Questionnaires

Welcome Pack

Complaints procedure/records

Absconding records

Individual care plans

Individual crisis management plans

Medication procedures/records

Health records

Various audits and monitoring forms

Staff supervision records

Minutes of meetings

Training records

Maintenance records

Discussions with young people

Discussion with the Cook

discussions with staff members

Discussions with managers

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

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 submitted a comprehensive self assessment prior to the inspection which informed the inspection process.

Taking the views of people using the care service into account

The views of the young people are contained within the body of this report.

Taking carers' views into account

We did not speak with any carers as part of 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

The grade achieved for this statement was 6 - Excellent. We concluded this after we considered feedback from young people, staff and management and we looked at records and other documentary evidence.

The service had a Participation Strategy. This was found to be person centred involving young people, parents, carers and other stakeholders in developing all aspects of the service. On examination of the participation strategy we saw that the principles of GIRFEC were embedded in the policy.

Examination of a sample of care plans provided evidence that young people had been supported by staff to make important decisions in their lives and that they had been well supported to develop their skills.

One young person that we spoke with during the inspection told us 'I am working and I am at college I couldn't have done either without the support and help that I got from the staff'.

We saw that children and young people were encouraged to participate and contribute to regular in-house care planning meetings. Every young person had a key worker who worked with young people to develop individualised plans for the young people. One young person told us 'I know what is in my care plans cos my key worker and me work out what's best for me'. The returned CSQ's indicated that all the young people 'strongly agreed' that they had full involvement in their care planning within Kylemore.

The manager and staff had created a positive atmosphere in which children and young people felt that their views were welcomed and valued. Young people we spoke with told us staff listened to their views. They said they could talk to staff

about anything and knew they would be listened to. Young people we spoke with told us

' staff ask us all the time what we think about things that have to do with everything that goes on '

' I get my say even if they don't ask me but staff always listen'

' We had a say in everything that happened in the move to this new house'

' I got to pick everything for my new bedroom before we moved in'.

This level of young people's involvement ensured that the young people felt a sense of ownership in the everyday decisions that affected their lives and gave them a sense of pride in their living environment.

We found staff promoted the use of children's rights officers. They visited the service regularly and met with young people. They also met with the service manager to give feedback on young people's views. This was a good support for young people and helped maintain a focus on involvement and consultation within the service. We found young people were supported to be aware of what they should expect from the service.

The service had a policy which described how services involved young people in making decisions. Staff members were all familiar with this document and good quality training had been made available to promote participation. The service made sure young people had different opportunities to get involved or give their views about the service. This meant young people could choose how to get involved. They could use the service's suggestion box or complete satisfaction questionnaires. The service provider also consulted with young people via an online tool called "Viewpoint". Child protection workers were involved in monitoring and assessing information to make sure there were appropriate responses to comments made.

The service continued to make good use of the questionnaires to seek the views of others. These were logged and audited and were seen to influence practice. Questionnaires recorded the views of a wide range of professional stakeholders. Each indicated a high level of satisfaction.

The service had developed a brochure which told young people all about staying at the service. This information gave young people a very good insight into the service prior to admission. The information given to young people also explained how the service used the SHANARRI indicators in all aspects of the care provided. Young people were involved in making the brochure and it was in a bright format using straightforward language. There was also a brochure for adults such as social workers and parents which gave them the information they needed.

The service is working with young people towards achieving an award 'Rights Respecting Unit' (UNICEF). This further shows that participation is embedded at the heart of the work carried out at Kylemore.

Areas for improvement

The service should ensure that the questionnaires used to obtain the views of service users and carers in assessing and improving the quality of the care and support provided by the service are duly dated. The service should continue to encourage all young people to participate in young people's meetings. This will ensure that the views of everyone living at Kylemore are heard and acted upon where appropriate.

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

As a result of our findings during this inspection we concluded that a very good grade had been achieved in regard to this quality statement.

We found Kylemore was delivering high quality care resulting in very good outcomes for the children and young people using the service. At this inspection, we looked at personal plans; spoke with the young people and the staff. We also sampled a number of policies and procedures that covered the services legal requirements to maintain the quality of care and support being provided.

Young people had access to various health professionals including ; GP, Dentist and Optician. Further specialised support was available on an individual basis. This had included access to and advice from the Child and Adolescent Mental Health Service (CAMHS) and additional training for staff members to address individual needs.

There was a complaints procedure that the young people all confirmed they were aware of and were confident it worked for them. We found that the service had in place a robust procedure to deal with complaints. Young people told us that they were very happy that their complaints were taken seriously. A robust child protection policy was in place and individual risk assessments were in place for young people.

The children and young people being cared for at Kylemore had very good personal plans that demonstrated real insight into the health and well-being of their needs. We found that the personal plans included the use of SHANARRI indicators to gather information which ensured that all the young people's plans were individualised. We found some excellent work carried out to address a particular young person's needs which led to the young person feeling more confident and raised self-esteem.

We saw evidence of effective planning by the service to make sure young people were fully supported with any changes or events, such as moving on to other services or to

independent living. Changes were well managed with the needs of young people a clear priority. Where circumstances allowed, there were detailed records about the lead up to any change, making sure young people were comfortable and had the time they needed to adapt. The service encouraged young people who had left the home to keep in touch. This ensured that the attachments formed continued after a young person left the care of the service.

We observed the staff and young people interact throughout the visit and it was evident that there were good positive relationships between them and a genuine emotional connection.

We spoke to three young people during the inspection they all indicated that the staff at Kylemore made them feel safe and secure. The young people informed us that they were all involved in their personal plan.

It was clear from the paperwork that we saw that staff had worked hard to understand, and where safe and appropriate, to accommodate the young peoples' wishes and views. Young people were encouraged to take part in healthy pursuits such as ; local football clubs, non contact boxing. All of these pursuits lead to a healthy outcome for the young people at Kylemore.

Areas for improvement

The service should continue with the very good service relating to meeting the health and wellbeing needs of the young people placed there.

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

Please see statement 1.1

Areas for improvement

Please see statement 1.1

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

At this inspection, we found that the performance of the service was very good for this statement. The service met the safety needs of young people very effectively. We looked at individual crisis management plans, maintenance records, monitoring forms and spoke with young people and staff to help us assess this statement.

Kylemore provides a safe and comfortable environment for the young people who live there. Very good attention is given to maintaining the premises and this includes regular health and safety audits. The young people live in a new, purpose build house which although large in size manages to maintain a homely feel. Young people told us;

'This new house is fab I love my en suite'

' the garden is amazing and so is the house'

' this is just like anybody else's house it doesn't feel like a unit'

' I love the big table in the dining room it's great'

' we are very lucky to live in such a posh place I love it'

The young people spoken with during the inspection and the returned questionnaires confirmed that the young people felt safe and secure when residing at Kylemore. Individual risk assessments for young people had recently been reviewed. Risk assessments for the building and garden area had been carried out and checked on a regular basis. We saw very good individual crisis management plans in place for young people. One young person told us ' when I go into one staff know me really well and if I'm cheeky they know that they can tell me that I am . They don't hold grudges'.

The provider had detailed policies and procedures and a robust system in place to ensure safer recruitment practice. Young people told us that they had been involved in the recruitment of new staff.

There was evidence of policies and procedures on physical intervention, which were in line with recent guidance on, Holding Safely, a guide for residential Child Care Practitioners and Managers about physically restraining children and young people. (SIRCC, Scottish Executive and SWIA 2005). There was also evidence of a child protection policy and risk assessments on all the young people being cared for.

The young people we spoke with during the visit all said they felt safe secure and well cared for. They were also confident that they knew who to speak to if they were unhappy or felt unsafe. Entry to the house was limited, the doors were secure and visitors were asked for identification and were required to sign a visitors book, therefore the young people are kept safe.

Areas for improvement

During this inspection we found that a large amount of confidential paperwork relating to young people and staff had been left lying on the floor of the young people's games room. The service must ensure that all confidential paperwork is kept safe and secure. (see recommendation 1)

We found that the Cook had not received child protection training although through discussion we ascertained that she had a clear understanding on what to do in the event of a child protection issue. We discussed with the manager the importance of ensuring that all staff receive child protection training.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The service must ensure that all confidential paperwork is secured safely. NCS 7
Care Homes for Children and Young People - Management and Staffing

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 6 - Excellent

Statement 1

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

Service strengths

Please see statement 1.1.

Areas for improvement

Please refer to statement 1.1.

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

As a result of our findings during this inspection we concluded that an excellent grade had been achieved in regard to this quality statement.

We found that the service's staff team are well trained, qualified and are appropriately registered with the Scottish Social Services Council.

The service had in place relevant policies and procedures to ensure that it had a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice. Staff we spoke with as part of this inspection demonstrated a very good knowledge of the National Care Standards. There was a policy and procedure in relation to staff recruitment to ensure that all staff were recruited and inducted in a safe and robust manner and service users were protected. All staff had completed a period of induction and had completed a full programme of mandatory training including, child protection and health and safety. As part of the induction, staff were required to familiarise themselves with the service's policies and procedures. This ensured that staff possessed the required knowledge skills and expertise to care for the children and young people who used the service

Staff training records provided a written record of when individual staff had completed training and when it was required to be updated. We found that staff were encouraged to access training relevant to young people's needs.

There was a system in place for all staff to receive supervision and annual appraisals. The staff spoken with as part of this inspection confirmed that they received regular supervision. One staff member told us 'the supervision has allowed me to become a reflective practitioner, it helps to put theory into practice'. All staff that we spoke with during the inspection told us that they felt that the management had very much an open door policy and that they did not have to wait for formal supervision to approach them for advice or guidance.

Young people spoken with during the inspection told us that they felt respected and cared for by the staff team. Young people said

'this is a great place to live the staff are the best'

'It's not like a children's home it's like living with your own family'

'In my opinion this unit is the best, staff don't look at us as if we are different from anybody else, they treat us as equals'

'I know that the staff care a lot about me'.

There were regular staff meetings. Staff we spoke with considered these as important both in terms of allowing for better communication and for information sharing ensuring continuity of care for the young people.

Staff spoken with impressed as highly motivated and enthusiastic about their work. They obtained a great deal of satisfaction from their employment at Kylemore.

Areas for improvement

The service should continue to access training opportunities which help address individual needs of young people.

Grade awarded for this statement: 6 - Excellent

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

Please see statement 1.1

Areas for improvement

Please see statement 1.1

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

As a result of our findings during this inspection we concluded that a very good grade had been achieved in regard to this quality statement.

We found that young people live in a home that is effectively managed in their best interests. The manager and staff clearly have a strong commitment to delivering very good childcare practice tailored to the personal needs of the young people they look after. The effectiveness of this approach was evident in the very good progress young people had made. This was confirmed during the inspection after speaking with young people, social workers and staff.

We sampled internal auditing systems that assist the performance of the service. By this we mean how they check the support for each young person, health and safety issues and ensuring action plans are devised to make improvements. Management and staff demonstrated through discussions and within records that regular checks were carried out across different aspects of the care being provided at Kylemore.

We found that the manager had in place a system for auditing individual care plans for young people. This ensured that planning documents were accurate and up to date which meant young people received the care which had been agreed with them.

Senior managers visited the service regularly and shared information and ideas with young people and staff. Management were fully involved in all aspects of the service and were described by young people, staff, stakeholders and parents as approachable, supportive and professional .

All service users, staff and stakeholders we spoke with as part of this inspection confirmed that they were very much involved in the ongoing assessment of the quality of care provided by Kylemore and all felt that their opinions were valued. The service organised a development day for staff, to review how the service was meeting the needs of young people and their families, by using the principles of GIRFEC, to inform their views. Staff who spoke with us during this inspection, told us that they found this and other development opportunities, to be very helpful, when reflecting on current practice and areas for development.

Areas for improvement

The manager should address the areas for improvement and recommendations contained within this report .

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	5 - Very Good
Quality of Staffing - 6 - Excellent	
Statement 1	6 - Excellent
Statement 3	6 - Excellent
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
28 Feb 2013	Announced (Short Notice)	Care and support 6 - Excellent Environment 6 - Excellent Staffing 6 - Excellent Management and Leadership 6 - Excellent
31 Aug 2011	Unannounced	Care and support 6 - Excellent Environment 6 - Excellent Staffing Not Assessed Management and Leadership Not Assessed
24 Jan 2011	Unannounced	Care and support 6 - Excellent Environment Not Assessed Staffing Not Assessed Management and Leadership Not Assessed

Inspection report continued

27 Jul 2010	Announced	Care and support Environment Staffing Management and Leadership	6 - Excellent Not Assessed Not Assessed 6 - Excellent
19 Mar 2010	Unannounced	Care and support Environment Staffing Management and Leadership	6 - Excellent Not Assessed 6 - Excellent Not Assessed
5 Oct 2009	Announced	Care and support Environment Staffing Management and Leadership	6 - Excellent 5 - Very Good 5 - Very Good 5 - Very Good
11 Feb 2009	Unannounced	Care and support Environment Staffing Management and Leadership	6 - Excellent 5 - Very Good 5 - Very Good 5 - Very Good
15 Oct 2008	Announced	Care and support Environment Staffing Management and Leadership	6 - Excellent 5 - Very Good 5 - Very Good 5 - Very Good

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