

## Care service inspection report

# Pentland View Close Support Unit

## Care Home Service Children and Young People

83 Pentland View  
Edinburgh  
EH10 6PT  
Telephone: 0131 445 4024

Inspected by: Duncan Craig

Chris Lumb

Type of inspection: Unannounced

Inspection completed on: 19 April 2012



## Contents

	Page No
Summary	3
1 About the service we inspected	6
2 How we inspected this service	7
3 The inspection	11
4 Other information	21
5 Summary of grades	22
6 Inspection and grading history	22

### **Service provided by:**

City of Edinburgh Council

### **Service provider number:**

SP2003002576

### **Care service number:**

CS2003010924

### **Contact details for the inspector who inspected this service:**

Duncan Craig

Telephone

Email [enquiries@scswis.com](mailto:enquiries@scswis.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	5	Very Good
Quality of Management and Leadership	4	Good

### What the service does well

We found that Pentland View Close Support Unit provided very good residential care and support to the young people living there.

The service worked very well with young people to help them develop purposeful and safe lifestyles. This was within the context of promoting an ethos of "community".

The cook and domestic played a significant role in contributing to this sense of community.

We saw that staff in the service worked very hard to make Pentland View a very positive place to stay.

We found that the service worked well with other services and agencies to best meet the needs of young people.

We found that managers and staff had a very high level of commitment to the young people in their care and to those who had previously been in their care.

We saw that relationships between young people and staff were very positive.

The managers and staff of the service were suitably qualified, knowledgeable and skilled.

We saw that the service provided a homely, stable and safe environment. The unit presented as clean and tidy. The downstairs of the house was well decorated and well furnished.

### What the service could do better

The Manager acknowledged the need to review and update the unit's "Statement of Functions and Objectives" and the information booklet for young people and their

parents/carers, "Things You Need To Know". This update should include details of the Care Inspectorate.

Whilst considerable improvement was evident from previous inspections, we found that the service should continue to monitor recording to ensure records are well maintained, audited and reviewed appropriately.

The service should continue to develop ways of involving young people, families/ carers and other stakeholders in assessing and improving the quality of the service. The "Action Plan" and the "Incident Evaluation" form should be introduced as planned.

The service should complete the dialogue regarding how it will support young people who have left the service. This should include a clear policy and practice guidance to ensure "dove-tailing" with the Edinburgh wide Throughcare and Aftercare provision. We discussed with the Manager the need for clarity as regards notifications to the Care Inspectorate.

The provider should continue to invest in the property to ensure the living environment reflects the valuing of young people. In particular, the upstairs bathroom is in need of upgrade.

### **What the service has done since the last inspection**

We found that the relatively recently appointed Manager had further settled in to his new role and was leading and supporting the staff team very well. The Manager had completed a Management Award and following inspection we learned that he had successfully achieved this.

Two of the Assistant Unit Managers, (AUM), had recently moved on and a well established staff member was "acting up" to support the Manager and the service generally. This major change was being negotiated very well.

We found that the service had continued to progress "Health Promoting" status and had successfully achieved Tier 1 and was moving toward Tier 2.

We found that the service had worked hard to build upon the established relationships with the Looked After and Accommodated Nurse (LAC Nurse), the Who Cares? Scotland Worker, the Child and Adolescent Mental Health Service (CAMHS), the Children's Rights Officer and the Edinburgh Connect project, all who were regular visitors to the unit and contributed to the health and wellbeing of the young people. All commented positively on their relationships with the service.

We found that the service had continued to develop its "Participation Strategy", with the Who Cares? Scotland facilitated young people's group ("Pentland View Young Peops"), playing a major role.

The Manager showed us, and discussed with us, a final draft of a unit "Action Plan" that was intended to progress specific goals and complement the Departmental wide Children's and Families plan. This plan was based upon SMART (specific, measurable, achievable, realistic and time bound) principles. The whole staff team had been involved in producing this plan.

He also showed us a incident debriefing and analyses tool, "Incident Evaluation", that he planned to introduce. Both documents evidenced considerable work and appeared

fit for purpose. We felt that consideration should be given to adapting the "Incident Evaluation" form with a view to it being adopted by other appropriate services. The service had "lost" its unit specific Throughcare and Aftercare service. (See previous inspection reports). This had been subsumed by the Edinburgh wide provision, including the transfer of a key staff member. At inspection dialogue was taking place regarding the services "new" support role to young people who have moved on, or will move on, from the service. It was intended that this revised role would be detailed within the revised Functions and Objectives.

Considerable decoration and refurbishment had been completed, including the fitting of new window frames.

Considerable work had taken place to establish a very pleasant, fenced off garden area at the rear of the grounds. Staff and young people had worked alongside an external service to plan and create this space.

Additionally, part of front grounds had been planted out as a flower garden and pot plants and trellises were located at the entrance to the building. Garden benches were also located there. A member of the team was leading this development and spoke enthusiastically about future plans.

### **Conclusion**

We found that Pentland View Close Support Unit provided very good care and support to young people.

We saw that managers and staff worked very hard to maintain an inclusive and caring culture within the context of promotion of "community". Young people told us that they felt safe, valued and listened to within Pentland View.

With the departure of two key management figures, the service was successfully managing a period of transition. We saw that the whole team was supportive and committed to their service.

The addressing of the recommendations contained within this report will promote continued improvement.

### **Who did this inspection**

Duncan Craig

Chris Lumb

# 1 About the service we inspected

Pentland View Close Support Unit was registered with the Care Inspectorate on 1 April 2011. It had been registered with the previous regulatory body since 1 April 2002.

The service provides residential care and intensive support to five young people aged between 12 years and 18 years, who have a variety of needs. The service is part of the City of Edinburgh Council's overall provision for young people who require to be looked after and accommodated.

The aim of the service is to provide "intensive support to five young people whose behaviour has placed them at the threshold of secure accommodation".

The service's "Functions and Objectives" state that "one of the aims of the placement at Pentland View is to enable the young person to assume sufficient control over their emotions so as to be able to function in society once they move on to an independent living environment".

At inspection, four young people were living in the service, although one was temporarily placed elsewhere.

The service is located within a quiet residential area on the west side of Edinburgh. This affords good links to transport and amenities. The building is detached and stands in its own spacious grounds. The building is in general good repair, well decorated and furnished and blends in well with neighbouring houses.

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

**Quality of Care and Support - Grade 5 - Very Good**

**Quality of Environment - Grade 5 - Very Good**

**Quality of Staffing - Grade 5 - Very Good**

**Quality of Management and Leadership - Grade 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.scswis.com](http://www.scswis.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**

This unannounced inspection was carried out by Inspectors Duncan Craig and Chris Lumb of the Care Inspectorate on 19 April 2012.

We analysed the Annual Return and Self Assessment completed by the service prior to inspection. We sought, and received, from the Manager clarity regarding some statistical information. We also received further requested evidence from the Manager and Line Manager following inspection.

We spoke at length with two young people and engaged with a third.

We discussed the functioning of the service with the Manager, four staff members and a student on placement.

We also engaged briefly with the Cook and the Domestic, both of whom were fully integrated within the life of the unit.

We attended a "Change Over" meeting and enjoyed lunch and tea with young people and staff.

We spoke at length with the External Manager and received a completed questionnaire from him.

We spoke with, or had e-mail exchange with, the Who Cares? Scotland Worker, The Looked After Nurse (LAC Nurse), Child and Adolescent Mental Health Service (CAMHS) and representatives of Edinburgh Connect.

We received three completed Care Standards Questionnaires from young people prior to inspection.

We looked at a range of documentation including Case files, health files and incident records.

We also looked at the interior and exterior of the building.

Interaction between young people and staff and staff practice were observed throughout the inspection visit.

### **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](http://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 fully completed their self assessment and identified areas of good practice and areas that they wished to develop.

## Taking the views of people using the care service into account

We spoke at length with two young people, both of whom were known to us from previous inspections. We had a brief discussion with a third young person.

We received three completed Care Standards Questionnaires from young people prior to inspection.

Young people spoke very positively about Pentland View. They told us that they enjoyed good relationships with the staff team and felt safe.

They told us that they felt respected, listened to and were confident in raising issues.

Two young people told us that they felt that their social workers should visit them more often.

Comments included:

"I get on well here"

"The staff help me and I get on with them well"

"The food is good and we usually get a laugh"

"Staff should not promise things that don't happen" (This was in relation to a trip to the Gambia in relation to the services charitable work).

"Things for me are a lot better now, I get on OK with the other kids now"

"There are lots of people I could talk to about things if I wanted to but I usually just go to (staff member)"

## Taking carers' views into account

We were unable to speak with parents/carers at this inspection.

None of the young people's social workers responded to our request to share their views on the service and how it impacted upon their client.

However, we did receive the views of the Who Cares? Scotland worker, the LAC Nurse, Child and Adolescent Mental Health Service (CAMHS) and Edinburgh Connect workers. They told us about improvements they had noticed in the overall quality of care and support. They also said that managers and staff had worked hard to improve relationships with them and to be "more open" to input from external professionals. They spoke very positively of the managers and staff team overall.

Also highlighted was the services "shared" approach to care planning.

Comments included:

"Management is sound; follow up concerns and enquires promptly and rigorously as required"

"Staff are not always consistent - however, matters are fully addressed by the manager in both the short and longer term"

"Staff tried very hard to support my young person with return to school"

"Staff attend school meetings and are in close communication with school and college. young people are supported to attend school"

"I have had complaints from young people about the bathroom facilities"

"Staff are engaging more with other professionals"

"The staff appear to work more as a team. They also take the opportunity to meet up with other residential staff so not working in isolation"

"Some unprofessional behaviour - staff with feet on table during professional meeting"

"Better relationship with the manager and staff and (young people's) needs are being addressed accordingly"

"Staff appeared very caring toward the young people. (Young person) displayed very challenging behaviours and staff supported as much as possible "

"Manager addressing team working and consistency"

"One of the managers gave me a comprehensive update about (young person)"

"Service has increased capacity for staff reflection. Service good at creating a "homely" atmosphere"

"Staff are committed to the young people - - they will hold on to young people for a long time and stick with them"

## 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

We found that the service had very good arrangements in place to involve young people in their care and support. We saw that young people were fully consulted and involved regarding Looked After and Accommodated procedures, (LAC), and Children's Hearings.

We also saw that young people were fully involved in support planning and risk assessment.

The Key worker system was very effective and proved the main vehicle for young people to express their views about their care and support. This was reinforced by very good young people/staff relationships. We saw that young people were able to raise issues with staff and were confident in being listened to.

We saw evidence of effective communication, and ongoing attempts at communication, with parents/carers.

We saw minutes of, and were told of, the regular Young people's Group, "Young Peoples Group", facilitated by the Who Cares? Scotland worker. This allowed for group living issues to be placed on staff meeting agenda and for the worker to raise matters directly with the manager. All involved cited this group as a major positive in the life of the unit.

We saw that the service had a participation statement included within the "Rights and Responsibilities" section of its "Functions Objectives" document. There were also specific sections entitled "Partnership with Parents" and "Child Centred Collaboration". These statements made it clear that the views of young people, parents/carers and other stakeholders were welcomed in contributing to the quality of care and support provided. The service also had a DVD and a leaflet for prospective users of the service that made explicit the desire for partnership working and stakeholder contribution.

We saw further very good evidence of the young people's involvement in "Health Promotion" and the unit had achieved Tier 1. Plans were in place to commence Tier 2.

We saw very good evidence of the Children's Rights Officer being involved in the life of the unit, both in terms of group advocacy and individual advocacy.

Similarly, the LAC Nurse had a high profile within the unit, both in terms of the promotion of general health and well being and in supporting individual young peoples health needs.

We found an established open culture where young people were able and confident in raising issues about all aspects of life within the unit.

We saw that one complaint had been raised by a young person through the service provider's Complaints Procedure. The young person's advocate told us that the complaint was dealt with thoroughly, quickly and to the young person's satisfaction. They also told us that the manager addressed the matter both as regards the young person's specific concern but also in terms of practice in the longer term. The advocate stated that the matter had been dealt with well.

### **Areas for improvement**

The service should continue to encourage and facilitate the involvement of young people, parents/carers and other stakeholders in assessing and improving the quality of all aspects of the service.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 0

### **Statement 3**

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

#### **Service strengths**

We found that the service had in place very good arrangements for promoting health and wellbeing.

We found very good health assessment and planning that operated in conjunction with the LAC nurse.

We saw that "Health Records", attached to each young person's file, were well maintained and up to date. The service enjoyed very good relationships with the LAC Nurse, the Child and Adolescent Mental Health Service (CAMHS)Edinburgh Connect, Who Cares? Scotland and the Children's Rights Officer. All contributed to the ongoing health and wellbeing of the young people.

All young people were registered with a GP, dentist, optician, and other external services as required.

We saw that catering arrangements were very good, with a varied and health menu. Young people spoke to the cook daily regarding their dietary preferences.

The service had achieved "Health Promoting Unit" status, tier one and was in the initial stages of planning the progression of tier two status. This work was led by a member of the staff team, the Health Link Worker, who spoke very enthusiastically and knowledgeably regarding this achievement. Young people, and to a lesser extent, their parents/carers, were central to this process. The Health Link Worker had worked closely with the LAC Nurse in progressing this work.

In addition to the external services we contacted, managers and staff told us that the service continued to have good links with a number of health related services including Caledonia Youth, Skylight and Hype. We found evidence that young people were continuing to be encouraged informally, and through key working and care planning arrangements, to take part in activities. Young people enjoyed a very good relationship with the cook and were encouraged to discuss menu planning and meal preparation.

We saw evidence of "Pamper Nights" where young people had access to head and foot massage and discussion centred around self esteem and well being.

Staff members we spoke with exhibited a very good knowledge of child protection and safe care issues.

The staff also indicated very good awareness of general health promotion issues and were able to give examples of specific examples of work with young people.

We saw records of, and staff members described to us, training and development opportunities they had

experienced that promoted their understanding of health and wellbeing.

Management and staff spoke very enthusiastically regarding their recent experience of training in relation to attachment, dyadic theory and social pedagogy.

We also saw evidence of the young people's ongoing involvement, supported by staff members, in raising funds for a charity, "GT500", that provided support to the Gambia.

### **Areas for improvement**

The service should continue to work with, and further develop relationships with, external professionals to further promote the health and wellbeing of young people.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 0

## Quality Theme 2: Quality of Environment

Grade awarded for this theme: 5 - Very Good

### Statement 1

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

#### Service strengths

We found that engagement and participation arrangements regarding all aspects of the service were very good. Please see Quality Theme 1, Statements 1 of this report. Considerable decoration and refurbishment had been completed, including the fitting of new window frames and the replacement of furniture.

Young people had planned the re-decoration of a small room to operate as a "Chill Out" room for private discussion or quiet reflection.

Extensive work had taken place to establish a very pleasant, fenced off garden area at the rear of the grounds. Staff and young people had worked alongside an external service to plan and create this space. Plans were in place to create a vegetable garden.

Additionally, part of front grounds had been planted out as a flower garden, with pot plants and trellises located at the entrance to the building. Garden benches were also located there. A member of the staff team was leading this development and spoke enthusiastically about future plans.

Young people told us that they enjoyed their living environment and pointed out that damage or graffiti was minimal and quickly repaired.

#### Areas for improvement

The service should continue to encourage and facilitate the involvement of young people, parents/carers and other stakeholders in assessing and improving the quality of all aspects of the service.

Young people told us, and we saw, that one of the bathrooms needed upgrading. Generally, the upstairs area was not of as good a standard as downstairs.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 1

#### Recommendations

1. One of the bathrooms upstairs, and the decor upstairs generally, needs to be upgraded to reflect the very good decor standards evident in the rest of the house. NCS 5 Care Homes for Children and Young People - Your Environment.

---

## Statement 2

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

### Service strengths

We found that the unit had in place appropriate safety arrangements.

The building was secure and visitors were required to sign in and out.

We saw that staff appropriately "challenged" visitors to the unit as to their legitimacy.

We found the building, particularly the downstairs areas, to be well maintained, furnished and decorated. We saw that no repairs were outstanding.

A "Chill Out" room had recently been created by young people and staff to provide a quiet area for discussion or time away from the group.

We found the staff team to be knowledgeable and aware regarding child protection and safe care issues. Risk assessment arrangements were very good, with plans updated regularly. We saw examples of imaginative risk assessments and "self help" aids, written in a manner easily understood by the young person and incorporating references that were important and meaningful to the individual.

Relevant policy and procedure, including "Whistle blowing" and "Anti-Bullying" were in place.

Staffing levels were sufficient to meet the needs of young people.

We found that the strength of relationships between young people and staff was a major contributor to young people feeling safe. Additionally, the line manager was a regular visitor to the unit and young people were on first name terms with him and felt able to approach him. The regular visits by, and established relationships with, external agencies and services (Who Cares? Scotland, CRO's, etc) further contributed to a safe and open living environment.

Appropriate accident and incident recording arrangements were in place.

### Areas for improvement

The service should, as planned, identify members of the team to train and operate as work place "First Aiders".

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 1

### Recommendations

1. The service should, as planned, identify members of the team to train and operate as work place "First Aiders".  
NCS 11 Care Homes for Children and Young People - Keeping Well - Lifestyle.

## Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 5 - Very Good

### Statement 1

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

#### Service strengths

We found that engagement and participation arrangements regarding all aspects of the service were very good. Please see Quality Theme 1, Statements 1 of this report. We found that young people had been involved in preparing questions for prospective staff members and during inspection, young people and staff were discussing the "key Attributes" of staff members with a view to further informing the recruitment process.

#### Areas for improvement

The service should continue to encourage and facilitate the involvement of young people, parents/carers and other stakeholders in assessing and improving the quality of all aspects of the service.

**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

We observed very good staff practice and interaction with young people throughout our inspection. We witnessed informed and insightful dialogue regarding the care of young people.

Established Edinburgh wide recruitment arrangements were in place that ensured all relevant checks were carried out prior to appointment. This Incorporated very good induction arrangements. At inspection a student on placement described a very comprehensive induction to the service and described to us the ongoing support she received from managers and staff.

The manager told us the the vacant Assistant Unit Manager (AUM) posts were to be advertised shortly.

We found a very good programme of staff supervision, including regular supervision to the manager provided by his line manager.

We found very good staff meeting and changeover arrangements were in place.



We found all staff to be registered, or gaining appropriate qualifications for achieving registration, with the Scottish Social Services Council (SSSC).

The staff team held a range of appropriate qualifications ranging from Diploma in Social Work to HNC and SVQ 3 in Social Care.

The manager had, immediately following inspection, received notification that he had successfully completed a management award.

We saw that a Performance Review and Development system, ("PRD") was in place, with all staff being set personal professional objectives that would be subject to annual review.

We saw records of, and staff described to us, various training and development opportunities that they had undertaken recently. These included whole team Development Days, Attachment Theory, Dyadic training and Domestic abuse.

A recent Development Day had focused on the production of a unit "Action Plan". We saw the final draft of this and the manager told us that it was due to be implemented soon.

Staff we spoke with were aware of the National Care Standards and SSSC Codes of Conduct.

We also noted that the unit's "Self Assessment", required by the Care Inspectorate, had been completed by sub-groups of staff with the manager maintaining overview.

### **Areas for improvement**

The service had successfully negotiated the loss of two integral members of the management team. The resultant vacancies should be filled timeously.

**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

We found that engagement and participation arrangements regarding all aspects of the service were very good. Please see Quality Theme 1, Statements 1 of this report.

#### Areas for improvement

The service should continue to encourage and facilitate the involvement of young people, parents/carers and other stakeholders in assessing and improving the quality of all aspects 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

We saw that LAC Review and Children's Hearing outcomes informed the service as to how it was meeting young people's needs. Good review arrangements were in place that informed planning and risk management for each young person.

We saw that the service sought the views of external agencies and services to enable their feedback to inform practice and planning. External professionals we spoke with, or exchanged e-mails with, told us of good communication and a preparedness by the service to "take on board" views and observations.

We saw evidence of files being audited by managers and of files having been sampled as part of an Edinburgh wide quality assurance programme.

We found a healthy culture of ongoing feedback from young people regarding all aspects of the service via Key Worker, Young Peoples Group and access to Manager and Line Manager.

The effective supervision, staff meeting and change over meeting structure contributed to this.

The manager spent time with young people who all knew him very well. Young people were seen to enjoy a good relationship with him and they told us that they were happy raising any issues with him.

The external line manager visited the unit approximately three weekly. This was to carry out the supervision of the manager, attend the "occasional" staff meeting and to, generally, make himself available to young people and staff. In discussion with the line manager, it was evident that he was up to date with issues pertaining to young people and staff.

The line manager also told us of other City of Edinburgh Council professionals who "have a key role in assisting units identify issues relating to education/training (for young people). This offers me a valuable insight into how effectively units are dealing with these issues."

Her also described other activities and sources that provided him with intelligence regarding the service's performance. For example, feedback from training events, LAC Reviews, Children's Hearings, etc.

We also so good evidence of the service maintaining relationships with ex-service users. We heard examples of how their views informed current practice.

### **Areas for improvement**

The service had established very good communication with the Regulator. We found one incident of absconding that should have been notified to the Care Inspectorate. We discussed with the manager the need to be aware of formal Notification requirements as regards incidents and accidents.

We were told that the line manager was made aware of all incidents. However, we found that some incident reports had not been "signed off" by him. The manager agreed to explore how a quicker "turn around" of signing off incident reports could be achieved.

Some young people felt that their social workers did not visit them in the unit frequently enough.

The manager should, as intended by him, review the unit's Functions and Objectives to take in to account changes in Throughcare and Aftercare provision and the regulator.

The manager should implement the unit "Action Plan" as soon as is practicable.

The manager should implement the draft "Debriefing" tool as intended by him. The line manager should monitor the effectiveness of this tool with a view to introducing it, or similar, to other relevant services.

The line manager told us that senior managers were "looking at developing Key Performance Indicators for services within our section and this will help with developing the quality assurance of our residential units." This should be progressed.

**Grade awarded for this statement:** 4 - Good

**Number of requirements:** 0

**Number of recommendations:** 4

---

## Recommendations

1. The management team must notify the Care Inspectorate of incidents as detailed within the "Guidance on notification reporting - All registered care services".  
Publication Code: OPS-0411-020  
NCS 6 Care Homes for Children and Young People - Feeling Safe and Secure.
2. In addition to informing the line manager of incidents, a system should be put in place to ensure written incident reports are signed off timeously.  
NCS 6 Care Homes for Children and Young People - Feeling Safe and Secure.
3. The manager and line manager should explore the views of some young people that their social workers did not visit frequently enough.  
Part of this dialogue should consider the significance, or otherwise, that none of the young people's social workers responded to our request to share their views on the service and how it impacted upon their client.  
NCS 6 Care Homes for Children and Young People - Feeling Safe and Secure.
4. The manager should, as discussed with the Inspectors and intended by him:
  - 1) complete the review the unit's Functions and Objectives to take in to account changes in Throughcare and Aftercare provision and changes to the regulator
  - 2) implement the unit "Action Plan" as soon as is practicable
  - 3) implement the draft "Incident Debriefing" tool.Monitoring and review arrangements for the above should be put in place.  
NCS 7 Care Homes for Children and Young People - Management and Staffing.
5. The provider should establish further, more formal, quality assurance systems. The current work on key performance indicators will, when instigated, provide a major contribution to this.  
NCS 7 Care Homes for Children and Young People - Management and Staffing.  
NCS 18 Care Homes for Children and Young People - Concerns, Comments and Complaints.

## 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 SCSWIS re-grading the Quality Statement within the Management and Leadership Theme as unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).

## 5 Summary of grades

<b>Quality of Care and Support - 5 - Very Good</b>	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
<b>Quality of Environment - 5 - Very Good</b>	
Statement 1	5 - Very Good
Statement 2	5 - Very Good
<b>Quality of Staffing - 5 - Very Good</b>	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
<b>Quality of Management and Leadership - 4 - Good</b>	
Statement 1	5 - Very Good
Statement 4	4 - Good

## 6 Inspection and grading history

Date	Type	Gradings	
12 Jan 2011	Unannounced	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	Not Assessed
		Management and Leadership	Not Assessed
7 Oct 2010	Announced	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	Not Assessed
		Management and Leadership	Not Assessed
12 Feb 2010	Unannounced	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	4 - Good
		Management and Leadership	Not Assessed

## Inspection report continued

30 Jul 2009	Announced	Care and support 5 - Very Good Environment 5 - Very Good Staffing 4 - Good Management and Leadership 4 - Good
24 Mar 2009		Care and support 4 - Good Environment 3 - Adequate Staffing 5 - Very Good Management and Leadership 4 - Good
19 Nov 2008	Announced	Care and support 4 - Good Environment 3 - Adequate Staffing 5 - Very Good Management and Leadership 4 - Good

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

## To find out more about our inspections and inspection reports

Read our leaflet 'How we inspect'. You can download it from our website or ask us to send you a copy by telephoning us on 0845 600 9527.

This inspection report is published by SCSWIS. You can get more copies of this report and others by downloading it from our website: [www.scswis.com](http://www.scswis.com) or by telephoning 0845 600 9527.

## Translations and alternative formats

This inspection report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

هه بایتسد می ونابز رگید روا ولکش رگید رپ شرازگ تعاشا هی

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

ی رځ ا تاغل بو تا قیسن تب بل طلا دن ع رفاو تم روشنم ا اذه

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.

Telephone: 0845 600 9527

Email: [enquiries@scswis.com](mailto:enquiries@scswis.com)

Web: [www.scswis.com](http://www.scswis.com)