

## Care service inspection report

# Action for Children - Stoneside Project

## Care Home Service Children and Young People

18 Stoneside Drive

Glasgow

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Telephone: 0141 632 4052

Inspected by: Karen McCormack

Type of inspection: Unannounced

Inspection completed on: 23 July 2013



HAPPY TO TRANSLATE

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## Service provided by:

Action for Children

## Service provider number:

SP2003002604

## Care service number:

CS2007164443

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

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

### What the service does well

The service provides individualised approaches when meeting the needs of children and young people. Very detailed care plans contain all relevant information for each young person.

Staff members are very knowledgeable and capable in their support of young people and well developed relationships with young people and their families is a strength of the service.

### What the service could do better

The service should continue to review and develop its systems for encouraging and supporting meaningful participation from the children and young people who use the service. The manager has identified that this should include better use of I.T. systems.

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

The service has used its own monitoring and auditing systems to identify areas for development and implement action plans to take any issues forward.

The service has worked hard to provide a very good service to families whilst experiencing a period of uncertainty as the local authority rolls out self directed support with families.

## **Conclusion**

We found during this inspection that the service had continued to build on a range of positive practices, with a genuine commitment from the team, which resulted in positive outcomes for young people.

## **Who did this inspection**

Karen McCormack

# 1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at [www.careinspectorate.com](http://www.careinspectorate.com)

This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

## Requirements and recommendations

If we are concerned about some aspect of a service, or think it needs to do more to improve, we may make a recommendation or requirement.

- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement. Recommendations are based on the National Care Standards, relevant codes of practice and recognised good practice.

- A requirement is a statement which sets out what is required of a care service to comply with the Public Services Reform (Scotland) Act 2010 and Regulations, Orders made under the Act or a condition of registration. Where there are breaches of Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Inspectorate."

Stoneside Project provides a residential respite service to six children and young people who have learning disabilities and/or related physical disabilities and complex needs. The provider is Action for Children Scotland. At the time of the inspection, the service had reduced its capacity to four children and young people at any time as a result a commissioning review that was underway within the local authority.

The property, which is a single storey building, situated in a quiet residential area in Eastwood Glasgow, has large grounds and off street parking.

Some of the stated aims of the service are to provide opportunities for holistic care planning developed in consultation with the child/young person, their family and other agencies, for parent/carers to develop and sustain skills to manage their son/daughter's behaviour within and out with the home environment, and for children and young people to maximise their potential in a range of areas including self help skills and confidence building.

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 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](http://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 over the afternoon and evening of 10 and 17 July 2013. We met with the local authority's operational link on 23 July 2013. Throughout July telephone contact was also made with relatives and external professionals. Care Inspector, Karen McCormack carried out the inspection.

As part of the inspection, we took account of the completed annual return and self-assessment forms that we asked the provider to complete and submit to us.

We issued 10 questionnaires to the manager to distribute to residents. We received two returned questionnaires.

We issued 20 questionnaires to staff working in the service. We received one returned questionnaire.

In this inspection we gathered evidence from various sources, including the following:

We spoke with:

- four young people
- three relative
- the manager and depute manager
- three residential workers and two family support workers
- one senior residential worker
- three social workers
- local authority's operational link (senior social worker)

We looked at:

- Participation strategy
- The service questionnaires for young people who use the service
- Care standard questionnaires completed by families who use the service and returned to us

- Observations of young people and staff
- Sample of young people's case files
- Evidence of how staff consulted with the young people
- The environment
- Health & safety policies
- Risk Assessments
- Medication procedures and records
- Records of staff meetings
- Staff training information
- Complaints procedure
- Quality assurance information
- Insurance certificates
- Certificate of registration

### **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 Care Inspectorate received a fully completed self assessment document from the provider. We were satisfied with the way the provider completed this and with the relevant information included for each heading that we grade services under.

The provider identified what it thought the service did well, some areas for development and any changes it had planned.

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

During this inspection we spent time with four young people who use the service. Due to the communication needs of the young people, we did not take direct feedback.

Two young people showed the inspector around the project and spoke positively about the time they spend in the garden and kitchen.

During our inspection visits the young people were taking part in a range of activities, including playing in the garden, playing with a train set, watching tv and having meals. We observed positive interaction between staff and young people.

## **Taking carers' views into account**

Parents and carers were contacted via questionnaires and by telephone interviews. Comments included:

"We're very happy overall"

"Really happy overall, confident"

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"Confident they stick to (young person's) routine, she loves it."

## 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

At this inspection we found that the performance of the service was very good for this statement. We spoke to young people, relatives, management and staff and visiting professionals. We looked at individual care plans and a sample of written evidence.

Welcome booklets promoted participation and provided detailed information regarding standards of care, activities available and staffing structures. Comprehensive information on the service complaints procedure was also included. This information allowed young people and their families to be clear before arriving at the service about what they could expect. Families told us that they were given very good information before their child arrived at Stoneside Project.

During this inspection we found very good evidence of young people and their families being involved in determining the care and support provided by the service. At the start of the placement individual support plans for all children were developed in consultation with parents, carers and external agencies. During this process the staff invited parents and carers to make comments and discuss their views on the care and support on offer

Within the young people's support plans, we found a range of information that had been influenced by the users of the service. For example, person centred information on routines, diet and personal care preferences. In the sample of support plans we looked at, we found these had been regularly reviewed and adapted as staff developed their knowledge of individual young people. We found these plans contributed to the consistency of support provided by staff, in turn helping young people settle within the project.

Through our discussions with staff, we found they considered the views of young people when making care and support decisions. For example one individual's support plan recognised the importance to him of receiving support from a range of workers. Information on the behaviours he would display when he was communicating his need for a change of support worker was also well detailed. An examination of a sample of staff rotas confirmed an adequate number of appropriately trained staff were always available during this person's stay. Staff confirmed arrangements remained flexible in response to this young person at the time. This ensured that young people could influence who they received support from whilst careful consideration was given to the management of risk.

Parents told us the pre and post stay phone calls by the service and home to service diaries were effective methods of ensuring they contributed the support received by their child. One parent told us they knew by the presentation of their child's skin on their return home that staff had followed their requests and suggestions to help keep their child healthy.

The service has an established procedure for issuing annual questionnaires to young people. Young people are assisted to respond by the use of pictorial symbols. Parents/carers are also given the opportunity to comment on the service through annual questionnaires. These included questions on care and support, environment, staffing and management and preferred methods for participation.

In the sample of completed questionnaires that we examined we found responses were positive. After collating the responses the depute manager completed an action plan to take forward any suggestions. We found several examples of when requests made by young people resulted in changes to the service, for example two of the bedrooms now have larger beds and improvements have been made to the garden, including a trampoline. We also saw examples of when comments made by young people were subsequently reflected in their support plans and during our observation of practice.

Feedback to families on the outcome of their participation was provided through regular newsletters or on the noticeboard. This helped let people know their comments were valued and had influenced the service.

Young people were assisted to communicate their needs via a range of communication systems. Pictorial aids provide very good opportunities for young people to express their views and be informed of what is available to them at Stoneside Project. For example, choosing meals and activities. This allowed young people to participate in decisions affecting their care on a day to day basis.

We saw evidence the service had offered to establish and support a parents' forum to allow parents/carers a further opportunity to influence the service. At the time of the

inspection this was not required by parents of the service however the manager confirmed this would continue to be available if requested.

### **Areas for improvement**

Whilst we found participation as an area of strength for this service, the provider should continue to review and explore alternative forms of communication to support young people with more profound communication needs influence the service they receive. For example the management team told us it was their intention to use the recently purchased iPads to assist with this.

**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**

We found the service had achieved a very good standard of performance for this statement at this inspection. We looked at personal plans, medication and health records, records kept on how the service helps to keep young people safe and spoke with young people, relatives, staff and external professionals.

The young people who receive a service from Stoneside Project require significant support in their daily lives. Health and well being is a key focus for all staff supporting such vulnerable young people. During this inspection, observation of practice showed that staff had a very good understanding of the needs of young people and provided support in a sensitive and thoughtful manner. This was significant in a short break service as it can be hard for young people to build relationships when they are away from the service for weeks at a time.

We saw staff attend to young people, waiting patiently for young people to process information and respond, before providing further instruction or support. This informed approach meant that young people felt comfortable and relaxed with the support provided.

One social worker told us how well the service responded to parents' who were anxious about their child starting at the service and that settling arrangements were made at the pace of each family. The service also used family support workers to widen the type of support available. This involved staff working alongside parents to share/demonstrate strategies to help young people achieve positive outcomes in relation to their wellbeing.

We looked at four support plans and found these were very well maintained. The

service used a care planning format which reflected Getting it Right for Every Child (GIRFEC) framework and we found this helped to provide staff with comprehensive information in a person centred format. The support plans contained a range of comprehensive detail including essential information, health, personal care, recreational activities, safeguarding young people, daily recordings and correspondence.

We were very impressed with the sample of 'my plans' (behaviour support plans) that we looked at. We found these contained very detailed information on 'what works' for each young person. We observed staff using this information effectively in practice. For example, we observed staff employ a range of techniques to help support one young person with his personal care and during his meal time. The result for this young person was he was more settled and able to eat a full meal, which we recognised as significant for this person.

Through our discussions with external professionals we found staff to be skilled in responding to young people's behaviour as a form of communication. The result of this for some young people was a reduction in their level of anxiety and a subsequent increase in positive behaviours'.

One parent told us: "Staff knew how anxious my son was at increasing his stay to three nights, they responded by identifying a small staff team to support him and gradually build relationships. This meant there was always someone who knew him well available to him."

There was evidence all personal plan information had been regularly reviewed and that they contributed significantly to LAAC reviews for the young people. There can be a period of several weeks between young people's visits to Stoneside Project and for many young people significant changes are made to their support needs during this time. We found the service used a range of methods to ensure they had the most up to date support information. This included pre visit phone calls to parents, home to service diary and effective links with other professionals including social workers and education. The parents we spoke to told us the outcome of this was that they felt relaxed as they were confident their child was being well cared for.

We found staff ensured the young people had regular access to physical and outdoor activities whilst giving thorough consideration to identified risks. Arrangements were made for young people to receive additional staff support when required to ensure they had safe access to recreational activities.

Parents and external agencies told us young people benefitted from a range of positive outcomes as a result of receiving a service from Stoneside Project. This included more social opportunities, managing behaviours so young people are more settled and a variation in previously restricted diets. One social worker told us they have seen "excellent outcomes for the young people".

Another senior social worker told us, "The service provided at Stoneside is unique in the type of support provided to young people with the most complex support needs, the service is about focusing on improving outcomes, supporting young people to develop social skills to help them to become more settled."

Parent's comments included:

"(young person) loves it."

"Have recommended others to the service, I'm relaxed when he goes"

"Very happy overall."

One parent told us the staff at Stoneside had gone out of their way to help her son during his transition into adult services. As well as sharing of information with the other service provider, project staff worked alongside support workers from the new adult service to help guide and inform their practice. This practical method ensured all details, no matter how small, were shared to help provide person centred support. This has significantly helped ease the transition for this young person.

We found the service had a robust procedure in place for the management of medication. This included the provider's procedure and a more detailed procedure specific to the service. We examined a sample of medication consent forms and records and found these completed appropriately. Through observation of practice and discussions with staff we were impressed with the high level of detail and co-ordination that was in place to ensure young people had access to emergency medications wherever they were on or outwith the premises.

One senior social worker told us, "The management has a very good understanding of child protection and safeguarding procedures and their actions in relation to this is an area of strength." This professional gave us examples of when management had been pro-active in advocating on behalf of young people to help keep them safe.

Menus were compiled with young people and these encouraged a healthy diet, while recognising the restricted diets of some. Young people made suggestions about mealtimes and evidence showed the considerable efforts of staff to respond positively to choices made by young people. Menus had been adapted to include specific choices made by young people.

Young people were also encouraged to become involved in healthy eating through the service's vegetable garden. One young person told us what they were growing.

### **Areas for improvement**

Within the self assessment, the provider identified that the service would continue to work alongside other professionals to develop the support they offer to young people

who have reached puberty. The manager should continue with this plan to help develop the service for this vulnerable group 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

Based on discussions with young people, relatives and staff and a review of a sample of written evidence, this service was found to have maintained a very good performance in relation to this statement.

We found the service had continued to work hard to balance individual need and preference for sparse décor with providing a homely environment. We saw that young people were able to individualise their bedroom with pictures and equipment to help them feel comfortable during their short break. One young person had been involved in writing up the layout of the furniture in her room as part of her support plan.

Further evidence to support strengths in this quality statement is detailed under quality statement 1.1.

#### Areas for improvement

Please refer to quality statement 1.1, areas for improvement

**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 the performance of the service was very good for this statement. We looked at risk assessments, maintenance procedures, accident records, insurance certificates. We spoke with young people, relatives, staff and the management team.

Overall we found the young people benefited from a clean environment. Relatives and staff confirmed the environment was kept clean and tidy. A housekeeper is employed to help ensure a high standard of hygiene is maintained.

During the inspection, one of the young people was comfortable showing the inspector their bedroom and another provided a tour of the communal areas including the garden space. Through our observations we found young people to be settled and content within the environment. Parents told us there were good facilities and equipment available to the young people.

Entry to the house was limited via a buzzer system and visitors were asked for identification and were required to sign a visitors' book. This helped to ensure no unauthorised people had access to the home.

Comprehensive risk assessments for the environment were found to be both informative and functional. Detailed protocols were in place to help keep the environment safe. This included fire safety checks and procedures, fire drills, daily checks and a range of health and safety audits. The service worked to 'cooksafes' guidelines and we observed good practice in terms of infection control during meal and supper time.

Maintenance procedures were in place and the provider had a facilities management department to carry out repairs in good time. Staff confirmed this helped to keep the environment safe and in a good state of repair for the young people.

The manager confirmed all recommendations made during their fire officer safety check had now been actioned.

Risks assessments completed alongside relatives and other professionals highlighted the need for night time monitoring devices within the young people's bedroom. We found staff had been sensitive about the rights of the young people to privacy and were clear on how and when these devices should be used to keep young people safe. The manager confirmed these were constantly under review and if risks were to decrease these would be removed for individuals.

Individual risk assessments and risk management procedures were found to be comprehensive and contained a well considered approach to keeping young people safe in their environment, whilst balancing individual preference and choice.

During our observations we saw staff used the environment to minimise risk to individuals. For example, we observed one young person whose behaviour at the time could have resulted in an injury for him or staff. We found staff responded by following the risk management procedures to promptly support him to outdoor play within the enclosed garden. Staff told me they knew that outdoor physical play could

help him to calm down and to engage him in a positive activity. We also saw staff redirect other young people to play with toys and other resources when they were becoming agitated.

Examination of a sample of staff rota's confirmed PROACT-SCIPr-UK trained staff to be on duty on at all times. We also examined a sample of incident forms and found these were well completed with evidence of follow up action having taken place. This all helped to minimise risks to young people.

### **Areas for improvement**

The service should continue to monitor and maintain the very high standards of quality within this statement.

**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

Based on discussions with young people, relatives and staff and a review of a sample of written evidence, this service was found to have maintained a very good performance in relation to this statement.

The manager had recently taken part in Action for Children training on the participation of service users in the recruitment and selection process and we found the management team planned to implement this within the service. The manager recognised the need to adapt the training to encourage meaningful participation from young people with complex communication needs.

We found some records of young people's comments on staff were used as part of the supervision process. The manager told us this helped to ensure feedback from young people was considered as part of staff development.

Further evidence to support strengths in this quality statement is detailed under quality statement 1.1.

#### Areas for improvement

Whilst we recognised the process of involving young people in staff development as a strength, we discussed with the manager the benefits of taking this forward as part of staff supervision and appraisal. This would give young people the opportunity to highlight the qualities in staff that they find important.

Please refer to quality statement 1.1, areas for improvement.

**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**

Feedback from young people, relatives, discussions with staff and management and an examination of training records indicated the service achieved a very good performance in relation to this statement.

During the inspection we found staff to be very committed to providing a high standard of care and support for young people. Through discussions and review records, we found staff to be knowledgeable and enthusiastic about their role.

We observed positive interaction between the staff and young people and witnessed examples of young people clearly enjoying the time they were spending with staff. We also saw examples of staff appropriately supporting young people, in a manner that was considerate of their privacy and dignity.

Parent comments included:

"(young person) is well looked after by staff."

"Staff very nice, always introduce themselves if I haven't met them before."

There is a comprehensive staff development policy, incorporating supervision and appraisal processes. Staff interviewed as part of this inspection told us that they receive regular supervision and that managers are approachable and friendly. It was noted by the Inspector that staff appeared relaxed and comfortable carrying out all aspects of their role and that comments indicated a positive morale.

Examination of team meeting minutes indicated that staff used this time to reflect on best practice and evaluate the service in relation to this. This helped to ensure staff were up to date with any changes to legislation or guidance.

We found staff were well trained, qualified and appropriately registered with the Scottish Social Services Council. Staff qualifications and experience were relevant to the support needs of the young people attending the service. Through our observations and discussions with staff, we found they were skilled in the use of augmentative communication, including the use of visual aids to support interaction with the young people.

The depute manager and service coordinator had a lead role in ensuring staff received appropriate training. The Service Coordinator is a PROACT-SCIPr-UK trainer and SVQ assessor, which has helped to support staff with their personal development.

The Depute Manager is a qualified nurse and has a lead responsibility for delivering health training. This included comprehensive medication training, based on theory

and competency, epilepsy awareness and rescue medication. All aspects of this training helped to ensure the safety and well being of all young people.

### **Areas for improvement**

Although it is clear from discussion with the Manager and staff, that there is a good level of understanding of child protection/adult support and protection procedures, there is a need for all staff to receive refresher training in this area, as training for a small number of staff had not occurred. By achieving this, the service will ensure that all staff fully understand current procedures and are better equipped to support young people to be safe and protected.

**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: 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

Based on discussions with young people, relatives and staff and a review of a sample of written evidence, this service was found to have maintained a very good performance in relation to this statement.

We found evidence to demonstrate the commitment of management to work alongside families as part of the process of change in relation to funding and allocation of service from the local authority. Whilst this was at the initial stages, the manager had clear plans of how this will be taken forward with the involvement of parents.

Parents/carers can express their views through the service providers' complaints procedure. At the time of this inspection the manager told us no complaints had been made.

Further evidence to support strengths in this quality statement is detailed under quality statement 1.1.

#### Areas for improvement

Please refer to quality theme 1, statement 1, areas for improvement.

**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**

Based on discussions with young people, relatives and staff and a review of a sample of written evidence, this service was found to have a very good performance in relation to this statement.

The provider has a range of systems in place for auditing records and practice within the service. Examples include health and safety, safeguarding children, fire safety, care plan, incident and medication audits. In the sample we looked at, we found these had been effective in identifying areas for improvement that had subsequently been actioned. This helped to ensure a consistent approach, in these areas, was offered to all young people.

We were particularly impressed with the level of attention given to care plan audits. For example, any updates/amendments required to individual care plans were discussed 1:1 meetings with keyworkers and timescales agreed for action. This was all well recorded. The benefits of up-to-date and comprehensive care plans are further detailed in quality statement 1.3.

Medication and health and safety audits help to ensure staff practice safely and a detailed system for auditing accidents/incidents was undertaken, with particular attention to trends and patterns of behaviour. This promoted consistent practice and helped staff to be pro-active in implementing strategies to reduce the impact of behaviours.

The manager prepares a report on the service's involvement with each young person for discussion at established monthly monitoring meetings with a representative from the local authority. The benefits of this, was that the aims and objectives of each placement arrangement were consistently evaluated in terms of service provision. The local authority representative told us the management of the service was very good and that they worked well with other stakeholders to evaluate and develop the service.

Regular team meetings and supervision of staff also assist the service in achieving better outcomes for young people. Opportunities for staff to reflect on their practice were part of the monitoring procedures.

Regular contact between the management team provided further opportunity to improve on existing practices. Through our discussion with staff and management, we found they were committed to the ongoing evaluation and development of the service.

Parents and carers have also assisted in quality assuring aspects of the service through their involvement in reviewing support plans for their children and through parents questionnaires aimed at gaining a better insight into how parents feel the



service is operated and how it could be improved. In the sample of parent and young people's feedback we viewed indicated most families were happy with service offered by Stoneside project.

### **Areas for improvement**

The manager recognised the need to update the service development plan, with the involvement of service users, staff and stakeholders. This will help to pull together all the very good information they have identified through their quality assurance systems and prioritize actions required.

**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

|   |               |
|---|---------------|
| <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 - 5 - Very Good</b> |               |
| Statement 1   | 5 - Very Good |
| Statement 4   | 5 - Very Good |

## 6 Inspection and grading history

| Date        | Type        | Gradings                  |               |
|-------------|-------------|---------------------------|---------------|
| 30 Nov 2012 | Unannounced | Care and support          | 5 - Very Good |
|             |             | Environment               | 5 - Very Good |
|             |             | Staffing                  | 5 - Very Good |
|             |             | Management and Leadership | 5 - Very Good |
| 31 Mar 2012 | Unannounced | Care and support          | 5 - Very Good |
|             |             | Environment               | 5 - Very Good |
|             |             | Staffing                  | Not Assessed  |
|             |             | Management and Leadership | Not Assessed  |
| 16 Feb 2011 | Unannounced | Care and support          | 4 - Good      |
|             |             | Environment               | 4 - Good      |
|             |             | Staffing                  | Not Assessed  |
|             |             | Management and Leadership | Not Assessed  |

## Inspection report continued

|             |             |  |  |
|-------------|-------------|--|--|
|             |             |  |  |
| 23 Aug 2010 | Announced   | Care and support<br>Environment<br>Staffing<br>Management and Leadership | 5 - Very Good<br>5 - Very Good<br>Not Assessed<br>Not Assessed |
| 30 Mar 2010 | Unannounced | Care and support<br>Environment<br>Staffing<br>Management and Leadership | 5 - Very Good<br>Not Assessed<br>5 - Very Good<br>Not Assessed |
| 13 Jan 2010 | Announced   | Care and support<br>Environment<br>Staffing<br>Management and Leadership | 5 - Very Good<br>Not Assessed<br>5 - Very Good<br>Not Assessed |
| 31 Mar 2009 | Unannounced | Care and support<br>Environment<br>Staffing<br>Management and Leadership | Not Assessed<br>Not Assessed<br>5 - Very Good<br>4 - Good      |
| 24 Dec 2008 | Announced   | Care and support<br>Environment<br>Staffing<br>Management and Leadership | 5 - Very Good<br>4 - Good<br>4 - Good<br>4 - 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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