

Hillside School School Care Accommodation Service

3 Main Street Aberdour Burntisland KY3 ORH

Telephone: 01383 860 731

Type of inspection:

Unannounced

Completed on:

14 November 2024

Service provided by:

Hillside School (Aberdour) Ltd

Service provider number:

SP2003001612

Service no:

CS2003007038



Inspection report

About the service

Hillside School is an independent school providing education and residential care for young people experiencing complex social, emotional and behavioural difficulties. Care is provided to a maximum of 35 young people on a 52 and 38 week per year residential basis.

Hillside School has four separate and distinct houses providing accommodation. At the time of inspection the service was only operating three of the houses.

The service's aims and objectives include the following:

- · A warm, friendly, nurturing and safe home, where young people are comfortable and confident.
- · A home suitable for young people, aged eight to 19, which meets all of the young people's individual needs and interests.
- · A happy and fun service for the young people, with a range of active, educational and engaging activities.

About the inspection

This was an unannounced inspection which took place on 12, 13 and 14 November 2024. The inspection was carried out by two inspectors.

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

In making our evaluations of the service we:

- spoke with seven people using the service and four of their representatives
- spoke with 23 staff and management
- · observed practice and daily life
- · reviewed documents
- spoke with visiting professionals.

Key messages

- Young people reported that they felt emotionally and physically safe.
- The service had vastly reduced its use of restrictive practice's leading to improved relationships between staff and young people.
- Staff and leaders were trained effectively in child protection procedures.
- Educational outcomes for some were mixed, with some reduced school attendance.
- Leadership within the service had strengthened since the previous inspection. Staff and young people spoke positively of the changes, with the reduction in restrictive practices being highlighted by all.
- External management arrangements need to be fully implemented and assessed. We have made a requirement on this point.
- The service should further strengthen its performance management structures for staff to ensure consistency in practice.
- Care planning processes and the service improvement plan would benefit from goals being SMART (specific, measurable, achievable, realistic and timely).

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support children and young people's rights and wellbeing?	3 - Adequate

Further details on the particular areas inspected are provided at the end of this report.

How well do we support children and young people's rights and wellbeing?

3 - Adequate

We made an evaluation of adequate for this key question. The service demonstrated strengths, but these just outweighed weaknesses. Strengths still have a positive impact but the likelihood of achieving positive experiences and outcomes for people are reduced significantly because key areas of performance need to improve.

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

We evaluated the service's performance on this quality indicator as good, where the service had made some important progress.

Young people told us they felt safe both emotionally and physically. It was clear that the service had taken important steps to reduce restrictive practices, with young people telling us they 'don't use them now.' Young people and staff told us that they felt this improved relationships between staff and young people. The service had greatly improved its processes following incidents. These had an increased focus on reflection of practice strategies, both successful and unsuccessful, and were more aligned to the provider's aim to reduce restrictive practices. Staff members and leaders told us that 'although the changes were hard they needed to happen.'

Staff and leaders were trained effectively in child protection procedures. This was supported by far clearer organisational policy and procedures. Staff reported that they felt far more confident in responding to concerns. We found evidence that the provider had good oversight of protection concerns and had dealt with matters effectively. We saw evidence of increased co-ordination between the service and local authorities with one social worker telling us they 'feel very confident the service responds effectively.'

Young people were made aware of their rights. There were positive examples of young people accessing advocacy in formal meetings and informally within the houses. The rights, views and wishes of young people using the service were also represented clearly by staff. We heard positive feedback from professionals linked to the service relating to this area of practice.

Young people were far more active. Young people told us there was always staff available to do things when they wanted to do them. This included activities in the extensive grounds or going out.

The environment within the service felt far more homely and relaxed. This was very different from the previous inspection and seemed testament to the important changes the service had strived to make.

Educational outcomes were mixed for some young people, educational attendance and achievement remained a strength, for others, outcomes had reduced with decreased attendance for some. We suggested that the service further develops individual goals and supports to ensure that attendance is prioritised and that care staff are fully aware of their role in supporting this. (See Area for Improvement 1)

Young people's rights to family life was promoted. The service had good links with families and would support young people to stay in touch with those close them. The service made good use of the family flat to help young people have increased visits. Staff were attuned to the sensitivity around visits to those close to them and had a good understanding of how to support young people's emotional needs, before and after these visits.

We highlighted the need for the service to develop a continuing care policy, which would help ensure that young people are fully aware of their rights in relation to this, and what they can expect of the service and provider. (See Area for Improvement 2)

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

We made an evaluation of adequate for this quality indicator. The service demonstrated strengths, but these just outweighed weaknesses.

Leadership within the service had strengthened since the previous inspection. There had been some important cultural changes made within the service. Staff and young people spoke positively of the changes, with the reduction in restrictive practices being highlighted by all.

All young people had care plans in place and the service was far more effective in representing the views of young people in these. We did highlight the need to be more detailed in the supports required from staff to meet these. (See Area for Improvement 3)

The service had detailed systems and processes for assessing their ability to meet the needs of young people coming to the service. Whilst these seem robust, the service has yet to fully implement these as there have been no new young people moving in since before the last inspection.

Quality assurance processes were in place. We saw strength in some of these processes, including medication audits and oversight of care planning and processes.

External management arrangements had been more difficult for the service to progress with limited implementation of these structures. This made it difficult to have full confidence in these processes and how they would support continued service performance and oversight. (See Requirement 1)

The service had a structure in place for assessing the staffing levels and needs. This had led to the introduction of some important training for staff, including those supporting young people overnight. Trauma training and more frequent opportunity to reflect on practice through team meetings and debriefs meant that staff seemed far more trauma informed leading to more therapeutic practice. The service had plans in place to further develop this area of practice

The service had developed new supervision processes for staff. We found inconsistencies in how these were being used by managers and how often these were being used. This highlighted a need to further develop the skills of staff. We suggested that the service would benefit from enhancing and improving its existing performance management structures. (See Area for Improvement 4)

The service had an improvement plan, which aimed to formalise the plans in place and resources needed to improve themes within the service. We highlighted the importance of keeping this under continual review and including specific, measurable, achievable, realistic, and timely objectives. (See Area for Improvement 5)

Inspection report

Requirements

1. By 12 May 2025, the provider must ensure there is evaluative scrutiny and oversight of all aspects of the care provision within the service. This is to ensure that children and young people experience high quality, consistent care and support.

In particular, you must:

- a) ensure that governance arrangements continue to be developed and implemented. This should include the services use of 'critical friends'; and
- b) provide Care Inspectorate with a progress report reviewing governance processes and their efficacy by 12 May 2025.

This is to comply with Regulation 3, Regulation 4(1)(a) and Regulation 5 of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/ 210).

Areas for improvement

1.

To support young people's right to education, the service should ensure that plans and supports are in place to maximise young people's attendance in school. This should include care plan focused educational goals and supports, including what is expected from care staff to help consistently progress educational goals.

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

'I get the most out of life because the people and organisation who support and care for me have an enabling attitude and believe in my potential' (HSCS 1.6).

2. The service should develop a continuing care policy to set out its responsibilities to provide continuing care to young people, and how it will ensure that young people are aware of their rights to continuing care up to the age of 21.

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

'As a child or young person I feel valued, loved and secure' (HSCS 3.5)

and

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

3. To support the young people's wellbeing and outcomes, the service should review its care planning processes to ensure they fully reflect the wishes and needs of young people, and inform staff fully of their role in supporting them.

The service should ensure that:

- a) goals are SMART (specific, measurable, achievable, realistic and timely). These should be reflective of young people's words, and should clearly describe the supports required to achieve these. Goals should be actively tracked and subject to regular review; and
- b) all staff are aware of the needs and focus of work for all young people within the service, and know exactly what is needed from everyone to support young people to reach their goals.

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

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

4. The service should further strengthen its performance management structures for staff to ensure consistency and support improvement in staff practice within the service.

This should include, but is not limited to:

a) ensure that these are routinely implemented at all levels, and that senior managers and external governance have oversight of this.

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

'If I have a carer, their needs are assessed and support provided' (HSCS 4.26).

5. The service should ensure that the service improvement plan is formalised. This should include the plans in place for improvement and resources required to improve themes within the service. The service should ensure this is kept under continual review and includes specific, measurable, achievable, realistic, and timely objectives.

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

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

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

Areas for improvement

Previous area for improvement 1

To support children's wellbeing, the provider should ensure that all young people have access to independent advocacy. This is to ensure that young people's voices are heard, their rights are respected and have an impact on the care they receive.

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

'I am supported to use independent advocacy if I want or need this' (HSCS 2.4)

and

'My views will always be sought and my choices respected, including when I have reduced capacity to fully make my own decisions' (HSCS 2.11).

This area for improvement was made on 7 February 2024.

Action taken since then

The service had made improvements to the way in which it accessed advocacy for young people. There were positive links with Local Authorities who also ensured young people had access to supports.

All young people we spoke with felt their rights were heard and they were able to access advocacy appropriately.

This area for improvement is met.

Previous area for improvement 2

To support children's wellbeing, the provider should ensure that they follow 'Matching Looked After Children and Young People: Admissions Guidance for Residential Services' published by the Care Inspectorate.'

This should include, but is not limited to:

- a) ensure they consider the potential impact on existing young people within the service, including identifying specifically which house they will reside in;
- b) ensure they have all the necessary information prior to making a decision regarding the new young person being referred to the service; and
- c) ensure they consider staffing levels, skills mix and any current staff vacancies.

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

'I am in the right place to experience the care and support I need and want' (HSCS 1.20).

This area for improvement was made on 7 February 2024.

Action taken since then

We have reviewed the policy and process, and we are confident that the service has important assessment steps in place, and will consider these when assessing their ability to meet the needs of any proposed young person coming to the service.

The service has not yet admitted any new young people into the service since this area for improvement was made.

This area for improvement is met.

Complaints

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

Detailed evaluations

How well do we support children and young people's rights and wellbeing?	3 - Adequate
7.1 Children and young people are safe, feel loved and get the most out of life	4 - Good
7.2 Leaders and staff have the capacity and resources to meet and champion children and young people's needs and rights	3 - Adequate

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