

## Care service inspection report

# Edinburgh Secure Services

## Secure Accommodation Service

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Type of inspection: Unannounced

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HAPPY TO TRANSLATE

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### Service provided by:

City of Edinburgh Council

### Service provider number:

SP2003002576

### Care service number:

CS2003010921

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## Summary

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

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

### We gave the service these grades

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

### What the service does well

The service provides a caring, nurturing environment in which skilled staff support young people to explore the issues which have resulted in their placement in a secure environment. They enable young people to develop positive strategies to help them to deal with the challenges they face on their return to the community.

Staff are aware of the young people's physical and emotional needs and work effectively to ensure that these are met.

Improved quality assurance systems have led to improvements and developments in key areas of practice, notably medication and the development of a new admissions procedure.

### What the service could do better

The service must ensure that it maintains a strong focus on ensuring the safety and security of the environment. In order to support a safe and secure environment for young people, the service provider should continue to implement enhanced security measures, including its revised policy and procedure on searches.

In order provide positive support young people at times of crisis, while minimising the time which they spend in isolation from the group, the service provider should also prioritise the implementation of its revised policy and procedure on single separation.

In order to make sure that young people benefit from the support of a stable and consistent staff team, the service provider should continue to support staff through the provision of regular supervision and effective communication.

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

The service provider had made progress in establishing a greater degree of stability in the staff team, by making permanent appointments to the staff team.

The service had reviewed and enhanced its policy and procedure in relation to searching young people on admission and return to the secure unit.

It had continued to develop management information systems which were helping to identify areas for development within the service.

### **Conclusion**

Edinburgh Secure Accommodation Services provides young people with a caring, nurturing environment in which a skilled staff team work effectively to meet young people's physical and emotional needs.

However, the service must develop a more robust approach to ensuring that the security of the environment is maintained. At the same time, it must ensure that young people's rights are respected and promoted.

# 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 could do more to improve its service, 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.

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

Edinburgh Secure Services is provided by Edinburgh City Council. It is registered to provide secure care and accommodation to young people between the ages of 10 and 17 years. Young people who use the service are mainly from Edinburgh, although at the time of this inspection, young people were also placed from both the Borders and East Lothian councils.

Edinburgh Secure Accommodation Services consists of Braid Secure Unit, based at Howdenhall Centre, and Guthrie Secure Unit, based at St. Katharine's Centre. Each unit provides six secure placements.

The stated aims of the service are "to provide for young people, whose behaviours pose a serious risk to themselves or others, a safe, secure, supportive and stimulating environment in which they will achieve their full potential, develop respect for themselves and for others and be assisted in gaining an understanding of the attitude, skills and knowledge that will enable them to return safely to their communities."

As both units provide secure education on the premises, National Care Standards (NCS) for School Care Accommodation Services are employed in addition to NCS for Care Homes for Children and Young People.

The educational provision is regulated by Education Scotland (ES) and was reported on, following a joint inspection, in September 2011.

The Secure Accommodation Service is approved by the Secretary of State in line with The Secure Accommodation (Scotland) Act 1996.

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

**Quality of Care and Support - Grade 4 - Good**

**Quality of Environment - Grade 4 - Good**

**Quality of Staffing - Grade 4 - Good**

**Quality of Management and Leadership - Grade 4 - Good**

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

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website [www.careinspectorate.com](http://www.careinspectorate.com) or by calling us on 0345 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 medium intensity inspection. We carry out these inspections where we have assessed the service may need a more intense inspection.

### What we did during the inspection

We wrote this report following an unannounced inspection of the service which took place in March 2015. We carried out the inspection over two days, 2 and 3 March 2015. We made a further visit to the service on 26 March when we looked at additional documentary evidence provided by the service, and met with the management team to share our findings.

During the inspection we gathered evidence from a range of sources, which included:

- discussion with young people on an individual basis and in informal groups
- discussion with the principal, depute, unit managers and care staff
- observation of interaction between young people and staff.

We also looked at written information, including:

- a sample of care plans
- risk assessments
- incident records
- records of single separation and time out incidents
- policies and procedures, including policies on search, single separation and time out
- quality assurance information.

We also inspected the premises and systems for ensuring the safety and security of the environment.

### 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)



### **What the service has done to meet any recommendations we made at our last inspection**

The service had taken appropriate action to address some of the recommendations made at the last inspection. In summary, the service had:

- improved opportunities for physical activity
- improved medication systems and practice
- reviewed and developed its policy and procedure on searching young people.

The service needed to make further progress in relation to the following issues identified for improvement at the last inspection:

- improving the frequency of one-to-one supervision for staff (a further recommendation has been made under Quality Theme 3, Quality Statement 3)
- improving the structure of care plans; some progress has been made, but further development is required.

Two recommendations which related to the proposed closure of one of the secure units were no longer relevant as closure was no longer imminent.

### **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.

As this was the second inspection of the service, we did not ask them to submit a self assessment for this inspection.

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

We spoke to seven of the young people who were currently placed in the service, some on a one-to-one basis, and others more informally.

All of the young people were very positive about the quality of care and support they received from staff. One young person said: "The staff are the best thing about being here. They really care about you and try to make things better for you. They have time to talk to you about things."

Another young person who was really unhappy about being in secure care told us that he was "treated really well" by staff and he said that he understood that they cared about him and tried to advise him because they had his best interests at heart.

Two young people raised the issue of the courtyard surface being slippery and unsafe. We reported this to the service, and the matter was dealt with immediately.

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

We did not have the opportunity to meet with parents or carers during this inspection. However, we spoke to a social worker who was visiting a young person for whom he had case responsibility. He expressed very positive views about the quality of the service and described "fantastic partnership working and communication" with staff. He told us that the young person had been supported to achieve positive outcomes in terms of developing more effective strategies for dealing with emotions, and in developing an understanding of his family relationships. He expressed confidence that the young person's needs were being met within the placement.

### 3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

#### Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 4 - Good

##### Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

##### Service strengths

We found that the service was very good at involving young people and their families in contributing to the quality of the service they received. This contributed to young people feeling that their views were respected and that they were included in the important decisions which were made about them

We found a number of strengths in relation to this Quality Statement as follows:

- Young people were closely involved in the care planning process. They attended weekly meetings with their key worker, social worker and parents or carers, as appropriate. Young people were encouraged to attend and to contribute. They felt that their views were listened to and taken into account. The very positive relationships which staff established with young people, their families and relevant professionals were central to the effectiveness of the care planning process and contributed significantly to the way that young people progressed within the service. During the inspection, we spoke to one young person and their social worker who had just attended a review; both confirmed that they had felt properly involved in the discussion and that plans were moving forward as they had anticipated.
- We found some very good examples of well-planned one-to-one work, where staff and young people worked together in a more structured way to address sensitive issues relevant to the young person's situation. The records we looked at provided clear evidence of young people's views and feelings being taken into account about the approach to key time working and changes being made to help young people feel more comfortable and confident about participating in these potentially difficult discussions.

- The staff recognised and understood the importance of young people's relationships with their families, and worked hard to ensure that positive links were developed and maintained. During the inspection, we saw that staff were instrumental in arranging family contact which helped to reduce one young person's anxiety and allowed them to become more settled within the unit. This clearly contributed to the young person's emotional health and wellbeing at that time.

- There was ample evidence to show that young people's views were sought and acted upon in relation to day-to-day life within the unit. We found that staff communicated with young people in a positive, up-beat and respectful way, which helped to encourage active participation. There was some evidence that formal unit meetings were sometimes held, but shared meal times and times spent informally as a group were used as opportunities for generating and consulting about ideas for activities. This had resulted in some shared activities which had been enjoyed by both young people and staff, including some group art activities and games nights. From our observations during the inspection, we could see that young people interacted positively with staff. They were confident in discussions and were helped to become more responsible by being encouraged to negotiate and reach compromise.

- There was regular consultation with young people about the very important issue of food and a reasonable balance was struck between providing a well-balanced diet and taking young people's food preferences into account. The provision of table menus in one unit was a nice way of keeping young people informed of the choices available on a daily basis.

- There was evidence that the service used exit interviews and questionnaires to seek feedback from young people, parents and carers, and allocated social workers. Periodically, the service sent out questionnaires to all stakeholders to assess satisfaction with the service. We saw that responses were collated and considered in relation to the service development plan.

- There was a robust and respectful complaints procedure in place. Complaints were taken seriously, investigated thoroughly and formally responded to. Young people had ready access to independent advice and support through the Children's Rights Officer and Who cares? Scotland representative who were informed of young people's admission to the service.

In summary, we found that the service was committed to providing opportunities for young people to influence the quality of the service they received both in relation to their individual care plans and in relation to the service as a whole, using formal and informal routes. From our discussions with young people and from our observations during the inspection, we found that the service's approach contributed to young people feeling respected, responsible and included, and had a positive effect on their health and wellbeing.

## Areas for improvement

The service should continue to develop opportunities for young people and their parents and families to participate in assessing and improving the quality of the service. In particular, the service should evaluate the impact of its participation strategy on outcomes for young people.

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

**Number of requirements:** 0

**Number of recommendations:** 0

## Statement 3

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

### Service strengths

We found that the service was performing at an adequate standard in relation to this Quality Statement.

We came to this conclusion because, while we found that there were some examples of very good practice which resulted in positive outcomes for young people, there were also some aspects of practice which we found were constraining the service's overall performance (see Areas for Improvement).

We did note the following important strengths which had a positive impact on the experience of young people:

- There was very good evidence to show that young people's primary healthcare needs were met. The Looked After and Accommodated Children (LAAC) nurse was informed of new admissions to the service and carried out an assessment within one week. The LAAC nurse had access to medical records and the time spent in secure care provided opportunities for young people to catch up with health issues, such as missed immunisations and outstanding dental treatment. Routine medical appointments were made and young people were supported to attend these, helping to ensure that prescribed courses of treatment were followed through. This benefitted their health in the immediate and longer term. At this inspection, we saw that staff responded quickly to ensure that one young person received appropriate medical treatment. We also saw that staff showed kindness and concern to young people who were unwell.
- The service had well-established links with the local GP surgery and had a standing appointment which meant that young people in need of medical attention could access this without delay. Young people also benefitted from the service links with other community-based health services, for example Edinburgh Connect, which

provided consultation to staff and direct support to some young people in relation to mental health issues. Where required, young people had access to forensic or clinical psychology services.

- There had been a sustained improvement in the service's systems for storing, administering and recording medication. Training and rigorous quality assurance had helped to embed the improved practice throughout the service. We noted that staff ensured that young people's privacy and dignity was promoted when medication was being given.

- The service had continued to encourage young people to eat more healthily. As well as providing well-cooked, well-presented meals (which always included salad and/or fresh vegetables and fresh fruit), young people were encouraged to limit their intake of junk food and fizzy drinks. There was ongoing consultation with the young people about the quality of the food provided and efforts made to accommodate individual preferences. Following a recommendation made at the last inspection, we found that there had been an increase in opportunities for physical exercise, with improved links with Edinburgh Leisure facilitating gym and swimming activities. Although young people complained that the slippery surface in the outdoor area in one unit meant that they couldn't get outside for activities, this was quickly resolved by the service.

- The service was characterised by really positive, nurturing relationships and the establishment of clear boundaries, structures and routines which helped young people to establish a healthier, more constructive lifestyle. Young people began to eat regularly, sleep better and attend school, all of which contributed to them being healthier, feeling nurtured and being supported to achieve more.

- Staff within the service were continuing to promote the development of 'health promoting' unit status across residential services in Edinburgh. This was a three-stage process, and the Secure and Close Support Units had achieved stage two. This had a positive impact in terms of raising awareness of health issues with both young people and staff.

### **Areas for improvement**

We had concerns about the service's approach to single separation, which is when young people are confined to their rooms for a period of time as a means of helping them to settle following a crisis. The Regulations and Guidance on the Children (Scotland) Act 1995 states that young people should not normally be singly separated for more than three hours in a 24-hour period. We found several examples of young people having been placed in single separation for periods well in excess of three hours (in one case, for 56 hours). This led us to conclude that it was common practice for young people to be detained for extended periods of time within this service. We understood from reading records and from discussion with staff and managers that the initial decision to remove a young person from the group and place them in a

locked room was made in response to challenging and potentially dangerous situations. We also found that young people were closely monitored throughout periods of single separation and that staff worked with them to help them to develop alternative ways of dealing with their feelings. However, there was considerable room for improvement in the service's approach and it needs to substantially reduce the number of times and the length of time that single separation is used as a response to challenging behaviour.

Through its quality assurance systems, the service had already recognised that it needed to address the issue of single separation. It had recently developed a new policy, a new recording system, and had put into place training and guidance for staff about this issue. It now needs to ensure that practice changes quickly in response to the new policy so that young people's needs can be effectively met without recourse to extended periods of single separation. As the service had already taken the required action to address this issue, we will not make a requirement in this case. However, we expect that the service will give priority to the implementation of the policy and to improving the approach to single separation and will follow up on progress towards this at the next inspection.

Following a recommendation in the last inspection report, we found that there had been some movement towards the integration of the SHANARRI Framework indicators (government outcomes of safe, healthy, achieving, nurtured, active, respected, responsible and included for children) into the structure of care plans. However, this is clearly a work in progress and the service should make sure that it further develops its care plan structure.

**Grade awarded for this statement:** 3 - Adequate

**Number of requirements:** 0

**Number of recommendations:** 0

## Quality Theme 2: Quality of Environment

Grade awarded for this theme: 4 - Good

### Statement 1

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

#### Service strengths

For information about the service's strengths in relation to this Quality Statement, please refer to Quality Theme 1, Quality Statement 1.

#### Areas for improvement

Please refer to Quality Theme 1, Quality Statement 1.

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

**Number of requirements:** 0

**Number of recommendations:** 0

### Statement 2

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

#### Service strengths

We found that the service was performing at an adequate standard in relation to this Quality Statement.

We came to this conclusion because, while we found that there were some examples of effective practice which resulted in positive outcomes for young people, there were also some aspects of practice which we found were constraining the service's overall performance (see Areas for Improvement).

From our discussions with young people, staff and managers and from our observations during the inspection we noted the following strengths:

- There was a secure entry system which appropriately restricted and monitored access to the secure units. Staff were diligent in making sure that only people who were authorised to do so could enter the premises. During the inspection, we



observed that staff adopted a rigorous approach to planning and supporting the transition of young people in and out of the secure unit. This practice contributed significantly to the safety and security of the environment.

- A range of risk assessments was in place which helped to make sure that the premises were safe and secure. Health and safety checklists provided evidence that staff routinely checked the security of the environment. Security protocols had been improved in the light of a recent incident which highlighted a deficit in security routines.

- The service had reviewed and developed its policy and procedure in relation to searching young people when they were admitted to the service or when they returned from time out of the unit. This was in response to young people who had raised the issue during the last inspection. Once fully implemented, this change will contribute to the provision of a safer environment for young people.

- Staff were provided with a range of appropriate training to support safe care practice. This included Crisis, Aggression, Limitation and Management (CALM), first aid and suicide prevention. The service was also in the process of rolling out Skills-based Training on Risk Management (STORM) training for suicide prevention to staff across the service. This focus on training to provide safe care helped staff to respond appropriately to young people whose behaviour presented a risk to themselves or others. In general, we found that staff had a very good understanding of the range of risks which young people faced and were skilled at helping them to address the issues underlying their behaviour.

- Detailed plans were in place to support young people who were assessed as being at risk of harming themselves. We noted that staff were diligent in carrying out plans where these had been identified as necessary to keep young people safe. The service had a suicide prevention strategy in place which had been amended to provide clear and concise guidance for staff.

### **Areas for improvement**

There had been a recent breach of security which had highlighted some serious concerns about the security of the building and the effectiveness of security checks in one of the secure units.

The service demonstrated that it had taken prompt action to address the main concerns, including improving the security of the building and implementing enhanced security protocols. Had this not been done before we carried out the inspection, we would have made requirements to this effect and the grade for this Quality Statement would have been weak. For a secure accommodation service, this is a major concern.

Also, although the service provider had carried out an arm's length review of security, this was not available to us at the time of the inspection (five weeks after the event) and we are unable to comment at this stage on what the outcome of this was.

Notwithstanding the findings of the internal review, our view is that this service sometimes struggles to find a balance between providing a caring, nurturing environment (which it does very well) and providing a level of security which is consistent with its registration as a secure accommodation service. We recommend that the service provider should undertake a comprehensive review of all aspects of security in the service and ensure that the premises, policies, procedures and staff practice support the provision of a safe and secure environment (**see Recommendation 1**).

As noted under Service Strengths above, the service has reviewed and developed its policy and practice on carrying out searches of young people. It should make sure that the policy is finalised and that all staff are trained and supported to implement it.

**Grade awarded for this statement:** 3 - Adequate

**Number of requirements:** 0

**Number of recommendations:** 1

### Recommendations

1. The service provider should undertake a comprehensive review of all aspects of security in the service and ensure that the premises, policies, procedures and staff practice support the provision of a safe and secure environment for all young people.

National Care Standards, School Care Accommodation Services - Standard 3: Care and Protection; Standard 5: Comfort, Safety and Security; and Standard 7: Management and Staffing.

## Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 4 - Good

### Statement 1

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

#### Service strengths

For information about the service's strengths in relation to this Quality Statement, please refer to Quality Theme 1, Quality Statement 1.

#### Areas for improvement

Please refer to Quality Theme 1, Quality Statement 1.

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

**Number of requirements:** 0

**Number of recommendations:** 0

### Statement 3

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

#### Service strengths

The service was operating at a good standard in relation to this Quality Statement.

We found that the majority of staff were professional, skilled and committed to delivering a high quality of care and support to young people. The quality of individual staff was generally high.

From our discussions and observations, and from examination of relevant documents during the inspection we noted the following strengths:

- At the last inspection, we found that there were uncertainties around the future of the Guthrie Unit which had been planned to close. The service was no longer subject to plans for imminent closure and the service provider had improved the stability of the staff team through the redeployment of permanent, qualified and experienced staff from other services.

- Staff worked effectively in partnership with young people, families and partner agencies to meet the complex needs of young people. Staff formed positive, meaningful relationships with young people, which were of central importance to the progress which young people made while in the secure unit. They were skilled and creative in developing strategies which helped young people to address the issues they needed to address so that they could move on from the service in a positive way.

- Almost all staff were qualified and registered with the Scottish Social Services Council (SSSC). There was a plan in place to make sure that those who needed to achieve qualifications to meet conditions of registration did so within the required timescales. A comprehensive staff development strategy was in place. Staff had access to a range of training to support their practice. Recent training had included first aid, social pedagogy, Child Protection and CALM. The service had invested heavily in developing an understanding of Attachment Theory throughout the staff team. We found that the staff team as a whole had a well-developed understanding of attachment issues and how this affected young people's behaviour. This helped to ensure that they were able to support young people to develop a better understanding of the challenges which faced them, and to deal with these in a way which improved their sense of health and wellbeing and safety

- Staff who had recently begun working in the service told us that they had a structured induction into the service which had helped them to quickly become familiar with policies, procedures and routines. In general, staff felt well-supported by their line managers and colleagues. The service had benefited from the introduction of staff from other local authority services. The service provider had improved the arrangements for staff appointments to the service, which would support a greater degree of stability and consistency within the staff team. This was of positive benefit to young people in terms of the establishment of positive relationships and the development of a consistent approach to care.

- Regular team meetings and handover meetings enabled staff to discuss the support and management of individual young people and relevant practice development issues. This helped staff to develop a consistent approach to supporting young people within the service. The service had recently introduced a system of group meetings for staff who were new to the service. These meetings aimed to provide new staff with a forum to discuss and explore issues and practice relevant to the secure setting and would, in time, help to promote a shared culture of safe practice.

- We looked at supervision records across the service. We found that the frequency of one-to-one supervision varied widely, with some staff having had very regular opportunities to discuss their practice and development needs, while there were gaps of several months for others. The sample of records we looked at showed that one-to-one supervision was used constructively to reflect on and apply learning from

training, to develop practice and to help staff to develop strategies to support the most troubled young people.

- Staff were involved to contribute to the development of the service as a whole, through support for initiatives at team level (for example, improvements to the environment and the development of activities); through contribution to the service development plan; and also to develop the quality of children's services more widely across the local authority.

### Areas for improvement

At the last inspection, we found that there were uncertainties around the future of the Guthrie Unit which had been planned to close. The service was no longer subject to plans for imminent closure and the service provider had improved the stability of the staff team through the redeployment of permanent, qualified and experienced staff from other services.

However, the service's system for supporting staff was still in need of improvement. There were significant gaps in the frequency of one-to-one supervision, particularly at unit manager/assistant unit manager level. There was a concerning level of staff sickness, particularly at assistant unit manager level.

While we found that the induction process for new staff was good, we thought that the service could improve the ongoing support to new staff during their early months in the service. While the recently introduced group meetings may do this effectively, the service could also consider whether a more formal support/mentoring arrangement would be a constructive way of ensuring that staff continue to feel supported.

In addition, the service faces further disruption with the introduction of new rotas necessitated by the Working Time Directive rules, which would mean further change and disruption for an already change-weary group of staff. This may affect the capacity of the service to provide a consistently high quality of care and support to young people.

The service provider should put in place an effective support and supervision strategy with the aim of supporting new and experienced staff at all levels within the service. This should include regular one-to-one supervision for all staff in accordance with the service's policy and enhanced support/mentoring for staff who have recently joined the service **(see Recommendation 1)**.

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

**Number of requirements:** 0

**Number of recommendations:** 1

### Recommendations

1. The service should put in place an effective support and supervision strategy with the aim of supporting new and experienced staff at all levels within the service. This should include regular one-to-one supervision for all staff in accordance with the service's policy and enhanced support/mentoring for staff who have recently joined the service.

National Care Standard, School Care Accommodation Services – Standard 7:  
Management and Staffing.

## 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

For information about the service's strengths in relation to this Quality Statement, please refer to Quality Theme 1, Quality Statement 1.

#### Areas for improvement

Please refer to Quality Theme 1, Quality Statement 1.

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

**Number of requirements:** 0

**Number of recommendations:** 0

### Statement 4

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

#### Service strengths

While we found that the service had some very effective processes in places for ensuring that the quality of the service was maintained, we have graded this Quality Statement as adequate because we felt that some aspects of quality assurance had not been properly implemented (see Areas for Improvement).

However, we were encouraged to find evidence within the service itself that improved management reporting and information systems had led to improvements in the quality of practice in key areas (notably in respect of medication procedures) and had also led to developments in policies and procedures (for example, the admissions policy), both of which were of positive benefit to the experience of young people who were using the service.

From our discussions and observations during the inspection, and from looking at relevant documents, including management information reports, we noted the following strengths:

- There was a comprehensive range of audits which enabled the management team to monitor and improve the quality of key processes within the service. There were regular audits of medication and supervision records; records of incidents; case files; and health and safety checks. The information from the audits provided managers with a very good basis for identifying where there were practice issues which needed to be addressed. We found that improved audit systems had contributed to significant improvements in the way the medication was administered and recorded. We also noted that a new admissions protocol had been developed in response to management information reports. We noted that the appointment of a deputy principal was supporting the continued development and analysis of quality assurance systems.
- The management team were visible and accessible to staff and young people. This meant that young people could raise issues directly with senior staff, if necessary. During the inspection, we observed positive and meaningful interaction between young people and the principal, deputy and unit managers. This level of contact and the ability of the manager to elicit feedback directly from young people was a positive element of the quality assurance system.
- There was a very good system in place for ensuring that incidents of physical restraint were properly recorded and monitored. The external manager reviewed all records of safe holds and made comment where areas for further learning were identified. This level of external scrutiny contributed to a safer environment for young people who used the service. The service provider was in the process of developing an electronic recording system which would help to improve the quality, consistency and transparency of record keeping in relation to incidents.
- There was a robust system in place for dealing with complaints. There had been two complaints from young people and/or their parents during the past year. Records of complaint investigations showed that they had been dealt with in a formal, constructive manner. The service took complaints very seriously and made sure they were properly investigated. We also found that the service was open to making adjustments to the way that the service was provided where complaints had been found to be justified. The regular Complaints Information Group meetings, which included the council's Client Services Officer, external manager and the Children's Rights Officer, helped to make sure that there was a balanced view taken of issues raised by service users.
- The service sought to form effective working relationships with partner agencies. We found evidence of effective collaboration between the Secure Service and colleagues in health, police and social work services, which helped the service to



provide more integrated support to young people. The service sought feedback from young people, parents and placing social workers at the end of placement, and again used this information to inform practice development.

- Managers and staff contributed towards the service development plan which took into account their views and the feedback the service had received through various channels from young people, parents, carers and other stakeholders in identifying and prioritising areas for development within the service.

### **Areas for improvement**

We had some concerns about the service's performance in relation to this Quality Statement as detailed below. Despite the very good progress which has been made in respect of some areas of quality assurance, these issues suggest that the service provider needs to address these areas of concern, while continuing to build on the good practice which we observed. This is reflected in the grade of adequate which we given for this Quality Statement.

- Although there had been a prompt response to a serious incident by the service itself, we felt that there was an unhelpful delay by the service provider in the setting up of an inquiry into the serious incident reported under Quality Theme 2, Quality Statement 2. This had not been reported by the end of this inspection, which was five weeks after the incident. This meant that although initial issues had been dealt with, the service provider had not yet clearly addressed some important questions about security arrangements in the service.

- We noted that there had been a delay in the service notifying the Care Inspectorate of significant events which require to be notified in line with statutory requirements and Care Inspectorate guidance. Following discussion, the service said that they were now clear about the circumstances in which incidents should be notified. For reference, the requirement to notify is detailed under SSI 2011/28 Regulation 4(1)(b). Guidance on the details of notifiable incidents can be found in 'Records that all registered care services (except childminding) must keep' and guidance on notification reporting V.2 - Publication code: OPS-0212-119 available on [www.careinspectorate.com](http://www.careinspectorate.com).

As there was evidence that both of the above issues were in progress, we have not made requirements about these matters.

However, we expect that the service provider will prioritise the review of security arrangements in the light of its own investigation and in line with the recommendation made under Quality Theme 2, Quality Statement 2. We also expect that the service will comply with the notification requirements as outlined above.

We will follow up on progress in relation to these issues at the next inspection of the service.

**Grade awarded for this statement:** 3 - Adequate

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

## 6 Inspection and grading history

Date	Type	Gradings
23 Oct 2014	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and Leadership 5 - Very Good
20 Mar 2014	Announced	Care and support 5 - Very Good Environment 5 - Very Good Staffing 5 - Very Good Management and Leadership 4 - Good
30 Aug 2013	Unannounced	Care and support 2 - Weak Environment 2 - Weak Staffing 4 - Good Management and Leadership 2 - Weak

## Inspection report continued

7 Nov 2012	Unannounced	Care and support 4 - Good Environment 5 - Very Good Staffing 5 - Very Good Management and Leadership 4 - Good
1 Jun 2012	Unannounced	Care and support 5 - Very Good Environment 2 - Weak Staffing 5 - Very Good Management and Leadership 4 - Good
24 Nov 2011	Unannounced	Care and support 5 - Very Good Environment 5 - Very Good Staffing Not Assessed Management and Leadership 3 - Adequate
18 Feb 2011	Announced	Care and support 6 - Excellent Environment Not Assessed Staffing Not Assessed Management and Leadership Not Assessed
11 Aug 2010	Unannounced	Care and support 5 - Very Good Environment 4 - Good Staffing Not Assessed Management and Leadership Not Assessed
10 Feb 2010	Unannounced	Care and support 5 - Very Good Environment 4 - Good Staffing 5 - Very Good Management and Leadership Not Assessed
10 Sep 2009	Announced	Care and support 5 - Very Good Environment 4 - Good Staffing 5 - Very Good Management and Leadership 5 - Very Good
12 Feb 2009	Unannounced	Care and support Not Assessed Environment 4 - Good Staffing Not Assessed Management and Leadership 4 - Good

## Inspection report continued

18 Nov 2008	Announced	Care and support	5 - Very Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and Leadership	3 - Adequate

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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