

The Muirhead Outreach Project Support Service

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Type of inspection: Unannounced
Inspection completed on: 21 February 2017

Service provided by:
The Muirhead Outreach Project Limited

Service provider number:
SP2010011348

Care service number:
CS2010279524

About the service

The Muirhead Outreach Project is a support service working with children and their parents and carers in the Fife area. Its primary aim is to 'support vulnerable children, young people and their families through difficult, chaotic times with an aim of assisting them to remain at home, and to refer on to other professional agencies when necessary.'

The service operates seven days a week both in the community and from a base in Glenrothes, which has two communal rooms, a dining kitchen and a staff office. They also have a caravan in a local holiday park which is used by families for holidays and short breaks.

The service provider is The Muirhead Outreach Project Limited, a company limited by guarantee and registered Scottish charity. It is governed by a board of trustees. The service has two managers, administrative staff and a team of paid and voluntary support workers in addition to a volunteer coordinator. Staff provide a combination of group and individual work.

The service has been registered since January 2011.

What people told us

We joined children and young people at two of their three evening groups. Five young children were present at the first (in addition to a young person who was helping) and two at the second. The first was a very lively and happy group who were actively engaged in play and were clearly very relaxed in staff's company. They really enjoyed their snacks and used good social skills and manners. They had lots of fun and laughter. The young people at the second group, who were older, also clearly had positive relationships with staff. They chose how to spend the time. There were friendly discussions and lots of good humour. One told us about a recent 'themed' event organised by staff, where they had learned about very interesting aspects of local history.

We also attended the 'Happy Fridays' group attended by five parents and carers, some babies and toddlers and supported by two staff. Most parents took part in a craft activity but this was clearly a very valued and relaxing social event for getting together with other parents. Some had been involved with the service for a number of years and described this as a safe environment.

We also spoke with two parents by telephone. They told us:

- the service had been 'absolutely fantastic'. They would recommend it and their son had already recommended it to a friend! He had loved his time there and had good experiences with staff. It had been 'amazing'.
- This was a 'very good service'. Staff had been 'there for her' and had given her a break. They were 'amazing people'.

Self assessment

We received a fully completed self-assessment document from the manager. This identified the service's strengths and also included some areas for development and improvement. The document was a useful aide for planning the inspection.

From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of environment	4 - Good
Quality of staffing	3 - Adequate
Quality of management and leadership	3 - Adequate

Quality of care and support

Findings from the inspection

Overall, the service's performance had important strengths and reached a good standard. The support provided by staff had enabled children, young people and their families to have a range of positive and enjoyable experiences and achieve good outcomes. These included the benefits of warm and stable relationships with staff, some of which were long-standing. Staff created valuable opportunities for children to play, make friends, reduce isolation and develop a range of social skills, including appropriate ways of managing their emotions. During a wide variety of activities children exercised choice and were listened to by staff who took them seriously. They also had some opportunities to influence how they spent their time and say whether there was anything that could be done to make improvements. The provision of tasty meals and snacks, including lots of fresh fruit, was a significant and valuable aspect of the service that children clearly enjoyed. They had also benefited from support with attending health appointments and learning about healthy lifestyles. Day trips and longer sessions during school holidays provided fresh air and exercise and a chance to find out about local and national history.

Parents in turn valued the opportunities the service provided for a break from sometimes stressful and challenging caring responsibilities. The weekly groups for example had helped some to develop employability skills and reduce social isolation.

Where the service was less effective was in planning for individual children's needs more systematically and with a focus on outcomes, even if this is largely by means of group work. This should of course be done proportionately, taking into account the type and scope of the service being provided. It was difficult for the service to provide clear evidence of all their successes in the records they maintained and their evaluations of progress were inconsistent. The lack of reviews, which are a legal requirement, played a part in this. **(See Requirement, Quality of Care and Support).**

Whilst there had been few concerns about children's welfare, we identified the need for a more systematic approach to record-keeping and formal notifications. **(see Recommendation, Quality of Care and Support).**

Requirements

Number of requirements: 1

1. The provider must meet individual children's needs by:
 - (i) developing personal plans
 - (ii) ensuring that these plans are reviewed at the required intervals.

This is in order to comply with SSI 2011/210 Regulation 5(1) and Regulation 5(2)(b)

Timescale for implementation: all plans should be completed by no later than the end of August 2017 and reviewed on an ongoing basis.

Recommendations

Number of recommendations: 1

1. The provider should safeguard children's welfare by ensuring that there is a clear process for recording and managing child protection concerns, including making referrals to the local authority.

National Care Standards Support Services: Standard 10 - Feeling Safe and Secure.

Grade: 4 - good

Quality of environment

Findings from the inspection

The service's performance was of a good standard with important strengths.

The new kitchen diner had had a very positive impact and was very well used by children and families, providing additional facilities for cooking, eating and socialising. We thought that staff made good use of the available space for a variety of uses. The new 'quiet room' for example meant that children had an additional space for activities away from the main group. The caravan provided a very useful facility for families to use for breaks and holidays which they might otherwise not be able to have. The service had provided new bedding and equipment and kept up with the necessary repairs and maintenance to ensure it continued to be a safe and pleasant space.

We asked the service to replace cloth with paper hand towels in the toilet to improve infection control: the manager dealt with this before the inspection was completed. A number of risk assessments for activities and outings were not signed or dated so we brought these to the manager's attention. We also felt that prompt action should have been taken following the fire risk assessment identifying that some doors were not closing properly. This should now be addressed without delay.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 - good

Quality of staffing

Findings from the inspection

The service's performance was basic but adequate overall. We found that the provider had followed most but not all of the best practice guidance on minimum checks to complete during the recruitment and selection process. In one instance for example they had not obtained the necessary information from Disclosure Scotland before staff started work: this is a key aspect of a safe recruitment process. We would also recommend that references be obtained for all volunteers regardless of whether they have worked in a similar role with other organisations. **(See Recommendation 1, Quality of Staffing).**

New staff underwent a basic induction when starting work, though the service acknowledged it could be further developed. They also took part in relevant training including child protection, recording practice and food hygiene where appropriate. Team meetings allowed staff opportunities to keep each other informed and be kept up to date with changes and developments.

Whilst staff turnover was very high in comparison with similar services nationally, there was a core group of more established staff. Staff also had warm and positive relationships with children and their families, showing good humour, respect and affection.

Staff had opportunities for planned supervision with their manager, though these were somewhat irregular. This should be proportionate to the hours they work and their roles and responsibilities. **(See Recommendation 2, Quality of Staffing).**

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 2

1. The provider should complete the minimum safe recruitment checks prior to staff starting work in order to ensure children and young people have good quality, safe care.

National Care Standards Support Services: Standard 2 - Management and Staffing Arrangements.

2. The provider should establish a policy on the minimum frequency of planned supervision for staff.

National Care Standards Support Services: Standard 2 - Management and Staffing Arrangements.

Grade: 3 - adequate

Quality of management and leadership

Findings from the inspection

The service reached a basic but adequate standard in this area. This meant that strengths had a positive impact on the experiences of users. However, while weaknesses were not significant enough to have a substantially adverse impact, they did constrain performance.

A number of changes of manager in the previous three years had perhaps inevitably led to a loss of momentum in terms of development and improvement. This included addressing requirements and recommendations from inspection reports, most of which had not progressed since the previous inspection. We were reassured however to hear that both the board and manager had plenty of ideas and plans for moving forward. These now need to be pulled together in the form of a structured but proportionate and achievable plan. We would suggest that the board provide regular oversight of the improvement process to keep the momentum going and make adjustments as required. The recent appointment of a second manager should also allow more time to address these areas, including involving the staff group in self-evaluation. **(See Recommendation 1, Quality of Management and Leadership).**

The service had not adhered to guidance on keeping the Care Inspectorate informed of significant events such as child protection concerns **(see Recommendation 2, Quality of Management and Leadership).**

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 2

1. The provider should develop an improvement plan for the service with clear goals and timescales for the short-, medium- and longer-term.

National Care Standards Support Services: Standard 2 - Management and Staffing Arrangements and Standard 8 - Making Choices.

2. The provider should ensure that managers submit notifications of significant events as outlined in the relevant guidance.

National Care Standards: Standards 2 - Management and Staffing Arrangements.

Grade: 3 - adequate

What the service has done to meet any requirements we made at or since the last inspection

Previous requirements

Requirement 1

The provider must make sure that they review service users' personal plans at the required intervals.

This is in order to comply with SSI 2011/210 Regulation 5(2)(b)(iii)
Timescale for implementation: within two months of receipt of this report.

This requirement was made on 17 December 2015.

Action taken on previous requirement

Personal plans had not been reviewed as required by Regulations.

Not met

Requirement 2

The provider must seek written consent for staff to administer medication.

This is in order to comply with SSI 2011/210 Regulation 4(1)(a)
Timescale for implementation: before administering medication.

This requirement was made on 17 December 2015.

Action taken on previous requirement

Staff had not administered medication since the previous inspection however the policy had been changed appropriately.

Met - within timescales

What the service has done to meet any recommendations we made at or since the last inspection

Previous recommendations

Recommendation 1

The manager should develop and implement systems to ensure that the views of service users and carers are regularly gathered and used to improve the quality of care and support, staffing and management and

leadership. Service users and carers should be regularly informed about how their views have been taken into account within quality assurance and quality improvement work in the service.

National Care Standards Support Services: Standard 8 - Making choices.

This recommendation was made on 29 February 2016.

Action taken on previous recommendation

The service had gathered information either in the form of evaluation forms after events such as an outing to Edinburgh, or through informal discussion. Children also used a white board to add brief comments after a group event. Members of the board had also undertaken some visits to families to obtain their views, which had all been very positive. The service was less effective and systematic in the way they collated these views and fed them back to service users and carers. See also section on Quality of Care and Support.

Recommendation 2

The manager should ensure that health and safety audits are carried out and reported on in order to ensure that quality is assured and maintained in health and safety and managing risks in the service.

National Care Standards Support Services: Standard 2 - Management and Staffing Arrangements.

This recommendation was made on 29 February 2016.

Action taken on previous recommendation

The designated staff member had completed a fire safety audit and risk assessment in November 2016. There had also been a gas safety check of the caravan in May 2016.

Recommendation 3

The manager should ensure that all staff are aware of and can use methods that reflect up to date knowledge and best practice guidance on the principles of "Holding Safely".

National Care Standards Support Services: Standard 2 - Management and Staffing Arrangements.

This recommendation was made on 29 February 2016.

Action taken on previous recommendation

The manager and staff had taken part in training on assessing and managing challenging behaviour. A staff member described this as 'impressive'.

Recommendation 4

The manager should ensure that proper recording systems are in place including for the recording of accidents and incidents.

National Care Standards Support Services: Standard 2 - Management and Staffing Arrangements.

This recommendation was made on 29 February 2016.

Action taken on previous recommendation

Staff had made appropriate records of accidents and incidents, though there had been very few.

Recommendation 5

The provider should develop a more structured approach to staff supervision.

National Care Standards Support Services: Standard 2 - Management and Staffing Arrangements.

This recommendation was made on 29 February 2016.

Action taken on previous recommendation

There was an agreed agenda forming the basis of supervision sessions and some evidence of discussion of training and development, staff achievements and reflection on practice.

Recommendation 6

The provider should make more effective use of staff meetings to promote self-evaluation and improvement.

National Care Standards Support Services: Standard 2 - Management and Staffing Arrangements.

This recommendation was made on 29 February 2016.

Action taken on previous recommendation

There was limited evidence in the records we reviewed showing progress in this area.

Recommendation 7

The provider should develop a systematic approach to quality assurance.

National Care Standards Support Services: Standard 2 - Management and Staffing Arrangements.

This recommendation was made on 29 February 2016.

Action taken on previous recommendation

As detailed in Quality of Management and Leadership, there had been very limited progress in this area since the previous inspection. We have made a further recommendation in this report.

Complaints

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

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

Date	Type	Gradings	
17 Dec 2015	Announced (short notice)	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
21 Dec 2012	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good
27 Jan 2012	Announced (short notice)	Care and support Environment Staffing Management and leadership	3 - Adequate 4 - Good 4 - Good 3 - Adequate

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