

St. Mary's Kenmure Secure Accommodation Service

St. Mary's Road Bishopbriggs Glasgow G64 2EH

Telephone: 0141 586 1200

Type of inspection: Unannounced

Inspection completed on: 14 March 2018

Service provided by:

St. Marys Kenmure

Care service number:

CS2011299188

Service provider number:

SP2011011646



About the service

St. Mary's Kenmure secure unit is a secure accommodation service that provides 24 secure beds for young people (male and female), aged from 11 to 18 years. Located in the north east of Glasgow, in Bishopbriggs, St. Mary's Kenmure is governed by an independent board of managers and is affiliated to the Cora Foundation, a registered charity committed to Christian social care and education.

The service has a campus style facility, which is formed by grouping four house units, an education centre, administration, and a catering centre around a large central courtyard containing an outdoor recreation area.

Additionally, there are indoor recreational facilities, such as a swimming pool and a gymnasium. Above the recreational unit is a group work area that has a programmes team dedicated to the delivery of structured programmes, such as cognitive skills and offending behaviour. The central courtyard, which is landscaped, is the main circulation route within St. Mary's Kenmure.

The accommodation for the young people is a single bedroom and includes a toilet and shower en suite with fixtures and fittings designed to limit self harm. There is a living/dining and kitchen area, office, and a visitors/activities room in each unit. Perimeter security is provided by the buildings and is supplemented by CCTV monitored by a designated team of operations staff.

The stated objective of St. Mary's Kenmure is to offer "individual young people who are experiencing and presenting difficulties in the community, a stable, safe, secure, stimulating environment to promote growth and development leading to eventual return to the community".

At the time of this inspection there were 22 young people in the secure unit.

This service has been registered since 24 January 2012.

What people told us

We interviewed 15 young people. Nearly all of the young people indicated that they were satisfied with the overall service at St. Mary's Kenmure. Most young people indicated that they felt safe. The following comments were provided during the inspection:

- "I've been here 10 months and I like the staff."
- "Staff are very good."
- "Staff give you what you need."
- "Staff are good at their job staff."
- "Yes, I feel safe."
- "The school has an brilliant gym, swimming pool, basketball court and we can play badminton in the sports hall."
- "Food would grade at 4.5, it could improve but sometimes its okay."

- "Most of the time it's okay here, I can't really think of anything that they could improve."
- "Everything is good."
- "Yes, we are listened to. For example, the chef comes round to speak with us."
- "Yes, we get looked after. If we're ill a nurse see us any time we need."
- "School is very good. We have individual tutors."
- "The activities are really good. We have a gym, pitch, and swimming pool."

We found some young people indicated their dissatifaction with the food. The service was continuing to review this situation. They have tried many strategies to ensure that young people were happy with the quantity and quality of the food so that they receive nutritious and healthy food. They idicated that will continue to strive to improve this issue.

Self assessment

We did not request a self assessment prior to the inspection. The service was able to provide action plans which clearly idicated that the service was continuing to develop the service.

From this inspection we graded this service as:

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

Quality of care and support

Findings from the inspection

We found that this service continued to offer young people good outcomes. All young people's assessments were very good and that staff had a very good understanding of individual young people's needs. The initial intervention team focused on identifying needs and panning work that had to be undertaken with young people in the short term to ensure that they made progress. Young people were encouraged and supported to offer their opinions about their wishes. These, on the whole, were worked on by young people and maintained by key workers and the interventions team. The service had worked hard at developing new care plans which incorporated the use of wellbeing indicators and where underpinned by Getting It Right For Every Child (GIRFEC). These were found to be participative and young people engaged in the creation and reviewing of these. All young people had identified targets that were formed using SMART (specific, measurable, achievable, realistic, and time-bound) principles. The targets were monitored and young people were found to be achieving. However, there was need for staff to have greater understanding of process recording so that care plans recorded the actual targets they were working on and took account of the young people's whole experience (see recommendation 1).

All young people had access to primary healthcare services and there was evidence that treatments had been carried out to ensure that health needs were being met. If young people needed additional referrals to specialist services they were actively persued and we saw good relationships with these external services, such as child and adolescent mental health services (CAMHS) and the sexual health services. The service also had internal specialist supports with a nurse specialist and other trained professionals who carried out cognitive behavioural therapy (CBT) and programmed work. Young people also had access to a clinical psychologist. All of these services helped ensure that young people were kept healthy.

We examined administration of medication, storage, and records. This was found to be compliant with best practice. There were some minor issues which we passed on to individual unit managers at the time of the inspection to rectify.

There was particularly high levels of interaction with staff and young people. This allowed trusting relationships to develop. We found some good work with individual families which had mutual benefits for both the young people and their carers. There was evidence that this helped with the transition for moving home. Staff were good at continuing to offer direct support to young people when the moved on. This sustained relationship helped them moving back to their own home communities.

All young people had regular access to physical activities. There was a well resourced recreational area which had a swimming pool, gym, and a games hall. This ensured young people had access to a range of activities. The service was in the process of developing a cinema. This would provide young people with an additional space where they could relax and enjoy time away from their individual units. The service was also investing in a new scuba diving club which would give young people additional experiences of taking part in a new and exciting club.

The service tried incredibly hard to ensure that young people we are able to gain work experience. There were several initiatives which provided young people opportunities to be responsible in and around the campus. These were found to give the young people additional skills and help boost their self worth and confidence.

We had a discussion with the management team about the difficulties with the current group of young people at the secure service. We felt that it may be beneficial for the service to look at specific training to enhance staff knowledge of current young people's experiences.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. The service to contiune to develop their recording systems to ensure that they reflect the current identified goals and record all achievements.

National Care Standards, Care Homes for Children and Young People - Standard 4: Support Arrangements.

Grade: 4 - good

Quality of environment

Findings from the inspection

The service had some exciting plans in terms of developing their environment. They had recently transformed an individual unit to a Trauma Informed Care environment. This was markedly different from the other units, providing comfortable surroundings with mainstream furniture, soft furnishing, pictures, mirrors, and plants. We found this environment to be calm and we observed a marked reduction in stressors that were around for young people.

Young people were found to be very relaxed and this had made young people's behaviour easier to manage. We welcomed this tranformation and look forward to see how the service expands the Trauma Informed Care practice to other elements of their practice. The service also had plans to redevelop young people's bedrooms. These will be less institutional and more welcoming. Most young people's rooms were found to be incredibly tidy, due to staff's positive encouragement and underpinned by an incentive scheme to keep rooms to a high standard. Young people where encouraged to personalise their rooms. We saw many young people had photographs of all their family and posters which reflected their interests.

The service had appropriate risk assessments in place for both their environment and also for individual young people's needs. All staff were found to be vigilant when it came to the movement of young people and the security within the campus. We examined the use of holding safely. They were appropriately recorded and showed that staff followed best practice. Staff were appropriately trained and accredited to use de-escalation techniques to manage young people's behaviour. We did, however, feel that there was a need for the service to further implement their new database. This would help the management team to have an overview of such incidents and provide a tool which could help identify any further learning (see recommendation 1).

The service had made some significant investment and improvement to the environment with new signage, a new reception area, and external barriers, which secured the access to the campus. We found that the service paid attention to detail when it came to the maintenance of the environment. There were regular audits of the environment and management had a good overview of what areas were in need of development. We look forward to their continued improvement over the next year.

We carried out the inspection just after a significant critical incident. We requested that the service review this incident and provide the care Inspectorate with an action plan to address any failings identified. We also had discussions with the management team about sharing the findings with the other secure providers to ensure that this learning was shared with the whole secure community (see recommendation 2).

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 2

1. The service to fully impement their new incident database to ensure that they have an overview of all incidents

National Care Standards, Care Homes for Children and Young People - Standard 7: Management and Staffing.

2. The service to provide the Care Inspectorate with an action plan which outlines the learning that has occurred from the recent critical incident.

National Care Standards, Care Homes for Children and Young People - Standard 7: Management and Staffing.

Grade: 4 - good

Quality of staffing

Findings from the inspection

We found that the recruitment and selection systems were of a high standard and followed best practice. The service was in the process of providing an innovative new six-week induction system which provide staff with essential core skills to help them support traumatised young people. This would include five weeks of direct teaching with one week of shadowing and would be instrumental in the service "growing their own" staff.

Staff indicated that there was regular support mechanisms, such as team meetings and handovers which allowed them the opportunity to reflect on practice on a regular basis. They were encouraged to actively participate. The service had changed their shift pattern to ensure that staff had these opportunities. The service planned to improve the support for staff with the introduction of a life coach, CBT for staff, a new professional development structure, and an outcomes for staff programme. We look forward to examining the progress of these at the next inspection.

All staff commented that they had been well supported by the senior management team during and after the recent critical incident. There had been a number of learning events and debriefings after this to ensure staff had were able to reflect on the incident

Although there were many opportunities for support. There was a need to ensure all staff had formal supervision in accordance with their policy. The service should develop an audit tool which identifies any gaps in supervision and ensures that this is addressed as quickly as possible. The service indicated that they are appointing a quality assurance manager as a way in which to strengthen the governance of the service (see recommendation 1).

The service had made a extensive investment in staff training. The staff had an extensive package of training which included psychological first aid, ASSIST, SAFE talk, mindfulness training, GIRFEC training, Trauma Informed Care, outcomes training, and LGBTQI awareness. Staff indicated that they had significant training in the last year. The new management team have plans to further strengthen this support to staff with regular professional development meetings.

We found that many staff in middle management roles had been given greater responsibility for specific tasks. This will help develop their understanding of the service and expose them to additional leadership responsibility.

We were impressed with the commitment and flexibility of staff to provide care and continuity for young people. Nearly all young people that commented indicated that they had trusting relationships with staff and they were well trained.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. All staff should have access to regular supervision in accordance with the organisation's policy. This should be monitored by the management team.

National Care Standards, Care Homes for Children and Young People - Standard 7: Management and Staffing.

Grade: 4 - good

Quality of management and leadership

Findings from the inspection

Staff had welcomed the arrival of the new registered manager indicating that they had an open approach to managing the service. Staff indicated that they were impressed with their vision and their commitment as they had made signicant changes for the benefit of young people and staff.

We recognise that there had been numerous staff changes in a short period and staff had acknowledged that these movements had an improvement to the service. There had been a devolvement of responsibilities to individual unit managers which has resulted in greater autonomy. Again, this has been welcomed by staff and they felt confident about the future of the service.

The current board has been instrumental in determining the future development of the service and had invested significant finances to ensure that the service contiues to improve. There was a clear vision on future direction and the commitment to ensure that this occurred. The board was found to be integral in overseeing complaints and in gaining an insight into young people's experiences in the service.

The service had effective mechanisms to ensure that all stakeholders had their opions listened to and that they utilised a number of tools to gain their views. They had just recently sent out a questionnaire to gain their thoughts on development areas so that they could use these in determining future improvements.

We acknowledge the time and commitment that the new management team has invested in the service. They have some innovative plans which will bear fruit in the near future. We felt that it would be beneficial for these plans to be formalised in an annual development plan for the whole service. This would record and monitor all aspects of development (see recommendation 1).

The service had also recently appointed a service manager. This will be an essential part of the service team as they develop a range of auditing tools to ensure that the service continues to maintain current practice and also identify potential development areas. We look forward to examining effective auditing systems at future inspections (see recommendation 2).

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 2

1. The service to develop an annual development plan which is reveiwed on a regular basis and uses SMART targets.

National Care Standards, Care Homes for Children and Young People - Standard 7: Management and Staffing.

2. The service to develop a rigorous and systematic approach to auditing to ensure that they maintain and develop their governance processes.

National Care Standards, Care Homes for Children and Young People - Standard 7: Management and Staffing.

Grade: 4 - good

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

Previous requirements

There are no outstanding requirements.

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

Previous recommendations

There are no outstanding recommendations.

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	Туре	Gradings	
9 Mar 2017	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good Not assessed Not assessed
31 Aug 2015	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 5 - Very good 5 - Very good
6 Feb 2015	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good
4 Jul 2014	Announced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good
27 Mar 2014	Announced	Care and support Environment Staffing Management and leadership	2 - Weak 5 - Very good 2 - Weak 2 - Weak

Date	Туре	Gradings	
23 Jul 2013	Announced	Care and support Environment Staffing Management and leadership	5 - Very good 5 - Very good 5 - Very good 5 - Very good
29 Jun 2012	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 3 - Adequate 4 - Good 3 - Adequate
16 Feb 2012	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good Not assessed

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate Compass House 11 Riverside Drive Dundee DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

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

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

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

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

本出版品有其他格式和其他語言備索。

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