care inspectorate

Maben House
Care Home Service

Gilmourbanks
Parkfoot
Lochmaben
Lockerbie
DG11 1RW

Telephone: 01387 811995

Type of inspection:
Unannounced

Completed on:
21 June 2018

Service provided by:
Gilmourbanks Ltd

Service provider number:
SP2003002532

Service no:
CS2003010819

HAPPY TO TRANSLATE

About the service

Maben House is provided by Gilmourbanks Ltd and is registered as a care home service for children and young people. Within the grounds of Maben House the providers also operate a small school which offers primary education for day pupils and for some of the children who live at Maben House.

The service has been registered since 2002 and can provide care for up to 10 children and young people. At the time of our visit there were three children and young people living at Maben House. One other young person was moving on to another service.

The provider website states "Maben House offers an excellent environment for a young person coming to terms with their life....social work and education staff combine as a professional team, where young people's abilities are developed through a patient, individualistic approach that makes full use of existing skills and offers new experiences to widen and compliment their horizons."

What people told us

Children and young people showed us around the house and invited us to have tea with them. During this time they told us that they thought some improvements could be made to the service, including having more things to do and having staff members spend more time with them. In particular, they said that they would like to have more choices and activities available for them to use in the garden.

Young people also said that different staff treated them differently and that some staff were stricter than others. They also commented that they were sometimes hungry, especially in between coming home from school and waiting for tea to be ready.

In one questionnaire we received, one young person told us they were not sure if they were happy about the care they were receiving at Maben House and did not know if there was a care plan in place.

Young people said they were generally happy with the environment but would like more choice in decorating their own rooms.

Staff told us:

"We have worked hard to build good relationships, we are firm and have fun."

"The staff team are much happier, more settled."

"We need more staff."

"Things are better now than they were a few months ago. I can't remember the last time I was in a restraint."

Stakeholders told us:

"Communication is still very poor. I receive weekly reports however these are not very detailed."

"No positive outcomes for him with regard to the care side of the service - no improvement in use of PACE techniques as evidenced by behaviour - simple things like being taken for haircut not happening."

"Staff need to show a collective response."

"Social work are still working with staff to get them to listen to young person more as this was one of the issues consistently raised by a young person."

Self assessment

We did not ask the service to complete and submit a self assessment to us on this occasion.

From this inspection we graded this service as:

Quality of care and support	2 - Weak
Quality of environment	3 - Adequate
Quality of staffing	3 - Adequate
Quality of management and leadership	2 - Weak

Quality of care and support

Findings from the inspection

We wrote this report following an unannounced inspection that took place between 19 June and 21 June 2018. This was a full inspection which focused on quality of care and support, environment, staffing and management and leadership and the action taken by the service to address the improvements we said needed to be made at our previous inspection visits.

During our visit we considered a range of information gathered through our time spent with three children and young people, staff members, a director, social workers and other professionals including an advocacy worker and a member of the looked after and accommodated child (LAAC) health team.

We looked at records including children and young people's plans and sampled other records and documents kept by the service including records of incidents, administration of medication, complaints, staff training records and staff team meeting records.

We used the information we collected to assess the quality of the service provided and to award grades.

When we visited the service in July 2017 we found concerning areas of weak practice which were leading to poorer outcomes for children and young people. To ensure better outcomes for children and young people, we asked the service to take prompt improvement action. We told the directors of the service we would visit again to see what progress had been made and we carried out a follow up inspection in March 2018. During that visit we found significant progress had been made in reducing restraints of children and that more limited progress had been made in other practice areas. We continued to monitor improvements in practice areas highlighted in previous requirements and recommendations, in this inspection visit.

We observed some important nurturing relationships between children and some staff and this was supporting the development of trust and helping children to feel more secure. For example, we saw some caring interactions between children and young people with some staff members where nurturing responses to children included hugs and caring conversations. In those moments we saw that children smiled more and appeared more relaxed.

Importantly, there had been a sustained improvement to ensure minimal and exceptional use of physical restraint of children, which was leading to children feeling safer and happier in the service. We have made a recommendation about the need for this improvement to be monitored and sustained in the longer term within the management and leadership section of this report.

Overall, records and our observations showed that children were having their basic needs met in terms of care and, for the most part education. In addition to this we saw children and young people having fun with staff when playing on bikes or going out for ice cream or to spend pocket money. Children were being well supported to access health care appointments and school or any alternative arrangements in place of school.

We noted that since our last visit there had been a more settled period for most children, with a growth in self esteem and sense of achievement being experienced by some. This was being supported by more consistent staffing and routines and through children being encouraged to choose activities and attend planned groups which they enjoyed. Arrangements were in place for some children to have regular contact with family so that important relationships could be maintained and the service was supporting this well.

In our last inspection we followed up on a requirement for a review of staff practice to be undertaken to ensure that at all times staff were delivering nurturing and compassionate care and on a separate requirement about the use of sanctions. In our follow up inspection we noted that additional training on trauma informed care had led to some improvements in staff practice, however, children and young people were not yet experiencing consistently nurturing and compassionate care. During this inspection visit we noted that although early progress in this area had continued to be sustained, sufficient progress had still not been made to ensure that high quality care and support was being consistently experienced by all children. We have therefore amended the requirement previously made to reflect parts of the previous requirement addressed and to maintain focus on the improvement still required. Similarly, we acknowledged the continuing progress being made in relation to ensuring fair and proportionate consequences as part of a strategy to promote positive behaviour. See requirement 1.

As well as looking at previously identified areas of weak practice, we also found some additional areas of concern in relation to the management of risks, access to education, care planning and storage of medication.

We found that although a risk assessment had been undertaken in relation to keeping a young child safe in the car, identified protective measures had not been put in place and this led to a serious incident which placed the safety of the child at significant risk. To ensure the safety and well being of all children we have made a requirement that the service improves practice in risk management. See requirement 2.

One young person had not been supported to engage in any education for a significant period of time. We were informed by the head teacher, director and staff members that this was on the basis of multi agency and multi professional decision making, however, we were concerned that there was no record available of the discussion or the decision made. There was also no record to indicate that any formal process had been followed in relation to exclusion and that meant that the young person had not been offered the opportunity to have their right to education appropriately considered.

We considered that the service could have taken a more rights based approach to ensuring appropriate procedures were promptly followed and that by not doing so, may have caused unnecessary delay in care and education planning for the young person who had already experienced significant disruption in education throughout childhood. To protect and promote the rights of children and young people experiencing the service and to ensure children can have confidence in the organisation providing care and support, we have made a requirement that the service improves to provide a rights based approach. See requirement 3.

We found that children and young people's personal plans were of a poor standard. We could see that plans were not being developed together with young people and were not being regularly reviewed. This meant that staff and young people were not sufficiently aware of identified needs or how best to support children to achieve desired outcomes. We considered that improvement in this area was necessary so that all children and young people could be fully involved in planning and reviewing their care and so that plans clearly set out how children's needs, wishes and choices will be met. See recommendation 1.

When we looked at the storage of medication and the way in which storage and administration of medication was being recorded, we saw that some improvements needed to be made to ensure a person centred approach to storage and to reduce chances of administration or recording errors being made. We discussed this with the director of the service and will monitor what improvements have been made at our next visit.

Although we found some strengths in the way children were being cared for and supported, we also found this was compromised by significant weaknesses which were continuing to substantially affect children and young people's experiences and potential outcomes. Taking all of the above into account, we assessed quality of care and support as weak.

Requirements

Number of requirements: 3

1. To promote the well being of children and young people, and to deliver high quality care and support, the provider must ensure that staff have the necessary skills and approach to provide nurturing and compassionate care.

The provider must carry out observation and audit of the care being provided by all staff to assess the impact of practice on children and young people. Appropriate training and support must then be put in place so that children's individual experience of trauma is understood.

The provider must ensure that a culture of compassion, which nurtures children and young people and ensures children and young people are treated fairly, proportionately and with dignity and respect is developed.

A detailed action plan for this work must be submitted to the Care Inspectorate by 10 September 2018 and significant improvement must be made by 24 September 2018.

This is in order to comply with:
The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011

Welfare of users
4.-(1) A provider must-
(a) make proper provision for the health, welfare and safety of service users;

To ensure that the quality of 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. To protect and promote the safety and well being of all children and young people experiencing the service, the provider must ensure that risk management arrangements are adhered to at all times by all staff.

A detailed action plan for this work must be submitted to the Care Inspectorate by 10 September 2018 and significant improvement must be made by 24 September 2018.

This is in order to comply with:
The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011

Welfare of users
4.-(1) A provider must-
(a) make proper provision for the health, welfare and safety of service users;

To ensure that the quality of care and support is consistent with the Health and Social Care Standards (HSCS) which state that:
"I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities." (HSCS 3.20)

3. To promote the potential of all children and young people the provider must ensure they support the right of access to education . Where children and young people are excluded from formal education there must be a system in place for recording the decision, reviewing the situation and ensuring alternative provision is put in place.

In order to achieve this the provider must ensure appropriate record keeping and effective liaison with the child's placing authorities.

A detailed action plan for this work must be submitted to the Care Inspectorate by 10 September 2018 and significant improvement must be made by 24 September 2018.

This is in order to comply with:
The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011

Welfare of users
4.-(1) A provider must-
(a) make proper provision for the health, welfare and safety of service users;

To ensure that the quality of care and support is consistent with the Health and Social Care Standards (HSCS) which state that:
"My human rights are protected and promoted and I experience no discrimination" (HSCS 1.2) and
"My human rights are central to the organisations that support and care for me." (HSCS 4.1)

Recommendations

Number of recommendations: 1

1. To ensure high quality care and support that is right for each child or young person, the service should ensure that all children and young people are fully involved in planning and reviewing their care. Personal plans should clearly set out how children's needs, wishes and choices will be met and should be regularly reviewed.

To ensure that the quality of care and support is consistent with the Health and Social Care Standards (HSCS) which state that:
"My personal plan is right for me because it sets out how my needs will be met, as well as my wishes and choices." (HSCS 1.5) and
"I am fully involved in developing and reviwing my personal plan, which is always available to me." (HSCS 2.27)

Grade: 2 - weak

Quality of environment

Findings from the inspection

We found that the service had effective systems in place to provide a safe and secure environment for children and young people. An independent contractor had conducted a comprehensive health and safety inspection of the premises. This indicated that effective systems were in place, including robust environmental risk assessments, compliance with legislative requirements; and a pro-active approach to identifying hazards and putting in appropriate controls.

Records were kept of regular health and safety checks. There were few accidents, which suggested that the arrangements for providing a safe environment were effective. The service also had in place a secure entry system, which meant that only people who were authorised to do so could access the premises and this promoted a safer environment for children and young people..

Arrangements for ensuring the property and furnishings were well-maintained seemed, on the whole, to be effective. However, we noted that the furniture in one of the bedrooms was badly damaged and needed to be replaced to maintain a good standard of safety and comfort. In addition, there was a large, non-functional pool table in the living area which should be removed and/or replaced with alternative equipment chosen in response to children's needs and interests. See recommendation 1.

The house was clean, bright and spacious with plenty of room for children to interact with others or have time on their own. However, there was little evidence of personalisation, and it lacked a homely, domestic feel. We thought that the service could do more to improve the homeliness of the environment, by involving children and young people in choosing the décor in their own rooms and in the shared areas. Similarly, children could be more involved in the day-to-day life of the house by helping to prepare for meals, setting and clearing tables etc. Including children in this way would help to promote a sense of belonging as well as supporting them to develop independence, self-care skills, and a sense of responsibility.

The house benefitted from a peaceful rural location with spacious gardens. The service had recently involved young people in choosing new bikes and, during the inspection visit, we saw them having really good fun on these.

One of the children had learned to ride without stabilisers and we saw how more opportunities for active physical play had contributed to a sense of achievement. Given the space available, we considered the service should continue to extend the resources for active outdoor play, taking into account children's age and stage of development and their needs, choices and interests.

Overall we found that strengths in this area were just outweighing weaknesses. We found that aspects of the environment were having a positive impact but we considered that the likelihood of achieving continued positive experiences and outcomes was reduced significantly because key areas needed to improve. Taking all of the above into account, we assessed quality of environment as adequate.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. The service should ensure that damaged furniture and equipment is promptly replaced. Children and young people should be involved in decision making about replacement.

This is to ensure that the quality of the environment is consistent with the Health and Social Care Standards (HSCS) which state that "I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment." (HSCS 5.22), and "I am able to access a range of good quality equipment and furnishings to meet my needs, wishes and choices (HSCS 5.21).

Grade: 3 - adequate

Quality of staffing

Findings from the inspection

We found that the service had robust systems in place for recruiting staff safely, including an application form; ID checks; PVG checks; two references; checks with professional bodies including the Scottish Social Services Council. Young people had been involved in interviewing potential candidates which helped to ensure children and young people could feel confidence in the people looking after them.

A structured induction, which included shadow shifts, helped to prepare new staff to do their job effectively, although we felt that the identification of a dedicated mentor to support new staff would enhance the induction process.

We noted there was increased stability in the staff team, which helped to provide children and young people with an experience of increased consistency of care and some staff had worked hard to build trusting relationships.

The staff team had all taken part in TCI training to help develop their skills in working with children with disabilities. Staff described how they had been able to apply their learning to enhance their practice with young people and we considered it likely that this training had contributed towards the reduction in restraint within the service. However, a number of staff vacancies remained unfilled and this, together with a new rota, had led to staff at times working long hours, feeling tired and unable to give of their best. Although the provider previously had a system in place for identifying and recording staffing needs, this was not currently being used, and consequently the service was unable to evidence that the service was always staffed at an optimum level which ensured that children's needs were being consistently met.

Children's needs not being consistently well met by sufficient staffing was further evidenced through some of our observations which showed that, at times, there were not staff available to respond to children and young people's needs; for example, when children returned from school and were waiting for tea to be made. This meant that a previous requirement made about sufficient staffing had not yet been sufficiently addressed and has been continued within this report. See requirement 1.

Although staff had access to a range of on-line training, the demands on their time were such that they didn't have time to complete it, and lack of time for team meetings meant that they hadn't had the opportunity to discuss the training or incorporate it into their practice. The largely unqualified staff team had not had regular supervision, and despite feeling that they were mutually supportive, and were well supported by seniors, the absence of formal structures was limiting the extent to which they were able to develop the knowledge, skills and confidence they needed to deliver the highest quality of care for vulnerable children with a range of complex needs. See requirement 2.

Although we found some strengths in staffing arrangements, we also found these just outweighed significant weaknesses. We asked the service to take action to improve key areas of performance to ensure positive experiences and outcomes for children and young people. Taking all of the above into account, we assessed quality of staffing as adequate.

Requirements

Number of requirements: 2

1. To promote the safety and well being of all children and young people experiencing care in the service, the provider must ensure that the service is at all times sufficiently staffed to meet the needs of all children and young people.

In order to demonstrate that sufficient staffing is in place, the provider should keep a record of the assessment that identifies the minimum staffing levels and deployment of staff on each shift over a four week period. This will take into account aggregated information of the physical, social, psychological and recreational needs and choices in relation to the delivery of care for all individuals, also taking into account the physical layout of the building, staff training and staff supervision needs.

A detailed action plan for this work must be submitted to the Care Inspectorate by 10 September 2018 and significant improvement must be made by 24 September 2018.

This is in order to comply with:
The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011

Staffing
15. A provider must, having regard to the size and nature of the care service, the statement of aims and objectives and the number and needs of service users-
(a) ensure that at all times suitably qualified and competent persons are working in the care service in such numbers as are appropriate for the health, welfare and safety of service users; and

To ensure that the quality of staffing is consistent with the Health and Social Care Standards (HSCS) which state that:
"My needs are met by the right number of people" (HSCS 3.15),

2. The provider must develop a comprehensive staff development strategy which:
- includes an analysis of staff skills and training needs
- deliver high quality training to meet the identified needs
- monitors staff training and assesses the impact of training on practice
- supports staff to acquire the qualifications they need to meet SSSC requirements
- provides formal supervision which supports staff to reflect on and improve their practice
- supports staff to meet regularly as a team to discuss practice issues and develop consistent approaches to care.

A copy of this strategy should be submitted to the Care Inspectorate by 24 September 2018.

This is in order to comply with :
The Social Care and Social Work Improvement (Scotland) (Requirements for Care Services) Regulations 2011

Staffing
A provider must, having regard for the size and nature of the care service, the statement of aims and objectives and the number and needs of service users-
(a) ensure that at all times suitably qualified and competent persons are working in the care service in such numbers as are appropriate for the health, welfare and safety users and

To ensure that the quality of staffing is consistent with the Health and Social Care Standards (HSCS)
"I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes."

Recommendations

Number of recommendations: 0

Grade: 3 - adequate

Quality of management and leadership

Findings from the inspection

We looked at the quality of management and leadership and found that senior care workers had developed some effective leadership skills since our last visit and during the period of absence of a manager.

The directors had been supportive of the staff and the service since our last inspection visit and had managed referrals and admissions to maintain lower numbers in order for quality improvements to be made and for a period of stability to be achieved before increasing service use. We agreed with the service that this had been an important decision to take in view of recent inspection and complaint findings.

We saw that when one of the directors spent time in the service, that there were good relationships in place with children and young people and that the director knew the children well.

We found that some quality assurance work had been carried out in relation to the use of restraint and physical intervention and considered that this, alongside increased staff training, had improved staff practice and experiences and outcomes for children and young people. We have made a recommendation that the service continues to sustain improved practice in this area, to ensure minimal and exceptional use of physical restraint of children and young people. See recommendation 1.

Although we noted the service was actively seeking to recruit a new manager for the service, there were no clear interim arrangements in place to support management processes. We considered that this was constraining performance in the service and the ability for the service to improve. We discussed this with the director and asked for clear interim management arrangements to be put in place to take prompt action to oversee improvement in performance in the following areas:

- supervision of staff
- monitoring notifications of incidents to social workers and to the Care Inspectorate
- management of risk
- management of care planning
- appropriate management of young people's complaints
- monitoring use of restraint and physical intervention
- progress in relation to recommendations and requirements made by the Care Inspectorate including in relation to sufficient staffing and staff practice.

When we looked at records of complaints we found that a complaint made by a young person had not been appropriately managed. There was no record of the complaint being acknowledged, investigated or resolved. We discussed this with the director of the service and have made a requirement that the service improved performance in this important area. See requirement 1

In addition, we recommended that the provider consider what further investment could be made in terms of resources within the service to increase quality of experience and outcomes for children and young people. See recommendation 2.

We highlighted the Health and Social Care Standards to the service and suggested the service begin to use them to evaluate the quality of the service and to generate ideas for improvement. We advised the director of the service that we would continue to closely monitor the capacity for improvement within the service on the basis that children and young people should be able to expect high quality care and that continued weak and adequate performance is not acceptable.

We also reminded the director of the service that all forms of restraint must be notified to the Care Inspectorate.

Although we found some strengths in the management and leadership of the service, we found that these were compromised by significant weaknesses. We considered that the weaknesses, either individually or when added together, substantially affected children and young people's experiences and outcomes. We also considered that without improvement as a matter of priority, the welfare or safety of people may be compromised, or their critical needs not met. We have required the provider to take action in the form of structured and planned improvement to demonstrate clearly that sustainable improvements are made and we will continue to monitor and support this closely.

Requirements

Number of requirements: 1

1. To ensure that young people can be confident in the organisation, are listened to and their rights promoted, the service must take appropriate action to record, investigate and respond to all complaints made.

A detailed action plan for this work must be submitted to the Care Inspectorate by 10 September 2018 and significant improvement must be made by 24 September 2018.

This is in order to comply with:
The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 No. 210 Complaints
18.-(1) A provider must establish a procedure ("the complaints procedure") for considering complaints made to the provider.
(2) The complaints procedure must be appropriate to the needs of service users.
(3) The provider must ensure that any complaint made under the complaints procedure is fully investigated.
(4) The provider must, within 20 working days after the date on which the complaint is made, or such shorter period as may be reasonable in the circumstances, inform the complainant of the action (if any) that is to be taken.

And to ensure that the quality of management and leadership is consistent with the Health and Social Care Standards (HSCS) which state that:
"I know how and can be helped to make a complaint or raise a concern about my care and support" (HSCS 4.20) and
"If I have a concern or complaint, this will be discussed with me and acted on without negative consequences for me" (HSCS 4.21).

Recommendations

Number of recommendations: 2

1. To protect and promote the rights of children and young people and to ensure that children and young people have confidence in the organisation providing their care, the provider should continue to ensure that restraint is only ever used in exceptional circumstances and after all other practicable attempts have been made to reduce the risk of significant harm. Where in exceptional circumstances restraint is used, a detailed record must be kept of the circumstances and reason for restraint and must be notified to the Care Inspectorate.

This is to ensure that the quality of staffing is consistent with the Health and Social Care Standards (HSCS) which state that:
"If my independence, control and choice are restricted, this complies with relevant legislation and any restrictions are justified, kept to a minimum and carried out sensitively." (HSCS 1.3).

2. To ensure that children and young people have confidence in the organisation providing their care, the provider should consider investing in additional resources to meet identified needs. This should include the employment of skilled and experienced staff.

This is to ensure that the quality of staffing is consistent with the Health and Social Care Standards (HSCS) which state that:
"I experience high quality care and support because people have the necessary information and resources." (HSCS 4.27).

Grade: 2 - weak

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

Previous requirements

Requirement 1

The service provider must carry out a review of staff practice, through observation and audit of documentation and records, to ensure that staff have the necessary skills and approach to deliver nurturing and compassionate care that enables young people to feel treated fairly, proportionately and with dignity and respect. Where training needs are identified as a result of this review, a training plan must be put in place to address these.

This is to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 - Staffing - 13. A provider must, having regard to the size and nature of the care service, the statement of aims and objectives and the number and needs of service users- (a) ensure that at all times suitably qualified and competent persons are working in the care service in such numbers as are appropriate for the health, welfare and safety of service users;

This requirement was made on 20 July 2017.

Action taken on previous requirement
Although we found that a systematic review of staff practice had not been carried out, we did find that managers had encouraged a more nurturing approach by staff. Training plans and records confirmed that a more therapeutic, nurturing and compassionate approach was being developed and staff told us that this was beginning to impact on their practise. Although we acknowledged some progress in this area, we found that children and young people were not yet experiencing consistently nurturing and compassionate care. For this reason we assessed this requirement as not yet being met.

Not met

Requirement 2

To promote the safety and well being of all children and young people experiencing care in the service, the provider must ensure that the service is at all times sufficiently staffed to meet the needs of all children and young people experiencing care in the service.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 Staffing 13.

This requirement was made on 20 July 2017.

Action taken on previous requirement

During the inspection visit we found that overall there were sufficient staff to support children's needs and activities. However, we also noted occasions during our visit when children were less settled. We noted that an additional staff member would have enabled more effective care and support to be provided at those times; for example, while tea was being prepared.

We also noted that staffing ratios were being achieved through existing staff covering vacancies and working significantly high numbers of shifts and hours. This was reported to us as impacting on staff health and well being, which was impacting on staff ability to fulfil their role well and to provide consistently high quality care for children. For these reasons we assessed this requirement as not yet being met.

Not met

Requirement 3

The provider must review the use of sanctions and develop an approach that ensures restorative, person centred intervention is the first consideration rather than a punitive one. Where sanctions are put in place, these must be proportionate and must not be applied to all young people.

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 Staffing 13.

This requirement was made on 20 July 2017.

Action taken on previous requirement

We found that work had begun to support staff to respond to children and young people in a fairer and more person centred way. In our follow up inspection in March 2018 we found an example of the manager challenging staff practise when a proportionate consequence was not applied. The manager had also drafted a guide for staff to encourage consistency in this area. We acknowledged that some progress was being made to improve in this area, however, we were not yet assured that sufficient progress had been made to ensure sustained improvement of children and young people's experiences. For this reason we assessed this requirement as not yet met.

Not met

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

Previous recommendations

Recommendation 1

The service provider should ensure staff attend specialist training in the chosen behaviour management model for young people with disabilities.

National Care Standards - Management and Staffing - Standard 7 and National Care Standards - Feeling safe and secure - Standard 6 and National Care Standards - Keeping Well - Lifestyle Standard 11.

This recommendation was made on 20 July 2017.

Action taken on previous recommendation
At the time of our inspection some staff had undertaken appropriate training. Further training was being carried out for remaining staff members during the following week. We asked the managers to tell us when all staff had completed the training and we received confirmation on 27 March 2018 that all staff had done so.

Recommendation 2

The provider should implement effective recording and information systems and ensure staff are given clear guidance on using these. The service should also ensure that young people's views are consistently sought and included in reports of incidents.

National Care Standards - Support arrangements - Standard 4 and National Care Standards - Making Choices - Standard 9.

This recommendation was made on 20 July 2017.

Action taken on previous recommendation
At the time of our inspection some progress had been made to improve record keeping. Training for staff was being planned and our findings indicated that although there was a good system for supporting children and young people to share their views following an incident, this was not yet being used effectively within the service. We will continue to monitor improvements in this area at our next inspection visit.

Recommendation 3

By implementing the supervision and appraisal policies, and specifically improving the regularity of formal supervision, the service will ensure that staff are best supported to meet the needs of young people.

National Care Standards - Management and Staffing - Standard 7.

This recommendation was made on 20 July 2017.

Action taken on previous recommendation

When we looked at supervision records, we saw there were some recent improvements made in the regularity and quality of staff supervision by the manager. However, we also found there was insufficient structure and formality to enable effective supervision for all staff at all levels. We commented to the managers at feedback that improvement in this area would be crucial to achieving the improvement work set out within the service development plans. We will continue to monitor improvements in this area at our next inspection visit.

Recommendation 4

To ensure the protection and promotion of the right to choice and dignity of all children and young people experiencing the service, the provider must ensure that the system of alarms on bedroom doors is reviewed and only used if it is the only practicable means of securing the welfare and safety of that or any other service user and there are exceptional circumstances.

National Care Standards care homes for children and young people standard Management and Staffing 7 and National Care Standards - Feeling safe and secure - Standard 6

This recommendation was made on 20 July 2017.

Action taken on previous recommendation

Although we initially found a lack of clarity from various staff members about the use of buzzers on bedroom doors, we were assured by a senior worker, the manager and by children's records that use of a bedroom door buzzer during the night was no longer universally applied within the service, but based on person centred risk assessment and multi professional decision making and review.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Enforcement

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

Inspection and grading history

Date	Type	Gradings	
7 Mar 2018	Unannounced	Care and support Environment Staffing Management and leadership	Not assessed Not assessed Not assessed Not assessed
20 Jul 2017	Unannounced	Care and support Environment Staffing Management and leadership	2 - Weak Not assessed 2 - Weak Not assessed
7 Oct 2016	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed Not assessed 4 - Good
28 Aug 2015	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good 5 - Very good 4 - Good 4 - Good
4 Sep 2014	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good 5 - Very good 5 - Very good 5 - Very good
25 Sep 2013	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good 5 - Very good 5 - Very good 5 - Very good
20 Feb 2013	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed Not assessed 5 - Very good

Date	Type	Gradings	
22 Aug 2012	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good 5 - Very good 5 - Very good Not assessed
1 Mar 2012	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good Not assessed Not assessed
6 Oct 2011	Unannounced	Care and support Environment Staffing Management and leadership	1 - Unsatisfactory 1 - Unsatisfactory Not assessed Not assessed
3 Feb 2011	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed Not assessed Not assessed
9 Jul 2010	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good Not assessed
4 Mar 2010	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed Not assessed 5 - Very good
6 Aug 2009	Announced	Care and support Environment Staffing Management and leadership	5 - Very good 5 - Very good 5 - Very good 4 - Good
15 Jan 2009	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good

Date	Type	Gradings	
19 Aug 2008	Announced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good

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অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

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