

Day Support Services for Children/Young People Support Service

43 Middlesex Street
Kinning Park
Glasgow
G41 1EE

Telephone: 01414 290 294

Type of inspection:
Announced (short notice)

Completed on:
9 August 2023

Service provided by:
Sense Scotland

Service provider number:
SP2003000181

Service no:
CS2008169066

About the service

Day Support Services for Children and Young People has been a registered service since 29 October 2008 and is provided by the charity, Sense Scotland. The service provides care for children and young people with communication support needs associated with complex sensory disabilities. The service operates after school and at weekends during the school term and provides day and evening support, up to seven days a week, during school holidays. The service is registered to provide a care at home service to allow flexibility to young people they support. Care at home was not being provided at the time of inspection. The service provides care and support for children and young people from Glasgow and the surrounding area who are aged 0-21 years.

The service is provided from TouchBase, Glasgow, a purpose-built centre in the Kinning Park area of the city. The building is shared between the children and young people's service, adult services, Sense Scotland offices and a large cafe that can be accessed by the young people, staff and visitors to the service. The children and young people service has a separate wing of the building that was designed specifically for their needs and has access to a courtyard. The space used by the service is spacious and young people benefit from the use of an art room, music room, sensory room, kitchen and two multi-purpose rooms. The children and young people who attend the service are also supported to participate in activities within the wider community.

About the inspection

This was a short notice inspection that took place on 31 July and 1 August 2023. One Inspector carried out the inspection. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection. To inform our evaluation we:

- Spoke with five staff members including the manager.
- Spoke with three external professionals.
- Spoke with three parents.
- Met four young people.
- Observed practice and daily life.
- Reviewed documents.

Key messages

- Young people received warm, fun filled relationships with compassionate staff who knew them well.
- Staff had a strong value base and person-centred approach to care.
- Young people were encouraged to enjoy their hobbies as well as being introduced to a variety of new experiences.
- Care plans and risk assessments should be developed to be more specific to individual young people.
- Staff would benefit from greater service specific training and further learning opportunities.
- The service benefited from strong leadership where staff were supported to provide consistency in care in line with clear aims and objectives.

From this inspection we evaluated this service as:

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

How well do we support people's wellbeing?	4 - Good
How good is our leadership?	4 - Good
How good is our staff team?	4 - Good
How well is our care and support planned?	4 - Good

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

How well do we support people's wellbeing?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for children and young people and clearly outweighed areas for improvement.

Young people received warm, fun filled care from compassionate staff who knew them well. There was a person-centred approach, providing fair and respectful care to a diverse group of young people. The knowledge and motivation from staff supported young people to achieve their outcomes. Parents were confident that staff knew their children well and felt that communication was effective.

We were told that young people and families had opportunity to express their views. Family members trusted that their views were heard and listened to and we saw young people's preferences being considered in daily practice. This was not clear within care plans and the service should improve how they record the views of others and the impact these have on care planning and support provided (see area for improvement 1)

We heard that parents/carers and local authorities had a clear understanding of the support the service provided to the young people. We felt that this could be improved if written service agreements were completed at the time of admission. This would ensure that young people, families and stakeholders were fully informed about the care they could expect. The service were developing service agreements and we were confident that these would be implemented in practice.

Young people's health needs were appropriately met whilst using the service. Health needs were clearly recorded in personal plans and workers had a good understanding of the impact of health conditions on young people. We heard from parents that there was a flexible approach to providing care if health needs changed. We saw appropriate systems in place for administering and recording medication.

The service worked well with other agencies to gain necessary information to understand the needs of young people and inform care planning. Despite the demand on the service, decision-making was based on the needs of the young people and an insightful understanding of service capacity. This meant that the service was able to confidently meet the needs of all young people who attended.

We found that the service was very good at supporting and encouraging young people to enjoy their interests and hobbies as well as introducing them to new social activities. This optimised young people's experiences, supporting them to maintain and develop their skills, interests and strengths. We saw several photographs of young people illustrating fun experiences, relationships and achievements. Staff celebrated achievements with young people and we saw young people respond positively to praise from staff. Parents told us that their children's confidence and self-esteem had progressed given the numerous new experiences available to them.

Young people were kept safe by trained staff who understood their responsibilities to protect them. The service did not use restraint practice. Some staff spoke about their ability to support and de-escalate young people who were showing distressed behaviours. We suggested that greater service specific training would ensure confidence and consistency of approach from all staff (see area for improvement 2). Not all new staff were aware of the organisation's whistleblowing policy. The service should ensure all staff have knowledge of this.

A recent child protection incident had led to significant reflection within the service and had initiated a review of the service's policy and procedures. We were confident that managers would use learning from this to ensure that national guidance and best practice is followed in all future child protection incidents.

Staff had an understanding of risk and we heard of proactive risk assessment and planning. We found that the written risk assessments were lengthy and generic. The service should develop specific risk assessments, clearly identifying the individual risks and management plan for each young person. This would enhance staff knowledge and ability to safeguard all young people (see area for improvement 3).

The service was good at supporting young people's outcomes, rights and choices. Family members and external professionals were confident that staff had the skills and understanding to support young people's rights. One professional stated 'they absolutely fight for their rights and challenge others and they advocate for the young people big time.'

Areas for improvement

1. To ensure that young people and family member's voices are heard, known to all staff and influence practice, the service should ensure consistent recording of views within personal plans.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'My views will always be sought and my choices respected, including when I have reduced capacity to fully make my own decisions (2.11)

2. To enhance the care provided to young people, and ensure they are supported by staff who are well-informed, the service should consider exploring with relevant stakeholders how additional time can be provided for staff to undertake further service specific training and increased opportunity for reflection, learning and development.

This should include but is not limited to training in managing distressed behaviours, care plan and risk assessment and greater time for staff reflection to learn from practice examples.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'I have confidence in people because they are trained, competent and skilled' (HSCS 3.14).

3. To further support young people and ensure a consistent approach to risk management, the provider should develop specific risk assessments and risk management plans that are individual to each young person.

This is to ensure that care and support is consistent with the Health and Social Care Standards, which state that: 'I am helped to understand the impact and consequences of risky and unsafe behaviour and decisions (HSCS 2.25)

How good is our leadership?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for children and young people and clearly outweighed areas for improvement.

The service had a clear vision and aspirational but realistic goals for young people given the limited time they spent in the service. Staff had a good understanding of the service aims and objectives and this

provided consistency in care for the young people while promoting equality and inclusion for all.

There was a positive culture where staff worked well as a team and felt supported by managers. Staff were encouraged to be innovative in the care provided to young people whilst encouraging positive risk-taking. Staff did this in partnership with young people and their parents. We heard from external professionals about the risk-taking activities the young people had been involved in and how this widened their experiences, self-esteem and confidence. One parent told us 'I know they would never do anything without checking with me first.'

We were impressed with the manager being a supportive and visible role model to staff, encouraging a strong value base and person-centred approach to care. Staff felt supported in their role and confident that they would be supported through any challenges. One staff member said "I love this service..., I love the team,...the manager is brilliant and I feel so supported."

There was discussion and review of young people's needs and experiences within the service. Daily logs were used by staff to record the young people's experiences. This meant that the positives, challenges and staff's responses were shared across the team to ensure that young people were receiving the right care and support in the right place to meet their outcomes.

Several quality assurance systems were in place including external audits. Audits had identified areas for improvement and these had informed the service development plan. The progress of some areas had been slow; however, this was being monitored in regular management meetings and realistic timescales for improvements had been added. Not all quality assurance activity was recorded and we suggested that a consistent approach to recording would strengthen analysis of the impact of auditing and support the progress of improvement.

The service worked closely with other agencies when necessary. We heard of examples where the service supported the progress of education and health outcomes ensuring consistency of approach across different settings. This consistent approach contributed to young people's achievements.

Staff felt safe and secure in their work, due to the support from their managers. Managers had a good understanding of individual staff needs. Managers supported staff to learn from practice and staff were confident to question the practice of others in a supportive way. Staff's competence was assessed by managers and this was used to highlight good practice and staff progression as well as additional learning and support when necessary. Some staff had been trained to deliver training, this supported their personal development and career progression. The supportive culture within the service promoted staff's confidence, growth and development. This impacted positively on staff wellbeing and helped to create a positive atmosphere that supported young people to achieve their outcomes.

How good is our staff team?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for children and young people and clearly outweighed areas for improvement.

The recruitment processes and procedures were clearly documented and followed safer recruitment guidance. The recruitment process had recently been developed and involved assessment of candidates taking part in a play session. Further changes included the young people developing interview questions. Newer staff members spoke positively of the recruitment process and how this created a positive sense of an organisation who cares for staff and young people. New staff spoke of an effective induction process

with a good balance of training and opportunity to shadow more experienced staff. Staff felt the induction process had given them the confidence to progress in their role.

The service had a diverse staff team and staff's individual learning needs and styles were considered and well supported by the manager. Staff were clear about their roles and responsibilities. Staff were aware of their conditions of employment and codes of conduct. They spoke positively about supervision and how this was used to reflect on practice, consider their learning and development needs and support positive wellbeing.

We heard about ongoing assessment of a staff competence. Managers carried out regular observation of practice identifying good practice and highlighting areas for development. There was recognition from the manager that the assessment of staff competence could be better evidenced and this was being developed within the service.

The service recognised the need to provide more service specific training and learning opportunities to the staff team. The nature of the service, funding and shift patterns made it difficult for the full staff team to come together for learning events. Given the complex needs of the young people we felt that practice would be enhanced if staff had additional time following the young people's support to reflect on practice and complete necessary paperwork. This is important to support knowledge and understanding of the young people and to allow peer reflection promoting learning for future practice (see area for improvement 1).

A particular strength of the service was the robust matching of staff to young people ensuring the right number of staff with the right skills were working at the right times to support young people's outcomes. This was supported by clear recording of young people's needs within their personal file and meant that young people's preferences were considered, and they were provided with continuity of care.

Staff understood their role and responded flexibly to changing situations. Young people, when able, had a choice in who provided their care and support. Staff planned in advance for activities but always had alternative options available, allowing for changes to be made based on the young person's choice and needs while in the service.

A particular strength of the service was the warm welcoming atmosphere for young people, families and staff. Relationships within the staff team were positive and communication was good.

Areas for improvement

1. To enhance the care provided to young people, and ensure they are supported by staff who are well-informed, the service should consider exploring with relevant stakeholders how additional time can be provided for staff to undertake further service specific training and increased opportunity for reflection, learning and development.

This should include but is not limited to training in managing distressed behaviours, care plan and risk assessment and greater time for staff reflection to learn from practice examples.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'I have confidence in people because they are trained, competent and skilled' (HSCS 3.14).

How well is our care and support planned?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for children and young people and clearly outweighed areas for improvement.

Young people benefited from a vision of aspirational care and support from managers and staff. Staff promoted and encouraged young people to have choice in the care provided and had developed several communication methods to increase participation. Young people's files were informative. These included description of likes, dislikes, religious and cultural celebrations, health needs and communication methods. Staff regularly read these to keep up to date, ensuring they provided effective care and support.

Young people and their families were given opportunity to be involved in the development and review of their personal plans. Parents reported that the care plans were accurate reflections of their children. We suggested that the service should better evidence the views of others within care plans (see area for improvement 1).

Young people's care plans required to be developed further to ensure that identified outcomes were more Specific, Measurable, Achievable, Relevant and Time-bound (SMART). This would allow for improved monitoring of progress, acknowledgement of achievement and future planning. This did not significantly impact on the positive outcomes for young people and the manager of the service recognised the need for development of written care plans (see area for improvement 2.)

We found that young people's risk assessments were lengthy and generic. Although staff had a good working knowledge of individual risk, this was less clear in the written documentation. Specific risk assessments would allow for better understanding and analysis of risk, leading to more dynamic and meaningful assessments (see area for improvement 3).

There was a supportive approach to involving young people, families and stakeholders in developing the delivery of care and support. There were a variety of options available to parents where they could express their views in person or make anonymous suggestions. Interpreters were used when English was a 2nd language and other communication methods were available as needed. The manager of the service had good knowledge of the young people and their families' wishes and expectations of the service and understood their rights to be involved. Parents told us that they felt confident to express their view or raise any issues if necessary.

The service recognised the importance of peer support for the young people to promote positive outcomes. We saw examples where young people with limited connections had developed positive, fun friendships within the service and there were plans to support the young people to maintain these friendships out with the service. This increased their social networks and supported the development of positive relationships.

Areas for improvement

1. To ensure that young people and family member's voices are heard, known to all staff and influence practice, the service should ensure consistent recording of views within personal plans.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: My views will always be sought and my choices respected, including when I have reduced capacity to fully make my own decisions (2.11)

2. To further support young people to achieve positive outcomes, the provider should ensure that care plans are outcome focussed and comply with SMART principles. Care plans should clearly record agreed actions to

achieve positive outcomes for young people, how these will be measured, how achievable these are and within which timeframe.

This is to ensure that care and support is consistent with the Health and Social Care Standards, which state that: 'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15) and 'My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected' (HSCS 1.23).

3. To further support young people and ensure a consistent approach to risk management, the provider should develop specific risk assessments and risk management plans that are individual to each young person.

This is to ensure that care and support is consistent with the Health and Social Care Standards, which state that: I am helped to understand the impact and consequences of risky and unsafe behaviour and decisions (HSCS 2.25)

Complaints

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

Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good
1.4 People are getting the right service for them	4 - Good

How good is our leadership?	4 - Good
2.1 Vision and values positively inform practice	5 - Very Good
2.2 Quality assurance and improvement is led well	4 - Good
2.3 Leaders collaborate to support people	4 - Good
2.4 Staff are led well	5 - Very Good

How good is our staff team?	4 - Good
3.1 Staff have been recruited well	5 - Very Good
3.2 Staff have the right knowledge, competence and development to care for and support people	4 - Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good

How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good
5.2 Carers, friends and family members are encouraged to be involved	4 - Good

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Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

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