

Ochil Tower School

School Care Accommodation Service

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Auchterarder
PH3 1AD

Telephone: 01764 662 416

Type of inspection:
Unannounced

Completed on:
5 March 2026

Service provided by:
Ochil Tower School

Service provider number:
SP2003002133

Service no:
CS2003009785

About the service

Ochil Tower School is an independent school for children and young people with additional support needs, aged between 8 and 21 years.

Ochil Tower provides care and education for both residential and day pupils. Older pupils continue their learning through the Life Skills centre where they develop practical skills such as in gardening, and further develop their independent living skills. Children and young people are cared for in six houses within a large campus. At the time of the inspection only four houses were being used. The six houses and three school buildings are set in nine acres of grounds located unobtrusively off the main street of Auchterarder, enabling the school to be part of the local community. The grounds offer facilities for gardening, and play activities as part of the curriculum. The campus is close to local shops and transport links.

About the inspection

This was an unannounced follow up inspection which took place on 04 March 2026 between 10:30 and 18:00 and 05 March 2026 between 09:00 and 14:30. The inspection was carried out by two inspectors from the Care Inspectorate. The inspection focussed on the requirements and areas for improvement made during the previous inspection for which the report was published on 31 October 2025. We evaluated how the service had addressed these to improve outcomes for children and young people. During this follow up inspection we increased the evaluations for Key Question 7 to adequate because the service had made progress by building on key strengths.

Key messages

Improvement was made in all required areas, made during the previous inspection. As a result children and young people's needs were being met.

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 children and young people's rights and wellbeing?	3 - Adequate
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Further details on the particular areas inspected are provided at the end of this report.

How well do we support children and young people's rights and wellbeing?

3 - Adequate

We found some strengths in aspects of the care provided, however the strengths just outweighed the weaknesses, therefore we evaluated Key Question 7 as adequate.

The service had worked closely with the Care Inspectorate to make the improvements identified at the previous inspection.

They had made progress in all areas. **See Requirements 1 - 6 in section- What the service has done to meet any requirements made at or since the last inspection.**

We will consider the sustainability of improvement at future inspections.

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

Requirements

Requirement 1

By 14 December 2025 the provider must ensure that child protection processes are robust. This is to ensure that children and young people are kept safe and experience high quality, consistent care and support. In particular you must:

- a) ensure all staff have appropriate training to equip them in their role
- b) ensure child protection reporting procedures are followed
- c) ensure the child protection policy and procedures are reviewed and identify expected timescales
- d) ensure effective management oversight and identification of child protection matters.

This is to comply with Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Make proper provision for the health, welfare and safety of service users

and

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

This requirement was made on 31 October 2025.

Action taken on previous requirement

- Child protection had been a high priority focus and we found increased oversight and quality assurance of protection matters
- The child protection policy and procedure had been updated to reflect timescales and current guidance
- The board of governors had increased awareness and were due imminently to complete protection training.
- Child protection leads had completed additional training and attended Perth and Kinross protection forum.
- Staff had completed scenario based training and managers had increased oversight and quality assurance

Met - within timescales

Requirement 2

By 31 January 2026 to ensure that the service can consistently achieve positive outcomes for young people, the provider must adopt a SMART approach to care planning that is integrated with robust risk assessment and risk management procedures. These care plans and risk assessments must be outcome focused and clearly express strategies to mitigate risk and help young people to progress.

This is to comply with Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland

(Requirements for Care Services) Regulations 2011 (SSI 2011/210) Make proper provision for the health, welfare and safety of service users and

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which states 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)

This requirement was made on 31 October 2025.

Action taken on previous requirement

- Care plans were SMART and the level of detail had improved.
- Team meetings were taking place to discuss SMART targets.
- Risk assessments were detailed.
- There was increased oversight and ownership of care plans from house managers.
- We asked that the service continues to develop care planning considering where individual documents within plans can come together better.
- As care plans develop and staff find greater confidence in creating plans, we would expect to find increased input to care planning from residential care workers.

Met - within timescales

Requirement 3

By 14 December 2025 must ensure that leaders have a robust understanding and overview of the quality of care. To do this the provider must at a minimum:

- a) ensure that all staff have regular one to one supervision with their line manager including recorded performance management
- b) develop a programme for senior managers to spend time in houses to observe practice and offer support and role modelling
- c) develop a quality assurance process which identifies areas for improvement and action plans with timescales to evidence progress.

This is to comply with Regulation 4(1)(a) (Welfare of users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) and

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which states that "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes". (HSCS 4.19)

This requirement was made on 31 October 2025.

Action taken on previous requirement

- An overview spreadsheet identified that staff received regular supervision, However, some staff told us that they received this less frequently than others. Leaders committed to ensuring that all staff receive supervision in line with the supervision policy.
- Senior managers had awareness of supervision content and trends from recorded supervision notes. Although these were anonymised and staff knew that the records were overseen by senior leaders, we would suggest making a policy statement to ensure full transparency.
- Senior managers were very visible and most staff felt confident to share their views. The appointment of the new head of care and new assistant house managers should further increase management visibility and

opportunities for staff to discuss their views.

- The chair to the board was a regular visitor to the school and care.
- Quality assurance had improved and was demonstrated by the openness to fulfilling the requirements and the ability to adopt the improvement journey with positive reflection. There was also a vision for quality improvement at a strategic level.

Met - within timescales

Requirement 4

By 14 December 2025 the Board of Trustees must ensure that they have clear oversight of the progression towards meeting the requirements of this inspection and ensure that improvements are made.

This is to comply with Regulation 4(1)(a) (Welfare of users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)
and

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which states that "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes". (HSCS 4.19)

This requirement was made on 31 October 2025.

Action taken on previous requirement

- The Chair of the Board has been present and available throughout the improvement journey.
- The Board have been fully sighted on the requirements and the Care Inspectorate report.
- Minutes from meetings between the Board and the Children and Young Peoples Committee reflected good strategic discussion at appropriate levels.
- The Boards ability to ensure the service continues to both self-identify and consistently work on the improvement agenda will be key moving forward

Met - within timescales

Requirement 5

By 14 January 2026, the provider must ensure that they follow 'Matching Looked After Children and Young People: Admissions Guidance for Residential Services', published by the Care Inspectorate'. This should include but is not limited to:

- a) ensuring they consider the potential impact on existing young people within the service, including identifying specifically which house they will reside in
- b) ensuring they have all the necessary information prior to making a decision regarding the new young person being referred to the service
- c) ensuring they consider staffing levels, skills, mix and any current staff vacancies.

This is in order to comply with Regulation 3, Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/ 210). Promoting quality and safety and make proper provision for the health, welfare and safety of service users.
and

This is to ensure that care and support is consistent with the Health and Social Care Standards which state "I am in the right place to experience the care and support I need and want" (HSCS 1.20)

This requirement was made on 31 October 2025.

Action taken on previous requirement

- It was clear that significant work that had been undertaken in relation to matching young people to the service. To enable this, identified leaders worked closely allowing space for creativity and development of new systems.
- Matching documentation was carefully collated from the raft of information provided. The views of staff and managers were sought to build assessment which then allowed the evaluation of capacity to meet the needs of both existing and new young people.
- We particularly liked the record of visit documents to ensure assessment in Ochil tower starts immediately.
- Risk assessments were initiated prior to admission which meant that staff were prepared to mitigate risks and keep young people safe from the offset.
- A dynamic staffing assessment allowed reasonable adjustments when new young people arrived or as issues appeared.

Met - within timescales

Requirement 6

By 14 January 2026 ensure that the service has sufficient staff on each shift to meet the needs of each child/ young person. To do this, the provider must, at a minimum:

- a) keep individual records of four weekly assessments of physical, social, psychological and recreational needs and choices as to how they will deliver their care. Record this in each care plan as this will inform the direct care hours for the individual
- b) in respect of the delivery of the service, a 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
- c) the overall assessment of staffing level and deployment must be available to any visitors to the service and everyone using it.

This is in order to comply with section 8 of the Health and Care (Staffing) (Scotland) Act 2019 (as substituted for regulation 15(b) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210))

and

This is to ensure that care and support is consistent with the Health and Social Care Standards which state "My needs are met by the right number of people" (HSCS 3.15)

This requirement was made on 31 October 2025.

Action taken on previous requirement

The service had developed a comprehensive four weekly assessment document which identified young people's needs, alongside staff deployment. This appeared to be working successfully at this inspection, however we will fully evaluate the impact of this at the next inspection when it has been fully embedded and operational for a longer period.

Met - within timescales

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 children and young people's rights and wellbeing?	3 - Adequate
7.1 Children and young people are safe, feel loved and get the most out of life	3 - Adequate
7.2 Leaders and staff have the capacity and resources to meet and champion children and young people's needs and rights	3 - Adequate

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