

**PERTH AND KINROSS COUNCIL****Executive Sub-Committee of Lifelong Learning Committee – 17 September 2014****CARE INSPECTORATE INSPECTIONS OF SUPPORT AND RESIDENTIAL CARE SERVICES FOR CHILDREN AND YOUNG PEOPLE****Report by Executive Director (Education and Children's Services)****PURPOSE OF REPORT**

This report sets out the key findings following the inspection of We Care Perthshire by the Care Inspectorate. Progress is shown against areas for improvement for scrutiny by the Executive Sub-Committee of Lifelong Learning Committee.

**1. BACKGROUND**

- 1.1 The Care Inspectorate (also known as Social Care and Social Work Improvement Scotland - SCSWIS) was created by the [Public Services Reform \(Scotland\) Act 2010](#). The Act sets out general principles, in accordance with which the Care Inspectorate must exercise its functions. These are:
- The safety and wellbeing of all persons who use, or are eligible to use, any social service are to be protected and enhanced;
  - The independence of those persons are to be promoted;
  - Diversity in the provision of social services is to be promoted with a view to those persons being afforded choice;
  - Good practice in the provision of social services is to be identified, promulgated and promoted.
- 1.2 The Act places the Care Inspectorate under a number of duties, including duties to: make arrangements which will secure continuous improvement in user focus and which demonstrate that improvement; and to co-operate with other specified scrutiny bodies.
- 1.3 Since April 2008 regulated care services in Scotland have been inspected using a framework of quality themes and quality statements. Services have been given grades based on the findings at each inspection. Inspection findings were published in reports and the reports and grades were made public on the Care Commission website. All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.
- 1.4 Services are checked against the [National Care Standards](#) and most typically against some or all, of the following quality themes:

- Quality of Care and Support;
  - Quality of Environment or Information;
  - Quality of Staffing; and
  - Quality of Management and Leadership.
- 1.5 Quality themes and quality statements are informed by the [National Care Standards](#), but do not replace them. Quality themes and quality statements are simply ways of grouping the standards and judging how a service is performing against them. Each quality theme is therefore a heading for an area of performance which is inspected and graded. Grades of 1-6 will be awarded: 1 = unsatisfactory, 2 = weak, 3 = adequate, 4 = good, 5 = very good and 6 = excellent. Different standards are marked within each grade with the lower score being the one which is taken as the overall score for that theme.
- 1.6 Inspectors will consider evidence from various sources when judging a service's performance since it was last graded, such as:
- Upheld complaints – and whether identified issues have been resolved;
  - Incidents - and how your service has dealt with them;
  - Feedback from people who use the service and carers;
  - Evidence that previous action plans have been implemented; and
  - Information in your annual return.
- 1.7 The most significant changes between Care Commission and Care Inspectorate inspections are:
- The use of unannounced inspections. The Care Inspectorate will conduct unannounced inspections for all regulated services as the main inspection method unless there are practical reasons why it needs to announce a particular inspection;
  - A greater maximum period between inspections for better performing and lower risk services;
  - Changes to the letters notifying providers to complete their self-assessments; and
  - A greater focus on poorly performing and riskier services.
- 1.8 Following an inspection, the Care Inspectorate may identify:
- Recommendations: statements that set out actions the care service provider should take to improve or develop the quality of the service.
  - Requirements: statements which set out what is required of the care service provider to comply with relevant legislation.
- 1.9 Care service providers must submit an action plan to the Care Inspectorate addressing any requirements and recommendations identified. Progress against

the action plan is monitored by the Care Inspectorate through annual return and self-assessment forms submitted by the care service provider and through subsequent inspection. Yes that is correct and no there are no other improvements other than the ones submitted in the action plan. There are areas where they suggest areas for development.

## **2 PROPOSALS: RECENTLY PUBLISHED REPORTS**

2.1 This report presents the findings following the inspection of We Care Perthshire in February 2014 by the Care Inspectorate. A progress update is provided for the improvement areas identified.

### **2.2 We Care Perthshire**

2.2.1 We Care Perthshire offer a community service for children and young people affected by disability or experiencing difficulties at home who receive a service from the Social Work Child Health Team. The service provides support through volunteers to parents and siblings, and social opportunities and befriending on an individual basis or in a peer group setting. This helps to facilitate and enhance social and community links and experiences. The service also provides mentors for children/young people who are experiencing significant difficulties. All aspects of the service provided are centred to individual's needs

2.2.2 The service is delivered entirely by volunteers who provide the support for children and young people, up to school leaving age, living in the Perth & Kinross Council area. The volunteers may befriend children and young people who can benefit from some additional support, visit a child's/young person's home to allow parent(s) to go out for a couple of hours, or provide practical support for care at home during school holidays and at other times that extra help is needed.

2.2.3 Volunteers do not get paid but are given expenses to spend while out with the child or young person. All types of people volunteer. They are checked out carefully through enhanced disclosure and given relevant training and support. We also run a summer programmes called Groovy Gang which are peer group programmes of outings, creative activities and general play opportunities. This is run by Child Health Team staff and volunteers.

2.2.4 The Care Inspectorate undertook an inspection of We Care Perthshire in February 2014. The inspection was announced (short notice) and low intensity. This level of inspection is carried out when the Care Inspectorate is satisfied that services are working hard to provide consistently high standards of care.

2.2.5 The Care Inspectorate identified the following key strengths:

- Well-planned, person-centred support to children and young people affected by learning disabilities and their families.

- The service recruits and trains volunteers and matches them carefully with young people and families.
- Very good communication and partnership working between the manager, the befrienders, families and social workers.
- The service was valued by the families who used it, and had a positive impact on the health and wellbeing of young people.

2.2.6 The inspection found the quality of care and support; quality of staffing; and quality of management and leadership **good**.

2.2.7 The inspection report details a number of key strengths with no requirements or recommendations identified. Three areas for improvement were identified. A summary of progress against these areas for improvement is provided in Table 1 below.

**Table 1: Summary of Progress against Key Areas for Improvement**

Areas for Improvement	Progress/Proposed Actions
<b>Quality of Care and Support</b>	
<p>Improvement: The "We Care" service has amalgamated with "The Groovy Gang" providing group activities during the Easter and summer holidays. We suggest that the service develops user-friendly ways of seeking feedback from these activities and, use the information gathered to inform the development of the service.</p>	<p><b>In Progress:</b> Online feedback survey being looked at to replace questionnaires currently used. Continued communication with young people on their views and opinions. PECS (Picture Exchange Communication System) to be used to seek young people's views, to make choices and understand instructions. Talking Mat training to be arranged, as an alternative communication aid. The 6 monthly review of the befriending service is due in September. (October 2014)</p>
<b>Quality of Staffing</b>	
<p>Improvement: The service should ensure that it keeps a record of group support sessions and shares these with participants.</p>	<p>Due to a fall in the number of volunteers there have been no group support sessions, therefore, support has been provided on a 1:1 basis. Further work has been undertaken to explore both recruitment and inclusion options for children and young people with complex disabilities. This will inform future service plans. Volunteer recruitment will be undertaken at Perth College and Ryder Cup Events week activities from 8 September 2014.</p>
<b>Quality of Management and Leadership</b>	
<p>Improvement: As the service has recently joined with "The Groovy Gang" the service should put in place a quality assurance system which gathers and records information across the different parts of the service. It should also think about how it can evaluate the impact of the service on outcomes for service users.</p>	<p><b>In Progress:</b> Existing systems are being reviewed and developed to include 'The Groovy Gang' ensuring that the service, as a whole, is evaluated. The impact on outcomes for service users will continue to be monitored as the combined service develops.</p>

2.2.8 A copy of the inspection report is provided in Appendix 1 together with a copy of the action plan submitted to the Care Inspectorate.

2.2.9 The last inspection of the We Care Perthshire was completed in September 2012 and reported to the Executive Sub-Committee of Lifelong Learning Committee on 6 February 2013 (Report No. [13/66](#)). We Care Perthshire was first inspected in December 2010 and Figure 1 below shows the inspection and grading history since then.

**Figure 1: Grading History, We Care Perthshire**



### 3 CONCLUSION AND RECOMMENDATION

The reports by the Care Inspectorate provide further information on the standards and quality in our services and set out a clear agenda for continuous improvement.

3.1 It is recommended that the Executive Sub-Committee of Lifelong Learning Committee scrutinises and comments as appropriate on the contents of the report.

**Author(s)**

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**Approved**

<b>Name</b>	<b>Designation</b>	<b>Date</b>
John Fyffe	Executive Director (Education and Children's Services)	14th August 2014

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## 1. IMPLICATIONS, ASSESSMENTS, CONSULTATION AND COMMUNICATION

<b>Strategic Implications</b>	
Community Plan / Single Outcome Agreement	<b>Yes</b>
Corporate Plan	<b>Yes</b>
<b>Resource Implications</b>	
Financial	<b>None</b>
Workforce	<b>None</b>
Asset Management (land, property, IST)	<b>None</b>
<b>Assessments</b>	
Equality Impact Assessment	<b>None</b>
Strategic Environmental Assessment	<b>None</b>
Sustainability (community, economic, environmental)	<b>None</b>
Legal and Governance	<b>None</b>
Risk	<b>None</b>
<b>Consultation</b>	
Internal	<b>Yes</b>
External	<b>None</b>
<b>Communication</b>	
Communications Plan	<b>None</b>

### 1. Strategic Implications

1.1 The Perth and Kinross Community Plan 2013-2023 and Perth and Kinross Council Corporate Plan 2013/2018 set out five strategic objectives:

- (i) Giving every child the best start in life;
- (ii) Developing educated, responsible and informed citizens;
- (iii) Promoting a prosperous, inclusive and sustainable economy;
- (iv) Supporting people to lead independent, healthy and active lives; and
- (v) Creating a safe and sustainable place for future generations.

This report relates to Objective No (i) Giving every child the best start in life.

1.2 The report also links to the Education & Children's Services Policy Framework in respect of the following key policy area: Change and Improvement

### 2. Resource Implications

#### Financial

2.1 Not applicable (n/a)

### Workforce

- 2.2 Not applicable (n/a)

### Asset Management (land, property, IT)

- 2.3 Not applicable (n/a)

## **3. Assessments**

### Equality Impact Assessment

- 3.1 Under the Equality Act 2010, the Council is required to eliminate discrimination, advance equality of opportunity, and foster good relations between equality groups. Carrying out Equality Impact Assessments for plans and policies allows the Council to demonstrate that it is meeting these duties.

The function, policy, procedure or strategy presented in this report was considered under the Corporate Equalities Impact Assessment process (Eq1A) with the following outcome: assessed as **not relevant** for the purposes of Eq1A.

However, it is anticipated that the work on the quality indicators will promote equality of access to care and support. Where appropriate, improvement policies, procedures or strategies will require equalities assessments to ensure compliance with our duty to ensure there is no adverse impact on any community group.

### Strategic Environmental Assessment

- 3.2 The Environmental Assessment (Scotland) Act 2005 places a duty on the Council to identify and assess the environmental consequences of its proposals. No further action is required as it does not qualify as a PPS as defined by the Act and is therefore exempt.

### Sustainability

- 3.3 Not applicable (n/a)

### Legal and Governance

- 3.4 Not applicable (n/a)

### Risk

- 3.5 Not applicable (n/a)

#### **4. Consultation**

##### Internal

- 4.1 Relevant Heads of Service and Service Managers within Education and Children's Services have been consulted in the preparation of this report.

##### External

- 4.2 Not applicable (n/a)

#### **5. Communication**

- 5.1 Not applicable (n/a)

#### **6. BACKGROUND PAPERS**

No background papers, as defined by Section 50D of the Local Government (Scotland) Act 1973 (other than any containing confidential or exempt information) were relied on to any material extent in preparing the above report.

#### **7. APPENDICES**

Appendix 1: We Care Perthshire  
Care Service inspection report





## Care service inspection report

### We Care Perthshire

### Support Service Care at Home

Strathmoor  
Harley Place  
Perth

PH1 5DP

Telephone: 01738 454424

Inspected by: Linda Paterson

Type of inspection: Announced (Short Notice)

Inspection completed on: 28 February 2014



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### **Service provided by:**

Perth & Kinross Council

### **Service provider number:**

SP2003003370

### **Care service number:**

CS2009236914

### **Contact details for the inspector who inspected this service:**

Linda Paterson

Telephone 01786 432940

Email [enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

### Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

### We gave the service these grades

Quality of Care and Support	4	Good
Quality of Staffing	4	Good
Quality of Management and Leadership	4	Good

### What the service does well

We Care Perthshire provides well-planned, person-centred support to children and young people affected by learning disabilities and their families.

The service recruits and trains volunteers and matches them carefully with young people and families. There is very good communication and partnership working between the manager, the befrienders, families and social workers.

We found that the service was valued by the families who used it, and had a positive impact on the health and wellbeing of young people.

### What the service could do better

The service should continue to develop effective ways of enabling children and young people to give their views about the service.

It should continue to develop a structured approach to quality assurance, taking into account the new joined up service with the Groovy Gang.

### What the service has done since the last inspection

Since the last inspection, the service has developed a comprehensive training programme for volunteers.

It has developed individualised support plans for each young person which are reviewed in line with statutory requirements.

### **Conclusion**

This service provides flexible, person-centred support to children, young people and their families, and offers them opportunities to participate in community activities in line with their needs and interests.

### **Who did this inspection**

Linda Paterson

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# 1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Prior to 1 April 2011, this function was carried out by the Care Commission. Information in relation to all care services is available on our website at [www.scswis.com](http://www.scswis.com).

This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

## Requirements and recommendations

If we are concerned about some aspect of a service, or think it needs to do more to improve, we may make a recommendation or requirement.

- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service based on best practice or the National Care Standards.

- A requirement is a statement which sets out what is required of a care service to comply with the Public Services Reform (Scotland) Act 2010 ("the Act") and secondary legislation made under the Act, or a condition of registration. Where there are breaches of Regulations, Orders or conditions, a requirement may be made. Requirements are legally enforceable at the discretion of the Care Inspectorate.

We Care Perthshire is a small support service provided by Perth and Kinross Council. It is registered to provide a support service to people in their own homes and the community and provided to children under the age of 18 and their families.

The part of the service we looked at during the inspection recruited volunteers and matched them with children and young people as befrienders.

At the time of this inspection, only one family was using the befriending part of the service.

Recently, the service has joined up with "The Groovy Gang" which provides a play scheme in the summer and Easter holidays, but this was not running at the time of this inspection.

The aims and objectives of the service are to:

- \* Provide a community service for children and young people affected by disability and children/young people experiencing difficulties at home
- \* Offer social opportunities on an individual basis or in a peer group setting
- \* All aspects will be person centred and tailored to individual's needs

- \* Facilitate and enhance social and community links and experiences
- \* Provide mentors for children/young people who are experiencing significant difficulties
- \* Effectively use trained volunteers to help provide this community service.

Based on the findings of this inspection this service has been awarded the following grades:

**Quality of Care and Support - Grade 4 - Good**

**Quality of Staffing - Grade 4 - Good**

**Quality of Management and Leadership - Grade 4 - Good**

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website [www.careinspectorate.com](http://www.careinspectorate.com) or by calling us on 0845 600 9527 or visiting one of our offices.

## 2 How we inspected this service

### The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

### What we did during the inspection

We wrote this report following an inspection of the service which took place on 28 February 2014. As this is a very small service, we telephoned the manager two days before the inspection to make sure that she would be available to meet with us. Before the inspection, the manager had submitted a self assessment document as required by the Care Inspectorate.

During the inspection, we gathered evidence from a range of sources including:

- \* discussion with the manager
- \* discussion with social worker responsible for placing young person with the service
- \* service user's support plans
- \* two befriender files
- \* volunteer handbook
- \* information folder
- \* staff questionnaires.

### Grading the service against quality themes and statements

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

### Inspection Focus Areas (IFAs)

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

### **Fire safety issues**

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at [www.firelawscotland.org](http://www.firelawscotland.org)

### **What the service has done to meet any requirements we made at our last inspection**

#### **The requirement**

The provider must ensure that staff/ volunteers receive training appropriate to the work they are to perform.

This is in order to comply with regulation 15(b)(i)(ii) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/ 210)

Timescale: within 2 months of receipt of this report.

#### **What the service did to meet the requirement**

The service had in place a structured induction and core training for all volunteers.

**The requirement is:** Met - Within Timescales

### **What the service has done to meet any recommendations we made at our last inspection**

The service had taken appropriate action to address the recommendations made at the last inspection:

- 1) Individual files were in place for young people who used the service
- 2) The service had put in place a more structured approach to quality assurance which included supervision, observations of practice, service user/family evaluation forms and feedback from placing social workers.

#### **The annual return**

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

**Annual Return Received:** Yes - Electronic

### **Comments on Self Assessment**

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

This was completed to a satisfactory standard prior to the inspection.

### **Taking the views of people using the care service into account**

We did not receive any completed questionnaires from people who used the service or their families. As the service was currently only being provided to one family, this was perhaps unsurprising. However, we took into account feedback from the family given directly to the service and, the views of the social worker who had case responsibility for the young person who was being supported by the service. From this information, we could see that the young person positively enjoyed the regular, reliable contact with the befriender.

### **Taking carers' views into account**

As noted above, we did not receive direct feedback from the family, but the placing social worker confirmed that the young person and the family were very happy with all aspects of the service they received.

## 3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

### Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 4 - Good

#### Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

#### Service strengths

We found that this was a very individualised, person-centred service which involved service users and their families very closely in, influencing the quality of the service they receive.

Some of the strengths we noted were:

\* The "This Is Me" form contains personalised information about the young person. Written with humour from the young person's perspective by the parents, the forms contain detailed information about safety, behaviour and communication needs. This form is used by the service to develop the support plan, which ensures that support is offered in a way which the young person and family need, as well as in accordance with their wishes.

\* The young people's profiles were agreed with them and their parents. Parents signed support plan agreements which set out roles and responsibilities. They also signed consents to emergency medical treatment. This ensured that the details of the support plan were very much influenced by the young person and their family.

\* There was ample evidence in the support plan diaries of young people being given choices about what they did during befriending sessions. Parents were also involved in suggesting/agreeing activities which the young person might enjoy. This meant that support was offered in line with the young person's interests, and written evidence indicated that they enjoyed the sessions very much.

\* We found that the service had put in place training in a range of communication methods, such as "Makaton", to help to facilitate communication where this was needed. The service was also looking at developing the use of tools such as "Talking Mats" to help young people to give their views about the service.

\* Families had direct contact with the manager of the service through reviews and additional telephone contact. The manager also worked alongside the placing social worker, so feedback about the quality of the support was gathered on an ongoing basis.

### **Areas for improvement**

The "We Care" service has amalgamated with "The Groovy Gang" providing group activities during the Easter and summer holidays. We suggest that the service develops user-friendly ways of seeking feedback from these activities and, use the information gathered to inform the development of the service.

**Grade awarded for this statement:** 4 - Good

**Number of requirements:** 0

**Number of recommendations:** 0

### **Statement 3**

We ensure that service users' health and wellbeing needs are met.

### **Service strengths**

We found that the service was good at meeting the health and wellbeing needs of service users.

Some of the strengths we noted were:

\* Service users' health, care and support needs were recorded in the support plans. Befrienders received appropriate training and guidance to enable them to support people safely and effectively. Detailed risk assessments were in place to identify any particular risks and, to specify how these should be managed. In the sample plan we looked at, we found that the service had adopted a really well-planned and sensitive approach to introducing the befriender to the young person, giving them time to build up trust and confidence at the service user's pace.

\* We noted that service users' health and wellbeing had been promoted as the befriender helped the young person to participate in regular physical activities, including swimming and football. One young person got a medal for swimming, and it was noted that both he and his parents were pleased with his progress.

\* In the sample plan which we looked at, the young person had been matched with a befriender close to his own age, and with some similar interests. This meant that

both were able to participate in and enjoy shared activities, helping to promote inclusion and respect.

\* The befrienders kept a regular diary of befriending sessions which noted progress and highlights of the befriending journey. There was also room to record observations which could be discussed in support sessions, and used to modify support plans if necessary.

### **Areas for improvement**

None noted at this inspection.

**Grade awarded for this statement:** 4 - Good

**Number of requirements:** 0

**Number of recommendations:** 0

## **Quality Theme 3: Quality of Staffing**

Grade awarded for this theme: 4 - Good

### **Statement 1**

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

#### **Service strengths**

For information about the service's strengths in relation to this quality statement, please refer to QS 1.1.

#### **Areas for improvement**

Please refer to QS 1.1.

**Grade awarded for this statement:** 4 - Good

**Number of requirements:** 0

**Number of recommendations:** 0

### **Statement 3**

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

#### **Service strengths**

From the evidence we gathered based on the very small sample of volunteer files available, we found that the service had recruited volunteers who were skilled, motivated and committed to high standards of practice.

We noted the following strengths:

\* The service followed safe recruitment procedures which included a formal application form, PVG checks and references being taken up.

\* There was a structured induction process which covered key areas of practice including health and safety, person-centred thinking, anti-discriminatory practice, child protection and managing challenging behaviour. They were also given information about learning disabilities and how this might affect the person. Volunteers were also provided with a range of relevant training opportunities which included; Manual Handling, Protection of Vulnerable Adults, and Makaton (a language

programme providing a means of communication to individuals who cannot communicate effectively by speaking).

\* Although not employees, volunteers were given the SSSC (Scottish Social Services Council) Codes of Practice, with additional information and discussion aimed at promoting professional conduct and values.

\* Volunteers were supported through regular support sessions conducted through meetings, phone and e-mail. Although not currently relevant due to the small number of befrienders, the manager also carries out group support sessions which help to share and develop knowledge and understanding amongst the group.

\* There was very good evidence from the befriending diaries of positive, inclusive relationships and a caring approach. We also found evidence of good communication and effective partnership working between manager, befriender, young person and family.

### **Areas for improvement**

The service should ensure that it keeps a record of group support sessions and shares these with participants.

**Grade awarded for this statement:** 4 - Good

**Number of requirements:** 0

**Number of recommendations:** 0

## **Quality Theme 4: Quality of Management and Leadership**

Grade awarded for this theme: 4 - Good

### **Statement 1**

We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

#### **Service strengths**

For information about the service's strengths in relation to this quality statement, please refer to QS 1.1.

#### **Areas for improvement**

Please refer to QS 1.1.

**Grade awarded for this statement:** 4 - Good

**Number of requirements:** 0

**Number of recommendations:** 0

### **Statement 4**

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide

#### **Service strengths**

We found that the service had good systems in place for monitoring and developing the quality of the service. From our discussions with the manager and, from examining relevant documents, we noted the following strengths:

\* The service was developed in response to the needs of children and young people with disabilities and their families and, consequently closely reflects their views and wishes. The service continues to consult with parents about the development of the service, and planned support in line with their views.

\* There is a clear complaints procedure in place, though no complaints had been made.

\* The manager monitored the befriending diaries and held regular support sessions with volunteers to discuss and develop practice.

\* Regular reviews were held which allowed for both parents and placing social workers to comment on the quality of the service and, for adjustments to be made in line with their views.

\* Since the last inspection, the service had drawn up an improvement plan as a means of developing a more structured approach to quality assurance.

### **Areas for improvement**

As the service has recently joined with "The Groovy Gang" the service should put in place a quality assurance system which gathers and records information across the different parts of the service. It should also think about how it can evaluate the impact of the service on outcomes for service users.

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**Grade awarded for this statement:** 4 - Good

**Number of requirements:** 0

**Number of recommendations:** 0

## 4 Other information

### Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

### Enforcements

We have taken no enforcement action against this care service since the last inspection.

### Additional Information

#### Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in the Care Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme being re-graded as unsatisfactory (1).

## 5 Summary of grades

<b>Quality of Care and Support - 4 - Good</b>	
Statement 1	4 - Good
Statement 3	4 - Good
<b>Quality of Staffing - 4 - Good</b>	
Statement 1	4 - Good
Statement 3	4 - Good
<b>Quality of Management and Leadership - 4 - Good</b>	
Statement 1	4 - Good
Statement 4	4 - Good

## 6 Inspection and grading history

Date	Type	Gradings
20 Sep 2012	Announced (Short Notice)	Care and support 4 - Good Staffing 4 - Good Management and Leadership 3 - Adequate
16 Dec 2010	Announced	Care and support 5 - Very Good Staffing 5 - Very Good Management and Leadership 4 - Good

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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