

REPORT TO: SCRUTINY COMMITTEE - 10TH JUNE 2010

REPORT ON: THE ELMS CLOSE SUPPORT YOUNG PERSONS UNIT CARE COMMISSION INSPECTION REPORT

REPORT BY: DIRECTOR OF SOCIAL WORK

REPORT NO: 256-2010

1.0 PURPOSE OF REPORT

1.1 The purpose of this report is to summarise the findings and gradings awarded by the Care Commission to The Elms Close Support Young Person's Unit.

2.0 RECOMMENDATIONS

2.1 It is recommended that the Scrutiny Committee:

- i. Notes the contents of this report
- ii. Requests that the Director of Social Work monitor the continued progress towards improving this service.

3.0 FINANCIAL IMPLICATIONS

3.1 None

4.0 MAIN TEXT

4.1 The Elms Close support Unit had its announced inspection on 9th October 2009. There were five young people in residence during the inspection.

4.2 The Care Commission's focus of inspection targeted the following Quality Themes.

- Quality of Care and Support
- Quality of Environment
- Quality of Staffing
- Quality of Management and Leadership

Each Quality theme is made up of several quality statements and this inspection focussed on eight of these quality statements.

4.3 The Care Commission identified the following strengths at the Elms Close Support Unit.

- Young people were encouraged to participate in all aspects of their day to day care and to contribute to assessing and improving the overall quality of the service in a number of ways
- The service had improved the system of weekly care planning meetings to make sure that everybody involved in the young persons care remained focussed on the important issues in the young people's lives
- Young people were helped to improve the quality of the service they received through support given by staff to do activities or follow interests in the community
- The service had some very good policies and procedures in place to ensure that the health and wellbeing needs of the young people were met
- The service evidenced that it actively promoted the health of young people by encouraging them to be physically active

- There was clear evidence that young people had been asked for their views about the details of the environment and these had been listened to and acted upon
- The service had good arrangements in place to make sure that the environment was safe and service users were protected
- The incidence of accidents and serious incidents was very low indicating that policies, procedures and risk assessments were effective and well implemented
- The service had very good systems in place to enable young people to participate in assessing and improving the quality of staffing within the service
- The staff recruited to the service were subject to a robust recruitment process
- The service had good systems in place to enable the young people to participate in assessing and improving the quality of management and leadership within the service
- The staff contributed to the development of the service in a number of ways, and were involved in departmental working groups

4.4 The Elms Close Support Unit

The Close Support unit accommodates five young people aged 12-16+ years, The unit's original remit was to provide short to medium term care, however this remit has recently been reviewed given the changes in the demand for resources within this age group. The unit is managed by Dundee City Council Social Work Department. It is subject to registration and inspection by the Care Commission for Scotland. Staff are subject to the regulations of SSSC.

4.5 Quality Indicators

The Quality Indicators used by the Care Commission are:-

- 6 Excellent
- 5 Very Good
- 4 Good
- 3 Adequate
- 2 Weak
- 1 Unsatisfactory

At their recent inspection on 9 October 2009 the Care Commission awarded The Elms Close support unit the following grades:

Quality Theme	Overall Grade	
Quality of Care and Support	5	Very Good
statement 1		5 very good
statement 3		5 very good
Quality of Environment	4	Good
statement 1		4 good
statement 2		4 Good
Quality of Staffing	2	Weak
statement 1		5 Very good
statement 2		2 Weak
Quality of Management and Leadership	4	Good
statement 1		4 Good
statement 2		5 Very good

4.6 Requirements and Enforcements

There were no enforcements placed on the unit.

One requirement was placed on the service:

That the service provider must ensure that there are sufficient staff on duty at all times to meet the needs of service users.

This was based on the service not meeting its agreed staffing schedule with some of the reasons for this being stated in the report as staff sickness, but mainly an inflexible rota.

One of the issues raised in this requirement was already being addressed and a new rota which was developed with staff is now in the consultation process with the Trade Unions. This was noted in the inspection report.

5.0 POLICY IMPLICATIONS

5.1 This report has been screened for any policy implications in respect of Sustainability, Strategic Environmental Assessment, Anti-Poverty, Equality Impact Assessment and Risk Management.

There are no issues.

6.0 CONSULTATION

6.1 The Chief Executive, Depute Chief Executive (Support Services), Depute Chief Executive (Finance) and Head of Finance have been consulted in preparation of this report.

7.0 BACKGROUND PAPERS

7.1 The following Background Papers were relied upon in preparation of this Report:

- Inspection Report Dundee City Council - The Elms Close Support Unit.

Alan Baird
Director of Social Work

19 April 2010



Inspection report

The Elms Close Support - Dundee Care Home Service Children and Young People

The Elms - Close Support Unit
317 South Road
Dundee
DD2 2RT
01382 436743

Inspected by: Linda Paterson
(Care Commission officer)

Type of inspection: Announced

Inspection completed on: 9 October 2009

	Page Number
Summary of this inspection report	3
Section 1: Introduction	
About the Care Commission	6
About the National Care Standards	7
What is inspection?	8
How we decided what to inspect	10
What is grading?	11
About the service we inspected?	12
How we inspected this service	13
Section 2: The inspection	16
Section 3: Other information	
Other Information	29
Summary of Grades	30
Terms we use in our reports and what they mean	31
How you can use this report	33
People who use care services, their relatives and carers	33

Service provided by:

Dundee City Council

Service provider number:

SP2003004034

Care service number:

CS2003034640

Contact details for the Care Commission officer who inspected this service:

Linda Paterson

Telephone 01382 207200 Lo-Call: 0845 6008331

Email enquiries@carecommission.com

Easy read summary of this inspection report

We grade all the Quality Statements for a service at each inspection. Each grade describes how well we think the service is doing based on what we inspected.

We can choose from six grades:



We gave the service these grades

Quality of Care and Support  **5** Very Good

Quality of Environment  **4** Good

Quality of Staffing  **2** Weak

Quality of Management and Leadership  **4** Good

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

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

What the service does well

The service is very good at meeting the health needs of young people, and at encouraging them to lead a more active lifestyle. Staff at The Elms place a strong emphasis on the importance of education, and through close supervision and good liaison with schools and colleges, they have helped all of the young people currently living at The Elms to attend school regularly.

The service has very good systems in place for involving young people in the recruitment and selection of staff.

What the service could do better

The service had not been able to maintain the staffing levels agreed as a condition of registration with the Care Commission. The service must ensure that it has enough staff on duty at all times to meet the needs of young people using the service. Immediate action should be taken by the service provider to address this issue.

What the service has done since the last inspection

The service had made significant improvements in its approach to care planning, involving young people and their families and key staff in this process. The service had also made some improvements to the quality of the accommodation and facilities at The Elms.

Conclusion

The manager and staff at The Elms have continued to develop and improve important aspects of the service, particularly in care planning and in the environment. However, the failure to meet agreed staffing levels in this service which is provided to young people who need high levels of support and supervision is a breach of the service's conditions of registration with the Care Commission, and must be addressed as a matter of priority.

Who did this inspection

Lead Care Commission Officer

Linda Paterson

Other Care Commission Officers

Lay Assessor

Not Applicable

Please read all of this report so that you can understand the full findings of this inspection.

About the Care Commission

We were set up in April 2002 to regulate and improve care services in Scotland.

Regulation involves:

- registering new services
- inspecting services
- investigating complaints
- taking enforcement action, when necessary, to improve care services.

We regulate around 15,000 services each year. Many are childminders, children's daycare services such as nurseries, and care home services. We regulate many other kinds of services, ranging from nurse agencies to independent healthcare such as hospices and private hospitals.

We regulate services for the very young right through to those for the very old. Our work can, therefore, affect the lives of most people in Scotland.

All our work is about improving the quality of care services.

We produce thousands of inspection reports every year; all are published on our website: www.carecommission.com. Reports include any complaints we investigate and improvements that we ask services to make.

The "Care services" area of our website also:

- allows you to search for information, such as reports, about the services we regulate
- has information for the people and organisations who provide care services
- has guidance on looking for and using care services in Scotland.

You can also get in touch with us if you would like more detailed information.

About the National Care Standards

The National Care Standards (NCS) set out the standards that people who use care services in Scotland should expect. The aim is to make sure that you receive the same high quality of service no matter where you live.

Different types of service have different National Care Standards. When we inspect a care service we take into account the National Care Standards that the service should provide.

The Scottish Government publishes copies of the National Care Standards online at: www.scotland.gov.uk

You can get printed copies free from:

Blackwells Bookshop
53-62 South Bridge Edinburgh
EH1 1YS
Telephone: 0131 662 8283
Email: Edinburgh@blackwells.co.uk

What is inspection?

Our inspectors, known as Care Commission Officers (CCOs), check care services regularly to make sure that they are meeting the needs of the people in their care.

One of the ways we check on services is to carry out inspections. We may turn up without telling the service's staff in advance. This is so we can see how good the care is on a normal day. We inspect some types of services more often than others.

When we inspect a service, typically we:

- talk to people who use the service, their carers and families, staff and managers
- talk to individuals and groups
- have a good look around and check what quality of care is being provided
- look at the activities happening on the day
- examine things like records and files, if we need to
- find out if people get choices, such as food, choosing a key worker and controlling their own spending money.

We also use lay assessors during some inspections. These are volunteers who have used care services or have helped to care for someone who has used care services.

We write out an inspection report after gathering the information. The report describes how things are and whether anything needs to change.

Our work must reflect the following laws and guidelines:

- the Regulation of Care (Scotland) Act 2001
- regulations made under this Act
- the National Care Standards, which set out standards of care that people should be able to expect to receive from a care service.

This means that when we register or inspect a service we make sure it meets the requirements of the 2001 Act. We also take into account the National Care Standards that apply to it.

If we find a service is not meeting these standards, the 2001 Act gives us powers that require the service to improve.

Recommendations, requirements and complaints

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

- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement.
- A requirement is a statement which sets out what is required of a care service to comply with the Act and Regulations or Orders made under the Act, or a condition of registration. Where there are breaches of the Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Commission.

Complaints: We have a complaints procedure for dealing with any complaint about a registered care service (or about us). Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

We investigate all complaints. Depending on how complex it is, a complaint may be:

- upheld - where we agree there is a problem to be resolved
- not upheld - where we don't find a problem
- partially upheld - where we agree with some elements of the complaint but not all of them.

How we decided what to inspect

Why we have different levels of inspection

We target our inspections. This means we spend less time with services we are satisfied are working hard to provide consistently high standards of care. We call these low-intensity inspections. Services where there is more concern receive more intense inspections. We call these medium or high intensity inspections.

How we decide the level of inspection

When planning an inspection, our inspectors, or Care Commission Officers (CCOs) carefully assess how intensively each service needs to be inspected. They do this by considering issues such as:

- complaints
- changes to how the service provides care
- any notifications the service has given us, such as the absence of a manager
- what action the service has taken in response to requirements we have made.

The CCO will also consider how the service responded to situations and issues: for example how it deals with complaints, or notifies us about incidents such as the death of someone using the service.

Our inspections take account of:

- areas of care that we are particularly interested in (these are called Inspection Focus Areas)
- the National Care Standards that the service should be providing
- recommendations and requirements that we made in earlier inspections
- any complaints and other regulatory activity, such as enforcement actions we have taken to improve the service.

What is grading?

We grade each service under Quality Themes which for most services are:

- **Quality of Care and support:** how the service meets the needs of each individual in its care
- **Quality of environment:** the environment within the service (for example, is the service clean, is it set out well, is it easy to access by people who use wheelchairs?);
- **Quality of staffing:** the quality of the care staff, including their qualifications and training
- **Quality of management and leadership:** how the service is managed and how it develops to meet the needs of the people it cares for
- **Quality of information:** this is how the service looks after information and manages record keeping safely.

Each of the Quality Themes has a number of Quality Statements in it, which we grade.

We grade each heading as follows:

6	5	4	3	2	1
excellent	very good	good	adequate	weak	unsatisfactory

We do not give one overall grade.

How grading works.

Services assess themselves using guidance that we given them. Our inspectors take this into account when they inspect and grade the service. We have the final say on grading.

The Quality Themes for this service type are explained in section 2 The Inspection.

About the service we inspected

The Elms Close Support Unit is located in the Lochee area of Dundee. The unit shares a building with the secure unit and secure education unit, but operates as a separate facility, having its own entrance and dedicated staff team. It has five bedrooms, all of which have en-suite facilities. In addition there is a spacious living/dining room, a laundry, meeting room and a general office.

At the time of this inspection, the unit was in the process of having work done to improve and extend the facilities available to young people living there.

The stated aim of the unit is "to provide young people whose behaviour is a threat to their wellbeing with a safe, supportive and stimulating environment in which it is hoped that they can achieve their full potential, develop respect for themselves and others, and understand the skills and attitudes they will require when they move on from the unit." At the time of the inspection, five young people were living in the Close Support Unit.

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

Quality of Care and Support	5 - Very Good
Quality of Environment	4 - Good
Quality of Staffing	2 - Weak
Quality of Management and Leadership	4 - Good

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

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

You can use the "Care services" area of our website (www.carecommission.com) to find the most up-to-date grades for this service.

How we inspected this service

What level of inspection did we make this service

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 activities did we undertake during the inspection

Prior to the inspection, the service submitted an annual return and a self-assessment form as required by the Care Commission.

Pre-inspection questionnaires were sent out to young people who were using the service.

During the inspection, evidence was gathered from a number of sources including the following:

Discussion with the acting manager of the service;

discussion with two members of staff;

discussion with three young people currently using the service;

observation of interaction between staff and young people,

examination of a range of documentation relevant to the inspection including the following:

medication policy;

internet policy;

team meeting minutes;

unit meeting minutes;

working group meeting minutes;

information from

sample of staff rotas;

complaint, accident and incident records

Inspection Focus Areas (IFAs)

Each year we identify an area, or areas, we want to focus on during our inspections. We still inspect all the normal areas of a care service; these are extra checks we make for a specific reason.

For 2009/10 we will focus on:

- Meaningful activity for all adult services
- How care services assess the health of people with learning disabilities
- Involving parents for children's services
- Medication for looked after children for residential accommodation for children
- How care services make sure they have safe recruitment procedures for staff for all services except childminders.

You can find out more about these from our website www.carecommission.com.

Fire safety issues

The Care Commission no longer reports on matters of fire safety as part of its regulatory function. Where significant fire safety issues become apparent, we will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Care service providers can find more information about their legal responsibilities in this area at: www.infoscotland.com/firelaw

Actions Taken on Recommendations Outstanding

There was one recommendation made at the last inspection of this service. This recommended that the service should review and develop its approach to care planning. During the inspection, it was found that effective action had been taken to improve this aspect of the service.

The annual return

We use annual returns (ARs) to:

- make sure we have up-to-date, accurate information about care services; and
- decide how we will inspect services.

By law every registered care service must send us an annual return and provide us with the information we have requested. The relevant law is the Regulation of Care (Scotland) Act 2001, Section 25(1). These forms must be returned to us between 6 January and 28 February 2009.

Annual Return Received

Yes - Electronic

Comments on Self Assessment

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

Taking the views of people using the care service into account

Four young people returned completed pre-inspection questionnaires "How satisfied are you with your care service?". Of these, two said that they were "happy" and one that they were "very happy" with the overall quality of care provided by the service, while the fourth said that they "didn't know" whether they were happy or not.

During the inspection visit, we spoke to three of the young people who were living at The Elms. They indicated that they were generally happy with their care at The Elms. They specifically mentioned good relationships with staff, good food, and one mentioned that they had enjoyed the unit holiday. One young person raised some issues about bedtimes being too early and pocket money rates which were passed on to the manager of the service for further consideration.

Taking carers' views into account

The views of carers were not sought for this inspection

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 5 - Very 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

Young people were encouraged to participate in all aspects of their day-to-day care, and to contribute to assessing and improving the overall quality of the service in a number of ways;

On an individual basis, young people were involved in making choices and decisions about their day-to-day care through formal and informal systems such as weekly planning meetings and looked after children (LAC reviews).

We looked at a sample of care plans which showed that the service had improved the system of weekly care planning meetings to make sure that everybody involved in the young person's care remained focussed on the important issues in the young people's lives. The plans were more structured and noted clearly who had responsibility for taking action to move things forward.

Staff were very committed to using the planning system to meaningfully involve young people and their families in participating in assessing and improving the quality of the service they received. One example of this was that a member of staff had come in on a day off to attend the meeting so that she could continue working with one young person and their family. The worker had established positive relationships with the young person and the family, which helped them to all work together to resolve issues. The care plans showed evidence that young people and their families were given genuine choices about issues which were important to them, eg contact and home visits.

Young people were also helped to improve the quality of the service they received through support given by staff to do activities or follow interests in the community. During the inspection, staff were observed to help young people to plan and make choices about these kind of issues which would improve their experience during their stay at The Elms.

The service also gave opportunities to young people to participate in assessing and improving the quality of care and support more generally in the service, by having unit meetings where issues such as holiday plans, the purchase of shared equipment, and food preferences were discussed. Although these meetings did not necessarily take place on a regular basis, the process of consulting young people in this way helped to create an atmosphere where the views of young people were routinely asked for and valued.

To try to gather and evaluate the views of young people and their parents and carers in a more structured way, the service had begun to use evaluation questionnaires to get feedback about their experiences at The Elms

after they had moved on from the service. Staff had already taken account of the views expressed so far, but planned to analyse and respond to these in a more structured way once more returns had been received.

Further evidence about the ways in which young people were involved in assessing and improving other aspects of the service, including the environment, staffing and management, is detailed under the relevant quality statements in this report.

Areas for Improvement

The service should continue to use the information gathered through questionnaires to review and develop practice within the service (see recommendation).

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

1

Recommendations

1.

The service should use the information gathered through questionnaires to review and develop practice within the service - National Care Standards for Care Homes for Children and Young People - Standard 7 - Management and staffing

Statement 3

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

Service Strengths

The service had very good arrangements in place to ensure that the health and wellbeing needs of the young people were met.

The dedicated nurse for young people who were looked after (the LAAC nurse) carried out an initial health assessment on young people as soon as possible after their admission. From this, any areas for further action were identified. All young people were registered with a GP and a dentist, and staff supported young people to access more specialised care when needed. A sample of care plans evidenced very good compliance with medical and dental appointments and medication. One young person had been supported to register with a dentist and get treatment after years without having this, while another had been helped to regulate his medication, with a positive effect on his behaviour.

The service recognised the importance of promoting the wellbeing of young people through regular attendance and achievement at school. At the time of this inspection, all young people were attending school, or alternative educational provision quite regularly. In one case, the care plans clearly showed that this had been achieved by close supervision of the young person and good liaison with the school.

The service evidenced that it actively promoted the health of young people encouraging them to be physically active. There were several examples of young people being supported to follow individual interests, such as football, and one young person had been taught to swim by staff and young people during the unit holiday, a terrific achievement for the young person and their training team!

The service had some very good policies and procedures in place to ensure that the health and wellbeing needs of young people were met. A new medication policy and procedure had streamlined and simplified arrangements for the safe storage, recording and administration of medication. During the inspection, staff demonstrated that they were familiar with the new procedures.

Overall, the service's policies and procedures, the support provided by the LAAC nurse, and the attention given by staff to ensuring that the health needs of young people were met, meant that the service's performance in relation to this quality statement was very good.

Areas for Improvement

The manager should continue to review the arrangements for the provision of a healthy, balanced diet within the service as discussed during the inspection.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Quality Theme 2: Quality of Environment

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 environment within the service.

Service Strengths

Young people were encouraged to give their views about all aspects of the service in a variety of ways, including formal and informal discussions on a 1:1 and a small group basis.

Minutes of young people's meetings clearly showed that they had been asked for their views about the details of the environment, and that these had been listened to and acted upon, eg the decor and equipment in the new living room had been decided upon in conjunction with young people. The bedrooms also showed a greater degree of personalisation, and there had been an overall improvement in the standard of furniture and fittings within the bedrooms.

Areas for Improvement

The service could further improve the extent to which young people were involved in assessing and improving the quality of the environment in the service, for example by encouraging them to contribute artwork, photographs, or by developing the outside areas of the premises(see recommendation).

Grade awarded for this statement

4 - Good

Number of Requirements

0

Number of Recommendations

1

Recommendations

1.

The service should continue to develop opportunities for young people to contribute to the quality of the environment - Standard 5 - Your environment

Statement 2

We make sure that the environment is safe and service users are protected.

Service Strengths

The service had good arrangements in place to make sure that the environment was safe and service users were protected.

The building was safe and secure and in a good state of repair. The use of a secure entry system and the presence of CCTV outside the premises contributed to a sense of security. All young people who responded via the pre-inspection questionnaires, or who commented during the inspection, indicated that they felt safe and secure at The Elms. Appropriate policies, procedures and risk assessments were in place to ensure the safety and security of the young people. There were individual assessments of risk for each young person, and also in relation to specific activities. The incidence of accidents and serious incidents was very low, indicating that policies, procedures and risk assessments were effective and well-implemented.

There was a range of policies which promoted a healthy lifestyle for young people, including a no-smoking policy, and a policy on the safe use of mobile phones.

A recent development within the service had been the introduction of internet availability for young people, supported by a policy and training programme which used the expertise of the Child Exploitation and Online Protection Centre (CEOP) to make both young people and staff aware of the potential risks and how to manage these safely.

During the inspection, staff were observed to pay very good attention to issues of internet safety, while managing to deal respectfully and sensitively with young people in relation to this.

All members of staff were fully trained in the use of the CALM approach to managing behaviour, and had established a culture where de-escalation was used as a first response, with physical intervention used very much as a last resort. During the inspection, staff communicated respectfully and effectively with young people.

Since the last inspection, the alterations to the unit have improved the quality of the communal living space, as well as improving the supervision of the young people within the building.

Areas for Improvement

The manager advised that the service provider was actively planning further improvements, with a view to increasing the homeliness of the unit. The current access to the building is problematic, and plans are in place to redesign and refurbish the entrance to the close support unit, separating it completely from access to the secure part of the premises.

In implementing these alterations, the service provider should take the opportunity to address the problems which have arisen in the past by providing an entry/exit system which ensures the security of young people without compromising their right to come and go freely (see recommendation).

Thye service could further improve the quality of the environment by refurbishing the bathrooms to make them more homely and ess "institutional".

Grade awarded for this statement

4 - Good

Number of Requirements

0

Number of Recommendations

2

Recommendations

1.

In planning for the alterations to the entrance to the building, the service provider should take the opportunity to address the problems which have arisen in the past by providing an entry/exit system which ensures the security of young people without compromising their right to come and go freely - Standard 6 - Feeling safe and secure

2.

The service should consider further improving the environment by refurbishing the bathrooms to make them more homely and less "institutional" - Standard 5 - Your environment

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 2 - Weak

Statement 1

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

Service Strengths

The service had very good systems in place to enable young people to participate in assessing and improving the quality of staffing within the service.

This included the regular and meaningful involvement of young people in the recruitment and selection of staff, with the support and guidance of independent facilitators.

The Children's Rights Officer had worked with young people to draw up a leaflet which outlined their views of the desirable qualities of care staff. This was used to promote a positive ethos within the staff team.

In addition, young people were able to use a range of informal and formal systems to give their views about a range of issues, including staff.

The complaints system was understood by young people, and the service evidenced that it listened to their views, and took appropriate action where necessary. The young people had ready access to the external manager of the service and external agencies, including the Children's Rights Officer, both of whom prioritised the rights and the welfare of young people within the service.

Areas for Improvement

none noted at this inspection

Grade awarded for this statement
5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Statement 2

We are confident that our staff have been recruited, and inducted, in a safe and robust manner to protect service users and staff.

Service Strengths

A centralised audit of Dundee City Council's recruitment policy and procedure was carried out in April 2009. At the time of writing this report, the findings of this audit were not available for publication.

Through examination of the policy and discussion with the manager, however, it was established the staff recruited by this service were subject to a robust recruitment process which involved Enhanced Disclosure Scotland checks being carried out, and appropriate references being followed up prior to employment.

Staff were also subjected to a varied interview and selection process, including group interviews, written submissions and interviews by service users, to establish that they had the necessary skills and values to enable them to do the job.

During the inspection of the service, we spoke to a member of staff who had recently been recruited and inducted into the service. She confirmed that she had had a very positive experience of starting work at The Elms, and had been an additional member of staff on duty for 4 weeks before becoming an active member of staff on shift. During this time, she had become familiar with the policies and procedures of the service, and had also had the opportunity to get to know the young people well before adopting a key role on shift.

Since starting in the service about eight months ago, she had done a range of relevant core training including first aid and CALM.

During the inspection, the new member of staff presented as positive, confident, and had very constructive interactions with young people.

Areas for Improvement

Although the staffing situation was generally better than it has been previously in this unit, some staff sickness, but mainly an inflexible rota, resulted in the service failing to meet its staffing schedule on a regular basis. During the week of the inspection, the service only had the required number (3) of staff on duty on 7 out of 14 shifts, and this with the unit operating at capacity.

An examination of rotas for the month of August showed that the service met its staffing schedule on 63% of shifts.

Compliance with the staffing schedule, in this case having 3 members of staff on every shift, is a condition of continued registration with the Care Commission, and must be recognised as such by the service (see requirement).

The failure of the service to meet the staffing schedule is the reason why, despite some improvements in other aspects of the service, this statement is graded as 2 - weak.

Grade awarded for this statement

2 - Weak

Number of Requirements

1

Number of Recommendations

0

Requirements

1.

Requirement 1: The service provider must ensure that there are sufficient staff on duty at all times to meet the needs of service users.
This is in order to comply with SSI/2002/Regulation 114 (13)(a) - a requirement to ensure that at all times suitably qualified and competent persons are working in the care service as are appropriate for the health and welfare of service users.
Timescale for implementation: 13 November 2009.

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

The service had good systems in place to enable young people to participate in assessing and improving the quality of management and leadership within the service. As described under quality theme 3, statement 1, young people were involved in the recruitment and selection of staff in the service, including managers.

They had ready access to the external manager of the service who responded seriously to any complaints or concerns.

They were consulted about policies and procedures which had an effect on their lives. Most recently, they had been closely involved in deciding the details of how access to the internet would be managed within the unit.

The evaluation forms which the service had begun to use to get feedback from young people who had left the service and other people involved in their care provided information which the manager and staff were beginning to use to reflect on their practice. The staff team had started to think about how to use the feedback in a more structured way to develop practice within the service.

As well as having an input into the development of policy and practice in the unit, some young people from The Elms were involved through Who Cares? Scotland in events which helped to develop national policy for looked after children.

Areas for Improvement

The service should further develop the ways that it uses feedback from young people and other relevant people to evaluate and improve the service.

Grade awarded for this statement

4 - Good

Number of Requirements

0

Number of Recommendations

0

Statement 2

We involve our workforce in determining the direction and future objectives of the service.

Service Strengths

The staff team at The Elms contributed to the development of the service in a number of ways, including through regular team meetings, individual supervision sessions, and involvement in departmental working groups.

Team meeting minutes evidenced that staff were involved in discussion and implementation of new policies and procedures: for example, it was noted that staff had contributed very effectively to the implementation of the new approach to providing internet access.

The staff team had also been actively involved in the consultation process for drawing up a new rota for the service.

During the inspection, the manager of the service demonstrated her commitment to empowering the staff team to take on responsibility for developing the service and making decisions to improve the care of young people. The improvement in the focus on care planning as described under quality theme 1, statement 1, is a very good example of how enabling staff to take on additional responsibility contributes to the overall development of the quality of the service. Other tangible results of this approach were that quality of furnishings in the bedrooms had greatly improved, and a very successful unit holiday had taken place over the summer.

Staff from the service had been involved in developing key policies for residential child care, including the nutritional policy and the recently introduced medication policy. In addition, the external manager had established a residential childcare working group which comprised staff at all levels who met to plan the implementation of national and local policy across the residential units.

In discussion, the staff team were positive and enthusiastic about their role in the development of the service.

Areas for Improvement

The service should continue to build on the improvements made in relation to involving staff in taking forward the direction and development of good practice within the service.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Other Information

Complaints

There have been no complaints since the last inspection.

Enforcements

There has been no enforcement action in respect of this service.

Additional Information

No 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 Commission re-grading the Quality Statement within the Management and Leadership Theme as unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).

Summary of Grades

Quality of Care and Support - 5 - Very Good	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
Quality of Environment - 4 - Good	
Statement 1	4 - Good
Statement 2	4 - Good
Quality of Staffing - 2 - Weak	
Statement 1	5 - Very Good
Statement 2	2 - Weak
Quality of Management and Leadership - 4 - Good	
Statement 1	4 - Good
Statement 2	5 - Very Good

Inspection and Grading History

Date	Type	Gradings
16 Mar 2009	Unannounced	Care and support 4 - Good Environment 3 - Adequate Staffing 4 - Good Management and Leadership <i>Not Assessed</i>
11 Sep 2008	Announced	Care and support 4 - Good Environment 3 - Adequate Staffing 4 - Good Management and Leadership 4 - Good

Terms we use in our report and what they mean

Action Plan - When we inspect a service, or investigate a complaint and the inspection report highlights an area for improvement; either through recommendations or requirements, the action plan sets out the actions the service will take in response.

Best practice statements/guidelines - This describes practices that have been shown to work best and to be achievable in specific areas of care. They are intended to guide practice and promote a consistent and cohesive approach to care.

Care Service - A service that provides care and is registered with us.

Complaints - We have a complaints procedure for dealing with any complaint about a registered care service or about us. Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

We investigate all complaints which can have more than one outcome. Depending on how complex the complaint is, the outcomes can be:

- upheld - where we agree there is a problem to be resolved
- not upheld - where we don't find a problem
- partially upheld - where we agree with some elements of the complaint but not all of them.

Enforcement - To protect people who use care services, the Regulation of Care (Scotland) Act 2001 gives the Care Commission powers to enforce the law. This means we can vary or impose new conditions of registration, which may restrict how a service operates. We can also serve an improvement notice on a service provider to make them improve their service within a set timescale. If they do not make these improvements we could issue a cancellation notice and cancel their registration.

Disclosure Scotland- Disclosure Scotland provides an accurate and responsive disclosure service to enhance security, public safety and protect the vulnerable in society. There are three types or levels of disclosure (i.e. criminal record check) available from Disclosure Scotland; basic, standard and enhanced. An enhanced check is required for people whose work regularly involves caring for, training, supervising or being in sole charge of children or adults at risk; or to register for child minding, day care and to act as foster parents or carers.

Participation - This describes processes that allow individuals and groups to develop and agree programmes, policy and procedures.

Personal Plan - This is a plan of how support and care will be provided. The plan is agreed between the person using the service (or their representative, or both of them) and the service provider. It is sometimes called a care plan mostly by local authorities or health boards when they commission care for people.

How you can use this report

Our inspection reports give care services detailed information about what they are doing well and not so well. We want them to use our reports to improve the services they provide if they need to.

Care services should share our inspection reports with the people who use their service, their families and carers. They can do this in many ways, for example by discussing with them what they plan to do next or by making sure our report is easily available.

People who use care services, their relatives and carers

We encourage you to read this report and hope that you find the information helpful when making a decision on whether or not to use the care service we have inspected. If you, or a family member or friend, are already using a care service, it is important that you know we have inspected that service and what we found. You may find it helpful to read previous inspection reports about his service.

The Care Commission

We use the information we gather from all our inspections to report to Scottish Ministers on how well Scotland's care services are performing. This information helps us to influence important changes they may make about how care services are provided.

Reader Information

This inspection report is published by the Care Commission. It is for use by the general public. You can get more copies of this report and others by downloading it from our website www.carecommission.com or by telephoning 0845 603 0890.

Translations and alternative formats

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

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

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

هذه بایتسد ىم وونابز رگىد روا رولکش رگىد رپ شرازگ تعاشا هى

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

یرخأ تاغل بو تاقيسنتب بلطلا دن ع رفاوتم روشنملا اذه

本出版品有其他格式和其他語言備索。

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

Telephone: 0845 603 0890

Email: enquiries@carecommission.com

Web: www.carecommission.com

Improving care in Scotland