

# Care service inspection report

Full inspection

## Curo Salus Carruthmuir Care Home Service

Steppends Road  
Bridge of Weir



HAPPY TO TRANSLATE

Service provided by: Curo Salus Limited

Service provider number: SP2004006972

Care service number: CS2012311363

Inspection Visit Type: Unannounced

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and set out improvements that must be made. We also investigate complaints about care services and take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

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## 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	6	Excellent
Quality of environment		N/A
Quality of staffing		N/A
Quality of management and leadership	5	Very Good

### What the service does well

The service provides intensive therapeutic support to young people, with psychological assessment and support supplemented by high levels of support from residential staff. The aim is to help young people develop healthy attachments, and to this end there is great focus on building positive relationships with young people. These aims are supported by high staffing levels within the service.

### What the service could do better

We made some suggestions to the service about improving recording of work and tracking outcomes for young people.

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

The service has added to the management team by appointing a fourth Senior Team Leader and a night shift co-ordinator. The provider has also developed a policy on Child Sexual Exploitation.

## Conclusion

As a result of the high levels of support offered, there has been much improved outcomes for the majority of young people who have used the service.

# 1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at [www.careinspectorate.com](http://www.careinspectorate.com)

This service registered with the Care Inspectorate on 7 December 2012.

The service has been registered since and is a care home service for seven children and young people. The house is a converted farm-house that has been substantially upgraded and modernised to meet the needs of the children and young people who live there. The house is located in a rural area a few miles outside Bridge of Weir.

Curo Salus note the following aims on their website:

To provide safe, therapeutic, caring environments for children who have attachment problems, due to adverse circumstances and emotional trauma in their early years.

The accommodation comprises:

- Seven en suite bedrooms
- A kitchen
- A laundry
- A toilet
- An office
- A living room
- A conservatory
- A very large garden area
- A chalet in the grounds, which can be used for supporting young people to develop independence.

The house is very well furnished and maintained.

## Recommendations

A recommendation is a statement that sets out actions that a care service provider should take to improve or develop the quality of the service, but where

failure to do so would not directly result in enforcement.

Recommendations are based on the National Care Standards, SSSC codes of practice and recognised good practice. These must also be outcomes-based and if the provider meets the recommendation this would improve outcomes for people receiving the service.

## Requirements

A requirement is a statement which sets out what a care service must do to improve outcomes for people who use services and must be linked to a breach in the Public Services Reform (Scotland) Act 2010 (the "Act"), its regulations, or orders made under the Act, or a condition of registration. Requirements are enforceable in law.

We make requirements where (a) there is evidence of poor outcomes for people using the service or (b) there is the potential for poor outcomes which would affect people's health, safety or welfare.

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

**Quality of care and support - Grade 6 - Excellent**

**Quality of environment - N/A**

**Quality of staffing - N/A**

**Quality of management and leadership - Grade 5 - Very 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 0345 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

This unannounced inspection was carried out by an inspector from the Care Inspectorate on 20 June 2016 between 5 pm and 6.15 pm and 21 June 2016 between 9.15 am and 6 pm. Feedback to the manager was given on 27 June 2016.

Prior to inspection, we looked at the service's self-assessment and annual return, any notifications from the service received by the Care inspectorate and the last inspection report. We also read questionnaires, four completed by young people and four by staff members.

At inspection, we:

- Looked around the house
- Spoke with six young people
- Spoke with the manager
- Spoke with five members of staff
- Reviewed four case files
- Reviewed three supervision and training records
- Reviewed all staff's performance development plans
- Read paperwork in relation to safe care management and other incidents
- Read team meeting minutes
- Read minutes of young people's meetings
- Read various policy documents
- Read the house development plan
- Reviewed quality assurance information.

Following inspection we spoke with social workers and family members of young people accommodated within the service.

### **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.firescotland.gov.uk](http://www.firescotland.gov.uk)



## 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.

The service provided us with a detailed self-assessment. They identified areas of good practice and areas for development.

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

We spoke with six young people who are currently accommodated at the service. Feedback from these young people was overwhelmingly positive, with a common theme being the very good relationships they enjoyed with staff.

Comments from young people included:

"It feels like a family".

"This place is excellent".

"Staff are really nice here and we have a lot of fun".

"It's a nice environment to live in".

One young person advised they wished some changes made to the way the service worked with them. This was discussed with the manager, who advised she was aware of this issue and it would be addressed during care planning meetings.

### Taking carers' views into account

We were able to speak to one parent of a young person placed at Carruthmuir.

They commented that:

"It's brilliant, staff are very well trained, we're very happy (with the service) and young people have an opportunity to flourish".

## 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: 6 - Excellent

#### Statement 3

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

#### Service strengths

At this inspection, we found the performance of the service was excellent for this statement. We spoke with young people, staff, the manager and external agencies. We also reviewed case files, read team meeting minutes, staff supervision and training records, information in relation to safe crisis management and the provider's Child Sexual Exploitation policy.

We looked at admission processes and found these were working exceptionally well. The manager and other staff visit young people prior to admission to begin the assessment process. Once the referral is agreed as appropriate, young people had the opportunity to visit the service and even have an overnight stay prior to admission. Young people spoke of being made to feel very welcome by the staff group.

Following admission, the provider's psychologist continues the assessment process, focussing on the young person's cognitive and emotional development, and from this assessment a therapeutic care plan would be developed, with this plan being implemented by an assistant psychologist and supported by education and residential staff. Therapeutic sessions take place within the school environment. Young people are also supported during the school day by residential staff. There is therefore a very integrated way of working, with psychologists, education staff, residential staff and young people all working together to agreed aims and objectives.

Care plans are very comprehensive and are reviewed by the young person and the team supporting them around every two months. Progress is measured with clear reference to the Scottish Government policy Getting It Right for Every Child (GIRFEC) and identified wellbeing indicators (safe, healthy, active, nurtured, achieving, respected, responsible and included). Comprehensive monthly reports are sent to placing social workers which are also linked to the wellbeing indicators. The outcome of the approach of integrated working and regular reviews of care plans is that outcomes for young people are assessed and intervention changed if required. Young people spoke of being fully involved in this process, and this was also evident from reviewing care plans.

The service bases its approach on a commitment to promoting positive attachments for young people. Consistent with this, they have a very high commitment to promoting family contact for young people. Crucially, this includes promoting sibling contact, and there were numerous examples of the service going to great lengths to ensure young people were able to see loved ones, even when geography was an obstacle to this.

The service operates a case team system, with four residential staff having responsibility for supporting a young person. The benefit of this approach is that young people have a number of staff who they can approach and who will have a very good knowledge of their background and care plan. It also means that if any staff member is absent, tasks which require to be completed can be delegated immediately to other members of the case team.

We found very good evidence of positive outcomes being achieved for young people. Educationally, young people had been supported to achieve qualifications and older young people had accessed college placements. There had also been very noticeable improvement in emotional wellbeing for a number of young people. One social worker commented that a young person had been able to open up and talk about his feelings in a way he had previously been unable to do.

Behaviour support plans were in place for all young people and were very comprehensive, with a clear focus on managing risk both within the service and within the community. Linked to this, there was a very clear routine and

structure within the service, which had supported young people to keep themselves safe. This approach was supported by staffing within the service; there is a two hour handover period between late shift and night shift, with both staff groups working together to support young people with bedtime routines. One young person commented that they found the structure at bedtime very helpful.

Staffing levels within the service are very high, with four or five staff plus a Senior Team Leader available during the day. Night shift presently comprises two waking staff, but a night shift co-ordinator is in the process of being appointed to support the night staff. There is an on-call management system for staff if any crisis develops during the night.

This high level of staffing is integral to the service meeting its objectives. It means there are staff available to spend individual time with young people, facilitate extra-curricular activities or simply be there to talk to.

In the 2016/17 inspecting year the Care Inspectorate is scoping child sexual exploitation (CSE) practice in children and young people's services. This is part of our contribution to 'Scotland's National Action Plan to tackle Child Sexual Exploitation' and focusses on frameworks of CSE practice, staff understanding and care planning outcomes.

Since the last inspection report, the service has developed a policy on Child Sexual Exploitation. All staff have subsequently attended training on CSE, which covered risks both online and in the community. Staff members we spoke with demonstrated a good knowledge in relation to CSE and clearly had absorbed learning from this training.

Managers and staff members also displayed a very good grasp in regard to identifying the risk and vulnerability indicators of CSE and evidenced a clear understanding of the actions required of them in order to protect young people from potential or further harm.

The case tracking sample evidenced that young people at risk had been appropriately identified. There were care plans in place to maximise the safety of these young people, and the service regularly reviewed care planning

strategies in conjunction with other agencies.

In addition, one of the topics discussed at a young person's meeting was in relation to online dangers, and this led to a very good discussion among young people. This is evidence of the service involving and working with young people to develop their understanding so they are better prepared to manage different scenarios and keep themselves safe.

### Areas for improvement

While we found care planning was to a very high standard, we observed that the service did not use a quality assurance tool to measure progress for young people, for example the outcomes star, which would have given young people a visual representation of the progress they had made. Further, we felt that keytime records could be recorded in a more focussed way, linked to wellbeing indicators in the same way as care plans and monthly summaries. The manager felt these suggestions were positive and advised they would be introduced.

We noted in one of the behaviour support plans information which was concerning but the source of this information had not been mentioned. The manager agreed she would check all behaviour support plans and care plans on young people to ensure all information held on young people was accurate.

### Grade

6 - Excellent

**Number of requirements - 0**

**Number of recommendations - 0**

## Statement 5

“We respond to service users' care and support needs using person centered values.”

### Service strengths

At this inspection, we found the performance of the service was excellent for this statement. We spoke with young people, staff, the manager and external agencies. We also looked around the house, observed interactions between young people and staff, read information on participation and read minutes of young people's meetings.

We observed very good interactions between young people and staff members. These were characterised by respect, good humour and playfulness. We noticed that many young people were keen to spend time with staff; on both days we visited several young people were playing football in the back garden with staff. We observed young people sitting down for their evening meal with staff. One young person commented the service was "like a family" and this was also the impression we formed during inspection.

There is a welcome booklet for all young people who are accommodated, which gives full information about support available, expectations and responsibilities for both staff and young people. This also offers clarity for young people about routines and structures which is often vital in supporting young people to regulate their emotions and behaviour.

We found that care plans were personalised and young people were fully involved in care planning. All young people attended their care planning meetings and local authority reviews, and in some cases this represented significant progress for young people.

Birthdays and special events are celebrated, as are achievements by young people. The service goes to great lengths to make these events special and personalise them for the young person. This has the effect of promoting a sense of belonging for young people within the service.

The provider has a participation policy and there were regular opportunities for young people to contribute to the development of the service. This included a participation forum, with one young person from each Curo Salus house attending, and the service's own young people's meetings. There was evidence that suggestions made by young people at these meetings were taken seriously and where appropriate acted upon, for instance in relation to healthy food choices.

There was a very good commitment to young people being involved in activities of interest to them. Young people were supported to attend extra-curricular activities including sports clubs. One young person spoke very positively of the support he had received from staff to attend his sport, with his keyworker being a regular spectator as he played. Other young people were supported to pursue other interests, such as art and music. This had the outcome of supporting young people to realise their potential.

There was also very good evidence of regular trips for young people to age appropriate activities, such as cycling, horse riding, shopping and the beach. Young people spoke very positively of these experiences.

We found good evidence of independent advocacy being provided, with both "Who Cares Scotland" and "Your Voice" being regular visitors to the service. This provides young people with the opportunity to speak to an independent external body if they had any concerns.

We viewed some young people's bedrooms and these had been personalised by the young people and reflected their own individual interests and styles. This had the benefit of helping young people feel at home and settle in.

Young people were involved in the recruitment procedures of the service. Prospective staff would carry out two shadow shifts prior to interview with young people and staff. Feedback is given by young people, based on their observations from the shadow shifts and views of the interview. This is an approach which allows young people to take in and analyse information with the support of existing staff, as well as helping them to play an important role in recruitment decision making.



## Areas for improvement

We did not identify any specific areas for improvement in relation to this statement. The service should continue to develop innovative ways to enhance the sense of belonging which young people feel within the service.

## Grade

6 - Excellent

**Number of requirements - 0**

**Number of recommendations - 0**

## Quality Theme 2: Quality of Environment

Quality theme not assessed

## Quality Theme 3: Quality of Staffing

Quality theme not assessed

## Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 5 - Very Good

### Statement 2

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

#### Service strengths

At this inspection, we found the performance of the service was very good for this statement. We spoke with young people, staff, the manager and external agencies. We also read staff supervision, training and development records and the house development plan.

We found there was evidence of staff members being supported to progress throughout the organisation. For instance, some residential staff had recently been appointed to management positions within the service.

Every member of staff had a personal development plan which identified progress and future learning needs, with training opportunities linked to those needs. This means there is a clear pathway for staff to progress and develop.

Staff members were involved in preparing the self assessment which the service prepared for the Care Inspectorate. This was a comprehensive document which demonstrated that staff had spent some time considering the work they do and the impact it has.

The service is in the process of organising "C in the Park" which will be a fun day held in the grounds of Carruthmuir. It was evident from team meeting minutes and young people's meetings that staff and young people were fully involved in organising this day and tasks had appropriately been delegated to staff members, who in turn worked with young people to complete agreed tasks. Other events, such as last year's Halloween Party and Christmas celebrations, were organised in a similar way.

The provider has recently undertaken a staff survey, and while full results from this have not yet been collated, one of the areas of development identified from this was to clarify the role of residential staff while supporting young people within the educational resource. The provider advised that there were plans to set up a working group involving all levels of staff to address this issue. This is due to be in place by August 2016.

Within the house development plan, there was evidence of individual staff members being identified to carry forward specific areas of work. This has the expected outcome of developing skills and confidence together with ensuring accountability for tasks within the development plan.

### **Areas for improvement**

The service should further develop the involvement of all staff in improving the service, either through individual performance development reviews, the use of working parties or any other methods deemed appropriate.

### **Grade**

5 - Very 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

At this inspection, we found the performance of the service was very good for this statement. We spoke with young people, staff, the manager and external agencies. We also looked at feedback from stakeholders, quality assurance information and the house development plan.

The manager of the service was experienced and knowledgeable, but was also approachable and it was evident that she had good relationships with staff and young people alike. She carried out regular audits of case files and, from our reading of these files, it was clear that these audits had, in nearly all cases, been rigorous.

We found that there was evidence of the service identifying areas of development and acting on this. For instance, they are in the process of recruiting a night shift co-ordinator to give extra management support to night staff, in addition to current on-call support.

The service has a supervision policy where staff are supervised every eight to twelve weeks. In addition, informal supervision is provided, dependent on the needs of individual staff members. New staff are provided with a very good induction, including necessary training on required areas such as child protection and safe crisis management. They are also expected to shadow more experienced workers in their first few shifts. There is, therefore, significant support and development of staff. We noted through our review of supervision records that any performance issues were appropriately identified and addressed.

The provider's recruitment process is robust, with prospective employees undergoing two formal interviews, a young person's interview and two shadow shifts. This process means there is a greater chance of successful candidates

being able to meet the requirements of the job. A six month probationary period is in place for all new staff, which provides a further method of quality assuring staff performance.

The service had sent out feedback questionnaires to stakeholders, including young people, social workers and other professionals, and relatives of young people. There had been a significant number of responses from young people, with a lesser number of responses from professionals. The feedback was overwhelmingly positive.

The service has also developed a house development plan. This was produced in April 2016 and addresses how the service will maintain and improve on its performance over the next year.

### Areas for improvement

While the service has sought feedback from stakeholders and had also carried out their own staff survey, and there were plans to hold a meeting of stakeholders to discuss their feedback and potential improvements to the service, this had not as yet happened, and it was not clear how stakeholder, staff or young people feedback had influenced the house development plan. In addition, while the educational aspect of the service had developed a report into the achievements of pupils, there was no analysis of non-educational outcomes for young people within the service, and it would be beneficial if this could be done so that the measuring and improving of outcomes for young people is a central feature of the house development plan (refer to recommendation 1 under this statement).

### Grade

5 - Very Good

**Number of requirements - 0**

### Recommendations

**Number of recommendations - 1**

1. The service should analyse feedback from all stakeholders and incorporate learning from this into the house development plan. The service should also measure outcomes for young people using the service and incorporate how to further improve outcomes for young people in the development plan.

National Care Standards, care homes for children and young people: Standard 7  
- Management and staffing.

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

### **Previous requirements**

There are no outstanding requirements.

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

### **Previous recommendations**

There are no outstanding recommendations.

## **6 Complaints**

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

## **7 Enforcements**

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



## 8 Additional Information

There is no additional information.

## 9 Inspection and grading history

Date	Type	Gradings	
21 May 2015	Unannounced	Care and support Environment Staffing Management and Leadership	6 - Excellent 6 - Excellent 6 - Excellent 6 - Excellent
13 May 2014	Unannounced	Care and support Environment Staffing Management and Leadership	6 - Excellent 6 - Excellent 6 - Excellent 6 - Excellent
30 Apr 2013	Unannounced	Care and support Environment Staffing Management and Leadership	6 - Excellent 6 - Excellent 6 - Excellent 6 - Excellent

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