



**East Ayrshire**  
COUNCIL

## **SOCIAL WORK INSPECTION UNIT**

### **INSPECTION REPORT**

**Bellsford House  
Kilmarnock  
East Ayrshire Council**

**4<sup>th</sup> September 2001**

**Announced**

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## 1 - INSPECTION INFORMATION

<b>Registration Category:</b>	
<b>Registered Capacity:</b>	Residential: 6 Day:
<b>Number At time of inspection</b>	Residential: 6 Day:
<b>Type of inspection</b>	Announced
<b>Inspector(s):</b>	Mr, George Stewart Mrs. Mina Cassidy
<b>Date of last inspection:</b>	4 <sup>th</sup> September 2001
<b>For further information on this establishment contact</b>	Children and Families Team Civic centre Kilmarnock.

## 2- Description of establishment, services and facilities.

Bellsford is an impressive sandstone building located in the centre of Kilmarnock. It is located closely to many local amenities and is within reasonable distance of a number of schools.

It currently provides accommodation for 6 young people of varying ages. This number has been increased on a relatively frequent basis often as result of a lack of other suitable resources.

The physical environment has been improved significantly in recent months. This has included a new fitted kitchen, carpeting, decoration and some external improvements. It is hoped that this programme of improvements as well as the purchase of new furnishings will continue on a regular basis.

There has been a limited number of changes in personnel including the appointment of a new senior residential worker. This should help the manager retain the frequency of formal supervision and allow the continuation of staff development through training.

Each child is treated as an individual with access to appropriate information and a detailed care plan outlining what happens in their day to day lives. Inspectors were advised that children are encouraged to participate in care planning however the care plan itself does not reflect this.

The system of communication is more robust within the unit with children's and staff meetings occurring at prescribed intervals. The content of minutes reflect appropriate debate and consideration being given to a wide range of topics.

The manager appears to offer dynamic and supportive leadership something, which appears appreciated by both staff and young people. She states that relationships with other social work colleagues and other agencies has improved significantly in the months she has been unit manager.

**Inspector:** \_\_\_\_\_

**Date** \_\_\_\_\_

**Head of IRC Unit:** \_\_\_\_\_

**Date** \_\_\_\_\_

## 3 - QUALITY OF LIFE SUMMARY

In this section the inspectors set out their views on the quality of life the establishment is achieving for service users. Each heading is followed by a short statement setting out the standard that is expected to be achieved. This is followed by comments from the inspector giving their findings.

**1. Good Basic Care** *"Children and young people are well cared for physically and emotionally by an experienced staff team who listen to the views of the children and young people. They are given praise and recognition for effort and achievement."*

The age range of young people accommodated at Bellsford means that there is significant attention paid to basic care tasks. This appears to have impacted positively on younger children and older members of the group. It has been stated that the older group have their practical care needs considered perhaps more carefully than might be the case in a house full of older adolescents. The young people at Bellsford have a range of different needs that are met using the guidance of individual care plans.

**2. A feeling of safety** - *"Children and young people feel safe, know what is acceptable and unacceptable behaviour and are informed about likely consequences of their actions. They are able to report concerns and know that their concerns will be listened to and taken seriously by staff"*

Most young people indicated that they feel comfortable speaking to at least one member of staff. They are able to complain but are currently without a Who Cares advocate although attempts are being made to recruit someone into that post. There are agreed sanctions and young people have access to this and other relevant information.

Building security is a concern that requires to be addressed.

**3. Rights and Responsibilities** - *"Children and young people know about their rights and responsibilities and how to access support to help exercise them. They are given the freedom to make age appropriate choices and are supported and helped to learn from any mistakes they may make."*

Information about rights, services etc. is available to young people. It is not yet available in a suitable format although it is hoped that this will be completed soon. The unit has identified gaps in the corporate information and is in the process of filling this gap.

**4. Individuality and Development** - *" Children and young people have their individual needs addressed, are supported to fulfil their potential and are treated with respect and dignity as individuals."*

All young people have a detailed individual care plan. This outlines the areas where they require support and generally highlights how this will be offered. In order to improve this further young people must be actively encouraged to participate in the care planning process. There is currently no way of evidencing that this is taking place.

Staff must ensure that they record clearly how they intend to support young people and how this might differ from what is achieved. There is evidence that children participate in activities appropriate to them although there is no clear indication how special talents or aptitudes might be developed.

**5. Health** - *"Children and young people have their health needs assessed and met; they know their rights to health care and how to access health care services; are supported in making age appropriate choices in relation to their health."*

Records observed by inspectors indicate that young people are encouraged to make age appropriate choices about health issues. There is also evidence that health concerns are treated seriously.

**6. Education** - *"Children and young people receive appropriate support to access education and training that helps them fulfil their potential. They receive encouragement and assistance to access further education and training wherever possible.."*

Educating young people is not the sole responsibility of Bellsford. They should be part of a partnership with other agencies such as schools and other specialist services. Some children do not receive much educational input and this is a source of frustration for staff and in some cases the children themselves. The unit should strive to ensure that the educational component of care plans is given greater significance even although they do not see themselves as the lead agency.

**7. Leaving a Care Placement** - *"Children and young people are well prepared for any move out of their care placement, are supported to move to appropriate other accommodation at the right time"*

*for them including progress to safe training or to employment."*

Young people moving to other resources on a planned basis would appear to get appropriate levels of support from staff and specialist workers. There is however variation in the standards of service and steps should be taken to ensure best practice at all times. This should include a review of documentation within the unit in addition to consideration of a specialist co-ordinator that may or may not be linked to a planned community post for the residential units.

**8. Involving Families** -*"Children and young people receive support to maintain contact with parents/cares, families, brothers and sisters and other significant people. Whenever it is in child's best interests, care will be planned and provided by parents and staff working together."*

Contact arrangements are detailed in care plans and observations suggest families are made welcome and encouraged to participate in the care of young people. Inspectors were unable to secure the views of parents at this inspection and will attempt to do so in the near future.

#### 4 - Records & Procedures Standards

	Date Checked	Standard Acceptable?	Findings at current Inspection
<b>Unit development plan including function &amp; objectives</b>	4/9/01	In part	The unit has a functions and objectives document that is in the process of being linked to a development plan.
<b>Information pack including details of service users rights &amp; responsibilities</b>	4/9/01	Yes	Young people have access to all of the information to be included in a corporate document entitled My Diary. This document is in the final stages of preparation and should be available in its published format soon. The unit is also in the process of completing a less formal document that will offer practical information about rights and expectations in Bellsford.
<b>Admission/ discharge record</b>	4/9/01	Yes	
<b>Medication</b>	4/9/01	Yes	Each young person has an individual medication record backed up by a centrally held unit record. All entries were complete.
<b>Accidents</b>	4/9/01	Yes	Accident records are well maintained. The day to day manager should regularly view and audit accident book entries and note by signature that she has done so.
<b>Incident/violent incident</b>	4/9/01	Yes	A monitoring group including the units external manager and the TCI trainer has added a greater significance to the monitoring and recording of violent incidents.
<b>Fire safety and checks</b>	4/9/01	No	There are gaps of up to 3 weeks in the early part of 2001. The past two months has seen checks carried out at the required frequency.
<b>Risk assessments</b>	4/9/01	No	The management of risk is an issue discussed by staff and young people. There is no formal documentation to evidence this. Efforts should be made to carry out general risk assessments on activities, outings, holiday's etc.
<b>(moving/ handling)</b>	4/9/01	N/A	
<b>(COSSH)</b>	4/9/01	Yes	
<b>Restraint (if appliqué)</b>	4/9/01	Yes	A care and control policy is in place.

<b>Complaints/relevant advocacy support</b>	4/9/01	Yes	The unit has a suitable complaints procedure. Attempts have been made to recruit a Who Cares worker. To date this has proved unsuccessful. Consideration should be given to an interim arrangement if further recruitment efforts do not secure a new worker.
<b>Management of personal allowances and relevant records</b>	4/9/01	Yes	Young people and staff sign an individual sheet to account for each financial transaction.
Statutory documentation	4/9/01	In part	Inspectors viewed six case files and found one did not have the appropriately completed Looked After paperwork
Child protection procedures	4/9/01	Yes	Training on new procedures has been made available to a number of staff.

### Comments

### Requirements

The unit is required to ensure there are no gaps in Fire records.

The unit is required to introduce risk assessment documentation.

### Recommendations:

It is recommended that the unit log all attempts made to secure statutory documentation within prescribed timescales.

## 5 - Management and Staffing Standards

	<b>Date Checked</b>	<b>Standard Acceptable?</b>	<b>Findings at current inspection</b>
<b>Recruitment practices</b>	4/9/01	Yes	
<b>Staff meetings</b>	4/9/01	Yes	Staff meetings take place on a fortnightly basis. This frequency lessened slightly through the summer months as a result of staff and young people's holidays.
<b>Shift handover</b>	4/9/01	Yes	All shifts are preceded by a shift handover.
<b>Staff supervision</b>	4/9/01	Yes	The manager has until recently been responsible for the regular supervision of 11 staff. Recent appointments and transfers should alleviate that burden. Supervision has been maintained at an acceptable level.
<b>Training records</b>	4/9/01	Yes	All staff have a Personal development plan that indicates what training has been undertaken and what training is planned for the future. A record is also held centrally.
<b>Training during last year</b>	4/9/01	Yes	Induction, TCI, child protection, human development, and SVQ.
<b>Rotas</b>	4/9/01	Yes	
<b>Contracts of employment</b>	4/9/01	Yes	

<b>Job descriptions</b>	4/9/01	Yes	
<b>Absence levels/ monitoring</b>	4/9/01	Yes	These records are maintained regularly by the day to day manager and admin worker.
<b>Staff Turnover</b>	4/9/01	In part	The level of staff turnover is within acceptable boundaries. If added to the number of long term illnesses it does present a slightly unsettled picture.
<b>Bank Staffing</b>	4/9/01	Yes	There are 3 regular bank staff. They have been through induction and receive regular support.

### Comments:

Communication systems within the unit are robust. Efforts should be made by all staff to ensure these opportunities are used to maximum effect to help improve the quality of life of young people.

### Requirements:

### Recommendations:

It is recommended that continued efforts are made in conjunction with personnel to resolve all outstanding staff issues.

### Commendations:

The unit is commended for its organisation of personal Development plans and the training opportunities on offer to staff.

## 6 - Physical / Environment Standards

	<b>Date Checked</b>	<b>Standard Acceptable?</b>	<b>Findings at current Inspection</b>
<b>Room sizes</b>	4/9/01	Yes	
<b>Double/Single Ratio</b>	4/9/01	Yes	
<b>Ambient Temp</b>	4/9/01	Yes	
<b>Hot Water temp control</b>	4/9/01	No	Water temperatures are not thermostatically controlled at all points.
<b>Hygiene/cleanliness</b>	4/9/01	Yes	
<b>Safety of environment</b>	4/9/01	Yes	
<b>Fabric/Decor</b>	4/9/01	Yes	The rooms of 4 young people have recently been decorated. In addition there are new carpets and the sitting room ceiling has been painted.
<b>Building maintenance</b>	4/9/01	In part	Work is ongoing and an appropriate system of notification is in place. Some repairs still take too long to be completed.
<b>Garden Areas</b>	4/9/01	No	Staff have made attempts to maintain the large garden area with support from some of the young people. In grounds of this size this is unacceptable.
<b>Furnishing; Comfort/quality</b>	4/9/01	Yes	A significant amount of new furnishings has been purchased.
<b>Security of establishment</b>	4/9/01	No	The building is not as secure as it could be.

<b>Privacy</b>	4/9/01	Yes	Young people have their own room, can have access to their own key and can make private telephone calls.
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**Comments:**

**Requirements:**

All hot water taps and radiators should be maintained at appropriate temperatures.  
 Efforts must be made by the appropriate officials to address any security shortfalls. A forum should be set up to discuss this issue and draw up a suitable action plan at the earliest opportunity.  
 The unit should receive more assistance in maintaining the large garden area.

**Recommendations:**

**Commendations:**

**7 - Care Standards**

**Care Planning and Review**

	<b>Date Checked</b>	<b>Standard Acceptable?</b>	<b>Findings at current Inspection</b>
<b>Assessment</b>	4/9/01	Yes	
<b>Care Plans</b>	4/9/01	Yes	Care plans viewed by inspectors were generally completed to a high standard. Assessments are detailed however the work staff do with young people to reach certain goals should be noted in more detail.
<b>Reviews</b>	4/9/01	Yes	
<b>Education plan</b>	4/9/01	In part.	The education plan is a component part of the care plan. At present it does not provide enough detail about partnership arrangements, contact routes, Home link teacher input etc.
<b>KeyWorker/ Named worker</b>	4/9/01	Yes	
<b>Daily notes</b>	4/9/01	Yes	Daily notes and case notes are of an acceptable standard
<b>Moving on/end of placement supports</b>	4/9/01	Yes	There are appropriate links made with specialised workers although the documentation could be more substantive. E.g. Throughcare plans. The appointment of a designated co-ordinator to manage transitions should be considered.
<b>User involvement - care planning and review</b>	4/9/01	No	There is no clear evidence that young people are actively involved in care planning. The new day to day care plans are not formatted in a way that allows young people to sign them.
<b>User contracts</b>	4/9/01	Yes	Contracts are in place for specialist pieces of work.
<b>Contact with other agencies</b>	4/9/01	Yes	Documentation viewed by inspectors indicates that appropriate contact is made with other agencies.
<b>Residents information/ resource directory</b>	4/9/01	Yes	The information is available to young people but not yet in its final form.

**Menus and Catering**

	Date Checked	Standard Acceptable?	Findings at current Inspection
Menus - choice & quality	4/9/01	Yes	
Participation in planning, purchase & preparation of meals.	4/9/01	Yes	Young people have regular meetings where food is a regular subject. They are actively encouraged to try new things although this does not always prove successful. It has been suggested to inspectors that more fresh produce should be used.
Catering equipment and practices	4/9/01	Yes	A new kitchen has been fitted providing an attractive working environment. The dining area is now located elsewhere minimising the risk of injury to young people and staff.
Environmental Health Report issues	4/9/01	Not examined.	

### Activity programmes

	Date Checked	Standard Acceptable?	Findings at current Inspection
Individual activity programme	4/9/01	Yes	Care plans list and indicate the interests of young people and how these are pursued.
Development of special aptitudes	4/9/01	Yes	There is evidence that suggests that in partnership with other agencies special interests are pursued. Staff should always attempt to develop any particular aptitudes in young people.
Transport arrangements	4/9/01	Yes	Transport is arranged on an individual basis.

### Comments:

The documentation reflecting the plans and day to day life of young people is generally of a good standard. Efforts should be made to ensure interventions with and on behalf of young people are properly reflected in the records maintained about their lives.

### Requirements:

The unit is required to evidence explicitly each young person's involvement in their care plan.

### Recommendations:

Consideration should be given to the content of the educational component of care plans. This should include important day to day information as well as perceived goals and necessary supports. This should be completed in conjunction with guidance teachers and or the Home support teacher.

### Commendations:

## **8 - Inspectors findings on other views**

### **Young peoples views**

Inspectors spoke with a number of young people during the visit. 4 confidential questionnaires were also returned. There were differing responses by individuals about life at Bellsford. These ranged from staff being helpful and friendly to the unit requiring better staff. Most were able to relate well with at least one staff member and saw this as a good thing. A number of young people did not seem to agree with or know what was in their care plan. Most recognised that activities and outings etc. were on offer but these were not considered to be good enough.

### **Staff views**

Inspectors spoke with a number of staff during the visit. 5 confidential questionnaires were also returned. Many staff feel that ratios of staff to young people limits the quality of work that can be undertaken. This is particularly true of one to one work. Staff recognise the nature of emergencies and understand the councils responsibilities to young people. They feel that regularly going over prescribed numbers e.g. 8 instead of 6 dilutes the quality of life for existing residents.

A number of staff indicated that they felt their complaints go unheard and that they are not valued as workers. This should be addressed through supervision and managers must attempt to create an environment where all feel they have a contribution to make to the lives of young people.

**AGENDA**