



A quality framework for secure accommodation services

For use in self-evaluation, scrutiny, and improvement support

November 2020

Changes to our inspection

We are developing new approaches to scrutiny. We want to make sure that inspections and our other scrutiny work are strongly focused on assessing the extent to which people experience wellbeing, and understand the difference care and support makes to their lives.

From 2018, on an incremental basis, we have been rolling out revised methods for inspecting care and support services. This is now being rolled out for secure accommodation services. The changes build on approaches we have introduced in the past three years: an emphasis on experiences and outcomes; proportionate approaches in services that perform well; shorter inspection reports; and a focus on supporting improvement in quality.

Since 1 April 2018, the **Health and Social Care Standards** have been used across Scotland. They were developed by Scottish Government to describe what people should experience from a wide range of care services. They are relevant not just for individual care services, but across local partnerships. We expect them to be used in planning, commissioning, assessing and delivering care and support. We also use them to inform the decisions we make about care quality.

The Secure Care Pathway and Standards Scotland launched in October 2020. They are aligned with, and reflect the principles of, Scotland's Health and Social Care Standards. The [pathway and standards](#), provide further context and, through the specific calls for action from children and young people with experience of secure care, give a unique voice to the outcomes set out in the Health and Social Care Standards. The pathway and standards have informed the illustrations of quality within the framework and will be referenced at inspection as part of the evaluations made.

The core of our approach is a quality framework which sets out the elements that will help us answer key questions about the difference care is making to people and the quality and effectiveness of the things that contribute to those differences. The primary purpose of a quality framework is to support services to evaluate their own performance. The same framework is then used by inspectors to provide independent assurance about the quality of care and support. By setting out what we expect to see in high-quality care and support provision, we can also help support improvement. Using a framework in this way develops a shared understanding of what constitutes good care and support. It also supports openness and transparency in the inspection process.

In developing this framework, we involved both young people who experience or have experienced care (including secure care) and those who provide care and support. It is based on the approach used by the European Foundation for Quality Management, specifically the **EFQM Excellence Model**, which is a quality tool widely used across sectors and countries. We have adapted the model for use in care settings and have used the Health and Social

Care Standards to illustrate the quality we expect to see. We tested versions of this framework in a number of care homes for older people and adults and subsequently in care homes for children and young people and schoolcare accommodation services. Finally, we tested this framework in a secure accommodation service. This test was evaluated to hear the views of people experiencing care, their carers and care providers. This test and people's experiences of them helped us refine the framework and the way we use it.

How is the framework structured?

The quality framework is framed around **key questions**. The first of these is:

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

To try and understand what contributes to wellbeing, there are four further key questions:

- How good is our leadership?
- How good is our staff team?
- How good is our setting?
- How well is care and support planned?

Under each key question, there are a small number of **quality indicators**. These have been developed to help answer the key questions. Each quality indicator has a small number of **key areas**, short bullet points which make clear the areas of practice covered.

Under each quality indicator, we have provided **quality illustrations** of these key areas at two levels on the six-point scale used in inspections. The illustrations are the link to the Health and Social Care Standards and are drawn from the expectations set out in the Standards. They describe what we might expect to see in a care service that is operating at a 'very good' level of quality, and what we might see in a service that is operating at a 'weak' level of quality. These illustrations are not a definitive description of care and support provision but are designed to help care services and inspectors evaluate the quality indicators, using the framework.

The final key question is:

- What is our overall capacity for improvement?

This requires a global judgement based on evidence and evaluations from all other key areas. The judgement is a forward-looking assessment, but also takes account of contextual factors which might influence an organisation's capacity to improve the quality of the service in the future. Such factors might include changes of senior staff, plans to restructure, or significant changes in funding. We think this is an important question to ask as part of self-evaluation.

From May 2020, we have developed an additional key question to augment our quality frameworks. Key Question 7 responds to the COVID-19 pandemic and enables the Care Inspectorate, under the duties placed on us by the Coronavirus (Scotland)(No.2) Act, to specifically evaluate infection prevention and control and staffing.

Key Question 7 has three quality indicators and, as with all our key questions, can be used alone or in combination with any of the other key questions and quality indicators from the framework.

In each quality indicator, we have included a **scrutiny and improvement toolbox**. This includes examples of the scrutiny actions that we may use in evaluating the quality of provision. It also contains links to key practice documents that we think will help care services in their own improvement journey.

How will this quality framework be used on inspections?

Inspectors will use the quality framework instead of the older approach of ‘inspecting against quality themes and statements’. Inspectors look at a selection of the quality indicators. Which and how many quality indicators will depend on the type of inspection, the quality of the service, the intelligence we hold about the service, and risk factors that we identify. It is likely that we will always inspect Quality Indicators 1.1, 1.2 and 1.3 as well as 5.1. In our professional evaluations of the care and support we see, we will use the quality illustrations.

Quality Indicator 1.4 looks beyond the practice of an individual care service and introduces elements about the impact of planning, assessment and commissioning on children and young people experiencing care. This is important because these practices impact on their experiences, including the extent to which they experience wellbeing.. This quality indicator may help us during an inspection to find information or intelligence which is relevant to practices in commissioning partnerships, but our overall inspection evaluations reflect the impact and practice of the care service itself.

We provide an overall evaluation for each of the key questions we inspect, using the six-point scale, from ‘unsatisfactory’ (1) to ‘excellent’ (6). This is derived from the specific quality indicators that we inspect. Where we inspect one quality indicator per key question, the evaluation for that quality indicator is the evaluation for the key question overall. Where we inspect more than one quality indicator per key question, the overall evaluation for the key question is the lowest evaluation of the quality indicators for that specific key question.

How will we use the six-point scale?

We will use the six-point scale when evaluating the quality of performance across quality indicators.

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| 6 | Excellent | Outstanding or sector leading |
| 5 | Very Good | Major strengths |
| 4 | Good | Important strengths, with some areas for improvement |
| 3 | Adequate | Strengths just outweigh weaknesses |
| 2 | Weak | Important weaknesses – priority action required |
| 1 | Unsatisfactory | Major weaknesses – urgent remedial action required |

An evaluation of **excellent** describes performance which is sector leading and supports experiences and outcomes for people which are of outstandingly high quality. There is a demonstrable track record of innovative, effective practice and/or very high quality performance across a wide range of its activities and from which others could learn. We can be confident that excellent performance is sustainable and that it will be maintained.

An evaluation of **very good** will apply to performance that demonstrates major strengths in supporting positive outcomes for people. There are very few areas for improvement. Those that do exist will have minimal adverse impact on people's experiences and outcomes. While opportunities are taken to strive for excellence within a culture of continuous improvement, performance evaluated as very good does not require significant adjustment.

An evaluation of **good** applies to performance where there are a number of important strengths which, taken together, clearly outweigh areas for improvement. The strengths will have a significant positive impact on people's experiences and outcomes. However, improvements are required to maximise wellbeing and ensure that people consistently have experiences and outcomes which are as positive as possible.

An evaluation of **adequate** applies where there are some strengths, but these just outweigh weaknesses. Strengths may still have a positive impact but the likelihood of achieving positive experiences and outcomes for people is reduced significantly because key areas of performance need to improve. Performance which is evaluated as adequate may be tolerable in particular circumstances, such as where a service or partnership is not yet fully established, or in the midst of major transition. However, continued performance at adequate level is not acceptable. Improvements must be made by building on strengths while addressing those elements that are not contributing to positive experiences and outcomes for people.

An evaluation of **weak** will apply to performance in which strengths can be identified but these are outweighed or compromised by significant weaknesses. The weaknesses, either individually or when added together, substantially affect people's experiences or outcomes.

Without improvement as a matter of priority, the welfare or safety of people may be compromised, or their critical needs not met. Weak performance requires action in the form of structured and planned improvement by the provider or partnership with a mechanism to demonstrate clearly that sustainable improvements have been made.

An evaluation of **unsatisfactory** will apply when there are major weaknesses in critical aspects of performance which require immediate remedial action to improve experiences and outcomes for people. It is likely that people's welfare or safety will be compromised by risks which cannot be tolerated. Those accountable for carrying out the necessary actions for improvement must do so as a matter of urgency, to ensure that people are protected, and their wellbeing improves without delay.

How can this quality framework be used by care services?

The framework is primarily designed to support care services in self-evaluation. We will work with care services and sector-wide bodies to build the capacity for self-evaluation, based on this framework. We have published 'Self-evaluation for improvement – your guide'. The guide is available [here](#).

Self-evaluation is a core part of assuring quality and supporting improvement. The process of self-evaluation, as part of a wider quality assurance approach, requires a cycle of activity based around three questions:

- **How are we doing?**

This is the key to knowing whether you are doing the right things and that, as result, people are experiencing high quality, safe and compassionate care and support that meets their needs, rights and choices.

- **How do we know?**

Answering the question 'how we are doing?' must be done based on robust evidence. The quality indicators in this document, along with the views of people experiencing care and support and their carers, can help you to evaluate how you are doing. You should also take into account performance data collected nationally or by your service.

- **What are we going to do now?**

Understanding how well your service is performing should help you see what is working well and what needs to be improved. From that, you should be able to develop plans for improvement based on effective practice, guidance, research, testing and available improvement support. Using this quality framework can help provide an effective structure around self-evaluation.

This diagram below summarises the approach.



Irrespective of our role as the national scrutiny and improvement body, care providers will want to satisfy themselves, their stakeholders, funders, boards and committees that they are providing high-quality services. We believe this quality framework is a helpful way of supporting care services to assess their performance against our expectations of outcomes for children and young people, outwith the inspection process.

The quality indicator framework

| Key question 1: How well do we support children and young people's wellbeing? | Key question 2: How good is our leadership? | Key question 3: How good is our staff team? | Key question 4: How good is our setting? | Key question 5: How well is our care and support planned? |
|---|---|---|---|---|
| 1.1 Children and young people experience compassion, dignity and respect | 2.1 Vision and values positively inform practice | 3.1 Staff are recruited well | 4.1 Children and young people experience high-quality facilities | 5.1 Assessment and care planning reflects children and young people's needs and wishes |
| 1.2 Children and young people get the most out of life | 2.2 Quality assurance and improvement are led well | 3.2 Staff have the right values, skills and knowledge to care for children and young people | 4.2 The setting enables children and young people to thrive and develop their independence | 5.2 Parents, carers and families are involved |
| 1.3 Children and young people's health and development benefit from the care and support they experience | 2.3 Leaders collaborate to support children and young people | 3.3 Staffing levels are right and meet children and young people's needs, with staff working well together | 4.3 Children and young people can be connected with and involved in the wider community | |
| 1.4 Children and young people get the service that is right for them | 2.4 Staff are led well | | | |
| Key question 6: What is our overall capacity for improvement? | | | | |
| Key question 7: How good is our care and support during the COVID-19 pandemic? | 7.1 Children and young people's wellbeing and potential is fully supported and fulfilled | 7.2 Procedures and practices support a safe environment for both children and young people and staff | 7.3 Management, staffing and practice frameworks drive and support the best outcomes for children and young people | |

Key question 1:

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

This key question has four quality indicators associated with it.

They are:

- 1.1 Children and young people experience compassion, dignity and respect.
- 1.2 Children and young people get the most out of life.
- 1.3 Children and young people's health and development benefit from the care and support they experience.
- 1.4 Children and young people get the service that is right for them.

Quality indicator 1.1: Children and young people experience compassion, dignity and respect

Key areas include the extent to which children and young people:

- feel loved, valued and secure and have positive relationships
- have their rights respected and experience dignity and a life free from discrimination
- have their views and wishes taken into account.

| Quality illustrations | |
|---|--|
| Very good | Weak |
| <p>Children and young people develop meaningful and secure relationships with those caring for them. These are based on empathy, compassion, love and fun.</p> <p>They know they always have someone they trust to turn to when troubled or to celebrate with. They benefit from affection and touch. They know who will be caring for them throughout the day.</p> | <p>Children and young people do not feel that the people looking after them like, know or value them as individuals. Their relationships with staff do not provide continuity, perhaps as a result of changes or shortages, and may be superficial or mistrustful. They may feel alone and unsupported.</p> |
| <p>Children and young people experience a high level of respect from everyone involved in their care. This principle is at the heart of the service's culture and frameworks of practice. The service is proactive in safeguarding their privacy and confidentiality and demonstrates genuine regard for their dignity.</p> <p>The service actively promotes and contributes to well-planned arrangements for welcoming children and young people to the service for the first time. These reflect their individual needs and circumstances and the significance of this transition. They provide reassurance and promote their dignity as well as ensuring their safety and wellbeing.</p> | <p>Children and young people experience unnecessary or insensitive intrusions on their privacy. Their personal records may contain inaccurate information or be shared inappropriately with others.</p> <p>Children and young people receive limited support or information to understand their rights. Care and support does not take enough account of their diversity, recognising, appreciating and understanding their culture, language, religion or spirituality, sexuality or gender identity. Restrictions on their choices and independence are not child-focused or based on risk. Staff fail to recognise and address inequality, discrimination or intolerance. The service has a risk-averse or inflexible approach.</p> |

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| <p>Children and young people benefit from effective support to understand and fully exercise their legal and human rights from staff who champion their cause. They know that staff will recognise and actively challenge any form of discrimination. Their wellbeing and sense of worth are strongly enhanced by adults who are knowledgeable about and value diversity.</p> <p>Searches are conducted only following individual risk assessments, with full regard for children and young people's dignity.</p> | <p>Children and young people experience unnecessary additional or disproportionate restrictions on their rights and freedom. This may include being isolated from others or being searched without clear justification, in order to prevent harm and as a last resort.</p> <p>Risk assessments do not take into account their individual circumstances, including previous experience of trauma.</p> |
| <p>Children and young people are fully engaged in their care and support, with participation embedded in the service's ethos and practice. They have a variety of ways of voicing their opinions. They know that their feedback is taken seriously and strongly influences the way they are cared for. They benefit from people who advocate passionately and effectively on their behalf.</p> <p>Children and young people with additional needs, or whose first language is not English, have ready access to services and communication tools which ensure they are fully included in all aspects of home and community life and decision-making.</p> | <p>The approach to children and young people's participation is superficial or their views do not consistently make a difference. They have limited access to either informal or independent advocacy. Views that are seen as challenging are not acted on consistently.</p> <p>Attempts to involve children and young people who are seen as difficult to engage are not given sufficient priority. Involvement in decision-making of those with additional needs is limited because of perceived challenges or time constraints.</p> |

Scrutiny and improvement toolbox

Scrutiny and improvement support actions

- Obtain the views of children and young people, family members, visitors, staff, managers and other professionals.
- Observe staff practice and interaction with young people.
- Where possible, observe arrangements for welcoming children and young people to the service.
- Examine young people's records for evidence of how their rights are respected and their views obtained and acted on. Consider complaint and duty of candour records for the service's response to issues and concerns.
- Review the extent to which relevant policies and procedures, for example confidentiality, equality and diversity, are implemented and influence care and support.
- Consider young people's access to advocacy or legal representation and the use of communication support tools in obtaining their views.
- Examine any additional restrictions to young people's liberty and freedom of choice.
- Review how young people are informed about their rights, for example in admission information.
- Review how the service is meeting the 'Secure Care Pathway and Standards Scotland' and assess the impact of ongoing improvements in young people's care and support.

Key improvement resources

The Health and Social Care Standards:
www.newcarestandards.scot

Secure Care Pathway and Standards Scotland (Scottish Government):
<https://www.securecarestandards.com/>

Information from the Scottish Human Rights Commission:
<http://www.scottishhumanrights.com>

The Independent Care Review:
<https://www.carereview.scot/>

Rights, Risks and Limits to Freedom (Mental Welfare Commission for Scotland):
<https://hub.careinspectorate.com/media/1607/rights-risks-and-limits-to-freedom.pdf>

Practice Guide: Involving Children and Young People in Improving Services (Care Inspectorate):
<https://hub.careinspectorate.com/media/1582/practice-guide-involving-children-and-young-people-in-improving-services.pdf>

Guidance for Care Providers in Scotland using CCTV:
<https://hub.careinspectorate.com/media/1515/guidance-for-care-providers-in-scotland-using-cctv-in-their-services.pdf>

7 Golden Rules for Participation and other rights information (Children and Young People's Commissioner Scotland):
<https://www.cypcs.org.uk/rights>

Scrutiny and improvement toolbox

| Scrutiny and improvement support actions | Key improvement resources |
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| | <p>Rights – Information for Young People looked after away from Home (Scottish Children’s Rights Officers Network): https://www.celcis.org/knowledge-bank/search-bank/rights-information-young-people-who-are-looked-after-away-home/</p> <p>Information on children and young people’s rights: Children and Young People’s Commissioner for Scotland: https://cypcs.org.uk/</p> <p>Who Cares? Scotland: www.whocaresscotland.org</p> <p>See, Think, Act (Royal College of Psychiatrists Centre for Quality Improvement): https://www.rcpsych.ac.uk/docs/default-source/improving-care/ccqi/quality-networks/secure-forensic/forensic-see-think-act-qnfmhs/sta_hndbk_2nded_web.pdf?sfvrsn=90e1fc26_4</p> <p>Rights: Information for Young People who are Looked After in Secure Care (Scottish Government): https://www.webarchive.org.uk/wayback/archive/20170702034601/http://www.gov.scot/Publications/2015/08/6809</p> |

Quality indicator 1.2: Children and young people get the most out of life

Key areas include the extent to which children and young people:

- make decisions and choices about their lives and how they spend their time
- lead active and fulfilling lives
- have positive learning experiences, achieve their goals and aspirations and reach their potential
- feel safe and are protected from abuse, harm, neglect and bullying.

| Quality illustrations | |
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| Very good | Weak |
| Children and young people routinely exercise choice in all aspects of their day-to-day lives. They experience highly personalised care and support that is enriched by an understanding of their individual strengths and preferences. Those with specific communication needs or cognitive impairment are enabled to express their views and exercise choice to the fullest extent. | Children and young people have little autonomy or experience institutionalised practices. The quality of their experiences is lessened by assumptions about what is safe or possible. |
| Children and young people are enabled to make the most of opportunities to connect with family and friends. Their right to have meaningful relationships with siblings is recognised and actively promoted where this is in their best interests. They benefit from and contribute to the local community. Children and young people regularly have fun. They gain satisfaction from a wide range of activities and interests, including exploring new ones. They develop a sense of fairness and learn how to cooperate with others. They are enabled to feel fulfilment in life, and to create positive memories. | Children and young people's sense of belonging and identity are compromised because they are isolated from their families or are not supported to form friendships with peers. The service restricts or intervenes unnecessarily or insensitively in children and young people's contact with the people who are important to them. Opportunities for children and young people to take part in meaningful activities are limited or aimed at groups rather than based on individual need and choice. |

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| <p>Children and young people receive lots of encouragement and support to take part in a wide range of interests and to develop new ones. This includes physical activities and the creative arts, as well as frequent opportunities to go outdoors.</p> | |
| <p>Young people receive individually tailored support to engage fully in learning, and maximise attainment as well as attendance. This may include extra tuition. Where challenges or barriers exist, staff successfully champion the right to a high-quality, inclusive education. Attending school or education, or taking part in preparation for college, higher education or work is the norm for all children and young people.</p> <p>Children and young people's learning is maximised by care and education staff working effectively together to provide high-quality opportunities and experiences across the 24-hour curriculum.</p> <p>There is a culture of ambition and celebration when children and young people strive for and achieve success, and these are used to build optimism and foster further progress.</p> <p>Children and young people making transitions in education within the service receive high-quality, planned support to do so successfully.</p> <p>With staff support and at the right time and pace, children and young people develop a wide range of life skills. These promote confidence and help them to get the most out of life.</p> | <p>Children and young people are disadvantaged because there is no learning culture or the support they receive is limited or takes little account of individual needs or strengths.</p> <p>School attendance is low or children and young people receive limited targeted support for successful learning and may fall behind. They are not enabled to play a full part in school life.</p> <p>Children and young people have low expectations about what they should aspire to and can achieve. They feel they do not receive enough encouragement to reach their potential.</p> <p>Children and young people have limited opportunities to practise the skills they will need in adulthood. There is an over-emphasis on achieving independence rather than being interdependent.</p> |

Children and young people are listened to. They are kept safe both emotionally and physically. This includes protecting them from harmful use of the internet and social networks. They benefit from preventive practice, early identification of concerns and sensitive, high-quality support from staff who work in partnership with other agencies. The service fully implements national guidance and best practice in child protection, including child sexual exploitation.

Children and young people develop the skills and knowledge they need to understand risk, make informed decisions and make their lives as safe as possible.

Children and young people always have access to responsible adults outside the service or in other organisations, who consistently act in their best interests and provide additional support and safeguards.

Children and young people are confident that staff will effectively challenge all forms of bullying, including prejudice-based bullying.

Children and young people's safety and wellbeing, and the extent to which they feel protected, may be compromised by a failure to identify and respond to indicators of concern. The needs of those with disabilities or who are less able to communicate their experiences do not receive enough attention. Children and young people may not feel involved in or well informed about decisions that are made about their protection.

Children and young people do not learn how to promote their own safety and wellbeing.

Networks of support for children and young people outside the service are limited and do not provide the additional safeguards required.

Children and young people experience bullying or may be hurt, feel threatened, afraid or excluded. Their wellbeing is affected by insensitive or inconsistent responses when bullying occurs. The service does not have a preventative approach to bullying.

Scrutiny and improvement toolbox

| Scrutiny and improvement support actions | Key improvement resources |
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| <ul style="list-style-type: none"> • Speak with children and young people, family members, visitors, staff, managers and other professionals. • Observe staff practice and interaction with young people. • Review young people's suggestions, comments and requests and how the service responds. • Examine young people's records, including assessments, plans and reviews, and the extent to which they demonstrate they are safe, active, achieving, respected and responsible. • Review the effectiveness of support to attend education. Consider how the service supports wider learning and achievement outside the formal school setting. • Review relevant policies and procedures, child protection records, incident records, staff training and their understanding of their responsibilities. • Consider young people's access to protective adults and supports outside the secure setting. | <p>Stand up for Siblings: https://www.standupforsiblings.co.uk/</p> <p>Go Outdoors! Guidance and good practice on encouraging outdoor activities in residential child care (SIRCC, SCCYP and Scottish Government): https://pure.strath.ac.uk/ws/portalfiles/portal/89413201/McCormack_etal_CELCIS_2010_Go_outdoors.pdf</p> <p>Learning in Care (Education Scotland and Care Inspectorate): https://hub.careinspectorate.com/media/1546/learning-in-care-activities-for-professionals-who-work-with-children-in.pdf</p> <p>Celebrating Success: What helps looked after children succeed (SWIA): https://www.celcis.org/files/3814/6669/2296/celebrating_success_2006.pdf</p> <p>National Guidance for Child Protection in Scotland (Scottish Government): https://www.gov.scot/binaries/content/documents/govscot/publications/advice-and-guidance/2014/05/national-guidance-child-protection-scotland/documents/00450733-pdf/00450733-pdf/govscot%3Adocument</p> <p>Child Sexual Exploitation: Definition and Practitioner Briefing Paper (Scottish Government): https://www.gov.scot/binaries/content/documents/govscot/publications/advice-and-guidance/2016/10/child-sexual-exploitation-definition-practitioner-briefing-paper/documents/00508563-pdf/00508563-pdf/govscot%3Adocument</p> |

Scrutiny and improvement toolbox

| Scrutiny and improvement support actions | Key improvement resources |
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| | <p>Practice Guide: supporting professionals to meet the needs of young people with learning disabilities who experience, or are at risk of, child sexual exploitation (Barnardos) https://www.childrenssociety.org.uk/sites/default/files/17107-SU-CSE%2BLD-practice-guide_v4_reduced.pdf</p> <p>National Guidance for Child Protection in Scotland: additional notes for practitioners: protecting disabled children from abuse and neglect (Scottish Government): https://www.childrenssociety.org.uk/sites/default/files/17107-SU-CSE%2BLD-practice-guide_v4_reduced.pdf</p> <p>Key Messages for Young People on Healthy Relationships and Consent (Scottish Government): https://www.gov.scot/publications/key-messages-young-people-healthy-relationships-consent-resource-professionals-working-young-people/#:~:text=The%20key%20messages%20on%20healthy%20relationships%20and%20consent%20have%20been,%2C%20positive%2C%20healthy%20and%20enjoyable.</p> <p>National Missing Persons Framework for Scotland (Scottish Government): https://www.gov.scot/binaries/content/documents/govscot/publications/strategy-plan/2017/05/national-missing-persons-framework-scotland/documents/00517676-pdf/00517676-pdf/govscot%3Adocument</p> <p>On Risk (IRISS): https://www.iriss.org.uk/resources/irisson/risk</p> <p>Scotland Works for You (Scotland Works for You): https://www.mygov.scot/scotland-works-for-you/</p> |

Quality indicator 1.3: Children and young people's health benefits from their care and support experience

Key areas include the extent to which children and young people:

- experience care and support based on relevant research, guidance, standards and good practice
- have the highest attainable standards of physical and mental health
- have positive food experiences, good nutrition and learn about healthy eating.

| Quality illustrations | |
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| Very good | Weak |
| <p>Children and young people consistently experience nurturing, therapeutic care and support that reflects their experiences, developmental stage and needs. Staff understand the impact of trauma and employ a range of credible, high-quality interventions. This enables them to develop emotional regulation, resilience and self-esteem.</p> <p>Staff make early and effective use of strategies for preventing escalation of distressed behaviour. If children and young people do experience restraint or physical intervention to prevent harm, this is always carried out in accordance with best practice.</p> <p>Children and young people receive high-quality support when they experience significant changes in their lives, including loss and bereavement. Their capacity for growth and change is recognised and promoted.</p> | <p>Children and young people's social and emotional development is compromised by a lack of stable, secure attachments with adults. They may feel that consequences are used inconsistently or arbitrarily or receive a message that being valued and loved is conditional on their behaviour. The care and support they experience is driven by processes or tasks, or it is at a basic level. Support for them to maintain, re-establish or repair family and other significant relationships is lacking.</p> <p>Children and young people may be restrained or subject to physical intervention without authority. A culture of reflection and learning following the use of restraint is not embedded.</p> <p>Children and young people suffer trauma or unnecessary criminalisation because the service has a culture of over-reliance on the police to help resolve conflict and challenges.</p> |

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| <p>Children and young people's health needs are pro-actively met. They benefit from comprehensive, holistic health assessment and primary and specialist healthcare. Where necessary they are enabled to make best use of the right technology and specialist equipment. Children affected by disability or a long-term illness or condition enjoy as full a life as possible. There is continuous review of their needs.</p> <p>Children and young people are enabled and encouraged to make informed health and lifestyle choices by adults who are positive role models. Flexible daily rhythms, routines and structures, including good sleep patterns, provide security and reassurance and support health and wellbeing.</p> <p>Positive mental health is a high priority for all children and young people. Those with additional mental health needs benefit from the support of skilled, informed and confident staff. They have timely access to appropriate specialist services for support in recovering from trauma, abuse and neglect. Where challenges exist, staff advocate persistently on their behalf.</p> <p>Children and young people benefit from safe and robust management of medication in line with legislation and good practice. If they are able and choose to do so, they are supported to safely manage aspects of their own medication.</p> | <p>The service is not proactive when there are unmet needs or delays, or when healthcare is disjointed. Information about children and young people's health needs is not up to date and made available when they move on.</p> <p>Children and young people have limited opportunities to take part in health promotion activities. Their right to have their views taken into account and make informed decisions about their healthcare is not respected.</p> <p>The service does not have a robust, preventive approach to children and young people's mental health. Lack of access to specialist intervention or effective advocacy may compromise their health, wellbeing or recovery.</p> |
| <p>Children and young people's lives are enhanced by being around and caring for animals.</p> | |

Children and young people benefit from a tasty, varied and well-balanced diet that promotes health and wellbeing. Food practices in the service contribute to them feeling included and nurtured and instil a sense of belonging. They benefit from the important social aspects of sharing food and eating together, but at a pace that suits them.

Children and young people play an active role in menu planning, budgeting and preparing meals for themselves and others. They may have opportunities for growing their own food.

Children and young people's diet lacks variety and balance. They may have limited choice or receive little of the food they enjoy. Food practices may be insensitive or controlling, and do not take into account the cultural, social, sensory, and symbolic significance of food.

Scrutiny and improvement toolbox

| Scrutiny and improvement support actions | Key improvement resources |
|--|--|
| <ul style="list-style-type: none"> • Speak with children and young people, family members, visitors, staff, managers and other professionals. • Observe staff practice and interaction with young people. • Review children and young people's records including assessments, daily logs, personal plans, reviews and evaluation. • Consider the extent to which children and young people are enabled to be healthy, nurtured, achieving, respected and responsible. • Examine medication, records, administration practices and storage. • Review methods used to capture and respond to children and young people's views. • Examine records of complaints and incidents. • Look at menus and where possible share mealtimes with young people. | <p>A Guide to Youth Justice in Scotland: Policy, Practice and Legislation: Section 3: Theory and Methods (CYCJ): https://www.cycj.org.uk/resource/youth-justice-in-scotland-guide/</p> <p>Responding to Offending in Residential Childcare – Next Steps (CYCJ): https://cycj.org.uk/wp-content/uploads/2018/04/LAC-Next-steps-final.pdf</p> <p>Guidance on Health Assessments for Looked After Children and Young People in Scotland (Scottish Government): https://www.gov.scot/publications/guidance-health-assessments-looked-children-scotland/</p> <p>Practice Guide: Suicide Prevention for Looked After Children and Young People (Care Inspectorate): https://hub.careinspectorate.com/media/1630/suicide-prevention-for-looked-after-children-and-young-people.pdf</p> <p>Notifications about Controlled Drugs: Guidance for Providers (Care Inspectorate): https://hub.careinspectorate.com/media/1566/notifications-about-controlled-drugs-guidance-for-providers.pdf</p> <p>Guidance about Medication, Personal Plans, Review, Monitoring and Record Keeping in Residential Care Services (Care Inspectorate): https://hub.careinspectorate.com/media/1514/guidance-about-medication-personal-plans-review-monitoring-and.pdf</p> <p>Managing Medicines in Care Homes (NICE): https://www.nice.org.uk/guidance/sc1</p> |

Quality indicator 1.4: Children and young people are getting the service that is right for them

Key areas include the extent to which children and young people:

- are involved in a comprehensive assessment of their holistic needs
- exercise choice in the care and support they experience
- experience high-quality care and support at all times, and as a result of planning, commissioning and contracting arrangements that work well.

| Quality illustrations | |
|---|---|
| Very good | Weak |
| Children and young people's views and choices are central to a comprehensive assessment of their needs whilst in secure care. They have the support they need to be fully involved, including opportunities to take an active role in directing aspects of the assessment and any reviews. The assessment involves all key partners, including family members, carers, representatives and professionals. | The assessment and review process provides limited opportunities for children and young people's views and preferences to be heard and this compromises its quality and integrity. |
| Children and young people receive meaningful support to enable them to be full and active partners in how their choices and needs are met. They are well-informed about and understand the reasons for any decisions affecting their lives. | Decisions about young people's care and support may be service-led or based on what is already available rather than providing suitable, individualised responses. Their changing needs and preferences are not considered. |

Children and young people benefit from strong links between the service provider and local authority commissioner to ensure that their care and support needs are fully planned for and met.

Admission decisions are strongly informed by a comprehensive assessment of children and young people's needs, wishes and desired outcomes. Those coming to the service have these accurately matched to what the service can offer. The needs of children and young people already living in the service are fully considered, and they experience minimal disruption as a result of new admissions. Wherever possible, children and young people visit the service before they move there.

Children and young people benefit from well-managed, positive and individualised pathways and transitions throughout their journey through secure care.

Children and young people are full partners in regular reviews of their progress. If their needs are no longer being met by the service, there is a planned approach to finding suitable alternatives and to supporting high-quality transitions at a pace that suits them and reflects best practice.

Children and young people's security and wellbeing are compromised by admissions to or transitions from the service that are inadequately planned or undermined by pressure on resources. The people caring for them do not have access to the full range of information to allow them to meet their needs.

Children and young people do not always benefit from planned reviews and evaluations of care, which means that their needs are not fully met. There may be delays in responding to their changing needs.

Scrutiny and improvement toolbox

Scrutiny and improvement support actions

- Obtain the views of children and young people, family members, visitors, staff, managers and other professionals.
- Review the extent to which the service adheres to its aims and objectives and whether they positively influence care and support.
- Review relevant records such as daily logs, assessments, reviews, personal plans, reviews, admission and transition records.
- Examine welcome and introductory information for children and young people.
- Review policies and practices for aftercare support.
- Review relevant policies and procedures, including admissions guidance.

Key improvement resources

Matching Looked After Children and Young People: Admissions Guidance for Residential Services (Care Inspectorate):

<https://hub.careinspectorate.com/media/1436/admissions-guidance-for-residential-services.pdf>

Children and Young People (Scotland) Act (2014): Guidance on Part 10: Aftercare (Scottish Government):

<https://hub.careinspectorate.com/media/1136/children-and-young-people-scotland-act-2014-guidance-on-part-10-aftercare.pdf>

Inform: The Children and Young People (Scotland) Act 2014: Parts 10 and 11 (Aftercare and Continuing Care):

https://www.celcis.org/files/9114/3878/4824/Inform_Children_Young_People_Act_Part_10-11.pdf

Practice Guide to Chronologies (Care Inspectorate):

<http://hub.careinspectorate.com/search/?s=practice+guide+to+chronologies&type=0&view=0&ord=0>

Principles of Good Transitions 3 (Scottish Transitions Forum), including the autism and life shortening conditions supplements, can be found at:

<https://scottishtransitions.org.uk/blank/wp-content/uploads/2018/01/Principles-of-Good-Transition-CHAS-2017-supplement-Final.pdf>

An Independent Guide to Quality Care for Autistic People (National Autistic Taskforce):

<https://nationalautistictaskforce.org.uk/an-independent-guide-to-quality-care-for-autistic-people/>

Key question 2: How good is our leadership?

This key question has four quality indicators associated with it.

They are:

- 2.1 Vision and values positively inform practice.
- 2.2 Quality assurance and improvement are led well.
- 2.3 Leaders collaborate to support children and young people.
- 2.4 Staff are led well.

Quality indicator 2.1: Vision and values positively inform practice

Key areas include the extent to which:

- the service's vision, values, aims and objectives are clear and inform practice
- innovation is supported
- leaders lead by example and role model positive behaviour.

| Quality illustrations | |
|--|---|
| Very good | Weak |
| <p>The vision, aims and values are clear, understood by all and fully implemented. They are inspiring, inclusive and embrace equality.</p> <p>Leaders are ambitious in actively seeking to achieve the best possible outcomes for children and young people. Children and young people and staff contribute to any review of the service's aims and objectives, which strongly inform the way in which care and support is provided and experienced.</p> | <p>The vision for the service lacks clarity or collective ownership and does not focus sufficiently on improving outcomes. An inclusive, rights-led and personal outcomes approach is not fully embedded in the culture and systems of practice. Staff have limited awareness of the service's ethos, values and aims.</p> |
| <p>The culture encourages and supports creative contributions from children and young people, their families, staff and other stakeholders. Care and support is child-centred and fosters a culture of positive and informed risk-taking. Leaders and staff actively promote human rights and embrace the service's vision, values and aims to ensure these are met.</p> | <p>Where improvements are needed, there is limited strategic or innovative thinking. The management culture is focused on organisational goals, which are prioritised over the needs of children and young people. Staff do not feel confident about making suggestions or implementing improvements. They do not adapt practice and tailor care and support in order to meet children and young people's needs and wishes.</p> |

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|---|--|
| Leaders ensure that the culture is supportive, inclusive and respectful, confidently steering the service through challenges. They are visible role models and guide the service's strategic direction and the pace of change. Distributed leadership is developed at all levels. | Leadership is ineffective or lacks direction and stability. Shared leadership is not in evidence. There may be a blame culture. Leaders are not well known to either children and young people or staff. |
|---|--|

| Scrutiny and improvement toolbox | |
|---|---|
| Scrutiny and improvement support actions | Key improvement resources |
| <ul style="list-style-type: none"> • Obtain the views of children and young people, family members, visitors, staff, managers and other professionals. • Observe staff practice and interactions. • Review quality assurance practices. • Review relevant meeting records. • Review the statement of aims and objectives/vision. • Look at self-evaluation processes and improvement/development plans. • Consider how staff are supported to develop and exercise leadership. | <p>Step into Leadership (SSSC): http://www.stepintoleadership.info/frontline_questions.html</p> <p>Insights: Achieving Effective Supervision (IRISS): https://www.iriss.org.uk/resources/insights/achieving-effective-supervision</p> <p>Supervision learning resource (SSSC): http://www.stepintoleadership.info/assets/pdf/SSSC-Supervision-learning-resource-Sept-16.pdf</p> |

Quality indicator 2.2: Quality assurance and improvement are led well

Key areas include the extent to which:

- quality assurance, including self-evaluation and improvement planning, drives change and improvement
- leaders are responsive to feedback and use learning to improve
- leaders have the skills and capacity to oversee improvement.

| Quality illustrations | |
|---|---|
| Very good | Weak |
| <p>There is continuous, robust evaluation of children and young people's outcomes and experiences to ensure they receive the best possible care and support. Quality assurance also leads to improved inputs and processes for delivering the service. Children and young people's views are central to the process of evaluation and they are well-informed about any changes.</p> <p>Leaders ensure that all staff have a meaningful role in comprehensive quality assurance activity. This leads to the development of a dynamic improvement plan which is continuously evaluated and successfully drives the future direction of the service. This process is well-managed, with research and best practice used to benchmark measurable outcomes.</p> <p>External managers are clear about their roles and responsibilities and act as champions for children and young people. They play a key role in monitoring the quality of their experiences, safeguarding and promoting positive outcomes. They also provide strong support for the manager and effective links with the provider.</p> | <p>There are some systems in place to monitor aspects of service delivery and impact, but they may be haphazard. There is a lack of clarity about roles and responsibilities. Quality assurance processes, including self-evaluation and improvement plans, are largely ineffective. The approaches taken are not sufficiently detailed to demonstrate the impact of any planned improvement.</p> <p>Staff and children and young people's contribution to quality assurance is minimal or peripheral. They have limited awareness of the methods used or the intended outcomes.</p> <p>External management arrangements are unclear. Children and young people may not know who external managers are, or rarely have opportunities to speak with them and share their views. External leaders' lack of contact with and knowledge about the home make them less effective in providing additional safeguards and assurance.</p> |

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|---|---|
| <p>Children and young people are well-informed about the standards they should expect from the service. They feel empowered to give feedback and raise concerns and they know these will be acted on promptly without negative consequences.</p> <p>Where things go wrong with a child or young person's care and support, or their human rights are not respected, leaders learn from this and offer a genuine apology. Reflecting on complaints, concerns and significant events is fully embedded in the service and leads to improvement.</p> | <p>Leaders fail to motivate staff and others to contribute to positive change. Lack of information regarding the rationale for improvement may inhibit change. Changes may happen as the result of crisis management rather than through robust quality assurance.</p> <p>Children and young people are not encouraged to have high expectations of their care and support, are unsure how to raise concerns, or do not feel supported to do so. If complaints and concerns are upheld, or mistakes are made, there is limited learning to drive sustained and meaningful change.</p> |
| <p>Leaders know what is working well and what needs to improve. They communicate this effectively to staff. They ensure that the needs and wishes of children and young people are the primary drivers for change. Leaders at all levels successfully direct and support improvement activities and are confident about where to obtain support and guidance. The pace of change reflects the improvements needed.</p> | <p>There is insufficient capacity to support improvement activities effectively or to embed change. The pace of change may be too slow or is unsustainable.</p> |

Scrutiny and improvement toolbox

| Scrutiny and improvement support actions | Key improvement resources |
|--|--|
| <ul style="list-style-type: none"> • Obtain the views of children and young people, family members, visitors, staff, managers and other professionals. • Review young people's personal plans, records of reviews and evaluation of outcomes and progress. • Look at participation records and other feedback from young people and their parents and carers. • Examine self-evaluation/quality assurance/audit records. • Look at senior staff/management overview of staff training, supervision and professional registration. • Review accident, incident, complaint and concerns records and analysis, and related action plans. • Review external management arrangements and visits. • Review the service's improvement plan. | <p>The Model for Improvement and associated resources: https://hub.careinspectorate.com/resources/</p> <p>Organisational Duty of Candour (Scottish Government): https://www.gov.scot/binaries/content/documents/govscot/publications/advice-and-guidance/2018/03/organisational-duty-candour-guidance/documents/00533470-pdf/00533470-pdf/govscot%3Adocument</p> <p>National Occupational Standards (NOS): http://learn.sssc.uk.com/nos/about.html</p> <p>National Guidance for the External Management of Residential Child Care Establishments in Scotland (Scottish Government): https://www.gov.scot/binaries/content/documents/govscot/publications/advice-and-guidance/2013/06/national-guidance-external-management-residential-child-care-establishments/documents/00424904-pdf/00424904-pdf/govscot%3Adocument</p> <p>Active Implementation Hub (National Implementation Research Network): https://nirn.fpg.unc.edu/ai-hub</p> |

Quality indicator 2.3: Leaders collaborate to support children and young people

Key areas include the extent to which:

- leaders understand the roles and responsibilities of other partners
- services work in partnership with others to secure the best outcomes for children and young people
- leaders oversee effective transitions for children and young people.

| Quality illustrations | |
|--|---|
| Very good | Weak |
| <p>Leaders have a sound knowledge of the key roles and responsibilities of partner agencies. Effective partnership working is facilitated by a clear strategy, including sharing of relevant policies and procedures.</p> <p>Leaders proactively work across boundaries and seek to overcome barriers between different agencies and organisations to enable children and young people to benefit from effective multi-agency support. A culture of joint responsibility and decision-making helps create a positive climate. Leaders recognise the benefits of sharing ideas and successes both within the service and further afield.</p> <p>Leaders ensure that services are delivered efficiently and effectively. They monitor the effectiveness of joint work with other providers and agencies.</p> | <p>Leaders lack understanding of how children and young may benefit from the involvement of external organisations. They do not ensure that care and support is provided collaboratively. There is an absence of strategy and guidance to inform this approach. Leaders lack the knowledge, skills and confidence to access and harness additional or specialist support and expertise.</p> |

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| Where children and young people are supported by more than one organisation, they benefit from all of them working together effectively. This includes sharing information appropriately and coordinating care and support so that they experience consistency and continuity. Where information is being shared between agencies for specific purposes, consent is obtained except where to do so is likely to cause harm. | <p>Communication with partners is ineffective. Progress is constrained by leaders being unclear about the principles of consent and information sharing.</p> <p>Leaders do not implement learning from other organisations to influence and improve the services they provide.</p> |
| <p>Leaders ensure that commissioned services are delivered efficiently and effectively, and that admission is strongly child-centred. They monitor the success and effectiveness of working with partner providers and other agencies.</p> <p>There are clear processes in place to support children and young people moving on to other care services when the time is right.</p> | Approaches to children and young people moving on mean they leave in a disjointed or rushed way, with resulting uncertainty or distress. |

Scrutiny and improvement toolbox

| Scrutiny and improvement support actions | Key improvement resources |
|--|---|
| <ul style="list-style-type: none"> • Speak with children and young people, family members, visitors, staff, managers and other professionals. • Review young people's records for evidence of inter-agency working. • Look at the admission procedure and practice. • Review the information sharing policy and practice. • Review arrangements for inter-agency working. • Examine the service's links to local resources and how these are used. | <p>Step into Leadership (SSSC): http://www.stepintoleadership.info/frontline_questions.html</p> <p>Information Commissioner's Guide to Data Protection, including GDPR: https://ico.org.uk/for-organisations/guide-to-data-protection/</p> |

Quality indicator 2.4: Staff are led well

Key areas include the extent to which:

- leaders at all levels make effective decisions about staff and resources
- leaders at all levels empower staff to support people
- leadership is having a positive impact on staff.

| Quality illustrations | |
|---|--|
| Very good | Weak |
| Leaders engage meaningfully with staff, children and young people, their families and others, taking a collaborative approach to planning and delivering care and support. They are skilled at identifying and delivering what is needed to provide the best care and support and understand any limitations the service may have. | <p>Leaders do not anticipate the type and level of resources needed for children and young people or identify potential barriers. This has a detrimental impact and fails to prevent difficulties arising or escalating.</p> <p>There is a lack of vision and creativity in identifying resources or interventions which meet the unique needs of each individual.</p> |
| <p>Leaders model a team approach, encouraging and appreciating the contributions and expertise of others. By listening to others' ideas and respecting different perspectives, they promote a supportive culture in which it is safe to challenge. They recognise that children and young people are often experts in identifying their own needs and encourage staff to adopt this approach.</p> <p>Leaders ensure equality of opportunity both among staff and for children and young people. They use successes as catalysts for further improvement in the quality of each individual's outcomes and experiences.</p> | <p>Staff are not empowered to help identify solutions for the benefit of children and young people. Leaders do not always engage staff, leading to confusion and a lack of clarity of roles and responsibilities. The service may have a culture of blame.</p> <p>Communication and direction are lacking, and the steps required to make improvements are not sufficiently detailed. The rationale for change is not always clear to staff, and this has a negative impact on children and young people's experiences.</p> <p>Equality and inclusion are not embedded within policies, procedures and plans.</p> <p>There is a lack of understanding of how all staff can contribute to delivering high quality care and support.</p> |

| | |
|--|---|
| Leaders adapt their leadership style to help motivate staff to deliver high quality care and support. They promote a good work-life balance which has a positive impact on both staff and children and young people. | Opportunities for staff to use their initiative, take responsibility and influence change are limited. They seldom adopt leadership roles. The extent to which professional learning is linked to organisational priorities is limited. Staff may work in isolation rather than as part of a team with shared responsibilities. |
|--|---|

Scrutiny and improvement toolbox

| Scrutiny and improvement support actions | Key improvement resources |
|--|--|
| <ul style="list-style-type: none"> • Speak with children and young people, family members, visitors, staff, managers and other professionals. • Observe practice and interactions. • Look at the quality assurance policy and procedure, practice and outcomes. • Look at records of staff meetings. • Review records of training/learning and development, supervision and appraisal. • Review minutes of staff and manager meetings. | <p>Step into Leadership (SSSC): http://www.stepintoleadership.info/frontline_questions.html</p> |

Key question 3: How good is our staff team?

This key question has three quality indicators associated with it.

They are:

- 3.1 Staff are recruited well.
- 3.2 Staff have the right values, skills and knowledge to care for children and young people.
- 3.3 Staffing levels are right and meet children and young people's needs, with staff working well together.

Quality indicator 3.1: Staff are well recruited

Key areas include the extent to which:

- children and young people benefit from safer recruitment principles being used
- recruitment and induction reflects the needs of children and young people
- induction is tailored to the needs, roles and responsibilities of the individual staff member.

| Quality illustrations | |
|---|---|
| Very good | Weak |
| <p>Recruitment and selection is informed by national guidance and best practice. There is a strong emphasis on values-based recruitment. High quality recruitment information ensures that candidates are fully aware of the conduct, qualities and capabilities that are required of them. The process is well-organised and documented so that core elements of the procedure are followed consistently. Staff are appointed and start work only after all pre-employment checks have been concluded.</p> <p>Children and young people and their families have opportunities and the necessary support to be actively involved in recruitment and selection. This is done in a meaningful and appropriate way which takes their expertise and views into account.</p> | <p>There is insufficient understanding of the principles and practices of safer recruitment and the part they play in preventing unsuitable people from entering the workforce. This may lead to key elements of the process not being fully implemented, even when good quality recruitment policies are in place.</p> <p>Recruitment and selection is not informed or enhanced by children and young people's views and active involvement.</p> |
| <p>There is a clear link between the service's aims and objectives, children and young people's needs and the values, skills and knowledge of those being recruited.</p> | <p>The service may not fully understand the essential characteristics required by staff. New staff may therefore not have the appropriate attitudes and values or the potential to gain the necessary knowledge and skills to support high quality outcomes.</p> |

All staff take part in a thorough, comprehensive, well-planned induction that has been developed to ensure they can perform their work to a high standard. This includes significant emphasis on implementing the Health and Social Care Standards.

The pace and length of induction ensures that staff become familiar with expectations and demonstrate competence in all key areas. There is enough flexibility to take into account individual learning needs and styles. A variety of induction methods is likely to be used.

Those caring for children and young people are clear about their roles and responsibilities and conditions of employment, have written information to which they can refer and a named member of staff for support. There is additional supervision during the induction and probationary period. This allows them to have the necessary opportunities to discuss learning needs or other issues.

Children and young people and their families are enabled to contribute their views to evaluation of staff performance during the induction phase.

Induction provides limited opportunities for genuine learning. There is no expectation that staff will perform to a required standard and demonstrate potential for continuous development.

Induction policies, procedures, guidelines and structures of support do not provide an adequate framework for new staff to develop confidence in their new role. There may be a lack of clarity about their role or the provider's responsibilities for promoting their development. Formal supervision is limited and there is no shared understanding of next steps.

Scrutiny and improvement toolbox

| Scrutiny and improvement support actions | Key improvement resources |
|---|--|
| <ul style="list-style-type: none"> • Obtain the views of children and young people, family members, visitors, staff, managers and other professionals. • Review the recruitment and induction policy and procedure against national guidance and best practice. • Review staff job descriptions and roles. • Examine recruitment and selection and induction records, including any participation by young people and parents and carers. • Review new staff supervision records. • Look at induction records. • Review the staffing analysis. | <p>Safer Recruitment Through Better Recruitment (SSSC and Care Inspectorate): http://hub.careinspectorate.com/knowledge/safer-recruitment</p> <p>Further information and a range of resources can be found at: https://www.sssc.uk.com/</p> <p>The National Health and Social Care Workforce Plan (Scottish Government): https://www.gov.scot/publications/national-health-social-care-workforce-plan-part-2-framework-improving/#:~:text=The%20purpose%20of%20the%20National,in%20service%20delivery%20and%20redesign.&text=As%20we%20progress%2C%20it%20is,improvement%20in%20our%20workforce%20planning.</p> |

Quality indicator 3.2: Staff have the right values, skills and knowledge to care for children and young people

Key areas include the extent to which:

- staff competence and practice lead to improving outcomes for children and young people
- staff learning and development lead to improving outcomes for children and young people
- staff practice is supported and improved through effective support, supervision and appraisal.

| Quality illustrations | |
|--|---|
| Very good | Weak |
| <p>Staff practice strongly reflects the values and principles of the Health and Social Care Standards and relevant professional codes.</p> <p>Staff consistently form warm, enduring and genuine relationships with children and young people. They model positive behaviour and have realistic expectations based on individual development rather than chronological age, using suitable strategies. They provide emotional containment, use their authority appropriately and are highly skilled in resolving conflict.</p> <p>Staff are empowered and equipped to deliver the best quality practical and emotional care and support. Their competence is regularly assessed to ensure that learning and development strategies support the highest quality outcomes and experiences.</p> | <p>Staff may be registered with relevant professional bodies but lack understanding of and commitment to what is expected of them.</p> <p>Staff adopt an overly procedural approach to their work, which is not based on relationships and values. They may have low tolerance of certain behaviours because they have limited understanding of the impact of trauma and adversity on children and young people’s development.</p> <p>Arrangements for assessing staff practice are under-developed. There is limited support for staff to reflect or for identifying and meeting learning needs.</p> |

| | |
|---|---|
| <p>There is a strong culture of reflection and learning in the service. Staff have high quality continuous learning opportunities based on research evidence and good practice. These are regularly evaluated to meet changing needs. The needs of children and young people influence staff development and training and they may be directly involved in its delivery.</p> <p>There is a range of approaches to learning, including the opportunity for group and face-to-face training. A clear structure of training and learning and development is in place for each staff role and all staff have individual plans. They consistently implement their learning to provide high quality care and support.</p> <p>Staff fulfil their responsibilities for continuous professional development and for meeting any registration requirements.</p> | <p>Continuous learning has a low priority in the service. There is limited access to best practice and research or opportunities to ensure knowledge is consolidated and embedded into practice.</p> <p>Learning opportunities lack breadth and scope, with little reference to values and codes. There is no effective training analysis for the service or individual staff. This means the plan for training is static and may not reflect children and young people's needs.</p> <p>Staff do not take sufficient responsibility for their own learning and development or for reporting misconduct or unsafe working practices. They have few opportunities for exercising autonomy, using their initiative and developing other leadership skills.</p> |
| <p>Staff benefit from a framework of support which reflects the demanding nature of their work and promotes high quality, sensitive care and support.</p> <p>Regular, high quality supervision and appraisal are used constructively by staff. These contribute to their professional development and enable them to become competent, confident and reflective practitioners.</p> <p>Supervision and appraisal informs the development of the service's staff skills analysis and training plan.</p> <p>The views of children and young people and their families inform and enhance the quality of supervision and appraisal.</p> | <p>Insufficient attention is paid to staff welfare and support. As a result, they may regularly experience stress. Their ability to manage setbacks and challenges and provide attuned care and support is also compromised.</p> <p>Supervision takes place infrequently or is given insufficient priority as a key element of a staff support and development framework. It is limited in its breadth and scope and provides few opportunities for reflection. Supervisors and staff are unclear about the purpose and principles of professional supervision. Records do not reflect discussion and decision-making.</p> <p>Systems for identifying and meeting learning needs are not robust enough and result in gaps remaining unfilled.</p> |

Scrutiny and improvement toolbox

| Scrutiny and improvement support actions | Key improvement resources |
|--|--|
| <ul style="list-style-type: none"> • Obtain the views of children and young people, family members, visitors, staff, managers and other professionals. • Observe staff practice and interactions. • Review the service's training analysis, plans and records and the extent to which these reflect the aims and objectives and needs of young people experiencing care. • Look at records of observation of staff practice, records of supervision and appraisal. • Consider any disciplinary records: how does the service respond to practice issues? • Review the system for staff support and welfare and learning and development policies and procedures. • Look at the system for monitoring staff registration with professional bodies and achievement of minimum qualifications. | <p>Codes of Practice for Social Service Workers and Employers (SSSC): https://www.sssc.uk.com/knowledgebase/article/KA-02412/en-us</p> <p>The Code: Professional Standards of Practice and Behaviour for Nurses, Midwives and Nursing Associates (NMC): https://www.nmc.org.uk/globalassets/sitedocuments/nmc-publications/nmc-code.pdf</p> <p>The Standards for Registration: Mandatory Requirements for Registration with the General Teaching Council for Scotland (GTCS): http://www.gtcs.org.uk/web/FILES/the-standards/standards-for-registration-1212.pdf</p> <p>The Framework for Continuous Learning in Social Services (SSSC): http://www.continuouslearningframework.com</p> <p>Common Core Skills and National Occupational Standards (SSSC): http://learningzone.workforcesolutions.sssc.uk.com/course/view.php?id=83</p> <p>Insights: Achieving Effective Supervision (IRISS): https://www.iriss.org.uk/resources/insights/achieving-effective-supervision</p> <p>Supervision learning resource (SSSC): http://www.stepintoleadership.info/assets/pdf/SSSC-Supervision-learning-resource-Sept-16.pdf</p> |

Scrutiny and improvement toolbox

Scrutiny and improvement support actions

Key improvement resources

Raising Concerns in the Workplace: Guidance for Employers, Social Service Workers and Social Work Students (Scottish Social Services Council and the Care Inspectorate):

<https://www.careinspectorate.com/index.php/news/5048-new-raising-concerns-in-the-workplace-guidance-for-employers-social-service-workers-and-social-work-students-published>

Quality indicator 3.3: Staffing levels are right and meet children and young people's needs, with staff working well together

Key areas include the extent to which:

- there is an effective process for assessing how many staff or staff hours are needed
- the skill mix, numbers and deployment of staff meet children and young people's needs
- staff are flexible and support each other to work as a team to benefit children and young people.

| Quality illustrations | |
|--|---|
| Very good | Weak |
| A process of continuous assessment determines the numbers, experience, qualifications and skill mix of staff required throughout the day and night. It takes account of the complexity of individual and group need, any risks and a range of other factors. | <p>The number of staff or staff hours being deployed at one time is relatively static, with infrequent reviews or adjustments to meet changing needs.</p> <p>There is an over-reliance on agency or sessional staff. This leads to children and young people experiencing a lack of consistency and stability in how their care and support is provided, and limits their ability to build trusting relationships with staff.</p> |
| <p>The service has the right number of staff with the right skills and experience working at all times. Staff have time to provide care and support with compassion, and to spend meaningful time with individual children and young people.</p> <p>Staff are clear about their roles and are deployed effectively. They help each other by being flexible in response to changing situations to ensure care and support is consistent and stable. The staff group is diverse enough to meet needs and allow children and young people to have a meaningful say in who is caring for them.</p> | There is a minimal number of staff at any one time and this is sometimes insufficient to fully meet diverse needs. Staff frequently work excessive hours or under pressure, leading to some aspects of care and support being neglected, with negative outcomes. Children and young people, or visitors, perceive staff to be too busy to provide good care. Planned activities are disrupted. |

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| <p>Children and young people and the adults caring for them benefit from a warm atmosphere created by good working relationships, support and mutual respect. There is effective communication between staff, with opportunities for discussing their work and how best to improve outcomes for children and young people.</p> <p>High levels of motivation and good team working mean that staff spend as much time as possible with children and young people.</p> <p>There is recognition of the important role played by staff who are not involved in providing direct care for children and young people. They are empowered to contribute to their support and to build positive relationships with them.</p> | <p>Pressure on staff leads to an over-emphasis on completing designated tasks without regard for the wider needs of either children and young people or colleagues.</p> <p>Care and support is at a basic or superficial level, with little time for meaningful communication and support.</p> <p>Communication and team building may suffer due to lack of time and affect staff motivation and morale. This has a negative impact on children and young people.</p> |
| <p>Staff turnover is minimal and continuously monitored. There is proactive use of a range of strategies for retaining skilled and experienced staff so that children and young people benefit from stable, enduring relationships.</p> | <p>There is a lack of understanding of attachment and the importance of continuity of relationships for children and young people. The service does not use targeted actions to address high turnover, based on accurate data and analysis.</p> |

Scrutiny and improvement toolbox

| Scrutiny and improvement support actions | Key improvement resources |
|---|---|
| <ul style="list-style-type: none"> • Obtain the views of children and young people, family members, visitors, staff, managers and other professionals. • Observe staff practice and interactions. • Review the system for assessing staffing levels and deployment. Examine how young people's assessments and personal plans and incident analysis inform this process. • Examine staff rotas. • Review staff handover practices and records. | <p>Records that all registered care services (except childminding) must keep and guidance on notification reporting (Care Inspectorate):</p> <p>https://hub.careinspectorate.com/media/1601/records-that-all-registered-care-services-except-childminding-must-keep.pdf</p> |

Key question 4: How good is our setting?

This key question has three quality indicators associated with it.

They are:

- 4.1 Children and young people experience high quality facilities.
- 4.2 The setting enables children and young people to thrive and develop their independence.
- 4.3 Children and young people can be connected with and involved in the wider community.

Quality indicator 4.1: Children and young people benefit from high-quality facilities

Key areas include the extent to which:

- the setting is well furnished, comfortable and homely
- the setting and equipment are safe, secure and well maintained
- children and young people's information is securely stored and managed.

| Quality illustrations | |
|---|---|
| Very good | Weak |
| The setting is very comfortable, furnished to a very high standard, welcoming and has plenty of natural light. It gives a strong message to children and young people that they matter. They have ample space for their needs. | The setting may look or feel institutionalised. It is a clinical or functional environment, rather than domestic and homely in nature. There is a lack of attention to detail such as homely touches, decoration and the quality of furniture. There may be unpleasant smells or intrusive noise levels. |
| Well-functioning arrangements for monitoring, maintenance and repair of the setting, including equipment and vehicles, are consistently implemented. Damaged items are promptly replaced. Robust infection control and food safety practices provide high levels of safety for children and young people. These are supported by effective quality assurance practices. | Essential equipment does not fully function or breaks down regularly. Standards of hygiene or food safety are deficient. |
| <p>The service implements risk assessment and risk management processes that ensure the highest levels of safety and security for children and young people, visitors, staff and the community.</p> <p>Any use of CCTV is lawful, fair, proportionate and protects children and young people's dignity. It is only used for purposes that support the delivery of safe, effective and compassionate care.</p> | <p>The service is not successful in achieving a balance between safety and security and may unlawfully or unnecessarily restrict children and young people's rights, including the right to privacy.</p> <p>Children and young people are not told or consulted about any CCTV or informed of their rights.</p> |

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| Protection of children and young people's personal information is paramount and complies with relevant best practice Leaders and staff are well-informed about their responsibilities. | There is a lax approach to safeguarding children and young people's confidentiality. This puts the security of their personal information at risk. They do not know how their information is used or with whom it is shared. |
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Scrutiny and improvement toolbox

| Scrutiny and improvement support actions | Key improvement resources |
|---|--|
| <ul style="list-style-type: none"> Obtain the views of children and young people, family members, visitors, staff, managers and other professionals. Observe staff practice and interactions. Inspect the environment inside and out, including for example equipment and furnishings and first aid equipment. Examine accident, incident and complaint records, relevant risk assessments, maintenance and repair records (including for service vehicles and equipment), and food and water safety records. Review staff training records. Review use of CCTV and the confidentiality/data protection policy. | <p>Rights, Risks and Limits to Freedom (Mental Welfare Commission Scotland): https://www.mwscot.org.uk/publications/good-practice-guides</p> <p>Guidance for care providers in Scotland using CCTV (closed circuit television) in their services (Care Inspectorate): https://hub.careinspectorate.com/media/1515/guidance-for-care-providers-in-scotland-using-cctv-in-their-services.pdf</p> <p>Information about health and safety at work: https://www.hse.gov.uk</p> |

Quality indicator 4.2: The setting enables children and young people to thrive and develop their independence*

Key areas include the extent to which:

- the setting enables children and young people to thrive and develop the skills they need
- children and young people influence the layout and how the setting is used.

| Quality illustrations | |
|--|---|
| Very good | Weak |
| <p>Children and young people have high quality care and support in a setting that is designed or adapted to meet their needs. The ambience strongly enhances their experiences by contributing to the provision of therapeutic care and support. The service's aims and objectives are central to the design process. Whatever the size, the setting ensures that children and young people experience the advantages of small group living.</p> <p>Children and young people have access to the facilities, equipment and technology they need when they need them. These include enough toilets and bathrooms, with separate facilities for staff and visitors, and somewhere quiet with a desk and chair to do their homework or other projects. Outdoor areas are well equipped and provide pleasant space for sport, play and relaxation.</p> | <p>Aspects of the design, size, layout, location or number of children and young people, have a negative impact on children and young people's quality of life. Insufficient attention is paid to ensuring that the setting can continue to meet their needs as they grow and develop.</p> <p>Facilities, equipment or technology are lacking or do not meet children and young people's individual and group needs.</p> <p>The setting does not support children and young people to develop the skills they need to thrive and get the most out of life. Their freedom of movement is unnecessarily restricted without a clear justification based on risk. Children and young people do not benefit from suitable, secure outdoor space or use it to its full potential.</p> |

*In this setting we recognise children and young people can be interdependent on others to support their independence. Interdependence means the dependence of a child or young person on other people.

Children and young people use kitchen and laundry facilities, other communal areas and outdoor areas. These lend themselves well to children and young people developing the life skills strongly enhances they need at a pace that suits them. There may be opportunities to grow food either in the outdoor space or local community.

Children and young people experience an educationally rich environment, with access to a wide selection of appropriate reading materials, toys and games.

Children and young people's choice and control over their environment is maximised. In particular, the heating, lighting and ventilation in their rooms are adjusted to suit their needs and preferences, and they have a view to the outdoors. They have a say in the décor of their rooms to suit their taste and personality.

Children and young people are regularly involved in giving their views about the setting, including how well it works for them and what could be improved. They feel listened to and can influence decoration, new design, changes and upgrades.

There is a risk-averse or bureaucratic approach to the way the setting is managed, designed or furnished. This leads to limited control, choice and flexibility for individual children and young people. They are over-reliant on staff to keep their things safe or do not have space to store their possessions.

Scrutiny and improvement toolbox

| Scrutiny and improvement support actions | Key improvement resources |
|---|---|
| <ul style="list-style-type: none"> • Speak with children and young people, family members, visitors, staff, managers and other professionals. • Inspect the environment inside and out. • Observe young people making use of the environment. • Review records of young people's meetings or responses to questionnaires about the setting. | <p>Playing it Safe (SCCYP): https://hub.careinspectorate.com/media/1298/playing-it-safe-a-study-of-the-regulation-of-outdoor-play-for-children.pdf</p> <p>Learning Disabilities and Behaviour that Challenges: Service Design and Delivery (NICE): https://www.nice.org.uk/guidance/ng93</p> |

Quality indicator 4.3: Children and young people can be connected with and involved in the wider community

Key areas include the extent to which:

- the setting supports children and young people to stay connected to family and friends
- the setting provides a sense of community and belonging
- children and young people benefit from meaningful links with the local community.

| Quality illustrations | |
|---|--|
| Very good | Weak |
| <p>Children and young people are actively supported and enabled to maintain family relationships. Their parents, siblings, other relatives and friends are confident of a welcoming and inclusive culture.</p> <p>Children and young people maintain a strong connection with the wider world. This includes television and radio, as well as easy access and support to safely use the internet, to help them regularly stay in touch with others.</p> | <p>The service is not committed to, or has limited ways of supporting the inclusion of family and friends.</p> <p>While there is access to the internet, it may be unreliable, and creative use of other options are not routinely supported to allow children and young people to stay in touch.</p> |
| <p>Children and young people's positive relationships with their peers are developed and promoted. They have space to socialise, including spending time in small groups as well as taking part in larger group events.</p> <p>In addition to high quality practical and emotional support when they have left care, children and young people benefit from continuity of relationships with the people who matter to them.</p> <p>Staff model behaviours and pro-actively support children and young people to develop interpersonal skills in their journey to adulthood.</p> | <p>There is limited flexible space for promoting peer relationships or a sense of community. Children and young people lack choice or privacy to have friends visit or develop friendships outside the service.</p> <p>When they leave their care setting, young people experience unnecessary disruption in their lives and in key relationships. They may feel unprepared or lacking in the support they need to sustain them at this critical time.</p> |

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|---|---|
| Children and young people benefit from the service's strong links with the community. This ensures that at the appropriate time and as part of transition planning, they are enabled to take advantage of active involvement in the community. As a result, they develop responsibility and a sense of belonging. | The culture of the service is insular, with limited links to the local community. Children and young people may spend most of their time in the service and have limited opportunities for getting out and about. |
|---|---|

| Scrutiny and improvement toolbox | |
|--|---|
| Scrutiny and improvement support actions | Key improvement resources |
| <ul style="list-style-type: none"> • Speak with children and young people, family members, visitors, staff, managers and other professionals. • Observe practice and interactions. • Review young people's personal plans and daily records for evidence of their involvement in the community. • Review how staff support young people to keep in touch and make connections. | <p>Throughcare and Aftercare Services in Scotland's Local Authorities: A National Study (CELCIS and STAF): https://www.celcis.org/files/1814/4050/5854/Throughcare-and-aftercare-in-scotlands-local-authorities.pdf</p> <p>The Support and Assistance of Young People Leaving Care (Scotland) Amendment Regulations 2015: http://www.legislation.gov.uk/ssi/2015/62/regulation/2/made</p> <p>Keys to Life (Scottish Government): https://keystolife.info/wp-content/uploads/2019/03/the-keys-to-life-full-version.pdf</p> <p>Children and Young People (Scotland) Act (2014): Guidance on Part 10: Aftercare (Scottish Government): https://hub.careinspectorate.com/media/1136/children-and-young-people-scotland-act-2014-guidance-on-part-10-aftercare.pdf</p> |

Key question 5: How well is our care planned?

This key question has two quality indicators associated with it.

They are:

- 5.1 Assessment and care planning reflects children and young people's outcomes and wishes.
- 5.2 Parents, carers and family members are involved.

Quality indicator 5.1: Assessment and care planning reflects children and young people's needs and wishes

Key areas include the extent to which:

- the service uses personal plans to deliver care and support effectively
- personal plans are reviewed and updated regularly, and as children and young people's circumstances, needs and desired outcomes change
- children and young people are involved in directing and leading their own care and support.

| Quality illustrations | |
|---|--|
| Very good | Weak |
| <p>Children and young people lead positive, healthy, enjoyable and meaningful lives through the implementation of high quality, SMART, care planning strategies. These are underpinned by robust assessment of need and risk. They benefit from a dynamic and aspirational approach which consistently informs all aspects of care and support. The service actively seeks and enables multi-agency involvement in the planning process.</p> <p>Children and young people's records are of a consistently high standard and are informed by rights, values, principles and codes of practice.</p> | <p>The standard of assessment or personal planning is weak, with insufficient attention to children and young people's strengths and potential. The quality of their outcomes and experiences may be limited by the low expectations of those involved in planning.</p> <p>Leaders do not maintain oversight of the assessment and planning process, and there is a lack of effective quality assurance. Plans are static documents rather than tools to inform staff practice and approaches to care and support. They may not reflect the care and support provided, experienced or needed by children and young people.</p> |

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| <p>There is high quality evaluation and recording of children and young people's development and progress. Their personal plans are regularly reviewed and amended in accordance with their changing needs, circumstances and desired outcomes. This process is informed by research and good practice and considers the views of all relevant professionals.</p> | <p>Personal plans are not reviewed in line with guidance or legislation. There is a lack of multi-disciplinary involvement in the care planning and review process and this may compromise its quality. Assessment and evaluation against intended outcomes do not form an integral part of the review process.</p> |
| <p>Children and young people are at all times at the heart of plans for their care and support. They are enabled to lead and direct their development so they feel a real sense of ownership and can clearly recognise their own voice. They receive full support to communicate what their outcomes should be, including advocacy where required. Their plans detail in plain language what matters to them, to support a clear shared understanding.</p> | <p>Children and young people have limited involvement in the care and support planning and review process. This means they do not consistently experience care and support in line with their wishes and preferences. When plans conflict with their wishes, there is no clear legal justification or they do not receive a proper explanation.</p> <p>Plans and reviews are not routinely made available or provided in an accessible format to children and young people and their representatives.</p> |

Scrutiny and improvement toolbox

| Scrutiny and improvement support actions | Key improvement resources |
|--|--|
| <ul style="list-style-type: none"> • Speak with children and young people, family members, visitors, staff, managers and other professionals. • Observations of staff working with children and young people. • Review children and young people's assessments, personal plans and reviews. | <p>Public Services Reform (Scotland) Act 2010, asp 8: https://www.legislation.gov.uk/asp/2010/8/contents</p> <p>Children and Young People (Scotland) Act 2014, asp 8: http://www.legislation.gov.uk/asp/2014/8/pdfs/asp_20140008_en.pdf</p> <p>The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, SSI 2011/210: http://www.legislation.gov.uk/ssi/2011/210/pdfs/ssi_20110210_en.pdf</p> <p>Understanding Personal Outcomes (SSSC): http://learn.sssc.uk.com/personal_outcomes/Personal_Outcomes_booklet_p2_FV_GM.pdf</p> <p>A Guide to Youth Justice in Scotland: Policy, Practice and Legislation (Section 3: Theory and Methods) (CYCJ): http://www.cycj.org.uk/resource/youth-justice-in-scotland-guide/</p> <p>Leading for Outcomes: Children and Young People (IRISS): https://www.iriss.org.uk/sites/default/files/iriss-leading-for-outcomes-children-and-young-people.pdf</p> |

Scrutiny and improvement toolbox

Scrutiny and improvement support actions

Key improvement resources

Further information, advice and evidence on personal outcomes approaches:

<https://personaloutcomescollaboration.org/>

My Anticipatory Care Plan (Healthcare Improvement Scotland):

<https://ihub.scot/media/1982/my-acp.pdf>

Quality indicator 5.2: Parents, carers and family members are involved

Key areas include the extent to which:

- parents, carers and family members are involved in delivering care and support
- the views of parents, carers and family members are heard and meaningfully considered.

| Quality illustrations | |
|--|--|
| Very good | Weak |
| <p>The service is influenced wherever possible and appropriate by parents, carers and family members. Their views and wishes also strongly inform the individual assessment, planning and review process, even where this challenges previous approaches. Where they have additional communication needs, or English is not a first language, they have ready access to the right services and tools to ensure they are fully included.</p> | <p>Parents, carers and family members may feel overlooked or are not given enough encouragement and support to make their views known or contribute to decision-making. The quality of assessments, plans and evaluation may be compromised because insufficient weight is given to their knowledge about what is or is not likely to work for children and young people.</p> |
| <p>There is a supportive and inclusive approach to working in partnership with parents, carers and family members in the delivery of care and support. They make suggestions, comments or complaints, knowing that these are always listened to and acted on in an honest and transparent way.</p> <p>Leaders and staff always sensitively manage any conflicts between children and young people and family members' views and wishes. This shows due regard for consent and other legal considerations. At all times, high expectations and aspirations and the best interests of children and young people are at the forefront of the way care and support is delivered.</p> | <p>Leaders and staff either seldom engage with children and young people's families or fail to do so in a meaningful way. There are limited ways for parents, carers and family members to be actively involved. Changes to how care and support is provided are rarely made as a result of their involvement.</p> <p>Leaders and staff are not well-informed about who has parental responsibility or other legal powers and may fail to fulfil their legal obligations in relation to information sharing and consent.</p> |

Scrutiny and improvement toolbox

| Scrutiny and improvement support actions | Key improvement resources |
|---|---|
| <ul style="list-style-type: none"> • Speak with children and young people, family members, visitors, staff, managers and other professionals. • Review children and young people's assessments, personal plans and reviews. • Observe staff working with parents, carers and family members. | <p>Parental rights and responsibilities under the Children (Scotland) Act 1995 (Scottish Government):</p> <p>http://www.legislation.gov.uk/ukpga/1995/36/part/I/crossheading/parental-responsibilities-and-parental-rights</p> <p>Guidance on Looked After Children placed in Residential Establishments – Looked After and Accommodated Children (Scotland) Regulations 2009, Part 9, regs 34 & 35:</p> <p>https://www.gov.scot/publications/guidance-looked-children-scotland-regulations-2009-adoption-children-scotland-act-2007/pages/12/</p> |

Key question 7:

How good is our care and support during the COVID-19 pandemic?

This key question has three quality indicators associated with it.

They are:

- 7.1 Children and young people's wellbeing and potential is fully supported and fulfilled.
- 7.2 Procedures and practices support a safe environment for both children and young people and staff.
- 7.3 Management, staffing and practice frameworks drive and support the best outcomes for children and young people.

Quality indicator 7.1: Children and young people's wellbeing and potential is fully supported and fulfilled

Key areas include the extent to which:

- children and young people are safe, and feel loved and valued
- children and young people have positive learning experiences, achieve their goals, and reach their potential
- children and young people enjoy contact with families, carers, friends, and this is maximised.

| Quality illustrations | |
|---|---|
| Very good | Weak |
| <p>Staff demonstrate the principles of the Health and Social Care Standards in their day-to-day practice. This means that children and young people experience care and support with compassion because they have warm, nurturing and positive relationships with staff.</p> <p>Staff recognise the impact that protective equipment, for example, masks and visors, may have on communication and relationships with the children and young people they support. They adjust how they communicate and take sensitive steps to minimise any negative impact.</p> <p>Children and young people feel safe, and staff demonstrate a clear understanding of their responsibilities to protect children and young people from harm, including the risk of infection. Measures are in place to prevent harm, and staff are confident that if they identify concerns or improvements, the open and supportive culture within the service ensures that they are responded to appropriately.</p> | <p>There is a lack of recognition of children and young people's interests, culture or history, including sexuality, gender identity, spirituality or important relationships, and of the importance of this for each young person.</p> <p>Children and young people's human rights are compromised because there is a risk-averse approach to restrictions in place to prevent the spread of infection. The restrictions are not reasonable, justifiable, or in line with current good practice.</p> <p>Children and young people may not be or feel safe. Staff are not clear about their role in identifying and reporting concerns about children and young people's safety and wellbeing.</p> <p>Children and young people's health and wellbeing may be compromised because processes are not in place to support effective communication about changes in their condition. Staff lack understanding about the potential for atypical presentation of COVID-19, and they do not</p> |

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| <p>Children and young people are supported to be emotionally resilient during the pandemic through the very good relationships with staff and staff expertise in trauma informed care. This includes supporting children and young people who are experiencing stress and distress in response to the changes in the environment and routines and exacerbated by media coverage.</p> | <p>escalate concerns, seeking clinical advice as necessary.</p> |
| <p>Children and young people are supported to understand the necessity for any restrictions placed on their freedom of movement, choice and control to prevent the spread of COVID-19. Where restrictions are in place, these are kept to a minimum, undertaken sensitively and in line with good practice guidance. This includes ensuring all restrictions are documented, linked to risk and implemented with the involvement and consent of relevant individuals.</p> <p>Personal plans reflect children and young people's rights, choices and wishes. They are person-centred and include information on children and young people's preferences for keeping in touch with people who are important to them, the supports needed to achieve this and ways they can remain active and engaged.</p> <p>Children and young people benefit from high quality interaction and engagement from staff. They experience support that meets their needs and promotes their independence, dignity, rights, privacy and choice. This includes encouragement and resources to take part in meaningful activities that validate the young person's identity and provide opportunities to feel included and attached to others, resulting in psychological comfort.</p> | <p>Decisions about care and treatment for children and young people are not made on an individual basis or based on their best interests. They are not made in consultation with the individual or their families/representatives, taking account of any expressed wishes contained in their personal plan.</p> <p>Despite the best efforts of staff, care and support is basic, with little time for speaking with children and young people or supporting them to maintain interests.</p> <p>The quality of children and young people's experiences is negatively affected because staff do not know them as individuals, or do not use their personal plan to enhance both the care provided and social interactions.</p> <p>Outdoor space may not be freely accessible to children and young people, for example, due to staffing limitations, and there is a risk-averse approach to this.</p> <p>Children and young people's psychological needs are not being met as they lack a sense of purpose or direction because there is not enough additional structure or stimulation when they cannot pursue their normal routines and daily activities.</p> |

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| <p>Children and young people continue to benefit from education and have access to the tools and equipment necessary to fully participate in blended learning. There continues to be an educationally rich environment and quiet space suitable to study and learn. Staff use imaginative ways to support learning during these times where access to school buildings is limited due to COVID-19.</p> <p>Children and young people are encouraged to remain as active as they can be, including using outdoor space where possible.</p> | <p>Personal plans are basic or static documents and are not routinely used to inform staff practice and approaches to care and support during this challenging time.</p> |
| <p>Children and young people have clear plans in place for staying connected with the people who are important to them. Staff ensure that these are supported as a priority with easy access to the internet and a telephone. They are routinely and actively supported to make best use of these, reducing the potential impact of visiting restrictions.</p> <p>Family members and professionals know about visiting arrangements and keeping in touch because these are clearly communicated to everyone.</p> | <p>Leaders in the service have not co-ordinated and communicated a clear plan for how the service is responding to COVID-19 for children and young people, staff, their families and carers.</p> <p>The culture in the service is inward-looking, with limited attempts to establish alternative methods of engaging with families, professionals and other stakeholders.</p> <p>Families and others who are important to children and young people are not kept up to date about the impact of COVID-19 in the service.</p> <p>Staff lack empathy about the impact and sense of loss experienced by children and young people who are unable to visit family, friends and partners. Expressions of distress are treated punitively.</p> |

Scrutiny and improvement toolbox

| Scrutiny and improvement support actions | Key improvement resources |
|--|---|
| <ul style="list-style-type: none"> • Observation of staff practice and interactions. • Discussion with: <ul style="list-style-type: none"> - children and young people - staff - relatives - social workers - advocacy workers - other professionals. • Personal plans and relevant documentation. • Policy or procedure for accessing other services. • Observation of the setting, inside and out. | <p>Coronavirus (COVID-19): Residential Child Care:</p> <p>https://www.gov.scot/binaries/content/documents/govscot/publications/advice-and-guidance/2020/04/coronavirus-covid-19-residential-childcare/documents/coronavirus-covid-19-residential-childcare-guidance/coronavirus-covid-19-residential-childcare-guidance/govscot%3Adocument/Coronavirus%2B%2528COVID-19%2529%2B-%2Bresidential%2Bchildcare.pdf</p> <p>Health Protection Scotland guidance:</p> <p>https://www.hps.scot.nhs.uk/a-to-z-of-topics/covid-19/#publications</p> <p>Coronavirus (COVID-19) ethical advice and support framework:</p> <p>https://www.gov.scot/publications/coronavirus-covid-19-ethical-advice-and-support-framework/</p> <p>Mental Welfare Commission. COVID-19 FAQ for practitioners – advice notes:</p> <p>https://www.mwcscot.org.uk/sites/default/files/2020-10/Covid-19%20advice%20note%20v17%2015%20Oct%202020.pdf</p> |

Scrutiny and improvement toolbox

Scrutiny and improvement support actions

Key improvement resources

Guide for repurposing prescription only medications in care homes:

https://www.careinspectorate.com/images/documents/coronavirus/Guidance_for_repurposing_medicines_May_2020.pdf

Communication for people with sensory loss during the COVID-19 pandemic: advice for health and social care staff:

<https://www.pmhn.scot.nhs.uk/wp-content/uploads/2020/04/COVID-19-Communication-for-people-with-Sensory-Loss.pdf>

Information on 'Near Me' video consulting:

<https://www.careinspectorate.com/index.php/coronavirus-professionals/near-me>

Quality indicator 7.2: Procedures and practices support a safe environment for both children and young people and staff

Key areas include the extent to which:

- children and young people are protected as staff take all necessary precautions to prevent the spread of infection.

| Quality illustrations | |
|--|---|
| Very good | Weak |
| <p>Staff carrying out housekeeping and cleaning in the service have access to and are up to date with Health Protection Scotland (HPS) guidance, are familiar with required environmental and equipment decontamination processes specific to the COVID-19 pandemic. They are trained in these processes and wear the appropriate personal protective equipment (PPE). They adopt systematic measures to minimise cross infection between different areas of the environment.</p> <p>Leaders carry out regular observations and audits of staff, and staff support each other, to ensure that everyone maintains good practice in relation to PPE and infection prevention and control. This includes the safe management of linens, clothing and waste.</p> <p>Where necessary, there are clear signs directing people to handwashing facilities (and reminders of the recommended technique) that reflect the needs of those using the service, for example accessible pictorial or written cues.</p> <p>All staff are able to recognise and respond to suspected or confirmed cases of COVID-19, including following local reporting procedures and contacting local health protection teams.</p> | <p>Staff working in the service are not familiar with, or do not follow, up-to-date guidance on infection prevention and control. This means that children and young people are not protected from the spread of infection. This may be because there are not enough domestic staff, cleaning equipment or because staff have not had the necessary support to devise effective cleaning schedules and regimes.</p> <p>Staff show limited understanding of when and how they should use PPE and other infection prevention and control methods such as handwashing and social distancing. This is because training has been insufficient to enable staff to feel confident about the correct measures.</p> <p>Managers do not ensure appropriate actions are taken in response to an incident or outbreak or follow up on actions identified.</p> <p>Sufficient attention is not paid to the difficulties children and young people may have in recognising when and how they should follow infection control and social distancing guidance. This may lead to them not receiving the support they require and putting themselves and others at risk.</p> |

Staff are proactive in recognising and responding to challenges children and young people may have in following guidance on social distancing and infection prevention and control, including those with reduced capacity, sensory loss and physical and learning disabilities.

Decisions on whether it is appropriate for children and young people moving into the service to be tested are made locally in discussion with the health protection team. Children and young people who test positive or are symptomatic are isolated for the required timescales. Children and young people who are moving in from a household where there is someone affected with COVID-19 are isolated for the required timescales from the date of admission.

Leaders in the service understand the potential challenges presented by COVID-19. They work in partnership with GPs, pharmacists and other health professionals to ensure they have timely access to medications to help alleviate symptoms.

Staff do not have ready access to the appropriate PPE, either due to poor planning or storage of supplies.

Children and young people are not supported to understand and make decisions about testing and attempts to seek informed consent from individuals or their representatives are not made.

Children and young people may not always receive the right medication or treatment at the right time, with the potential to negatively affect their health. Repurposing of medication is used inappropriately in place of good medication management systems. There is a risk-averse approach to enabling young people to manage their medication.

Scrutiny and improvement toolbox

| Scrutiny and improvement support actions | Key improvement resources |
|--|--|
| <ul style="list-style-type: none"> • Observation of staff practice and interactions. • Discussion with: <ul style="list-style-type: none"> - children and young people - staff - relatives - social workers - advocacy workers - other professionals. • Cleaning matrix and schedules. • Policies and procedures. • Inspection of the environment and equipment. • Availability of PPE at key points (including alcohol-based hand rub). • Availability of appropriate cleaning materials. | <p>Coronavirus (COVID-19): Residential Child Care:</p> <p>https://www.gov.scot/binaries/content/documents/govscot/publications/advice-and-guidance/2020/04/coronavirus-covid-19-residential-childcare/documents/coronavirus-covid-19-residential-childcare-guidance/coronavirus-covid-19-residential-childcare-guidance/govscot%3Adocument/Coronavirus%2B%2528COVID-19%2529%2B-%2Bresidential%2Bchildcare.pdf</p> <p>COVID-19 Incident or outbreak control tool for social or community care or residential settings:</p> <p>https://www.hps.scot.nhs.uk/web-resources-container/COVID-19-Supplementary-resources-for-care-home-settings/</p> <p>Infection prevention and control (IPC) educational resources:</p> <p>https://www.hps.scot.nhs.uk/a-to-z-of-topics/covid-19/workforce-educational-resources/#title-container</p> <p>COVID-19 information and guidance for care homes:</p> <p>https://www.hps.scot.nhs.uk/web-resources-container/covid-19-information-and-guidance-for-care-home-settings/</p> |

Scrutiny and improvement toolbox

Scrutiny and improvement support actions

Key improvement resources

Best Practice - How to Hand Wash visual:

<http://www.nipcm.hps.scot.nhs.uk/appendices/appendix-1-best-practice-how-to-hand-wash/>

Best Practice - How to Hand Rub visual:

<http://www.nipcm.hps.scot.nhs.uk/appendices/appendix-2-best-practice-how-to-hand-rub/>

COVID-19 – the correct order for donning, doffing and disposal of Personal Protective Equipment (PPE):

<https://www.hps.scot.nhs.uk/web-resources-container/covid-19-the-correct-order-for-donning-doffing-and-disposal-of-personal-protective-equipment-ppe-for-healthcare-workers-hcws-in-a-primary-care-setting/>

Unsuspected COVID-19 PPE in Social/Community/ Residential poster:

https://hpspubsrepo.blob.core.windows.net/hps-website/nss/3006/documents/2_non-covid-19-ppe-poster-A3-social-community-ppe-poster.pdf

Suspected or confirmed COVID19 PPE for health and social care poster:

https://hpspubsrepo.blob.core.windows.net/hps-website/nss/3006/documents/3_covid-19-ppe-poster-A3-RED-mixed-AGP-general.pdf

Young inspectors video to share their thoughts and ideas about staying safe and getting through the lockdown:

https://www.youtube.com/watch?utm_medium=email&utm_source=govdelivery&v=G6K3-eweS_0

Quality indicator 7.3: Management, staffing and practice frameworks drive and support the best outcomes for children and young people

Key areas include the extent to which:

- staffing arrangements are right and are responsive and flexible
- staff are confident and well supported
- staff knowledge and skills improve outcomes for children and young people.

| Quality illustrations | |
|--|---|
| Very good | Weak |
| <p>The right number of staff, with the right skills, are working in the service at all times because providers and leaders understand children and young people's needs and wishes.</p> <p>Staff have time to provide high quality care and support with compassion and engage in meaningful conversations and interactions with children and young people.</p> <p>Staffing arrangements are determined by a process of continuous assessment. This includes consideration of the number of children and young people being supported in their rooms due to self-isolating, requiring one-to-one support, or additional support to maintain good hygiene and infection control practices.</p> <p>Staff are clear about their roles and are deployed effectively. Staff help each other by being flexible in response to changing situations to ensure care and support is consistent and stable.</p> | <p>Staffing arrangements are relatively static, with infrequent reviews, and are not adjusted to meet children and young people's changing needs. Staff numbers and mix are not determined by the use of appropriate measures or feedback.</p> <p>The service does not have a staffing contingency plan in the event that staff are absent as a result of illness, self-isolation or exclusion following a positive COVID-19 polymerase chain reaction (PCR) swab test.</p> <p>Staffing numbers are minimal and sometimes insufficient to fully meet children and young people's needs. Staff work under pressure, and important aspects of care and support may be missed, affecting outcomes for children and young people.</p> <p>There may be an over-reliance on agency staff, which leads to children and young people experiencing a lack of consistency in how their care and support is provided. There are no protocols in place about the use of agency, sessional or bank staff, which are designed to help prevent transmission of COVID-19.</p> |

| | |
|--|--|
| <p>Staff benefit from personal and professional wellbeing support that includes planning for managing difficult situations, personal safety, and assessment of workload. There is supportive and visible leadership that enables them to voice their concerns, share ideas, explore ways to promote resilience, and achieve an appropriate work-life balance.</p> <p>Management show an appreciation of the mental wellbeing stressors on staff as a consequence of COVID-19. This includes being responsive to staff members individual vulnerabilities and family circumstances.</p> | <p>Staff feel fearful about the risks associated with COVID-19 because they lack confidence in the leadership of the service or the protective measures that have been introduced, or because there is poor support and communication.</p> <p>Pressure on staff leads them to stick to their designated tasks because there is no capacity to respond to other demands.</p> |
| <p>Staff who are not involved in providing direct care and support understand how they can contribute to keeping children and young people safe, including supporting good hygiene and infection control.</p> <p>Staff are supported to keep up to date with current and changing practice, with easy access to a range of good practice guidance relating to supporting children and young people during the COVID-19 pandemic.</p> <p>Children and young people are confident that staff have the necessary skills, training and competence to support them.</p> <p>Observations of staff practice are regularly undertaken to assess learning and competence. Outcomes from this are discussed through team discussions, reflective accounts or supervision. Informal support within the staff team, particularly in relation to infection control measures, is welcome and valued.</p> | <p>Training does not reflect the changing needs of children and young people being supported in the service during the COVID-19 pandemic. There is limited access to good practice guidance or opportunity for further discussions to ensure that knowledge is consolidated and embedded into practice.</p> <p>There is no effective training analysis for the service or individual staff. The training plan and records are incomplete or held in a format that does not allow the identification of priorities.</p> <p>Staff feel anxious and defensive about making mistakes because there is a critical and punitive culture in the service that has been exacerbated by the unfamiliar protective restrictions introduced in response to the COVID-19 pandemic.</p> <p>Leaders do not engage with the additional support available during the pandemic, for example the recruitment portal, or make the required notifications to relevant bodies.</p> |

Children and young people can have confidence in their support because any redeployed, temporary or new staff have ready access to the right information about them, their needs, and the service.

Scrutiny and improvement toolbox

| Scrutiny and improvement support actions | Key improvement resources |
|---|--|
| <ul style="list-style-type: none"> • Observation of staff practice and interactions. • Discussion with: <ul style="list-style-type: none"> - children and young people - staff - relatives - social workers - advocacy workers - other professionals. • Staff training. • Records of support, supervision and learning and development activities. • Management/senior presence (in person and on-call system). • Evaluation of assessment of staffing arrangements, rotas and staff contingency plan. | <p>Guidance on testing and management of test positive residents and staff: https://www.hps.scot.nhs.uk/web-resources-container/guidance-on-covid-19-pcr-testing-in-care-homes-and-the-management-of-covid-19-pcr-test-positive-residents-and-staff/</p> <p>Coronavirus (COVID-19) testing: https://www.nhsinform.scot/illnesses-and-conditions/infections-and-poisoning/coronavirus-covid-19/test-and-protect/coronavirus-covid-19-testing</p> <p>Coronavirus (COVID-19) getting tested in Scotland: https://www.gov.scot/publications/coronavirus-covid-19-getting-tested/pages/who-can-be-tested/</p> <p>Care Inspectorate notification guidance: https://www.careinspectorate.com/images/documents/coronavirus/Records_that_all_registered_care_services_except_childminding_must_keep_and_guidance_on_notification_reporting_V7.pdf</p> |

Scrutiny and improvement toolbox

Scrutiny and improvement support actions

Key improvement resources

SSSC COVID-19 recruitment portal:
<https://news.sssc.uk.com/news/social-care-staffing>

National Wellbeing Hub for staff:
<https://www.promis.scot>

SSSC staff guidance, wellbeing and learning resources:
<https://www.sssc.uk.com/covid-19/>

COVID-19 learning materials for health and social care staff:
<https://learn.nes.nhs.scot/27993/coronavirus-covid-19>

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