

Care service inspection report

Gordonstoun School

School Care Accommodation Service

Gordonstoun Schools Ltd
Elgin
IV30 5RF

Type of inspection: Unannounced

Inspection completed on: 8 January 2015



HAPPY TO TRANSLATE

Contents

	Page No
Summary	3
1 About the service we inspected	5
2 How we inspected this service	7
3 The inspection	13
4 Other information	28
5 Summary of grades	29
6 Inspection and grading history	29

Service provided by:

Gordonstoun Schools Limited

Service provider number:

SP2006008231

Care service number:

CS2006117721

If you wish to contact the Care Inspectorate about this inspection report, please call us on 0345 600 9527 or email us at enquiries@careinspectorate.com

Summary

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

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

We gave the service these grades

Quality of Care and Support	5	Very Good
Quality of Environment	5	Very Good
Quality of Staffing	5	Very Good
Quality of Management and Leadership	6	Excellent

What the service does well

Gordonstoun School provides extremely good opportunities for students to achieve their potential in a stimulating and caring environment. Students are involved in the life of the school and encouraged to take responsibility for themselves, each other and the wider world.

What the service could do better

There have been ongoing difficulties ensuring that upper floor windows are restricted to opening only a safe distance. Despite attempts by staff at the school to do this it still needs to be resolved to ensure students safety.

What the service has done since the last inspection

The school has developed really good systems of sharing information. This and the support of a full-time clinical psychologist has further improved the support offered to students.

Areas of some of the boarding houses have been upgraded with plans for further upgrade to some bathrooms. An extension to the theatre was formally opened, providing an impressive facility for dance and drama. Pastoral staff are making very good progress with the qualifications they are required to have.

Conclusion

The staff at Gordonstoun School are continually looking at ways to develop the opportunities they offer to students to ensure that their boarding experience is a very positive one, provided in a safe, stimulating and caring environment. The school have embraced the Getting it Right for Every Child (GIRFEC) Agenda and have implemented comprehensive procedures to ensure all students get the support they need.

1 About the service we inspected

Gordonstoun School provides independent, co educational, non-denominational education for young people aged between 8 and 13 years in Aberlour House junior school, and between 13 and 18 years in the senior school. A small number of international students in the senior school may be older.

The schools pastoral aims include their intention to:

- Provide a family environment (in the boarding houses) in which students feel, comfortable, safe and secure in an atmosphere of mutual trust and respect.
- Provide equal opportunities for students.
- Encourage tolerance, understanding and positive interaction between students.
- Provide the conditions for students to develop their intellectual talents.
- Provide activities and projects which will encourage each student to develop spiritually, culturally, morally and socially.
- Develop students responsibility - for themselves, for others and for the environment.

The school is set in a rural area, beside the village of Duffus, near Elgin.

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at www.careinspectorate.com

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

Requirements and recommendations

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

- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service, but where failure to do so will not directly result in enforcement. Recommendations are based on the National Care Standards, relevant codes of practice and recognised good practice.
- A requirement is a statement which sets out what is required of a care service to comply with the Public Services Reform (Scotland) Act 2010 and

Regulations or Orders made under the Act or a condition of registration. Where there are breaches of Regulations, Orders or Conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Inspectorate.

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

Quality of Care and Support - Grade 5 - Very Good

Quality of Environment - Grade 5 - Very Good

Quality of Staffing - Grade 5 - Very Good

Quality of Management and Leadership - Grade 6 - Excellent

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

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0345 600 9527 or visiting one of our offices.

2 How we inspected this service

The level of inspection we carried out

In this service we carried out a medium intensity inspection. We carry out these inspections where we have assessed the service may need a more intense inspection.

What we did during the inspection

Gordonstoun School is registered with the Care Inspectorate to provide a school care accommodation service. Two inspectors, and a professional advisor (pharmacy) carried out an unannounced inspection of the service on Tuesday 18th and Wednesday 19th November 2014. A volunteer inspector also joined the inspection team on Tuesday 18th November 2014.

Verbal feedback was given to the Headmaster and Registered Manager (who is the Director of Pastoral Care), at the end of the inspection.

During the inspection process evidence was gathered from various sources, including the relevant sections of policies, procedures and other documents including:

- The School Development Plan 2013-14.
- Minutes of various meetings.
- Records relating to child protection issues.
- Transition planning for students with additional support needs.
- Student health and history consent forms.
- Self assessment of medication document
- Risk assessments for individual houses.
- The boarding house handbook.
- Parental, student and staff questionnaires.
- The Student Development Scheme.
- Literature relating to the school (The Gordonstoun Record, and Rank Scholars at Gordonstoun).
- Information on the Schools website.

Discussions with various people including:

- The Director of Pastoral Care
- The Head of Junior School
- Deputy Head (Staffing & Planning)
- The Director of Finance.

- The Child Protection Officer.
- The Clinical Psychologist
- Matrons and House Masters/Mistresses.
- Students of various ages/year groups
- Staff at the Medical Centre

The inspection team also joined students for lunch in the refectory, at morning Chapel, carried out an inspection of the premises and resources, and carried out a medication audit in two of the houses.

The professional advisor spent time with staff at the medical centre discussing imminent changes to the way this service is to be provided.

Grading the service against quality themes and statements

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

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

Inspection Focus Areas (IFAs)

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

Fire safety issues

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

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

The requirement

The Provider to implement effective procedures to ensure the safe administration of medication.

In order to achieve this the Provider to:

- a) Ensure that medication is appropriately stored.
- b) Ensure that medication recording systems accurately reflect the medication that has been administered and taken.
- c) Ensure that effective auditing and monitoring systems are in place.
- d) Ensure that staff are appropriately trained and competent to effectively implement medication procedures.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, No 210: 4(1)(a) - A requirement to make proper provision for the health, welfare and safety of service users.

Timescale: Within 4 weeks of receipt of this report.

What the service did to meet the requirement

Since the previous inspection the Care Inspectorate had spent time with the service discussing their plans for the changed use of the school medical centre and a formal arrangement with a local GP practice. These plans had been progressed and at the time of the inspection were about to be implemented. In addition to this staff in the residences had received medication training.

The requirement is: Met - Within Timescales

The requirement

The Provider to carry out a risk assessment in relation to the upper floor windows and thereafter to take appropriate action to prevent/reduce identified risks.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, No 210: 4(1)(a) - A requirement to make proper provision for the health, welfare and safety of service users.

Timescale: Within 4 weeks of receipt of this report.

What the service did to meet the requirement

At the time of the inspection it was evident that this issue had not been resolved. Windows on the upper floors of more than one of the houses were seen to be wide open presenting the danger of an accident (**see Quality Theme 2, Statement 2 where this requirement has been re-stated**).

The requirement is: Not Met

The annual return

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

Annual Return Received: Yes - Electronic

Comments on Self Assessment

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

A comprehensive Self Assessment had been submitted which provided useful information and informed the inspection process.

Taking the views of people using the care service into account

The Volunteer inspector who joined the inspection team met with a large number of student in both Aberlour (Junior School) and Gordonstoun (Senior School).

Groups she joined included:

10 Year 11 students in the Junior Round Square Committee of Activities.

11 Year 12 and 13 students in the Senior Round Square Committee.

6 students from the Year 9 Student Council.

9 House Captains, all in Year 13.

Members of the inspection team also joined students for lunch and attended a Colour Bearers meeting.

Generally students spoke very positively about all aspects of their lives at Gordonstoun.

Comments from students included:

"The best thing at Gordonstoun? Outdoors Activities - they're very varied."

"They're character building."

"Would like more football."

"More rugby training sessions."

"Everyone is involved in something to do with Music."

"We are doing a new waste experiment where everything left over from meals is weighed."

The younger students in Gordonstoun said they appreciated:

"More freedom - free time every day. Time is filled but you're opting for your choice."

"Being able to socialise."

"The House spirit is very strong - enjoy general atmosphere."

"Encouraged to support House activities."

"There are Buddies - seniors look out for you."

"Support you in prep."

They all said, "We feel very safe - the gates are closed at 9:45pm. There's a locked Barrier."

Comments made about the standards in the Boarding Houses included:

"Some Houses good - Bruce and Hopeman have been improved."

"Cumming is adequate."

"Gordonstoun House is a close unit - it has been upgraded."

Others complained about problems with the showers:

"Showering problems in Plewlands House - shower curtains don't give privacy."

"Showers in Duffus - have to keep pressing them to make them work."

Students spoke of the many aspects of their involvement in arranging numerous activities to raise money for Charity, stating "It is tradition to arrange activities to raise money for charity."

Students also spoke about the responsibilities they are encouraged to embrace at all levels of their school lives.

The younger students told me:

"We were asked to be in the Year group or were volunteered by their peers or were chosen by House master/Mistress."

"It makes you feel part of the School."

Older students reported:

"The Senior Round Square Committee has a say in the School Organisation - Charities. We are supporting the Children's Immunology Trust this year as it is close to several of our hearts,"

House Captains said they had learned, "Leadership and Responsibility." This included, "Collecting money for charities, arranging regular Inter-House competitions such as sports, chess and tug-of-war." In some Houses they also, "Supervised Junior Prep."

Taking carers' views into account

No parents or family members were present during the unannounced inspection.

3 The inspection

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

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 5 - Very Good

Statement 1

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

Service strengths

Observation and discussion during the inspection evidenced the opportunity for students to be involved in a wide range of decisions which would influence their care and support. All students could have their views represented at year group and house group council meetings, colour bearer meetings, house captain groups and via individual meetings with tutors and House Masters.

Students were actively involved in the inspection process during the unannounced inspection. Staff at the school were very helpful in arranging various groups who could meet the inspectors. Groups included various year groups, Round Square committee members, House Captains and Colour Bearers. Students were observed to confidently discuss issues relating to all aspects of their care and education and advocated for fellow students, raising points on their behalf.

Meetings had formal minutes which were shared with all those to whom they would be relevant. Minutes evidenced issues which had been raised being positively progressed. Through discussion with students and minutes of meetings, it was clear that students confidently and appropriately suggested and challenged issues and decisions. Student meetings attended by the inspectors evidenced students taking on a high level of responsibility for organising events, progressing allocated tasks and information sharing with fellow students. Students were observed to be confident and diligent in meeting the responsibilities delegated to them.

The Student Development Scheme (SDS) provided students with the opportunity to record their endeavours and achievements on a blog. The blog was overseen by individual tutors who could then use these entries to encourage and motivate

students. The blog provided a 'portfolio of achievements' to ensure the students overall experience at the school had been comprehensive in a range of identified areas, (academic, sports, creative activities, outdoor education, responsibility, service and experience in the wider community and international and spiritual citizenships). The students spoken with at the inspection, and in meetings, were generally positive about the system and felt they would become more skilled at inputting information as they became more used to doing this. They also advised that it would provide a good 'picture' of their time at the school once they reached school-leaving age.

Students were able to express their views on the quality of care and support they received from staff through their involvement in the 360° supervision of staff. This provided a very good opportunity for students to influence their care and support and to contribute to change **(see Quality Theme, 4, Statement 4)**.

Parents and students were able to comment on assessing and improving the quality of care and support through questionnaires they could complete **(see Quality Theme 4, Statement 4)**.

Parents' meetings were held regularly throughout the year and were timed to coincide with 'leave out' weekends to offer optimum opportunity for parents to attend. The junior school had weekly services which parents could attend and which offered the opportunity for parents to access staff.

The school website had comprehensive information about all aspects of life at the school and was updated regularly. A 'parents portal' (Gordonstoun Gateway) allowed parents to have secure access to a host of key information. The information was pulled directly from the School's central management information system (MIS) and could be accessed from any location around the world that had internet access. As Gordonstoun has a school community from all over the world this provided an invaluable resource for parents to access updated information about their child. The 'Gordonstoun Record' provided news and updates about the endeavours and achievements of students across a wide range of activities. Many of the articles were written by students and demonstrated the wide range of interests and experiences which the students were able to be involved in. The Record also included student profiles where students described their experience of living and learning at Gordonstoun, 'reflections on exchange' where students described their experiences as exchange students and 'what the pupils think', where new pupils reflected their views on their first year at junior school.

Young people of various ages/year groups were spoken with throughout the inspection. Most stated that they were very involved in all aspects of life at the school, that their participation was actively encouraged and their views taken seriously.

Areas for improvement

The service should continue to develop the opportunities for young people and their families to participate in assessing and improving the quality of the care and support provided.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

Number of recommendations: 0

Statement 3

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

Service strengths

Students were involved in a wide range of activities which promoted their physical health and wellbeing. Students spoken with stated that they were required to do a certain amount of exercise as part of the curriculum, however, generally did a great deal more as there were so many activities and groups they were keen to join. Students stated that while these groups included sports teams there were many others for students interested in other pursuits. The 'Gordonstoun Record' and photographs around the school evidenced an exciting range of activities students had the opportunity to be part of.

A new sports facility provided an excellent resource for a wide range of sporting activities, including fitness and dance. Individual gym programmes tailored to the students particular sporting or fitness requirements were accessed, with qualified staff present to ensure appropriate supervision and support. Staff at the fitness centre felt that the resource was very well used by students, and had noted a rise in the number of female students accessing the facilities.

The educational curriculum included a range of health related topics aimed at providing students with information to support them to make positive choices. External agencies visited the school to provide current and expert knowledge. The services of the Young People's Addiction Counsellors (YPAC) was accessed by young people and the 'kickbutt' team visited the school once a week (to support students to stop smoking). The medical centre provided numerous leaflets about healthcare issues which young people could access for information. These were displayed in a room where students could take leaflets without having to specifically ask for these.

The school were very keen to promote the positive mental health of their students. Students were encouraged to develop their confidence and self-esteem through a huge variety of daily tasks and challenges, and to support one another. Systems of feedback to students were designed to celebrate success and achievement, both of the individual and the group. Where young people might require additional support the school had an identified team of people who could provide this. This ranged

from students identified and trained as peer mentors, too an on site, full-time clinical psychologist. Staff at the school also had good links with external healthcare professionals, including the Child and adolescent Mental Health team.

The school had an identified Child Protection Officer and comprehensive child protection procedures. Staff received regular child protection training. Matrons and HM's spoken with during the inspection demonstrated knowledge of the procedures to be followed should they have any concerns. Senior students received child protection training and were aware of the situations which would alert them to concerns to be shared with the Child Protection Officer. Senior students also had an important role in mentoring younger students.

Senior staff represented the school on the Moray GIRFEC (Getting It Right For Every Child) committee. Documents and procedures had been developed to ensure that systems were compliant to the GIRFEC principles and the wellbeing of students. Considerable progress had been made in relation to this area. A wellbeing protocol and committee had been established, and the introduction of case conferencing and professional discussion for students requiring additional support had been developed. Staff provided descriptions of some very positives outcomes for young people and their families following case conferencing and group discussion about appropriate support.

Student support plans had been developed for students requiring additional support. Plans were proactive and included risk assessment. The school had developed an electronic wellbeing system which was used to record a wide range of important information about young people. The system allowed varying levels of access for specific members of staff, from widely shared information for all relevant staff to very restricted access, as in the case of child protection issues, to a very small select group. The system was used very positively to record and access significant information, and had hugely enhanced the ease of recording and information sharing across the school.

The school had an on site medical centre where students could access various nurse lead clinics, attend GP appointments and stay if they were unwell. Since the last inspection the medical centre had established more formal links with a nearby GP practice, with nurses from this practice providing the clinics for students and supporting GP appointments. The new system was not fully operational at the time of the inspection, however, had been discussed fully with the Care Inspectorate throughout the change process. The new service would continue to provide a high level of care to students, with the benefits of more formal links with the GP surgery and NHS nurses.

The refectory provided a wide selection of foods to ensure that the nutritional needs of students were met. Fresh fruit, vegetables and water were always available. Younger students had a separate dining room where adults were able to supervise

meal selections and encourage the younger children to eat a balanced and varied diet. Students throughout the school were involved in food committees which regularly met with the chef and catering staff to share ideas and opinions. Following these meetings changes had been made to food options. Inspectors joined the students for a meal at the refectory and found the food to be of a high quality with a very wide range of choices. Students spoken with were generally very satisfied with the choice and quality of food. Students were also able to access fruit and make snacks and drinks in their boarding accommodation.

Numerous systems were in place to reduce the possibility of bullying. Peer mentor schemes were well used, with new students also being assigned a buddy to help them settle in. Students had small group meetings with the HM ('brews') which provided a relaxed forum to discuss anything they wanted to. At the time of the inspection all students had been part of Anti Bullying week where the topic of bullying had been discussed at chapel (morning assembly) and students had participated in making banners to highlight the anti bullying message. When asked directly young people stated that bullying was not tolerated at the school and if there were any incidents these were taken very seriously and dealt with immediately.

Student health history and consent forms had been completed for all students. This information was accessible to all staff caring for students and to the medical centre staff. Appropriate support could therefore be offered to students who had health conditions, or required medication. In discussion with pastoral staff, it was clear that where specific support was required this had been fully discussed with the student and relevant members of their family to ensure young people took an appropriate level of responsibility for their own health, while being supported at an agreed level by the adults caring for them.

All staff had received 'Health and Wellbeing' training which included their responsibilities in relation to GIRFEC, health and wellbeing within the Curriculum for Excellence and knowledge of various best practice documents.

At the last two inspections a requirement had been made regarding medication storage, administration and recording. All pastoral staff had received medication training with appropriate medication storage facilities being available in all the houses. Information in the 'medical information' section of the boarding handbook (for staff) had been updated and provided comprehensive information about the support offered to students, and of expectations regarding medication storage and systems for the storage of medication at the medical centre had also been subject to review and change. Medication audits were carried out in two of the houses and time spent at the medical centre discussing the revised plans for medication storage. All were found to be satisfactory.

Areas for improvement

As stated above there were imminent and ongoing changes to the way in which the medical centre was managed. There was no reason to believe these would be anything but positive and will be looked at the next inspection when they will be fully operational.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 2: Quality of Environment

Grade awarded for this theme: 5 - Very Good

Statement 1

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

Service strengths

See Quality Theme 1, Statement 1.

Areas for improvement

See Quality Theme 1, Statement 1.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

Number of recommendations: 0

Statement 2

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

Service strengths

The Organisation had appropriate policies and procedures and risk assessments in place to ensure the safety of service users. Staff were made aware of these through the induction process, team meetings and ongoing training, and were required to sign to say they had read and understood these. Discussion with staff at the inspection evidenced their awareness of key procedures and how these would be implemented.

Staff were vigilant to any repairs which were required and contacted the maintenance team when repairs were required. Staff spoken with stated that this system generally worked quite well and that given the size of the School, repairs were generally carried out within a reasonable timescale. This resulted in the accommodation being maintained to a reasonable standard.

Monitoring and evaluation of the boarding houses was carried out on a rolling basis and identified any areas for improvement or upgrade. The monitoring document included a self-evaluation of the boarding facilities and a walk round by relevant staff. Some of the houses visited at this inspection were seen to have new and homely

furnishings, with others 'earmarked' for much-needed upgrade to bathrooms.

The School had a Health and Safety Committee which had developed comprehensive procedures to ensure the safety and wellbeing of students and staff. This committee met less frequently than previously as Health and Safety had been added as a standing agenda item at all meetings. This increased the frequency of discussion as meetings of some form were held at least weekly.

Discussion was ongoing to identify the members of staff who had the relevant knowledge and skills to complete certain policies, procedures or risk assessments, as some required expert knowledge.

The "Cooksafe" system was used to ensure that food was appropriately stored and temperature checked. As stated above all catering staff were well-trained to ensure that food preparation, storage and delivery demonstrated good practice, and ensured food hygiene and controls were of a high standard.

Individual boarding houses had locked doors with keypad entry systems. Students were expected to sign in/out of the building so their whereabouts could be accounted for. Signs to remind students of the importance of doing this were seen in individual houses, with Matrons and HM's stating that they reminded students to do this, particularly when they were new to the boarding environment. Security staff were also employed by the school to monitor the grounds and ensure student safety.

Generic risk assessments for boarding houses had been completed, and were being further developed.

A critical incident/emergency evacuation plan was in place. This detailed how such situations would be managed. Students could therefore be confident that should an emergency arise suitable plans were in place to ensure their wellbeing.

Areas for improvement

At previous inspections concerns had been raised about the windows in certain boarding houses, and the need for them to be made safe from opening too far. This was an ongoing issue, with upper floor windows continuing to cause concern. In the past the numerous attempts had been made to place window restrictors to the windows or frames, however, all had been unsuccessful. At this inspection upper floor windows were observed to be very wide open and present the very real concern of a serious accident. The school must find a solution to this issue. A requirement will be ongoing until the matter is fully resolved. **(see Requirement 1).**

As stated above there were generic risk assessments in place in all of the boarding houses. These risk assessments need to be developed to be more 'site specific' and detail the strategies in place to minimise risk. Where that risk is high (eg, the upper floor windows) these risk assessments should be reviewed and updated regularly

detailing all of the strategies, and attempts, which have been made to minimise risk. It is not sufficient to acknowledge the risk on an ongoing basis. **(see Recommendation 1).**

Grade awarded for this statement: 4 - Good

Number of requirements: 1

Number of recommendations: 1

Requirements

1. The Provider to take appropriate action to prevent/reduce the identified risks presented by upper floor windows.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, No 210: 4(1)(a) - A requirement to make proper provision for the health, welfare and safety of service users.

Timescale: Immediately and Ongoing.

Recommendations

1. Each boarding house should have an individual risk assessment which identifies strategies to minimise risk. Risk assessments should identify all strategies which have been implemented and be reviewed on a regular basis.

National Care Standard 5 - Comfort, safety and security.

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 5 - Very Good

Statement 1

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

Service strengths

See Quality Theme 1, Statement 1.

Areas for improvement

See Quality Theme 1, Statement 1.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

Number of recommendations: 0

Statement 3

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

Service strengths

Pastoral staff spoken with were knowledgeable about the students they supported and demonstrated a high level of motivation, warmth and commitment to them. They stated that there was good team work between members of staff who were very focused on meeting the needs of the students and to ensuring that all young people achieved their potential.

All staff were appropriately registered with the Scottish Social Services Council (SSSC), or another professional body (such as the General Teaching Council). A training plan was in place for staff who were registered with the condition that they gain the required qualification. A rolling programme of Protection of vulnerable groups checks (PVG checks) was in place for all staff to ensure that all staff were suitable to work with young people.

An online staff handbook was available to all staff. This clearly outlined roles and responsibilities and relevant policies and procedures. Where relevant it also made reference to best practice documents staff could read for further information.

A structured induction was in place for new staff which included mentoring from more experienced staff. In discussion with inspectors newer staff stated that they had been allocated more experienced staff as mentors and who could assist them to learn specific aspects of their job, and which provided opportunities for support and development amongst the pastoral team. New staff received a first term review where they set targets. These were then discussed at the first annual review and at a formal appraisal the year after.

Weekly meetings and pastoral staff training days were organised to reinforce training and good practice, and to discuss any concerns about students. Senior pastoral staff also disseminated new guidance and best practice and discussed training opportunities. Pastoral staff spoken with stated that they were well supported by senior members of the pastoral team and could access them at any time.

Staff received regular supervision by a senior member of staff. Supervision provided the opportunity for dissemination of best practice, information sharing and discussion about training and development needs (however, see 'Areas for Improvement'). The clinical psychologist also received clinical supervision every month.

Records were kept of all staff training, reviews and appraisals and continuous personal development. Staff had received health and wellbeing training and use of the new wellbeing system, training in infection control, medication, GIRFEC, bereavement and child protection.

Staff leaving the service had the opportunity to complete exit questionnaires and have exit interviews. They therefore had the opportunity to discuss any improvements which might be beneficial to the school, and to confirm the positive support and opportunities given to young people. **(see Quality Theme 4, Statement 4).**

Areas for improvement

The pastoral staff had made good progress in achieving the qualifications required for registration with the SSSC. A small number of staff were still in the process of completing this training and remained registered with the SSSC with the condition that they completed this.

Pastoral staff were part of various 1:1 and group meetings which were not minuted. A lack of minutes made it difficult to review decisions which had been made and whether or not these had been met as agreed. **(see Recommendation 1).**

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. Pastoral staff and 1:1 meetings should be formally minuted to ensure that discussion and decisions can be effectively monitored and reviewed.

National Care Standard 7 - Management and staffing.

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 6 - Excellent

Statement 1

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

Service strengths

See Quality Theme 1, Statement 1.

Areas for improvement

See Quality Theme 1, Statement 1.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

Number of recommendations: 0

Statement 4

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

Service strengths

The school had an annual development plan which detailed the progress of the school and identified action points for the forthcoming year. Points were prioritised with identified target dates, resources required and the staff responsible for the progress of each target. The plan had been developed in consultation with all staff, with a survey of students in their final year having been included. The development plan also included an audit of pastoral staff training. School Governors had an overview of the plan and its progress, and could therefore ensure that agreed targets and timescales were met.

Students had the opportunity to meet the senior management team and the Board of Governors in a number of settings, including visits to the boarding houses. This provided students with the opportunity to discuss their views with people who were directly involved with the school, but removed from their day-to-day lives.

A staff consultative committee met and had the opportunity to question or clarify decisions made by senior staff. They also had regular meetings which school

Governors attended. These ensured an overview of management decisions.

Staff, parents and students had the opportunity to evaluate staff performance, influence staff appraisal and comment on a wide range of boarding and pastoral issues via questionnaires. The range of questions asked was extensive, with responses collated and used to influence service improvement.

Individual staff had clear roles and responsibilities within the school. Documentation provided to parents and students made it clear who they should contact to discuss specific areas of school life. Staff were accessible to parents to discuss any issues in relation to the care or education of their child.

Boarding houses were subject to regular monitoring and evaluation by senior staff. This included assessment of the accommodation and of the care and support provided. House Masters/Mistresses also completed individual assessments of their individual boarding houses. These were completed in consultation with the students who boarded there.

Matrons were involved in regular pastoral meetings with House Masters and the Director of Pastoral Care. Meetings provided a forum for staff to share issues relating to their pastoral role and to assess and evaluate the care and support provided.

Good practice guidance relating to areas of care and health and wellbeing were available at the school and complemented the policies and procedures. Staff received appropriate training to ensure they were aware of their responsibilities.

The recently introduced 'wellbeing system' provided a comprehensive system for information recording and sharing. The capabilities of the system allowed a wide number of people to access and input information and supported the effective support of students. Senior pastoral staff had a very good knowledge of the principles of Getting it Right for Every Child (GIRFEC) and had introduced appropriate review meetings, risk assessments and action plans using the GIRFEC, SHANARRI wellbeing indicators (Safe, Healthy, Achieving,, Nurtured, Active, Respected, Responsible, Included).

The framework of meetings ensured that senior staff had a constant overview of what was going on within the school. Senior staff attended a range of meetings where they could observe and evaluate progress. Formal meeting minutes were available and of a high standard.

Students were made aware through handbooks, posters and discussion how they could express a concern. Information provided included internal and external contacts and the specific names or details of how people could be contacted. Emphasis was placed on students sharing concerns in order to positively resolve these.

Areas for improvement

As stated above there were clear and formal systems for students and their parents to make complaints. Discussion and examination of some records highlighted the need for a single system which would ensure that all relevant staff knew the issues which had been raised, who with and how these were being managed. The current system did ensure that complaints were dealt with, however, needed to be recorded through the use of a single system, accessible to all relevant senior staff. **(see Recommendation 1).**

At the time of the inspection the inspectors were made aware of a number of incidents about which they should have been formally notified. This was discussed during the inspection, with an assurance given that appropriate notifications will now be made. **(see Recommendation 2).**

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

Number of recommendations: 2

Recommendations

1. The system of recording complaints should be reviewed and developed to ensure there is one clear system of recording complaints, any action taken and the outcome of any decisions.

National Care Standard 7 - Management and Staffing.

2. The Care Inspectorate must be notified of all incidents as detailed within "Records all Services (excluding Childminders) Must Keep and Notification Reporting Guidance".

National Care Standard 7 - Management and Staffing.

4 Other information

Complaints

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

Enforcements

There has been no enforcement action against this care service since the last inspection.

Additional Information

Not applicable.

Action Plan

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

5 Summary of grades

Quality of Care and Support - 5 - Very Good	
Statement 1	6 - Excellent
Statement 3	5 - Very Good
Quality of Environment - 5 - Very Good	
Statement 1	6 - Excellent
Statement 2	4 - Good
Quality of Staffing - 5 - Very Good	
Statement 1	6 - Excellent
Statement 3	5 - Very Good
Quality of Management and Leadership - 6 - Excellent	
Statement 1	6 - Excellent
Statement 4	6 - Excellent

6 Inspection and grading history

Date	Type	Gradings
26 Jun 2013	Unannounced	Care and support 5 - Very Good Environment 5 - Very Good Staffing 5 - Very Good Management and Leadership 6 - Excellent
29 Nov 2012	Unannounced	Care and support 4 - Good Environment 5 - Very Good Staffing 5 - Very Good Management and Leadership 6 - Excellent
6 Sep 2011	Unannounced	Care and support 6 - Excellent Environment Not Assessed Staffing Not Assessed Management and Leadership 6 - Excellent

Inspection report continued

24 Feb 2009	Unannounced	Care and support 5 - Very Good Environment 4 - Good Staffing 5 - Very Good Management and Leadership 5 - Very Good
24 Sep 2008	Announced	Care and support 5 - Very Good Environment 4 - Good Staffing 5 - Very Good Management and Leadership 5 - Very Good

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

To find out more about our inspections and inspection reports

Read our leaflet 'How we inspect'. You can download it from our website or ask us to send you a copy by telephoning us on 0345 600 9527.

This inspection report is published by the Care Inspectorate. You can get more copies of this report and others by downloading it from our website: www.careinspectorate.com or by telephoning 0345 600 9527.

Translations and alternative formats

This inspection report is available in other languages and formats on request.

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

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

ہے بائی تہ سرد می م و ن اب ز رگی د روا و ل کش رگی د رپ ش راز گ ت ع اش ا ہی

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

ی ر خ ا ت اغ ل بو ت ا ق ی س ن ت ب ب ل ط ل ا د ن ع ر ف ا و ت م ر و ش ن م ل ا ا ذ ه

本出版品有其他格式和其他語言備索。

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

Telephone: 0345 600 9527

Email: enquiries@careinspectorate.com

Web: www.careinspectorate.com