

Care service inspection report

Grampian Autistic Society - Jigsaw Centre

Day Care of Children

39/41 Carnie Drive

Aberdeen

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Telephone: 01224 277900

Inspected by: Susan Barrie

Type of inspection: Unannounced

Inspection completed on: 17 August 2012



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Service provided by:

Grampian Autistic Society

Service provider number:

SP2003000368

Care service number:

CS2003001829

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Summary

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

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

We gave the service these grades

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

What the service does well

The playscheme offers a safe place for young people to be involved in a range of interesting activities alongside other young people around the same age. The staff are well trained to support young people with autism and therefore to understand and support them to develop new skills and interests.

What the service could do better

Some of the information held about young people needed to be updated. Staff working at the playscheme also had some good ideas about how the services could be developed to support even more people. A new service manager had been appointed and would take up post in the near future. The service remain keen to identify a new premises.

What the service has done since the last inspection

Since the last inspection responsibilities within the staff team had changed. This had offered staff who worked alongside young people to be more directly involved in decision making and staff support. This seemed to be working well. A sibling support group had started which offered the siblings of young people on the autistic spectrum the opportunity to be supported and meet others in a similar position.

Conclusion

The playscheme offered young people the opportunity to have fun, gain new experiences and spend time with other children and young people in a safe environment, supported by committed and enthusiastic staff. The staff at the service were continually thinking of further ways to support young people and their families and to enhance the service offered.

Who did this inspection

Susan Barrie

1 About the service we inspected

The service provides a playscheme at weekends and daily during the school holidays to children and young people who have autistic spectrum and communication disorders (although this is not a pre requisite for the playscheme with all referrals individually considered).

The Care Inspectorate regulates care services in Scotland. Prior to 1 April 2011, this function was carried out by the Care Commission. Information in relation to all care services is available on our website at www.scswis.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 its service, 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.
- A requirement is a statement which sets out what is required of a care service to comply with the Public Services Reforms (Scotland) Act 2010 and Regulations or Orders made under the Act, or a condition of registration. Where there are breaches of the Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the 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 5 - Very Good

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

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0845 600 9527 or visiting one of our offices.

2 How we inspected this service

The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What we did during the inspection

An unannounced inspection was carried out on Friday 17th August 2012.

Throughout the inspection process, information was gained from:

- Discussion with staff , parents and service users.
- Three randomly selected service user case files, including support plans and reviews.
- Minutes of staff meetings.
- Various policies and procedures.
- Incident reporting and auditing.
- Observation of the environment and staff /service user interaction.
- Training records and plans.
- Medication systems and storage.
- Questionnaires returned to the Care Inspectorate by parents/carers.

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 recommendations we made at our last inspection

An appropriate action plan was received stating how the service would progress the two recommendations made at the previous inspection. These were examined at this inspection and had been fully 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 self assessment was submitted prior to the inspection. This provided useful information which informed the inspection process.

Taking the views of people using the care service into account

At the time of the inspection one young person spoke directly to the inspector.

Others were observed in the company of staff in various playrooms, and when going on an outing.

The young person spoken with enjoyed attending playscheme. Observation suggested that all of the young people were well supported and enjoying a range of activities.

Taking carers' views into account

Three parents were spoken with individually at the time of the inspection.

Parents spoken with were very complimentary about the ability and skills of the staff group and without exception stated that their children loved attending playscheme.

Six parental questionnaires were returned to the Care Inspectorate prior to the inspection.

In response to the question 'Overall I am happy with the quality of care my child receives from this service' . three parents returning questionnaires 'strongly agreed'. The remaining three 'agreed'.

Comments made by parents within questionnaires included:

"Jigsaw is a fantastic club, my son loves his time at the club. I have no comments to make apart from the staff doing a great job with the children. If my son is happy at the club then I am too".

"A thoroughly good and invaluable service. My son looks forward to going very much and enjoys the varied outings and experiences offered. The staff are very approachable, friendly and honest with us and appear genuinely committed to caring for the children".

"Our child seems to enjoy the services provided and it appears to have a positive effect on his behaviour. The staff have a good attitude and interact with our child to his benefit".

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

All young people had individual care plans which had been drawn up in conjunction with them (where possible) and their parents. Plans which were examined included details of young peoples likes and dislikes and some key information about them.

Support plans were also developed (in addition to care plans). Well completed plans which were examined included comprehensive information about young people and identified short and medium term goals, however not all plans had been completed.

(see Areas for improvement)

An induction programme was used by staff to ensure that parents and children received and shared comprehensive information about the service and their child. Parents/children signed this document.

Communication books were used to share information with parents about their child. Parents were also able to communicate to staff via this book and make suggestions or requests.

The playscheme had distributed questionnaires to parents. These asked parents to comment on a range of issues relating to the playscheme, including their views on the care and support of their child. Parents were also asked to make individual comments or suggestions.

New questionnaires had been developed to gain the views of young people using this service. These were in addition to existing questionnaires which relied more heavily on text. The new questionnaires were pictorial, using boardmaker signs and photographs and were therefore more accessible to some of the children using the service. The range of questionnaires supported the inclusion of all service users and their families in sharing their views.

Areas for improvement

Of the three randomly selected files, one did not contain a completed support plan (but did have a care plan). A different file did not contain accurate parental contact details on the essential information sheet.

As the quality of information in case files is generally good this does not appear to reflect the overall quality of information gathering or support planning, however, should be addressed to ensure information is comprehensive and accurate (**see Recommendation 1**).

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. Written plans to support young people should contain comprehensive and accurate information. Systems should be in place to ensure they are regularly reviewed and audited.

National Care Standard 6 - Support and Development.

Statement 3

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

Service strengths

Most young people had individual care and support plans which contained detailed information about their healthcare needs and strategies to manage their specific autistic behaviours (**see Quality Theme 1, Statement 1**).

Appropriate procedures for the storage and administration of medication were in place. These procedures included parental consent and relevant healthcare information. Staff who administered medication had received training to ensure they could do this safely and were aware of their responsibilities.

Staff were trained to support young people with epilepsy and autism and to manage challenging behaviour.

Policies, procedures and protocols were in place to ensure young people received appropriate support to feel safe and relaxed in the service, or when out in the community with playscheme staff. Young people had a high level of staff support both within the service and when out in the community.

At the time of the inspection young people went on an outing in the minibus. Staff were aware of which child they had responsibility for. Appropriate planning and risk assessment was in place. A rucksack was carried on each outing and contained all the necessary things to ensure young people were safe and would enjoy their outing. The minibus driver confirmed that he carried out safety checks on the minibus prior to every outing. Both he, and staff, described the procedures which ensured that children travelled safely in the minibus wearing seat belts at all times when the vehicle was moving.

Young people had a structured day with a manageable range of choices. Within the day there was the opportunity for quiet, relaxed time and physical activity. Outings in the community were provided during each session.

The service had copies of best practice documents such as the North East of Scotland Child Protection Committee guidelines and nutritional guidance.

Young people brought their own packed lunch. Staff and young people prepared snack. Staff acknowledged the limited space for eating and preparing meals, however, made best use of available space. A parent spoken with stated that their child found it difficult to eat whilst at the service, however, confirmed that staff had tried various strategies to encourage them.

Areas for improvement

Staff acknowledged that it could be difficult for some children to make the transition from playing in a room, to eating in the same room at lunchtime. The team had given this some consideration and had ideas which might make this better. Limited space did, however, restrict available options.

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: 5 - Very Good

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 service had a locked front door to ensure the safety of children and young people. Visitors were expected to press the buzzer and wait until a member of staff answered the door. Identification would be requested of visitors.

Young people had a high level of staff support. This was assessed and reviewed to ensure it was appropriate to both their safety and development.

The accommodation provided opportunities for young people to access a range of equipment. Rooms included a technology room, a snoozelen/sensory room, a messy play/dining room and a kitchen. Staff spoken with stated that toys and equipment were checked on an ongoing basis and discarded if broken or damaged.

The day was structured to allow young people to be involved in a range of activities of their interest within individual rooms, whilst allowing young people to have adequate space within each room.

As the accommodation had no outdoor area, outings and trips were a planned part of each session, ensuring young people had the opportunity for fresh air and more energetic play.

Comprehensive risk assessments were in place for various aspects of the service, including indoor and outdoor activities. These contained useful information to minimise risk whilst allowing young people to be involved in a range of experiences. All had been recently reviewed.

Procedures were in place for recording and reporting accidents and incidents.

Portable Appliance Testing (PAT) had been carried out with appliances marked to say they had been checked and were safe to use.

Staff were vigilant to areas of the building requiring attention or repair and would report these to the General Manager or administrator. The General Manager of the service stated that repairs would be carried out by reputable companies as and when they were required.

Areas for improvement

Not all staff had the required training, or training update to ensure the safety of young people.

(see Quality Theme 3, Statement 3)

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

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: 5 - Very Good

Number of recommendations: 0

Number of requirements: 0

Statement 3

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

Service strengths

Staff spoken with, and observation throughout the inspection, evidenced an enthusiastic and professional staff team who were committed to provide the best possible support to young people.

Staff had positive ideas how to develop the service which they were keen to progress. As a new manager had just been appointed they were hopeful that this would provide the opportunity for further development.

Staff received formal supervision and attended regular team meetings. These forums provided opportunities for discussion about best practice, aims and values, and training.

At the end of each playscheme session the staff team came together to discuss the day. Staff spoken with felt this time of sharing and reflection was helpful in looking at future strategies and encouraging to each other. It also provided a forum to share information about individual young people and any issues pertinent to their support.

Staff had attended a variety of training, including child protection. At the time of the inspection the General Manager stated that they were reviewing the autism specific

training provided to staff. The Organisation hoped to source accredited training, in addition to in-house training. A training provider had been sourced who would provide other training (such as first aid, infection control etc). **(see Areas for Improvement)**

In the absence of a service manager the service had reviewed the responsibilities of senior staff. Staff spoken with felt that this was a positive model which offered senior staff additional responsibilities, developed their practice and provided good support to other staff.

New staff stated that they had received a positive and supportive induction. They felt that they were part of a enthusiastic team of committed and supportive individuals.

Parents spoken with, and who returned questionnaires, were very positive about staff **(see 'Views of Carers' in this report)**.

Areas for improvement

At the time of the inspection there was no service manager. A new manager had been successfully recruited, however, had not yet taken up post.

Training records did not evidence that all staff had received recent training in relation to some key areas. These included Crisis and Aggression, Limitation and Management (CALM) training and ongoing autism training. As stated previously the Organisation had source a training provider who would provide key training, and intended to source accredited autism training **(see Recommendation 1)**.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. Staff should continue to review the service, and implement the areas which have been identified within the service development plan. Future developments should take account of questionnaire responses.

National Care Standard 13 - Improving the service.

Quality Theme 4: Quality of Management and Leadership

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 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: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 4

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

Service strengths

A series of minuted meetings (staff meeting, team leader meetings and leadership meetings of senior organisational staff) were held to ensure staff were well informed and had the opportunity to discuss the work they carried out and ensure this best met the needs of young people. Staff spoken with stated that meetings provided a good opportunity for open discussion and support from colleagues. Staff also met at the beginning and end of each playscheme session.

Guidelines used by staff to support young people were audited by senior staff to ensure these were appropriately reviewed.

The service had a parent and carer participation strategy and a parent and carer involvement strategy.

These included development plans, and identified what staff at the service would do to meet identified aims.

The involvement policy also included values and approaches which would be used to support parents and carers to be involved.

Regular contact with many parents allowed formal and informal discussion regarding the playscheme and how this could be developed. Parents were invited to become

board members and contribute more formally via this route. Parents also had the opportunity to provide ongoing feedback when they collected their children from the service.

Staff at the service met with placing social workers and contracts officers from Local Authorities. Meetings looked at current and future provision for both individual children and the future needs of service users generally.

Senior staff at the service provided three monthly reports to Local Authorities. Annual reports were also completed and circulated.

Questionnaires had been circulated to parents and stakeholders. As stated elsewhere in this report, additional questionnaires had been developed to ensure the views of children who preferred to communicate via pictures could be gained. Questionnaires seen at the time of the inspection provided positive and useful feedback

Exit interviews were carried out with staff leaving the service.

Areas for improvement

Questionnaires had been developed to include pictorial questionnaires. These had just been distributed at the time of the inspection. They had therefore not yet been collated or used to influence future service provision. **(see Recommendation 1)**

As the parent and carer participation and involvement strategies were for 2012 -2014 not all aspects of these had yet been achieved. It was hoped that the appointment of a new manager would allow the team to progress some of the identified areas. **(see Recommendation 1)**

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. Staff should continue to review the service, and implement the areas which have been identified within the service development plan. Future developments should take account of questionnaire responses.

National Care Standard 13 - Improving the service.

4 Other information

Complaints

There have been no complaints made to the Care Inspectorate about the service.

Enforcements

There has been no enforcement action against this care service.

Additional Information

None.

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 SCSWIS re-grading the Quality Statement within the Management and Leadership Theme as unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).

5 Summary of grades

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

6 Inspection and grading history

Date	Type	Gradings
28 Jul 2009	Unannounced	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.

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অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

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