A quality framework for mainstream boarding schools and school hostels

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

April 2021

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 on understanding the difference care and support makes to their lives.

Since 1 April 2018, the **Health and Social Care Standards** have been used across Scotland. They have been developed by Scottish Government to describe what people should experience from a wide range of care and support services. They are relevant not just for individual care services, but across local partnerships. The Care Inspectorate's expectation is that they will be used in planning, commissioning, assessment and in delivering care and support. We will use them to inform the decisions we make about care quality. This means that we are changing how we inspect care and support.

From 2018, on an incremental basis, we have been rolling out a revised methodology for inspecting care and support 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.

The core of the new approach is a quality framework setting 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.

This framework 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 range of services and used people's experiences of the tests to help refine it and the way we use it.

How is the framework structured?

The quality framework is structured around **key questions** (see the table on page 8). 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?

The quality framework will be used by inspectors in place of the older approach of 'inspecting against quality themes and statements'. Inspectors will 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, but 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 (grades) will reflect the impact and practice of the care service itself.

We will provide an overall evaluation for each of the key questions we inspect, using the six-point scale, from 'unsatisfactory' (1) to 'excellent' (6). This will be derived from the specific quality indicators that we inspect. Where we inspect one quality indicator per key question, the evaluation for that quality indicator will be 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 will be the lowest grade/evaluation of the quality indicators for that specific key question. This recognises that there is a key element of practice that makes the overall key question no better than this evaluation.

How will we use the six-point scale?

The six-point scale is used when evaluating the quality of performance across quality indicators.

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 is 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 peoples' 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 are working with care services and sector-wide bodies to build capacity for self-evaluation, based on this framework. We have published "Self-evaluation for improvement – your guide", which 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 a 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 and prioritise plans for improvement based on effective practice, guidance, research, testing, and available improvement support. You can find out more about the Model for Improvement and tools to support your improvements on the Care Inspectorate's Hub.

Using this quality framework can help provide an effective structure around self-evaluation.

The diagram below summarises the approach:

How are we doing?	How do we know?

- How well do we support children and young people's wellbeing?
- How good is our leadership?
- How good is our staff team?
- How good is our setting?
- How well is our care and support planned?

What are we going to do now?

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. 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 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	
	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

Notes on guardianship

A guardian is a person to whom the parents of a boarding school pupil have delegated certain responsibilities. The guardian acts on behalf of the parents and shares responsibility for the child or young person's welfare with them and the school. This person should not be confused with the guardian named by parents under the Children (Scotland) Act 1995 as the person they wish to care for their child in the event of their death, or any other person appointed with similar rights and responsibilities under any other law.

Where the service arranges for a young person to spend weekends or holidays in someone's home, this is treated by law as being part of the service provided by the school. This means we regulate the arrangement as part of the school's registration as a school care accommodation service. In these circumstances, the person who is the guardian does not have to be registered as a separate care service. All inspections of boarding schools that provide guardians themselves will therefore include inspection of guardianship arrangements, using this quality framework.

Parents may also use an agency to provide a guardian or make arrangements with someone directly. With certain exceptions, these guardians must be registered as childminders before providing care. A list of these exemptions can be found in our publication 'Guidance for the regulation of guardianship arrangements in boarding schools', which is available in the Publication & Statistics area of our website, under Professionals and Guidance. It is an offence for an individual to act as a childminder unless registered to do so.

Key question 1:
How well do we support children and young people's wellbeing?

This key question has three quality indicators.

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 benefits from the care and support they experience.

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

Key areas include the extent to which children and people:

- feel nurtured, 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**
Children and young people develop meaningful, secure relationships with those caring for them. These are based on empathy, compassion and fun. They know they always have someone they trust to turn to when troubled or to celebrate with. They benefit from affection and physical contact where appropriate. They know who will be caring for them throughout the day and night.	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.
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 pro-active in safeguarding their privacy and confidentiality and demonstrates genuine regard for their dignity. 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.	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. 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.

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 staff who advocate passionately and effectively on their behalf.

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 school and community life and decision-making.

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.

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.

Scrutiny and improvement toolbox	
Scrutiny and improvement support actions	**Key improvement resources**
- Obtain the views of children and young people, family, visitors, staff, managers and other professionals. - Observe staff practice and interaction with young people. - 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 and the use of communication support tools in obtaining their views. - Examine any restrictions to young people's liberty and freedom of choice, whether these are justified, and how they have been explained. - Review how young people are informed about their rights, for example in admission information. - Review the extent to which the service adheres to its aims and objectives and whether these positively influence care and support. - Review the service's arrangements for the management of guardians (where these are provided by the service).	The Health and Social Care Standards: **www.newcarestandards.scot** Information from the Scottish Human Rights Commission: **http://www.scottishhumanrights.com** 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** Guidance for the Regulation of Guardianship Arrangements in Boarding Schools (Care Inspectorate): **https://www.careinspectorate.com/images/documents/5235/Guidance%20for%20the%20regulation%20of%20guardianship%20arrangements%20in%20boarding%20schools.pdf**

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

Key areas include the extent to which children and 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	
Very good	**Weak**
Children and young people routinely exercise a high degree of choice in their day-to-day lives. They experience 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 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 supported to understand the reasons for any decisions affecting their lives	Children and young people have little autonomy or freedom or experience institutionalised practices. The quality of their experiences is lessened by assumptions about what is safe or possible. 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 are actively encouraged and enabled to keep in regular touch with family members and other people who are important to them.

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 receive lots of encouragement and support to take part in

a wide range of interests, including the creative arts, and to go outdoors. They have regular exercise. They have opportunities to plan and take part in trips and expeditions with staff and peers. | There is an inflexible approach that makes it difficult for children and young people to maintain contact with family members overseas or in different time zones.

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.

Children and young people have little time for relaxation or a limited say in how they spend their free time. |
| Young people receive individually tailored support to engage fully in learning and maximise attainment. 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.

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. | 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.

Children and young people have limited opportunities to practise the skills they will need in adulthood. |

Children and young people are listened to. They are kept safe both emotionally and physically, including 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 both with other agencies and parents.

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 are well informed about and 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, are compromised by a failure to identify and respond to indicators of concern. Children and young people do 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**
• Speak with children and young people, 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 children and young people's records, including assessments, plans and reviews, and the extent to which they demonstrate they are safe, active, achieving, respected and responsible. • Consider how the service supports wider learning and achievement outside the formal school setting. • Review relevant policies and procedures, child protection records and incident records and the service's response to and learning from significant events • Review staff training in child protection and their understanding of their responsibilities. • Consider young people's access to protective adults and supports outside the service. • Review the service's arrangements for the management of guardians (where these are provided by the service).	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 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 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 Practice Guide: supporting professionals to meet the needs of young people with learning disabilities who experience, or are at risk of, child sexual exploitation https://www.childrenssociety.org.uk/sites/default/files/17107-SU-CSE%2BLD-practice-guide_v4_reduced.pdf National Guidance for Child Protection in Scotland: additional notes for practitioners: protecting disabled children from abuse and neglect (Scottish Government): https://www.gov.scot/publications/national-guidance-child-protection-scotland-2014-additional-notes-practitioners-protecting-disabled-children-abuse-neglect/ On Risk (IRISS): https://www.iriss.org.uk/resources/irisson/risk

Quality indicator 1.3: Children and young people's health and development benefit from the care and support they experience

Key areas include the extent to which children and 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	
Very good	**Weak**
Children and young people consistently experience nurturing care and support that reflects their needs and promotes healthy development. Children and young people receive high-quality support when they experience significant changes in their lives, including loss and bereavement.	Children and young people's emotional wellbeing is compromised because they do not have positive relationships with staff. They may feel that consequences or sanctions are used inconsistently or arbitrarily. The care and support they experience is driven by processes or tasks or is at a basic level.
Children and young people's health needs are pro-actively met and they benefit from the primary and specialist healthcare they need. Where necessary they are enabled to make best use of the right technology and specialist equipment. There is continuous review of their needs. Children and young people are enabled and encouraged to make informed health and lifestyle choices by adults who are positive role models. Flexible daily routines and structures, including good sleep patterns, provide security and reassurance and support health and wellbeing.	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. 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.

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. Where challenges exist, staff advocate persistently on their behalf.

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.

Children and young people benefit from contact with animals. | 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. |
| Children and young people benefit from a tasty, varied and well-balanced diet that promotes health and wellbeing. They have ready access to snacks and drinks and somewhere suitable to store them. They benefit from the important social aspects of sharing food and eating together, including special occasions.

Menu planning takes children and young people's views into account. They have regular opportunities and facilities to make food. They may have opportunities for growing their own food. | Children and young people's diet lacks variety and balance. They have limited choice or receive little of the food they enjoy. Food practices are insensitive or controlling, and do not consider the cultural and religious significance of food. |

Scrutiny and improvement toolbox	
Scrutiny and improvement support actions	**Key improvement resources**
• 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 they 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 young people views. • Examine records of complaints and incidents and the service's response. • Look at menus and where possible share mealtimes with young people. • Review the service's arrangements for the management of guardians (where these are provided by the service).	Notifications about Controlled Drugs: Guidance for Providers (Care Inspectorate): https://hub.careinspectorate.com/media/1566/notifications-about-controlled-drugs-guidance-for-providers.pdf 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 Safe Administration of Medication: Modules 1-3 (SSSC): http://learn.sssc.uk.com/sam/ Animal Magic: The benefits of being around and caring for animals across care settings (Care Inspectorate): http://www.careinspectorate.com/images/documents/4476/Animal%20Magic_2018.pdf Health Promotion Guidance: Nutritional Guidance for Children and Young People in Residential Care Settings (Scottish Government): https://www.gov.scot/publications/health-promotion-guidance-nutritional-guidance-children-young-people-residential-care-settings/ Creating a Tobacco Free Culture (Care Inspectorate and ASH Scotland): https://hub.careinspectorate.com/media/1484/creating-a-tobacco-free-culture-guidance-for-providers-of-residential-care.pdf Holding Safely: A Guide for Residential Child Care Practitioners and Managers about Restraining Children and Young People (SIRCC): https://hub.careinspectorate.com/media/1213/holding-safely-a-guide-for-residential-child-care-practitioners-and-managers.pdf

Key question 2:
How good is our leadership?

This key question has four quality indicators.

They are:

2.1. Vision and values positively inform practice

2.2. Quality assurance and improvement is 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 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 model positive behaviour.

Quality illustrations	
Very good	**Weak**
The vision, aims and values are clear, understood by all and fully implemented. They are inspiring, inclusive and embrace equality. 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.	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.
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 respect human rights and embrace the service's vision, values and aims to ensure these are met.	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.
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 weak or lacks stability, energy or effectiveness. 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**
• Obtain the views of children and young people, parents, 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 and any contribution by staff and young people. • Look at self-evaluation processes and improvement/development plans. • Consider how staff are supported to develop and exercise leadership. • Review the service's arrangements for the management of guardians (where these are provided by the service).	S Step into Leadership (SSSC): **http://www.stepintoleadership.info/ frontline_questions.html** Insights: Achieving Effective Supervision (IRISS): **https://www.iriss.org.uk/resources/ insights/achieving-effective-supervision** Supervision learning resource (SSSC): **http://www.stepintoleadership.info/assets/ pdf/SSSC-Supervision-learning-resource-Sept-16.pdf**

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**
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. Leaders ensure that all staff have a meaningful role in comprehensive quality assurance activity. This leads to the development of a dynamic improvement plan that is continuously evaluated and successfully drives the future direction of the school or hostel. This process is well managed, with research and best practice used to benchmark measurable outcomes. 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.	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. The contribution made by staff and children and young people to quality assurance is minimal or peripheral. They have limited awareness of the methods used or the intended outcomes. 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 service make them less effective in providing additional safeguards and assurance.

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.

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.

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.

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.

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.

There is insufficient capacity to support improvement activities effectively or to embed change. The pace of change may be too slow or is unsustainable.

Scrutiny and improvement toolbox	
Scrutiny and improvement support actions	**Key improvement resources**
• 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. • Review the effectiveness of 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/development plan. • Review the service's arrangements for the management of guardians (where these are provided by the service).	The Model for Improvement and associated resources: **https://hub.careinspectorate.com/resources/** 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** National Occupational Standards (NOS) **http://learn.sssc.uk.com/nos/about.html** 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**

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**
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. Leaders confidently 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. Leaders ensure that services are delivered efficiently and effectively. They monitor the effectiveness of joint work with other providers and agencies.	Leaders lack understanding of how children and young people 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.

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.	Communication with partners is ineffective. Progress is constrained by leaders being unclear about the principles of consent and information sharing. Leaders do not implement learning from other organisations to influence and improve the services they provide.
There are clear processes in place to support children and young people moving on to other services when the time is right.	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**
• 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 and transitions. • Review the information sharing and confidentiality policy and practice and their implementation. • Review arrangements for inter-agency working. • Examine the service's links to local resources and how these are used. • Review the service's arrangements for the management of guardians (where these are provided by the service).	Step into Leadership (SSSC): **http://www.stepintoleadership.info/ frontline_questions.html** Information Commissioner's Guide to data protection, including GDPR: **https://ico.org.uk/for-organisations/guide-to-data-protection/**

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.	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. There is a lack of vision and creativity in identifying resources or interventions which meet the unique needs of each individual.
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. 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.	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. 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. Equality and inclusion are not embedded within policies, procedures and plans. There is a lack of understanding of how all staff can contribute to delivering high-quality care and support.

Leaders adapt their leadership style to help motivate staff to deliver high-quality care and support. They promote a good work-life balance that has a positive impact on both staff and children and young people.	Opportunities for staff to use 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**
• Speak with children and young people, parents, 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. • Review the approach to staff engagement. • Review the service's arrangements for the management of guardians (where these are provided by the service).	Step into Leadership (SSSC): **http://www.stepintoleadership.info/ frontline_questions.html** Guidance for the Regulation of Guardianship Arrangements in Boarding Schools (Care Inspectorate): **https://www.careinspectorate.com/ images/documents/5235/Guidance%20 for%20the%20regulation%20of%20 guardianship%20arrangements%20in%20 boarding%20schools.pdf**

Key question 3:
How good is our staff team?

This key question has three quality indicators.

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.

* Where the service provides guardians, 'staff team' includes guardians

Quality indicator 3.1: Staff are well recruited

Key areas include the extent to which:

- the service implements safer recruitment principles and practice
- recruitment and induction reflect the needs of children and young people
- induction is tailored to the needs, roles and responsibilities of individual staff members.

Quality illustrations	
Very good	**Weak**
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. 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 that takes their views into account.	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. Recruitment and selection is not informed or enhanced by children and young people's views and active involvement.

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.	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.
All staff take part in a thorough, comprehensive, well planned induction that has been developed to ensure they are able to 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 receive 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
• Obtain the views of children and young people, parents, guardians, 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, selection and induction records, including any participation by young people and parents. • Review new staff supervision and induction records. • Review the service's arrangements for the management of guardians (where these are provided by the service).	Safer Recruitment Through Better Recruitment (SSSC and Care Inspectorate): **http://hub.careinspectorate.com/ knowledge/safer-recruitment** Further information and a range of resources can be found at: **https://www.sssc.uk.com/** The National Health and Social Care Workforce Plan: **https://www.gov.scot/publications/ national-health-social-care-workforce- plan-part-2-framework-improving/** Guidance for the Regulation of Guardianship Arrangements in Boarding Schools (Care Inspectorate): **https://www.careinspectorate.com/ images/documents/5235/Guidance%20 for%20the%20regulation%20of%20 guardianship%20arrangements%20 in%20boarding%20schools.pdf**

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**
Staff practice strongly reflects the values and principles of the Health and Social Standards and relevant professional codes. 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. 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.	Staff may be registered with relevant professional bodies but lack understanding of and commitment to what is expected of them. Staff adopt an overly procedural approach to children and young people, which is not based on relationships and values. They may have low tolerance of certain behaviours because they have limited understanding of children and young people's development. Arrangements for assessing staff practice are under-developed. There is limited support for staff to reflect or for identifying and meeting learning needs.

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. 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. Staff fulfil their responsibilities for continuous professional development and for meeting any registration requirements.	There is limited access to best practice and research or opportunities to ensure knowledge is consolidated and embedded into practice. 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. 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.
Staff' benefit from a framework of support which reflects the demanding nature of their work and promotes high quality, sensitive care and support. 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. Supervision and appraisal informs the development of the service's staff skills analysis and training plan. The views of children and young people and their families inform and enhance the quality of supervision and appraisal.	Insufficient attention is paid to staff welfare and support. As a result, they may regularly experience stress, or their ability to manage setbacks and challenges and provide attuned care and support is compromised. 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. Systems for identifying and meeting learning needs are not robust enough and result in gaps remaining unfilled.

Scrutiny and improvement toolbox	
Scrutiny and improvement support actions	**Key improvement resources**
• 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. • Review incident records and the extent to which these demonstrate appropriate practice. Consider how learning is implemented. • Consider any disciplinary records and how 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. • Review the service's arrangements for the management of guardians (where these are provided by the service).	Codes of Practice for Social Service Workers and Employers (SSSC): **https://www.sssc.uk.com/knowledgebase/article/KA-02412/en-us** 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** 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** The Framework for Continuous Learning in Social Services (SSSC): **http://www.continuouslearningframework.com** Common Core Skills and National Occupational Standards (SSSC): **http://learningzone.workforcesolutions.sssc.uk.com/course/view.php?id=83** Insights: Achieving Effective Supervision (IRISS): **https://www.iriss.org.uk/resources/insights/achieving-effective-supervision** Supervision learning resource (SSSC): **http://www.stepintoleadership.info/assets/pdf/SSSC-Supervision-learning-resource-Sept-16.pdf**

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 boarding 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.	The number of staff or staff hours being deployed at one time is relatively static, with infrequent reviews or adjustments to meet changing needs. 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.
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. 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 sufficiently diverse to meet needs and allow children and young people to have a meaningful say in who Is caring for them.	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 perceive staff to be too busy to provide good care. Planned activities are disrupted.

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. High levels of motivation and good team working mean that staff spend as much time as possible with children and young people. 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.	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. Care and support is at a basic or superficial level, with little time for meaningful communication and support. 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.
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 relationships.	There is a lack of understanding of 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.

Scrutiny and improvement toolbox	
Scrutiny and improvement support actions	**Key improvement resources**
• Obtain the views of children and young people, parents, visitors, staff, managers and other professionals. • Observe staff practice and interactions. • Review the system for assessing staffing levels and deployment. • Review staff turnover information. • Examine staff rotas. • Review staff handover practices and records. • Review the service's arrangements for the management of guardians (where these are provided by the service).	Records that all Registered Care Services (except Childminding) must keep and Guidance on Notification Reporting (Care Inspectorate): **https://hub.careinspectorate.com/media/1601/records-that-all-registered-care-services-except-childminding-must-keep.pdf**

Key question 4:
How good is our setting?

This key question has three quality indicators.

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

* Where the service provides guardians, 'setting' includes the domestic premises provided for children and young people by the host family.

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 homely, with 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 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.
Arrangements for monitoring, maintenance and repair of equipment and vehicles function well and are consistently implemented. Damaged and worn 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.
The setting provides security and safety without impinging on children and young people's rights. It reflects the service's aims and objectives. Any use of CCTV is lawful, fair, proportionate and protects their dignity. It is only used for purposes that support the delivery of safe, effective and compassionate care.	The service is not successful in achieving a balance between safety and security and children and young people's freedom and independence. They are not told or consulted about any CCTV or informed of their rights.

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.

Scrutiny and improvement toolbox	
Scrutiny and improvement support actions	**Key improvement resources**
• Obtain the views of children and young people, parents, visitors, staff, managers and other professionals. • Inspect the environment inside and out, including for example, equipment and furnishings. • 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. • Review the service's arrangements for the management of guardians (where these are provided by the service).	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** Information about health and safety at work: **https://www.hse.gov.uk/**

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**
Children and young people have high-quality care and support in a setting that is designed or adapted to meet their needs. The setting strongly enhances their experiences. 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.

Children and young people have access to the facilities, equipment and technology they need when they need them. These include enough toilets and showers (including access to baths), with separate facilities for staff and visitors, and somewhere quiet with a desk and chair to do their homework or other projects. There is a range of high-quality bedroom accommodation that allows individual needs and wishes to be met. These are considered at the admission assessment stage and regularly thereafter. Outdoor areas provide pleasant spaces for play and relaxation. | 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. Not enough attention is paid to ensuring that the setting can continue to meet their needs as they grow and develop. Their right to spend time alone is not respected.

Facilities, equipment or technology are lacking or do not meet children and young people's individual and group needs.

Children and young people who share bedrooms do not have enough space or privacy for their needs, when sharing is either a positive choice or unavoidable. They are not supported to develop respect and tolerance towards those with whom they share.

The setting does not support children and young people to develop the skills they need to thrive and get the most out of life. Communal areas are not accessible, or their use is limited without a clear justification based on risk. Children and young people are unable to play in or access outdoor space or to use it to its full potential. |

Children and young people are enabled to use kitchen and laundry facilities, other communal areas and outdoor areas, with support where needed. These lend themselves well to enabling children and young people to develop the life skills 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 exercise as much choice and control over their environment as possible. In particular they can adjust the heating, lighting and ventilation in their rooms to suit their needs and preferences. They can lock their bedrooms if this is practically possible and they have safe storage for their medication and other possessions. They may choose or bring items to personalise their rooms.

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 new design, changes and upgrades.

The way the setting is managed, designed or furnished is risk-averse or bureaucratic. 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.

Scrutiny and improvement toolbox	
Scrutiny and improvement support actions	**Key improvement resources**
• Speak with children and young people, parents, visitors, staff, managers and other professionals. • Inspect the environment inside and out. • Observe young people using the environment. • Review records of young people's meetings or responses to questionnaires about the setting. • Review the service's arrangements for the management of guardians (where these are provided by the service).	Guidance for the Regulation of Guardianship Arrangements in Boarding Schools (Care Inspectorate): **https://www.careinspectorate.com/images/ documents/5235/Guidance%20for%20 the%20regulation%20of%20guardianship%20 arrangements%20in%20boarding%20schools. pdf**

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**
Parents, siblings, other relatives and friends are confident of a welcoming and inclusive culture that actively supports them to visit. 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 use social media safely, to help them regularly stay in touch with others.	The service is not committed to, or has limited ways of, supporting the inclusion of family and friends. While there may be access to the internet, it may be unreliable. Creative use of other options are not routinely supported to allow children and young people to stay in touch.
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 in addition to taking part in larger group events. Staff model positive behaviours and support children and young people to develop interpersonal skills in their journey to adulthood.	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 them, or to develop friendships outside the school.
Children and young people benefit from being active members of the school and wider community, to which there are strong links. They are supported to develop individual interests, and access facilities beyond the immediate school setting.	The culture of the service is insular, with limited links to the local community. The setting's remote location or limited transport links make it difficult for them to get out and about either independently or with support. They are less able to benefit from the opportunities provided by a diversity of relationships or membership of groups and networks.

Scrutiny and improvement toolbox	
Scrutiny and improvement support actions	**Key improvement resources**
• Speak with children and young people, parents, 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. • Review the service's arrangements for the management of guardians (where these are provided by the service).	Guidance for the Regulation of Guardianship Arrangements in Boarding Schools (Care Inspectorate): **https://www.careinspectorate.com/ images/documents/5235/Guidance%20 for%20the%20regulation%20of%20 guardianship%20arrangements%20 in%20boarding%20schools.pdf**

Key question 5: How well is care and support 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 needs and wishes.

5.2. Parents and carers 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 active participants in their own care and support.

Quality illustrations	
Very good	**Weak**
Admission decisions are informed by a comprehensive assessment of children and young people's needs and what the service can offer. There is sufficient time and support for them to visit the service. Children and young people benefit from well-managed and supportive introductions and transitions throughout their journey through the school.	Children and young people's wellbeing is compromised by admissions that are inadequately planned. The service and staff do not have access to the relevant information to allow them to meet their needs.
Children and young people lead positive, healthy, enjoyable and meaningful lives through the implementation of high quality, SMART and proportionate care-planning strategies based on GIRFEC principles. They benefit from a dynamic and aspirational approach that consistently informs all aspects of care and support. The service actively seeks and enables multi-agency involvement in the planning process.	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.
Children and young people's records are of a consistently high standard and are informed by rights, values, principles and codes of practice.	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.

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 takes into account the views of all relevant professionals.	Personal plans are not reviewed in line with guidance or legislation. Assessment and evaluation against intended outcomes do not form an integral part of the review process.
Children and young people are at all times at the heart of plans for their care and support. They have a sense of ownership of their plans and can clearly recognise their own voice. They receive full support to communicate what their outcomes should be. Their plans detail in plain language what matters to them, to support a clear shared understanding. If their needs are no longer being met by the service, they and their parents are supported to identify suitable alternatives.	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. Plans and reviews are not routinely made available or provided in an accessible format to children and young people and their representatives.

Scrutiny and improvement toolbox	
Scrutiny and improvement support actions	**Key improvement resources**
• Speak with children and young people, family members, visitors, staff, managers and other professionals. • Review children and young people's assessments, personal plans, reviews, evaluations and other relevant records. • Review the service's arrangements for the management of guardians (where these are provided by the service).	Public Services Reform (Scotland) Act 2010, asp 8: **https://www.legislation.gov.uk/ asp/2010/8/contents** Children and Young People (Scotland) Act 2014, asp 8: **http://www.legislation.gov.uk/ asp/2014/8/contents/enacted** 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** Understanding Personal Outcomes (SSSC): **http://learn.sssc.uk.com/personal_ outcomes/Personal_Outcomes_booklet_ p2_FV_GM.pdf** Further information, advice and evidence on personal outcomes approaches can be found at: **www.personaloutcomescollaboration. org**

Quality indicator 5.2: Parents and carers are involved

Key areas include the extent to which:

- parents and carers are involved in delivering care and support
- the service keeps parents and carers informed about children and young people
- the views of parents and carers are heard and meaningfully considered.

Quality illustrations	
Very good	**Weak**
The service is influenced wherever possible and appropriate by parents and carers. Their views and wishes also strongly inform the individual assessment, planning and review process.	Parents and carers 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 not enough weight is given to parents' and carers' knowledge about what is or is not likely to work for children and young people.
Parents and carers receive regular, high-quality updates about children and young people's progress. The service ensures they are informed about significant events such as accidents, incidents and health issues at the earliest opportunity.	Parents and carers have limited choice in how and when the service communicates with them. Getting hold of staff who can speak confidently about children and young people is difficult. They do not feel well informed about children and young people's day-to-day lives and experiences.

There is a supportive and inclusive approach to working in partnership with parents and carers. They make suggestions, comments or complaints, knowing that these are always listened to and acted on in an honest and transparent way.

Leaders and staff always sensitively manage any conflicts about views and wishes between children and young people and parents or carers. 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.

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 and carers to be actively involved. Changes to how care and support are provided are rarely made as a result of their involvement.

Leaders and staff do not fulfil their legal obligations in relation to information sharing and consent.

Scrutiny and improvement toolbox

Scrutiny and improvement support actions	Key improvement resources
• Speak with children and young people, parents, visitors, staff, managers and other professionals. • Review feedback from parents and carers. • Review children and young people's assessments, personal plans, evaluation, reviews and other relevant records. • Review records of complaints and action taken. • Review communication with parents. • Review the service's arrangements for the management of guardians (where these are provided by the service).	Parental rights and responsibilities under the Children (Scotland) Act 1995 (Scottish Government): **http://www.legislation.gov.uk/ ukpga/1995/36/part/I/crossheading/ parental-responsibilities-and-parental- rights**

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 experiencing care and staff.*

7.3 Management, staffing and practice frameworks drive and support the best outcomes for children and young people experiencing care.

* Where the service provides guardians, 'staff', includes guardians.

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 nurtured and valued
- children and young people have positive learning experiences, achieve their goals, and reach their potential
- children and young people enjoy staying in touch with families, carers, friends, and this is maximised.

Quality illustrations	
Very good	**Weak**
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.	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.
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.	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.
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.	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.

Children and young people are supported to be emotionally resilient during the pandemic through the very good relationships with staff. This includes supporting children and young people who are experiencing stress and distress in response to the changes in the environment and routines, exacerbated by media coverage.

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 escalate concerns, seeking clinical advice as necessary.

Where there are restrictions placed on children and young people's freedom of movement, choice and control to prevent the spread of COVID-19, these are kept to a minimum and undertaken sensitively, proportionately, and in line with guidance. Restrictions are clearly understood by young people, documented, linked to risk and implemented with the involvement and consent of relevant individuals.

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.

Children and young people benefit from high-quality interaction and engagement from staff, and experience support that promotes independence, dignity, needs, 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

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.

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.

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.

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.

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.

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 may be limited due to COVID-19. Children and young people are encouraged to remain as active as they can be, including using outdoor space where possible.	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.
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. Family members and professionals know about visiting arrangements and keeping in touch because these are clearly communicated to everyone.	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, their families and carers and staff. The culture in the service is inward-looking, with limited attempts to establish alternative methods of engaging with families, professionals and other stakeholders. 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. Staff lack empathy about the impact and sense of loss experienced by children and young people who are unable to visit to family and friends. Expressions of distress are treated punitively.

Scrutiny and improvement toolbox	
Scrutiny and improvement support actions	**Key improvement resources**

• Observation of staff practice and interactions.
• Discussion with:
  - children and young people
  - staff
  - relatives
  - other professionals.
• Personal plans and relevant documentation.
• Policy or procedure for accessing other services.
• Observation of the setting, inside and out.
	Coronavirus (COVID-19): guidance on reducing the risks in schools: **https://www.gov.scot/publications/coronavirus-covid-19-guidance-on-reducing-the-risks-in-schools/pages/overview/**
	
	Coronavirus (COVID-19): residential child care: **https://www.gov.scot/publications/coronavirus-covid-19-residential-childcare/**
	
	Health Protection Scotland guidance: **https://www.hps.scot.nhs.uk/a-to-z-of-topics/covid-19/#publications**
	
	Coronavirus (COVID-19) ethical advice and support framework: **https://www.gov.scot/publications/coronavirus-covid-19-ethical-advice-and-support-framework/**
	
	Mental Welfare Commission. COVID-19 FAQ for practitioners – advice notes: **https://www.mwcscot.org.uk/sites/default/files/2020-05/Covid-19%20advice%20note%20v9%2027%20May%202020.pdf**
	
	Guide for repurposing prescription only medications in care homes: **https://www.careinspectorate.com/images/documents/coronavirus/Guidance_for_repurposing_medicines_May_2020.pdf**

Scrutiny and improvement toolbox	
Scrutiny and improvement support actions	**Key improvement resources**
	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**
Staff carrying out housekeeping, cooking and cleaning in the service have access to and are up to date with 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. 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, infection prevention and control and quarantine protocols. This includes the safe management of linens, clothing and waste, and the use of appropriate ventilation. Where necessary, there are clear signs directing people to handwashing facilities, and reminders of the recommended technique, that reflect the needs of children and young people using the service, for example accessible pictorial or written cues.	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 or cleaning equipment or because staff have not had the necessary support to devise effective cleaning schedules and regimes 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. Managers do not ensure appropriate actions are taken in response to an incident or outbreak or follow up on actions identified.

All staff are able to recognise and respond to suspected or confirmed cases of COVID-19, including following local reporting procedures, contacting local health protection teams and Care Inspectorate notification requirements

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.

Children and young people feel procedures and practices are safe. They are very well supported, and sensitively cared for, whilst experiencing any COVID-19 infection control or quarantine restrictions. All individual young peoples' needs are proactively identified, planned for, and well met.

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 time period. Children and young people who are moving in from a household where there is someone affected with COVID-19, or who are returning from overseas, are isolated for the required time period. Children returning from overseas are provided with safe travel arrangements.

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 children and young people not receiving the support they require and putting themselves and others at risk.

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 do not feel safe and do not understand the reasons for the restrictions they are experiencing. Leaders and staff do not recognise young people with additional support needs and support them appropriately.

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**

• Observation of staff practice and interactions.
• Discussion with:
  - children and young people
  - staff
  - relatives
  - 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
	COVID-19: Information and Guidance for Social, Community and Residential Care Settings:
	https://hpspubsrepo.blob.core.windows.net/hps-website/nss/3045/documents/1_covid-19-guidance-social-community-residential-care.pdf
	
	NIPCM Scottish COVID-19 Community Health and Care Settings Infection Prevention and Control Addendum:
	http://www.nipcm.hps.scot.nhs.uk/scottish-covid-19-community-health-and-care-settings-infection-prevention-and-control-addendum/#a2785
	
	Infection prevention and control (IPC) educational resources:
	https://www.hps.scot.nhs.uk/a-to-z-of-topics/covid-19/workforce-educational-resources/#title-container
	
	Care Home Outbreak Checklist:
	https://hpspubsrepo.blob.core.windows.net/hps-website/nss/3088/documents/1_covid-19-care-home-outbreak-checklist.pdf
	
	National infection prevention and control manual and handwashing video:
	http://www.nipcm.hps.scot.nhs.uk/chapter-1-standard-infection-control-precautions-sicps/
	
	Best Practice - How to Hand Wash visual:
	http://www.nipcm.hps.scot.nhs.uk/appendices/appendix-1-best-practice-how-to-hand-wash/

Scrutiny and improvement toolbox	
Scrutiny and improvement support actions	**Key improvement resources**
	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/

Coronavirus (COVID-19): interim guidance on the extended use of face masks and face coverings in hospitals, primary care, wider community care and adult care homes: https://www.gov.scot/publications/coronavirus-covid-19-interim-guidance-on-the-extended-use-of-face-masks-in-hospitals-and-care-homes/

Coronavirus (COVID-19): public use of face coverings: https://www.gov.scot/publications/coronavirus-covid-19-public-use-of-face-coverings/

Unsuspected COVID-19 PPE in Social/Community/Residential poster : https://scottishcare.org/wp-content/uploads/2020/04/2_non-covid-19-ppe-poster-A3-social-community-ppe-poster.pdf

Suspected/confirmed Covid-19 PPE General Area: https://scottishcare.org/wp-content/uploads/2020/04/3_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 young people.

Quality illustrations	
Very good	**Weak**
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. Staff have time to provide high quality care and support with compassion and engage in meaningful conversations and interactions with children and young people. 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. 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.	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 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 PCR (polymerise chain reaction) swab test. There is a minimal number of staff and this is sometimes insufficient to fully meet children and young people's needs. Staff work under pressure, and some important aspects of care and support may be missed, affecting outcomes for children and young people. 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.

Quality illustrations	
Very good	**Weak**
	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.
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. 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.	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. Pressure on staff leads them to stick to their designated tasks because there is no capacity to respond to other demands.
Staff who are not involved in providing direct care and support to children and young people understand how they can contribute to keeping children and young people safe, including supporting good hygiene and infection control. 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. Children and young people are confident that staff have the necessary skills, training and competence to support them.	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. 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.

Quality illustrations

Very good	Weak
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. 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 and their needs, and about the service.	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. 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.

Scrutiny and improvement toolbox

Scrutiny and improvement support actions	Key improvement resources

• Observation of staff practice and interactions.
• Discussion with:
   - children and young people
   - staff
   - relatives
   - 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.
	Advice for Social or Community Care and Residential Settings Staff: **https://hpspubsrepo.blob.core.windows. net/hps-website/nss/3088/documents/2_ covid-19-advice-for-social-or- community-care-and-residential- settings-staff.pdf**
	
	Interim guidance on COVID-19 PCR testing in care homes and the management of COVID-19 PCR test positive residents and staff: **https://www.careinspectorate.com/ images/documents/coronavirus/1_covid- 19-interim-guidance-pcr-testing-in- care-homes-and-management-pcr-test- positive-residents-and-staff_UPDATED_. pdf**

Scrutiny and improvement toolbox	
Scrutiny and improvement support actions	**Key improvement resources**
	SSSC COVID-19 recruitment portal: **https://news.sssc.uk.com/news/ recruiting-staff-for-coronavirus-covid-19**

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

COVID-19 notifications - Care Inspectorate: **https://www.careinspectorate.com/ index.php/coronavirus-professionals/ covid-19-notifications**

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** |

Website: www.careinspectorate.com
Email: enquiries@careinspectorate.gov.scot
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