St Leonards
School Care Accommodation Service

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Type of inspection:
Unannounced

Completed on:
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Service provided by:
St. Leonards

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About the service

St Leonards is a school care accommodation service forming part of an independent, co-educational school with boarding places for up to 174 pupils, mainly between 10 and 19 years. It has three boarding houses: St Rule can accommodate up to 58 boys and girls (including up to three flexible boarders aged from eight to 19); Bishopshall can accommodate up to 57 girls between 10 and 19; and Ollernshaw can accommodate up to 49 boys between 10 and 19.

The school is situated on a campus in the centre of St Andrews, a town on the east coast of Fife with a wide variety of community amenities and public transport links. The campus has a range of facilities for pupils, including gardens and playing fields, indoor sports hall, swimming pool, library and a music school with auditorium.

About the inspection

This was an unannounced inspection which took place on 28 February, 1 March and 2 March 2023. Inspectors visited the service between approximately 11:30 and 19:30, 09:30 and 20:00 and 09:15 and 15:30 respectively. The inspection was carried out by four inspectors from the Care Inspectorate.

To prepare for the inspection, we reviewed information about the service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection. In making our evaluations of the service, we:

- reviewed survey responses from 49 young people, 15 parents and carers and 11 staff
- spoke with 71 young people using the service
- spoke with 22 staff, managers and council members
- observed practice and daily life
- reviewed documents.

Key messages

- Almost all pupils were highly satisfied with the care and support they received at St Leonards.
- Staff protected young people, almost all of whom felt safe at the school.
- Young people benefitted from very positive, respectful relationships with boarding staff. Support for their physical and emotional wellbeing was a strong feature of the service they received.
- Pupils had lots of opportunities to engage meaningfully in their care, and their views and suggestions were making a difference to their experiences at St Leonards.
- Boarding staff worked well together to meet pupils' needs. They felt well-supported by managers but should have regular, planned supervision.
- Quality assurance was having a positive impact but there was scope for further development to maximise the quality of service delivery and pupils' outcomes and experiences.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support children and young people's rights and wellbeing?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support children and young people's rights and wellbeing? 4 - Good

We evaluated quality indicator 7.1 as **very good**, which means performance in this area had major strengths. We evaluated quality indicator 7.2 as **good**, which means there were a number of important strengths which, taken together, clearly outweighed areas for improvement and had a significant positive impact on pupils' experiences and outcomes.

Practices were highly effective in preventing harm and abuse. Almost all young people felt safe, which is an essential factor in healthy emotional development. They had adults to turn to when they needed support, and most agreed that when bullying occurred, staff dealt with it quickly and sensitively so that it stopped. Parents' responses also indicated very high levels of confidence in safeguarding arrangements. We made suggestions for improving the quality of admission information and documentation of individual risk assessments when concerns increase. More specific risk indicators and interventions should help guide staff in their work and support the service to track and review the effectiveness of safeguards.

Pupils' relationships with staff were very positive, trusting and respectful and provided the foundation for security and making the most of their time at St Leonards. An extensive, ongoing refurbishment programme had resulted in a high-quality environment in the boarding houses and reflected this respectful ethos. We shared pupils' comments about privacy in some bathrooms: managers agreed to follow this up. An effective system for responding to complaints promoted accountability and allowed identification of learning to support improvement, though information about what to do if they are unhappy with the outcome should be shared with complainants. A wide range of consultation forums and similar initiatives, including a student council, supported engagement in school life. Along with regular wellbeing surveys, these provided evidence of the service listening to and acting on the student voice.

Pupils made very good use of the wellbeing hub, which had contributed to enhancing provision for their emotional and mental health. This was an extremely valuable resource, and the team of experienced staff was well placed to participate in its ongoing development. Significant improvements to management of young people's medication had reduced the potential for adverse outcomes and played an important part in maximising health. We asked managers to review arrangements for ensuring pupils always had access to appropriate home remedies such as pain relief overnight.

Catering staff provided young people with a very varied range of meals and snacks and met a wide spectrum of dietary needs. Pupils made a range of comments about their food experiences. They had regular opportunities to make suggestions and the service had been responsive to many of them. Managers should continue to monitor satisfaction levels, including considering whether arrangements for portion sizes and extra servings can be improved.

Pupils were able to take advantage of a diverse range of facilities on the very attractive and historically significant campus. The school's proximity to a busy town with lots of additional amenities and social and cultural opportunities, and easy access to a number of scenic locations, further enhanced their experiences.

National wellbeing outcomes strengthened planning processes and delivery of support for maximising pupils' experiences. Some plans would benefit from more focussed and specific actions for addressing additional needs or challenges, and should be amended as these change to keep them fully dynamic. The system currently being used by the service made it difficult to fully engage and involve pupils in the development and review of plans, though we could see that they had regular opportunities to catch up with staff and discuss how they were progressing. We felt that the new system currently being piloted had the potential for creating a highly personalised approach and look forward to evaluating this at the next inspection.

New management arrangements in one of the houses had led to an improved and more enabling culture that more closely reflected the service's inspiring vision for high quality experiences for all pupils. Council members had continued to demonstrate a strong commitment to promoting positive outcomes and safeguarding pupils' wellbeing, in partnership with the school's senior leaders. This included reviewing key management information, regular visits to the boarding houses to speak with young people and staff, and contributing to and overseeing the service's improvement agenda. As a next step, we signposted the service to new guidance on effective safeguarding for boards of governors, which can be used for self-evaluation and continuous development.

Managers had reviewed staffing levels in the boarding houses. This had enhanced support for young people by increasing availability of staff at key times of the day. Staff knew young people well and there was strong evidence of a caring and sensitive approach. They had access to a range of relevant mandatory training, though we suggested that training in self-harm would be a valuable addition. Staff described high quality support from colleagues and managers. However, with the exception of heads of boarding houses, there had been limited progress in implementing plans for regular supervision of boarding and wellbeing staff **(see area for improvement 1)**. Nevertheless, there were good examples of observation and evaluation of staff practice, including individual feedback on performance to support learning.

Recruitment records confirmed that the service had followed good practice in most respects, with the aim of appointing only suitable staff to work with young people. However, they need to make every attempt to obtain references that are as up to date as possible, and ensure that employment gaps are explored and recorded.

Quality assurance processes contributed to ongoing improvement of service delivery and of young people's experiences and outcomes. Pupils' responses to our survey indicated that almost all were happy with the quality of care they experienced. However, professional registration promotes trust and confidence in the workforce and provides safeguards, and we concluded that the process for ensuring all staff were registered with the Scottish Social Services Council had not always been effective. Managers took prompt action, including a plan to develop a monitoring system to prevent recurrence, so we will not make an area for improvement in this report. In addition, further development of quality assurance systems would allow more effective monitoring and tracking of staff training. We also reminded managers about recording, and where necessary submitting, relevant notifications of, significant events to the Care Inspectorate.

Areas for improvement

1. In order to ensure there is an effective staff support and development framework, the provider should implement a plan for regular supervision of staff.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state that: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14) and with the SSSC's Code of Practice for Employers of Social Service Workers, which state that the employer will 'provide effective, regular supervision to social service workers to support them to develop and improve through reflective practice.' (3.5)

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

Requirements

Requirement 1

In order to meet young people's health needs and prevent harm, the provider must improve management of medication. This will involve ensuring that:
(i) all staff take part in appropriate training and are able to demonstrate a required level of competence before they manage young people's medication (by no later than the end of May 2021);
(ii) records made by staff are accurate, reflect good practice and provide an effective audit trail (within two weeks of receipt of this report); and
(iii) there are regular, robust audits identifying any errors or practice issues and how these are to be addressed, and any action taken (beginning within one week of receipt of this report).

This is in order to ensure that care and support is consistent with the Health and Social Care Standards, which state that: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14) and 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11), and complies with SSI 2011/210 Regulation 4(1)(a).

This requirement was made on 21 May 2021.

Action taken on previous requirement

The service, under the direction of the new school nurse, had implemented a number of changes to systems and practices for managing medication, including staff training, recording and quality assurance. These had contributed to reducing potential risks and maximising young poeple's health outcomes.

Met - within timescales

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

In order to safeguard and promote young people's welfare, the provider should ensure that managers explicitly identify potential concerns and make clear records of the assessment and decision-making process.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards, which state that 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20).

This area for improvement was made on 21 May 2021.

Action taken since then

The service protected and promoted young people's safety and wellbeing, though managers should ensure that the risk assessment process is clearly recorded.

Previous area for improvement 2

The provider should consider how staff can be further engaged in self-evaluation, quality assurance and improvement planning.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards, which state that 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

This area for improvement was made on 21 May 2021.

Action taken since then

The service had continued to make use of wellbeing surveys to gauge staff satisfaction levels and identify improvements to staff support. There were also other opportunities for staff to feed back their views and make suggestions about service development, including regular meetings between house managers and the head of boarding, and house meetings. We felt that the positive relationships that existed in house teams were conducive to staff feeling able to discuss their work and raise issues. A process of consultation for the school's new five-year strategic plan, which will include the staff group, was also underway.

Previous area for improvement 3

In order to meet young people's needs and meet their aims and objectives, the provider should ensure that staff have the appropriate support to complete the specified training programme.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards, which state that 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

This area for improvement was made on 21 May 2021.

Action taken since then

We were able to make only a partial evaluation of this aspect of service performance as staff training logs were not available. We suggested that the service develop a system for monitoring and tracking staff training to ensure learning and development needs are met. In discussions with staff, we were able to confirm some of the training they had taken part in, including child protection.

Previous area for improvement 4

The provider should put in place a system for assessing the staffing levels, skills and deployment that are required in all parts of the service throughout the day, taking into account young people's physical, emotional, and social needs. They should review and record this on a four-weekly basis in line with Care Inspectorate guidance.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state that 'My needs are met by the right number of people' (HSCS 3.15).

This area for improvement was made on 21 May 2021.

Action taken since then

Managers had reviewed staffing provision and deployment in the boarding houses and made changes to more effectively meet young people's needs. Moving forward, the assessment should detail the factors that have contributed to decisions about staffing provision and deployment and should include reference to overnight arrangements.

Previous area for improvement 5

In order to meet young people's needs more effectively, the provider should ensure that:
(i) all young people with additional needs are identified and have appropriate plans in place;
(ii) the quality of assessments and personal plans continues to improve; and
(iii) young people are fully involved in the assessment, planning and review process.

This is to ensure that care and support is consistent with the Health and Social Care Standards, which state that 'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15).

This area for improvement was made on 21 May 2021.

Action taken since then

The service had put in place a system that allowed managers to identify pupils who had a range of additional needs (though we asked them to clarify whether this was the case for a small number whose records we reviewed). Plans were underpinned by national wellbeing (SHANARRI) outcomes aimed at keeping young people safe and promoting positive experiences. Further development was needed to ensure all plans contain more specific actions and interventions for achieving agreed outcomes, which should in turn contribute to evaluation of progress. The service was piloting a promising new system that should allow pupil to be more actively involved and engaged in the planning and review process.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How well do we support children and young people's rights and wellbeing?	4 - Good
7.1 Children and young people are safe, feel loved and get the most out of life	5 - Very Good
7.2 Leaders and staff have the capacity and resources to meet and champion children and young people's needs and rights	4 - Good

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