

Care about physical activity



Almost a thousand care homes for older people have been asked to support physical activity for older residents after the Care Inspectorate launched Care... about Physical Activity, a multimedia resource pack to help care home residents keep active.

Extensive research shows that taking part in regular, simple physical activities brings a host of healthy benefits. Something as simple as making a cup of tea, going for a walk or taking part in a spot of gardening can make all the difference when it comes to helping people enjoy a better quality of life, especially as people get older.

The pack, produced in partnership with the British Heart Foundation National Centre for Physical Activity and Health at Loughborough University, supports care home staff to encourage physical activity as part of every resident's daily life.

"Some people in care just need a little help to keep active, and that can often mean taking part in simple activities like making their bed, helping to prepare a meal, or going for a short walk," says Edith Macintosh, the Care Inspectorate's Rehabilitation Consultant. "When people are supported to take part in activities of their own choosing, it can make a huge difference to their quality of life. The total amount of activity people are supported to take part in is the key to obtaining many physical, emotional and social benefits."

The scheme was launched at Kincarrathie House in Perth, where residents piloted some of the approaches and techniques. Vikki Urquhart, Care Assistant at the home, agrees: "When you have residents who come to us from their own homes, you find that their mobility can be quite poor. But with the support of the staff, as times goes by, you see a massive increase in their willingness to partake in physical activity and their ability to do so."

Based on the World Health Organization model of 'Health Promoting Settings', Care... about Physical Activity offers simple solutions and practical approaches to enable all residents to choose to be active every day, with self-assessment tools, a guide to active living, and a DVD to demonstrate good practice. The pack has been tested with care homes, and is practical and easy to use.



introduction from chief executive

Everyone will use a care service at some stage, and our job is to help them be as good as they can. Care services in Scotland cannot, by law, operate unless they are registered with us — so we are the quardians of quality in care.

Every year, we collect a lot of information about care in Scotland which shows trends and themes. This provides a solid evidence base to inform our own inspections and the work of others.

This publication is different. As a standards and quality report, it shows what our 600 staff have been doing to protect and support some of the most vulnerable people in society. This tries to tell the human story of care today.

As regulators, I am determined that we will never forget our profound responsibility to members of the public in whose name we act. When we inspect care services, we expect them to be self-aware and evaluate their own performance effectively and openly. I want to operate the same standards for the inspectorate itself, and hope this report allows you to see what we are doing to serve the public.

Annette Brutan 😵

Annette BrutonChief Executive

our chair writes...

The work of the Care Inspectorate touches the lives of every person in Scotland. From babies to grandparents and older people rely on the services we regulate, inspect and help improve.

Many are vulnerable and need others to help them. Our job is to ensure they get as high a quality service as possible.

That makes chairing the Care Inspectorate a profound privilege and a profound responsibility. People rightly rely on us to make judgements and feel assured about care. I am pleased to report that most care services perform well. Where we have concerns, we do not hesitate to act and have powers to require changes or take enforcement action.

This is a time of great change in the care sector. Soon we will have new national care standards, there is closer working between integrated health and social care, and there are new laws to improve the support children and young people experience.

That means the Care Inspectorate is changing too. We are not just inspectors — we are also an improvement body. Our staff are working on developing a new methodology for our scrutiny and improvement work. In the coming year, we will begin to see developments.

I hope you find this publication interesting.

Paul Do 80

Paul Edie Chair, Care Inspectorate Board

inspecting regulated care services

Senses get fired up for top care

Programme provides sensory stimulation for care home residents with dementia

Wet shave sir? Or maybe a hand rub, madam? Or how about we play your favourite song?

A resident enjoys a wet shave

Residents at a Johnstone care home are taking part in a brand new programme that provides sensory stimulation for people with dementia who are nearing the end of their lives.

Namaste was developed by Joyce Simard from the US and has only recently been piloted in the UK by Adams House, a Church of Scotland Crossreach facility.

The home's manager, John McDaid, and his deputy, Linda Kelly, were introduced to Namaste by Lorna Reid, an education liaison nurse with the ACCORD Hospice in Renfrewshire. Linda said: "We felt we were providing a high standard of care in general, but that residents at the end stage of their lives needed a more therapeutic approach to enhance their spiritual comfort and care.

"Lorna told us about Namaste care and we were immediately keen to try it. She even arranged for Joyce, the founder, to come over from the US and carry out training and help us set this up." All the staff at Adams House are involved – from care assistants to cooks and housekeepers. A room has been set aside for Namaste – with a range of aids, including music, lighting, and comfortable seating for the residents who had been identified as benefiting from this model of care.

"It's important that the room is used for small groups so that the residents receive that personal touch," said John.

The early results are remarkable. "One lady who hadn't spoken a word for over a year began humming along to music. Another, who seemed in some discomfort, was identified as needing some breakthrough pain relief after having Namaste care. This has made a huge difference to her experience and she is more settled at night," he added.

Namaste is not about stimulation, he said, but is about making contact with someone who has dementia. "Family members are finding it beneficial too. It can be very difficult to visit a loved one when the time comes that you cannot get any verbal response from them. Now they can give their relative a hand rub, or read a short story, and get a response."

Adams House has an increasing number of visitors from other care homes looking to find out more about Namaste.

"I have visited Adams House and was very impressed with the connections made with residents. Given that dementia is a lifelimiting illness, Namaste looks at the spirit within and uses people's own senses to help make contact with them, or just give them a feeling of wellbeing.

daycare of children care services services support services

Regulated

a young inspector's experience

"We see changes in services when we go back – it's great to know we make a difference"

The Care Inspectorate is working with charity Move On — to encourage young people with experience of care services to become Young Inspection Volunteers and take part in inspections of services for children and young people.

"We make a difference"

Young Inspection Volunteers have been involved in all joint inspections of children's services since 2012. Donna Chatterton explains how she got involved and what she gets out of it.

What motivated you to get involved? My own experiences of the care system and homelessness and to be a better role model for my two children.

How did you find your first inspection? I enjoyed being able to communicate with everyone at all levels. I liked the fact that we were all equally treated and respected.

How did people using the care service relate to you?

All the young people opened up, even those who were shy. We talk to them in a way they understand. I could relate to a lot of their experiences, such as running away, being a young carer and homelessness, which allowed me to help and give good advice.

Gemma Watson, the Care Inspectorate's Involvement Advisor Children and Young People, explains:

"Children and young people offer us the voice of experience and no one has better knowledge or understanding of these services than the young people who use them. We have a responsibility to listen and allow it to influence how we work." joint inspections children's services

we carried out:



joint inspections for children's services in 2013/14

This year we began our programme of joint inspections of services for children and young people.

We looked at how well community planning partners are working together to ensure good outcomes for all children and young people in their communities and to close outcome gaps between those children and young people who are vulnerable or disadvantaged and their peers. We carry out these inspections with Education Scotland, Healthcare Improvement Scotland and Her Majesty's Inspectorate of Constabulary for Scotland.

Three pilot inspections in Orkney, City of Edinburgh and North Ayrshire were followed by inspections in Argyll and Bute, Midlothian and Highland. Inspection reports for these are now published and available on our website.

We gather a great deal of information in the course of our own inspections of regulated care

services such as childminding, day care, out of school care and services for children who are looked after away from home, and this knowledge informed the joint inspections. There is real potential to target our inspection activity even more helpfully as we extend and embed our new, outcome-focused way of inspecting care services for children.

During this year, we have been able to see the valuable contribution made by a range of services to better outcomes for children, including Fire and Rescue Services, housing services and many third sector services. This has extended our normal range of activities. Our inspections have a particular focus on early intervention and prevention. We have been able to see the positive impact of the continued roll out of the Getting it Right for Every Child Approach which, although at different stages of implementation across the country, seems to be providing a common language and approach to help staff work better together to support children and families at the first sign of difficulties.

joint inspections of services for older people





We have now carried out two pilot inspections with Healthcare Improvement Scotland, of the community health and social care partnerships in Moray and Aberdeenshire.

These inspections herald a new programme of joint inspections that links closely to the integration of health and social care that is happening across Scotland now.

We looked at how well partnerships were working together to deliver services that make a positive difference for older people and their carers. The sort of positive differences we were looking for included early intervention and prevention; quicker assessments

of needs; more effective setting up of care packages; promoting self-care; and reducing delays in discharge from

Our pilot inspections are now complete and the inspections reports, which detail our findings and how and what we inspected, will be published and available on our website, later in 2014. We will now refine this type of inspection, based on the pilots and roll the programme out across Scotland.

I'm helping to make it etter for young people"

Donna Chatterton



"The experience we gain is great for our CV"



protecting vulnerable people

How well does Scotland protect vulnerable adults and children?

We have a responsibility to protect some of the most vulnerable people in society. That's why Scottish Ministers asked us to report on the effectiveness of adult and child protection in Scotland. Between January and March 2014 we looked at the arrangements to protect adults and children, in place across all 32 local authority areas.

We have looked at the strategic leadership and governance of public protection in Scotland as a whole, including areas of potential risk and key strengths and areas for improvement.

We examined what we know from previous inspections, including our joint inspections of health and social work services for older people. We also carried out work across all 32 local authority areas in Scotland with chief officers and adult protection committees to find out how effective their protection arrangements are.

We are encouraged to find some strong leadership and clear focus on delivering the best possible outcomes for people. The most effective services we found are those with sound quality assurance systems, set up to jointly monitor and evaluate their performance rigorously.

A number of chief officers' groups have strengthened their structures and governance, to improve the scrutiny and challenge of their performance. This has

made the connections across relevant areas (such as domestic abuse, violence against women, and drug and alcohol partnerships) more explicit. It is leading to better joint working and successful integrated approaches to protecting and supporting groups that are vulnerable and at risk.

Where there are strong links between the work of child protection committees and integrated children's services planning, the protection of children and young people is placed firmly at the centre of wider strategies to improve the wellbeing of children, young people and families.

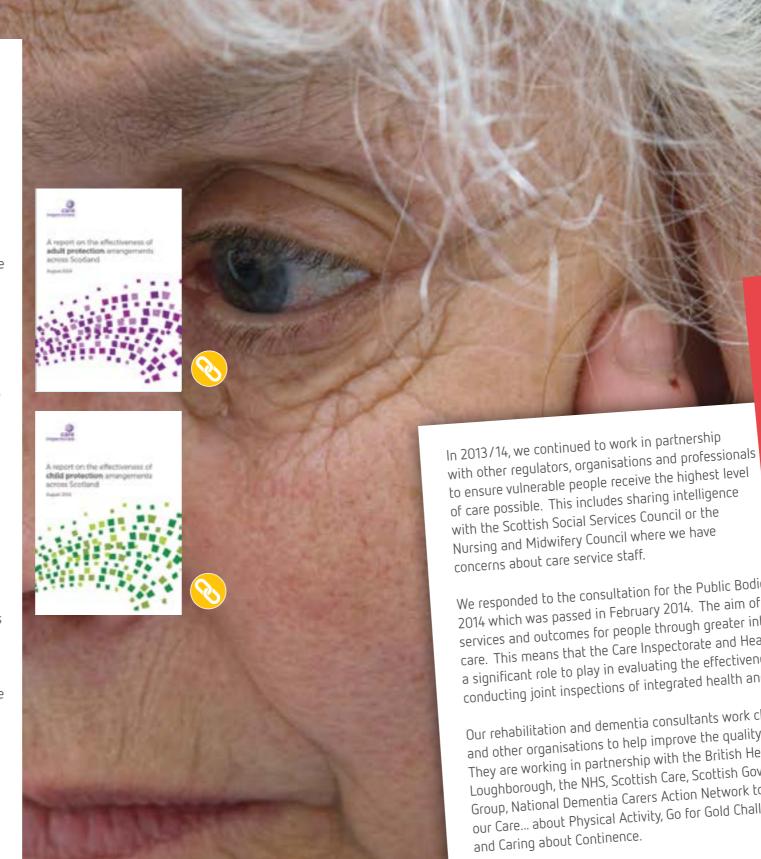
However, we are concerned that the capacity for improvement is weak in some areas.

Lack of direction and oversight of protection work by chief officers tends to be associated with weak self-evaluation and an inability to provide evidence of ongoing improvement.

We found barriers to improvement that tend to be focused around capacity rather than capability. Given the high level of restructure happening to drive efficiencies and integrate services, it is imperative that roles and responsibilities for support and protection are not lost and that frameworks of continued improvement are identified and reported to chief officers' groups.

And we need a national improvement to the processes in place for assessing and responding to risks and needs so that vulnerable people are protected.

Our two separate reports on the effectiveness of protection arrangements for Adults and Children in Scotland are available on our website.



We had: memorandums of understanding in 2013/14

who else we work with

We responded to the consultation for the Public Bodies (Joint Working) (Scotland) Act 2014 which was passed in February 2014. The aim of this Act is to improve the quality of services and outcomes for people through greater integration between health and social care. This means that the Care Inspectorate and Healthcare Improvement Scotland will have a significant role to play in evaluating the effectiveness of integration at a local level and conducting joint inspections of integrated health and social care services.

Our rehabilitation and dementia consultants work closely with care service providers and other organisations to help improve the quality of life for people using care services. They are working in partnership with the British Heart Foundation National Centre in Loughborough, the NHS, Scottish Care, Scottish Government, Scottish Dementia Working Group, National Dementia Carers Action Network to launch a number of resources, including our Care... about Physical Activity, Go for Gold Challenge Scotland, Care... about swimming and Caring about Continence.

During 2013/14, we worked with the Mental Welfare Commission for Scotland to carry out scrutiny of secure services for young people. We also work with Audit Scotland and other scrutiny bodies across Scotland to plan and schedule inspections of public authorities. In 2013/14, we carried out joint inspections or concurrent inspections with:











Future strategic development

This year saw a number of strategic achievements. together with be progressed in the next.





"We continuously look at how we can refine, improve and expand our contribution to improving care and social work in Scotland."

Putting human rights at the heart of what we do

There is an increasing focus on human rights in care services — and it is likely to grow. We are putting human rights at the heart of how we inspect care to make sure people's likes, choices and wishes are respected.

The Scottish Government is currently reviewing the National Care Standards and there are wide calls for this rights-based approach to be formalised.

"We regulate such a wide variety of care services, and there are risks around human rights in many of them. Some of the services we regulate are ones which intentionally remove people's liberty, such as secure care. In others, people's rights may be curtailed in more subtle ways. Our inspectors seek to ensure that people have choice and dignity in every way possible. Treating people how you would wish to be treated is, at heart, what human rights are all about" says Gordon Paterson, Head of Inspection (Older People – East).

Developing the National Care Standards around human rights will mean changes for care services and for the Care Inspectorate – and this is at the heart of our review of our new inspection methodology for care services.

"We need to ensure that all staff working in care have the right skills, knowledge and commitment to ensure a human rights based approach," says Marie Paterson, Project Lead Methodologies, who is leading on the development of the new scrutiny and improvement methodology. "Ensuring high quality leadership that puts human rights at the heart of improvement is crucial. So is meaningful involvement of all people who use services and their carers. That is an important way of ensuring that there is no discrimination, inadvertent or otherwise."

We have also been working with the Scottish Human Rights Commission to support and implement SNAP – Scotland's National Action Plan for Human Rights.

Better intelligence, better scrutiny

We gather, analyse and report on a huge quantity of data from a wide range of sources. This intelligence is crucial to understanding the state of care in Scotland. As well as informing and influencing national policy direction, it informs how so the information we collect is more useful and produces better in-depth and accurate pictures of care across local authority areas. You can read more about how our contact managers and link inspectors are helping us achieve this on page 16. Going forward into next year, we will be refining our intelligence-gathering to better support outcomes-focused risk assessment that underpins new scrutiny and improvement methodologies.

National Care Standards Review

Scottish Government is continuing its major review of the National Care Standards that services must meet and that we use to inspect against. We have kept in close touch with developments and made a significant contribution to influence what these new standards should look like. We are doing all we can to ensure the new standards focus clearly on positive lives too.

Methodology review - looking at how we inspect

We have begun a methodology review; to look at how we can improve the way we inspect care services. This review is taking a root and branch look at what we do and how we do it, so that we can continue to improve and develop our approach to scrutiny and improvement in an ever-changing care landscape. We need to make sure that care in Scotland really benefits the people using it; it must be based on rights and focused on outcomes. We have consulted extensively and we aim to conclude the review in 2015/16, so we can then move swiftly to make the changes we need to remain a high-performing, effective and efficient regulator.

New inspections for childminders

We developed a new inspection model for childminding services; based on rights and focused on outcomes. So for example, before we might have asked "Do you have a policy that protects vulnerable children", we would now ask "How do your policies protect vulnerable children?" To help us do this, we are using a set of nationally adopted indicators designed to explore the impact of services on children. You can find out more in our 'How we inspect' section on page 16.



Gordon Paterson, Head of Inspection (Older People - East) said:

"It's about how we can reinforce our drive to put dignity, respect and choice at the heart of the improvement that our work can bring"

Choosing a care at home service



care at home services

delivered to 63,000



"Not all older people live in a care home; many are supported in their own home"

The introduction of Self Directed Support means that people can now arrange some, or all of the support they need instead of receiving services that the local authority social work or housing department arrange. It is for people who would like more flexibility, choice and control over their care so that they can live at home more independently.

Care at home services support people who want to live in their own homes, but may need help with some daily tasks, for example, preparing a meal or personal hygiene. Some people decide to arrange their own care at home service and some ask their local authority to provide or commission the service for them.

No matter how you arrange your care, you have the right to expect the same high standard. People looking for a care at home service can look at our inspection reports, complaints and enforcements for services at www. careinspectorate.com

Once you choose a service, they should:

 get to know you as a person and understand how you like to like to live your life so that they can provide the right care to meet your needs

- respect your human rights, by supporting your privacy, your dignity and your right to confidentiality
- give you the opportunity to be involved in your own care, and listen to your views and act on them
- establish a personalised care and support plan for you
- make sure you have easy access to information about the service, before the service starts
- have safe systems in place to manage medicines
- ensure you are cared for by staff who have the skills, knowledge and training to provide high quality, safe, and compassionate care
- have clear service agreements in place with you before the service starts.

More information is available in our leaflet 'Choosing a Care at Home Service: what can I expect'.

You can download it at www.careinspectorate.com or order a copy by calling us on 0345 600 9527.





involving

People make inspections!

People who have direct experience of using care services themselves, or who care for someone close to them who uses a care service, can add real value to our inspections. Their unique personal insight means they are really well placed to get the honest views of people using the services we are inspecting.

Janine Cameron is an inspection volunteer who mainly helps with care home inspections. Here, she talks about what she does and why.

"I've been an inspection volunteer for over five years now. Being an inspection volunteer suits me – you choose how much you want to do - I've done around 10 inspections this year and that was my choice as it suits my lifestyle.

"Why do I do it? I thought I fitted the criteria. You need to have someone close who is using or has used care services and you bring your own experience of this to the position. Being part of a team appeals to me and being an inspection volunteer you feel like a worthwhile part of the team. I get great support from my co-ordinator and I like the structure of the inspection volunteer service – the set up works well.

"I like people and I like speaking to people — I get a lot out of it. You bring a different set of eyes and your own life experience, but you often come to similar conclusions as the inspectors. A typical inspection visit is a whole day then a half day to write your report.

"I do feel we make a difference – you go to one place then, when you go again, maybe a year later – you can see a real difference.



Janine, said:

"Do I enjoy being an inspection volunteer? Enjoy is a funny word, but I do enjoy the whole experience. It's really satisfying knowing you are a valued member of a team helping to make a difference to people using care services."

how we inspect care services and the difference it makes

We are here to make sure vulnerable people are protected and experience care services that are focused on their human rights and improving their quality of life.

We do this in a number of ways. By law, every care service in Scotland must be registered by us. We inspect them, deal with complaints and, where necessary, carry out legal enforcement action. We also work with other inspectorates, such as Healthcare Improvement Scotland and Education Scotland, to jointly inspect services that are delivered to people by a number of agencies working together, such as services for children and older people.

Every person in Scotland, at some point in their lives, will use a care service, or care for someone who does. We regulate early years services such as childminders and nurseries; services for looked after children and young people; services for people with learning disabilities and services for older people, such as housing support and care homes, as well as services delivered in people's own homes. We also regulate fostering and adoption agencies and nursing agencies.

We inspected 7,825 individual, registered care services in 2013/14 and we checked they were meeting the National Care Standards. But inspection is not about numbers and ticking boxes. Our inspections are designed to look for the positive difference services are making in people's lives. We want them to deliver care that is focused on the people they serve; that they are centred around human rights and delivering the best outcomes for people so the quality of their lives are improved.



Robert Peat, Director of Inspection, said:

"Our contact managers and link inspectors are now connecting better and more regularly with local authorities and multiple-service providers"

Joining the dots for a bigger, better picture

We want services to work for people in a joined up way, with the person using them always at the heart of what happens. Their experience of services, no matter how many they may be using at any one time, should be well co-ordinated and seamless — that's what we mean when we talk about being person-centred. This means that our scrutiny and the intelligence we gather has to work in a joined up way too, to build a clearer picture and provide better direction, so this year we improved how we do that.

We strengthened how our contact managers and link inspectors help us monitor performance and encourage improvement overall. They are now connecting better and more regularly with local authorities and multiple-service providers that deliver care and social work services on a broader scale and across larger areas than the individual registered care services do. They challenge, encourage, influence and support these larger organisations to improve.

As well as this improvement work, our contact managers and link inspectors gather intelligence; monitoring, analysing and reporting on performance and quality. Joining this up with the information we gather from regulated care services in any given local authority area, means our strategic inspections of social work services in that same area are better informed. And, for people who want to know what to expect in their area, our information can now demonstrate the quality of services available and the range, too.

We've published two reports, prepared by our contact managers and link inspectors, which look at the effectiveness of child and adult protection arrangements across Scotland.

New inspections for childminders We have begun using the **SHANARRI** indicators when we inspect childminders, to focus our checks on important outcomes for each child. These indicators are linked to the national agenda, Getting it right for every child (GIRFEC). GIRFEC sets out a unified approach for everyone who works with children in Scotland. By using these indicators we can better assess whether children's needs and rights are being met and that positive outcomes and quality of life are at the heart of the services they receive. **SHANARRI** stands for: Safe Healthy Achieving Nutured Active Respected Responsible Having opportunities to take Having a nurturing place to Included live, in a family setting with part in activities such as play. additional help if needed or, recreation and where this is not possible, in sport which contribute to a suitable care setting healthy growth and development, both at home and in the community Being supported and guided in their learning and in the opportunity, along development of with carers, to be their skills. heard and involved confidence and in decisions which self-esteem at home, at school and Best start in the community in life: Ready to Having the highest Having opportunities and attainable standards succeed of physical and active and responsible mental health, access roles in their schools and communities and, where healthcare, and necessary, having support in learning to appropriate guidance and make healthy and supervision and being safe choices involved in decisions that affect them Having help to overcome social educational, physical and Protected from abuse, neglect or economic inequalities and being harm at home, at school and in accepted as part of the community in which they live and

criminal justice

We play a key role in helping criminal justice services improve and keep people safe. We regulate hostels for people on remand and ex-offenders, secure units for young people and support Her Majesty's Inspectorate of Prisons in their inspections of young offender institutes.

We also work closely with the criminal justice social work services across all 32 local authorities in Scotland. A key part of our work is to make sure that Serious Incident Reviews, when they happen, are of high quality and learn the right lessons.

Serious Incident Reviews

Every year, there are about 23,000 people on supervision orders in Scotland and it's our responsibility to make sure services for people in the justice system work well. Most of these orders work well, but where things go wrong, we will look at how well services have managed such cases.

Clare Wilson, strategic inspector, said: "If a serious incident occurs, then the local authority managing the offender must notify us and carry out a review. The social work department criminal justice service carries out an initial analysis review, and where they require to take a closer look, a comprehensive review. We then consider how well the review has been carried out and give comments to the local authority.

"We are about to produce our second annual report on Serious Incident Reviews.

"This will help us monitor progress made against recommendations in last year's reports.

"Part of the role that link inspectors carry out in their contact with local authorities is to monitor and consider improvements in all social work services.

"We have seen an increase in reporting recently, and whilst under-reporting remains an issue, more local authorities are notifying us of serious incidents. We are working more closely with local authorities to try and identify and promote good practice.

"This is an important aspect of what we do as it monitors how services are dealing with those who often present significant risk where a serious incident has occurred, but also allows everyone to learn from such incidents and make changes as necessary, or indeed identify where practice has been effective."

what we do when things just aren't good enough

enforcement notices against 32 different services in 2013/14

When standards of care fall short and are not improving, or where people who use care services are endangered, we will move quickly to make sure services improve to ensure the safety of those who use services.

Enforcement is a powerful and necessary element of regulation. Where we have concerns about a care service, we will not hesitate to act.

For example, we acted urgently to safeguard children at Hamilton School Nursery in Aberdeen, which closed in February 2014 due to inspectors' concerns about the safety and wellbeing of children in their care.

Between May and December 2013, we upheld eight complaints about the Hamilton School Nursery covering a large number of areas. In January 2014, we identified intelligence from complaints which resulted in us making a child protection referral.

On 7 February, the Care Inspectorate and Education
Scotland visited the premises and began an inspection.
During the course of the inspection, we assessed that the service was not complying with regulations made under the Public Services Reform (Scotland) Act 2010 and as a result, we served an Improvement Notice under Section 62 of the Act, requiring the service to make a number of improvements.

There were 14 immediate concerns raised by our inspection team.

These were: medication; mealtimes; milk feeds; sleep arrangements; outdoor play; assessment of risk in the toilet area; engagement with children; support for children with additional needs; supporting children's behaviour; toilet training and support with toileting; staff turnover and deployment; communication; planning for children's interests and abilities; management and leadership.

Scottish Ministers cancelled the school's registration on 21 February. However, the nursery was registered under a separate legal framework which meant it could still legally operate at this point.

On 21 February, our inspectors attended the nursery and continued to be extremely concerned about the health, safety and wellbeing of young people. That afternoon, we applied to Aberdeen Sheriff Court for an emergency cancellation of the nursery's registration under Section 65 of the Public Services Reform (Scotland) Act 2010. A hearing was set for Wednesday 26 February.

The hearing never took place as the provider decided to cancel their registration. We always try to work with services to help them improve, however on this occasion, the decision to close the nursery – given the evidence we held was in the best interests of the children.

We made requirements in

2,055services in 2013/14

reports on offenders annually by local authority social work

staff

nnually on upervision orders in Scotland

services
registered to
offer
accommodation
for offenders

prisons, each with a social work team managed by the local council

15

32

local authority criminal justice social work services

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registration

Care services must register with the Care Inspectorate before they can operate. Our national registration team deals with all new applications from individuals and organisations who want to register a service. They also deal with enquiries from existing services to vary the conditions of their registration.

In 2013/14 there were:







Ross Keenan, said:

"The process has improved from our perspective because there's now a direct point of contact for us at the Care Inspectorate, "We can be sure to incorporate whatever the registration team requires from us at an early stage, and make sure it's consistent."

This year we registered 980 new services. We also dealt with 2,714 variation requests from existing services.

As part of the process we check

- · whether the premises in which the proposed care service will be provided are fit to be used for that purpose
- that the service will make all the proper provisions for the health, welfare, independence, choice, privacy and dignity of everyone using the service
- whether they are fit to provide and manage a care service. This includes assessing a potential provider's integrity, character and financial background and where the applicant will also manage the service, we assess their skills, knowledge and experience.

We need to make sure every new service is fit to operate. We have been continuously working with providers to make sure they understand our requirements and receive the proper support and quidance.

Ross Keenan, together with his wife Deborah, runs two nurseries and two after-school services in Glasgow, and has seen a positive change in the process since they first registered 10 years ago.

As well as inspection, we investigate complaints about care services and can require changes as a result. We also use the intelligence and information we get from complaints to help plan our inspections.

complaints

In 2013, we improved the way we deal with complaints to make our processes more efficient and effective. We can and do investigate anonymous complaints.

Complaints are best solved at the lowest level possible, so people with concerns should raise them with care service staff or the manager. If that isn't possible or appropriate, a formal complaint can be made to us anonymously. There are no restrictions on who can make a complaint to us, including staff. Once we receive a complaint, we acknowledge it in writing within three working days and agree the specific matters to be investigated. Our complaints investigators can make unannounced visits to care services. We try to complete a complaints investigation within 40 days.

To make a complaint, you can:

- call our national enquiries line on 0345 600 9527
- telephone, write to, or visit any of our offices fill in our complaints form online at www.careinspectorate.com



How we perform

100% 99%

* or complainant notified of extension

Complaints by type of service

care home service childminding complaints completed

upheld

complaints completed

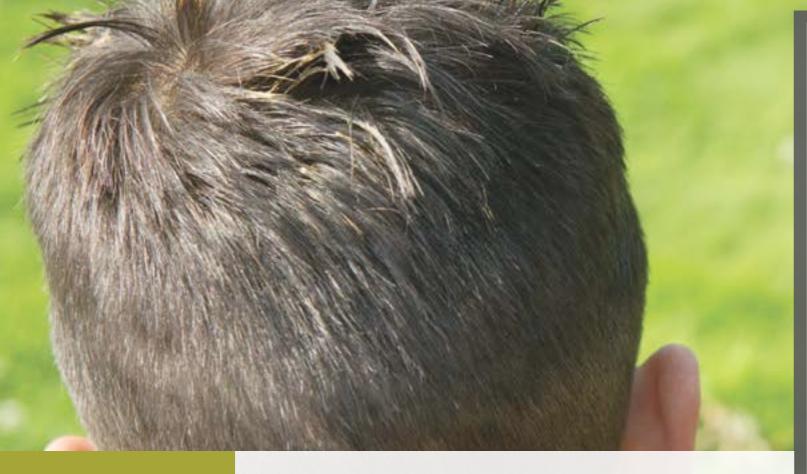
children

housing support support service

complaints complaints completed

upheld

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complaints

In 2013/14 we had to address a steady increase in the number of complaints made and investigated. This is partly due to people becoming more aware of what they should expect from services. Specialist inspectors are highly skilled at getting to the heart of a complaint quickly. They are increasingly developing skills in assessing and defining complaints, managing expectations and investigating in an efficient manner leading to outcomes that are clear and unambiguous for both the complainant and the service.

Top issues for complaints

- General health and wellbeing
- Communication between staff and people using services/ relatives/carers
- Staff levels
- Staff training/ qualifications
- Policies and procedures - complaints procedure

Case study - complaint upheld

When someone complained to us that a nursery garden was unsafe for children, we carried out an unannounced visit to the service to investigate.

The complainant stated the garden at the nursery was unsafe for children – they were concerned about old tyres, a bath and other debris lying around.

While we were in the service, we spoke to the service manager and looked at the garden used by children. The service provider stated parts of the garden were being further developed for children.

Although the garden contained a large amount of old tyres, these were being used appropriately as play equipment and planters. These were laid out in a safe manner and did not pose any risk to children's safety.

However, we did find some long planks of wood and a bath standing on one end against a fence. The service provider stated both were waiting to be installed as part of the children's eco garden. While the work was ongoing, the service provider agreed to lay both the wood and bath down flat to minimise any risk to the children.

We concluded that the garden was unsafe for **children and upheld the complaint**. We recommended that the provider ensures all materials are stored in a safe manner at all times.

Case study - complaint not upheld

A complainant believed a service failed to ensure correct adult to child ratios while at the park, when they believed they had witnessed approximately 15 children present with one staff member.

We carried out an unannounced visit to the nursery and spoke to the manager and supervisor. We also looked at children's registers, staff rotas and outing records. The manager stated that none of the children she was caring for were in the park that day, which was confirmed when we looked at outing records. The service was caring for 11 children in total that day with four of them under two years of age. We looked at staff rotas and found four staff were on duty on the day.

Based on the evidence we gathered during our investigation, the complaint was not upheld.

Who complained - upheld complaints

employee, ex-employee

service user

member of public

THE HUB

In February 2014, the Care Inspectorate launched 'The Hub' – a new website providing one-stop-shop access to a range of resources aimed at supporting improvement in the services we regulate and inspect.

Features on the site include:

- a visual library of good practice and policy documents;
- dedicated portals on the main policy developments impacting on services;
- weekly news bulletins with updates from the social care and social work sectors;
- video-based examples of innovative practice;
- event listings; and
- access to research resources and toolkits that professionals can use to improve the way they work.

Maggie Simpson, Chief Executive of the Scottish Childminding Association (SCMA) explains how professionals in the social care and health sectors can benefit from using the new resource: "Whatever job you do, the easier it is to find relevant information, the better. Our members are no different. Childminders work a long day and then have to catch up with information in the evening after the children have gone home. They currently tell us that they find it hard to navigate the existing website and sometimes miss out on important information. The Care Inspectorate appears to be making a real improvement by introducing The Hub.

"The Hub promises to be a valuable tool for practitioners and those with an interest in social care and health. I like the weekly bulletins and the section updating about legislation. You also have access to case studies which provide an insight into the care services the Care Inspectorate has responsibility for.





Maggie said:

"Sharing best practice is very important, especially for childminders who tend to work in isolation. Other early years workers rarely get a chance to fully understand what childminders do especially with the early intervention work. I hope that the Hub will provide this."

Knowledge

A central library of resources including publications, policy and legislation in the social care sector, good practice guidance, news and useful links.

Innovation

A collection of video case studies that showcase innovation in services across Scotland that provide positive experiences for people using care services.

Improvement

Access to a range of resources and centre for excellence training courses that support continuous improvement in the delivery of care services.

You can access the Hub at:

hub.careinspectorate.com



spending the public's money wisely

Staff

total number of staff

registration, complaints and legal teams

59% inspection and other scrutiny

senior management and board

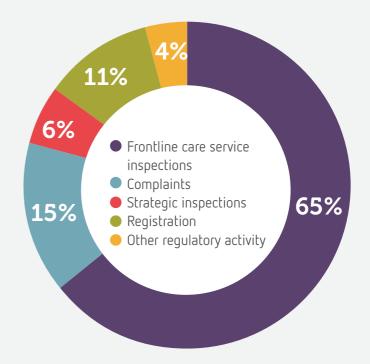
17% support staff

4% agency and other workers

In 2013/14, we delivered our core business of inspection and regulation and, at the same time, we made efficiencies. We can demonstrate that we add public value in all areas of our business.

We had a total operating budget of just over £33m in 2013/14. This came from a combination of grants from the Scottish Government (65%), continuation fees (34%) and 1% from new registration fees. We spend the majority of our budget on staff costs (80%). We use the remaining budget for offices (8%), administration (5%), transport (4%), and supplies and services (3%).

We allocated our budget to five main activities:



The Scottish Government set strict rules about paying all of our invoices within 10 days. This helps small businesses and suppliers to operate more efficiently. We continuously meet the targets set by Scottish Government.



Gordon Weir, Director of Corporate Services, said:

"As a public body, we have very tight financial
controls in place to ensure that we spend the public's
money wisely and prudently. Where possible, we use
money wisely and prudently become the Scottish Government's public sector procurement
the Scottish Government's public sector procurement
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Letters

Inspection reports

Questionnaires

Report about

Ark East Lothian

CSQs translated into English

Leaflets

accessibility

Making ourselves understood

People using services have a wide variety of communication needs:

sign language, and their first language may not be English. Being able to communicate with people we are responsible for protecting and assuring is really important. We believe that anyone using a service can expect to know what we found in their service, be able to feedback to us and know who we are and what we do. That's why we provide our inspection reports, questionnaires and other information in suitable formats and languages on request.

This year, we received 118 separate requests for alternative formats or languages.

If you need our information in an alternative format or language, please email:

translations@careinspectorate.com

Meet Sid 🗞

This year our Meet Sid website got a makeover when we launched "Far From Home", a new 3D online game. As well as the game, we also developed the website, which now includes a number of films where young people talk about their emotional journey through care. The website aims to help young people in care find

Working in partnership with young people from Who Cares? Scotland, Aberlour Childcare Trust and Abertay University, we created a game that helps young people explore trust and the importance of making good decisions. The game is set in the outskirts of a fictional city where characters can either help or hinder Sid in

David Miller, one of the young people involved in the game said:

"Games can be easily overlooked as just a form of entertainment, but projects like Far From Home help to show how technology can engage

The students from Abertay developed and built the game as part of their studies and it was shortlisted for



Care Inspectorate welcomes new chair



Find the big stories online





May 2013 Major child protection study published









November 13 Our new game, Far from Home is launched



December 2013 Chinese visit



January 2014 First 'Improving care in Scotland' published



inspection volunteers



February 2014 Hamilton nursery school closes



February 2014 Our new online resource, The Hub



http://cinsp.in/1scv8qc

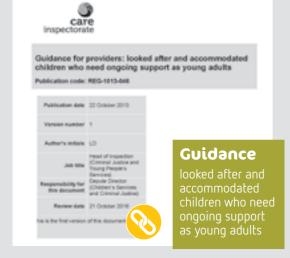


March 2014 Care Inspectorate welcomes three new board members

some information we published in 2013/14



























looking forward – a new corporate plan &

This year we published a new corporate plan, setting out what the Care Inspectorate will do over the next three years.

The plan sets out six high level strategic objectives which will guide the Care Inspectorate's work through a period of unprecedented change.

Each of these strategic objectives are inter-connected and are underpinned by a detailed operational plan. The objectives help us make sure our work is focused on protecting some of the most vulnerable people in Scotland.

Strategic objective 1

To provide assurance and build confidence through robust regulation and inspection of the quality of care

Strategic objective 4

To build capacity within care services to make sure there is high quality development and improvement of rights based care across Scotland

Strategic objective 2

To contribute to building a rights based, world class care system in Scotland

Strategic objective 3

To support people's
understanding of high
quality, safe and compassionate care
by promoting the
standards and quality of service they
should expect and
make sure their voices
are heard

Strategic objective 5

To support and inform local and national policy development by providing high quality, evidence based advice and information on care

Strategic objective 6

To perform effectively and efficiently as an independent scrutiny and improvement body and work in partnership with others

last year we carried out 7,825 inspections

This map of Scotland shows the breakdown of these inspections by service type.





