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Priority Group of Companies

# Our case study portfolio

## Achieving positive outcomes



A REAL AND LASTING DIFFERENCE FOR EVERYONE WE SUPPORT

# Introducing our new case studies

I am delighted to introduce you to our new case studies brochure, showcasing a selection of the many success stories at Aspire Scotland.

## Achieving positive outcomes

We take great pride in the services we provide to children and young people with complex needs. These include autistic spectrum disorders (ASD), attention deficit hyperactivity disorder (ADHD) and behaviours that may challenge. Our aim is to always make a difference to their lives and enable them to achieve the best possible outcomes.

We are also really proud of the high quality care and education that we offer in safe and nurturing environments, taking full account of national standards and quality indicators. This is further emphasised by six of our children's homes being graded as either '5 - Very Good' or '6 - Excellent', during their latest inspection from the Care Inspectorate.

Our education campus is embedded within Radio City, based in Kilbirnie. All of the children and young people receive a broad and balanced curriculum, individually tailored to their needs and the principles of the Curriculum for Excellence. The campus also includes a café and gymnasium, enabling our pupils to experience socialisation within their curriculum and build resilience in their transition into young adulthood, through a stimulating and enterprising, community environment.

I hope you enjoy our new case studies brochure, showcasing how we have equipped children and young people with a brighter future.

**Raymond Alexander**  
Head of Care,  
Aspire Scotland



## The current Care Inspectorate gradings for our children's homes

We are really proud of the quality and services provided to the young people we support at Aspire Scotland.

All of our children's homes have improved in their gradings; this is at a time when the Care Inspectorate changed to the new Health and Care Standards.

Please see the below current and existing gradings for each of our services.



Children's home	Care and support	Environment	Staffing	Management and leadership
<b>Balgray Cottage</b>	Very Good	Very Good	Very Good	Very Good
<b>Clonmacate - New Home</b>	-	-	-	-
<b>Croekwood - New Home</b>	-	-	-	-
<b>Dovecote Hall Cottage</b>	Very Good	Very Good	Very Good	Very Good
<b>Gatehouse/ Brownhill Cottage</b>	Very Good	Very Good	Very Good	Very Good
<b>Rose Cottage</b>	Good	Very Good	Very Good	Very Good
<b>Waterside</b>	Excellent	Very Good	Very Good	Very Good
<b>Woodend Farm</b>	Excellent	Excellent	Very Good	Very Good

# Balgray Cottage case study

## Daniel's story

At 10 years old, Daniel\* spent six months on the children's ward of The Royal Hospital in Glasgow, before coming to live at Balgray Cottage. Daniel has now stayed with us for three years, with an agreed view that Daniel's placement will be long term.

Daniel has a diagnosis of ADHD and depression, as well as significant eating difficulties, which left him malnourished and underweight.

Daniel previously had limited engagement in education and would often spend his day in an education base, requiring support from his father to be able to maintain attendance. Daniel also found it difficult to communicate with adults in his life. He would often try to hide under tables or squeeze himself into small spaces when he was upset, and this could be dangerous for him. Daniel would often bark or growl at staff when angry, as he was unable to verbalise his emotions.

Daniel's key issues and needs included:

- ADHD
- Delayed communication
- Depression
- Emotional regulation
- Impulse control
- Relationship difficulties

When Daniel arrived at Balgray Cottage, he was on high doses of medication to help control his ADHD and to manage his depression. He struggled to take his medication and this would often have an adverse impact on his behaviour. Daniel would often become aggressive towards staff and put himself at risk by trying to hide in small, enclosed spaces.

Following any incidents, Daniel would often lie in the foetal position or try to sit on a staff member's knee for reassurance and support. This led staff at Balgray Cottage to develop an approach with Daniel which allowed him to re-trace early childhood developmental stages. This approach allowed Daniel to develop his internal coping strategies, whilst also encouraging him to build trusting relationships with staff.



## Planned strategies

Planned strategies at Balgray Cottage formed the plan which worked for Daniel and helped him to overcome many of his difficulties. These included:

- Close contact (hugs)
- A tent for his bedroom which he identified as a 'safe space', giving him time alone
- Regular medication reviews at Child and Adolescent Mental Health Services (CAMHS)
- Letting Daniel know that staff were there and not speaking to him, until he was ready to communicate
- Regular key working sessions, which allowed Daniel to build trust with staff and begin open communication
- Time at the park after school to allow Daniel to burn off unused energy
- A consistent staff team



## Achieving positive outcomes

We are consistently seeing improvements in Daniel's behaviour, with the support of staff members within Balgray Cottage.

In 2019, it was agreed by CAMHS that Daniel no longer required the medication used to manage his depression, due to the coping strategies and support developed within Balgray Cottage.

Through the staff support, Daniel is also able to maintain educational attendance. This includes:

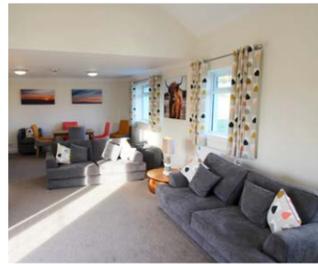
- 100% attendance at school in 2016-2017
- 96% attendance at school in 2017-2018
- 100% attendance at school in 2018-2019

The number of incidents Daniel has been involved in has also decreased year-on-year:

- 35 in 2017
- 16 in 2018
- 9 in 2019

Daniel has joined a local football club, and attends training and games. Daniel has also been able to build up levels of contact with his family and maintains relationships with his siblings.

# Croekwood case study



## Laura's story

Laura\* struggled with group living in her previous placement, often engaging in 'riot type' behaviours with her peers and planned periods of absconding, where she was then vulnerable and exposed to child sexual exploitation (CSE). Laura often misused her mobile phone, leaving not only herself, but others in dangerous situations. Laura had also been previously involved in criminal behaviour, including vandalism, shoplifting and assault on a peer. It was observed by her previous placement that Laura appeared to be the 'follower' and not the 'leader', which, in a placement with eight other girls, was a concern.

Laura was often seen as the 'scapegoat' within the family home by her mum's partner at that time. Laura had little contact with her own dad and now has no contact with him. Laura does have fortnightly contact with her mum and initially struggled with this when at her previous placement, often struggling to follow any direction from her mum. She would abscond and return under the influence of alcohol. The contact with her mum at times could be fractious, due to Laura struggling to form and maintain relationships, and also due to her mum's struggles with mental health and her parenting skills.

It was felt by Laura's social worker that she would benefit from a smaller, therapeutic care placement, which was more rural. Laura transitioned to live

in Croekwood, where she benefits from a therapeutic and nurturing environment, with clear rules and boundaries agreed and put in place. Laura's previous placement had struggled to provide this guidance with the occupancy levels and age difference between all of the girls.

Croekwood was a newly opened service with Laura being the first person to reside there. She receives 24-hour support from an experienced staff team and is included in all aspects of her care plan, which is then followed up by staff to enable consistency for Laura. She is also planning to attend education and is currently receiving the support to identify subjects she struggles to engage with and how to overcome this, to ensure that she gains as many qualifications as possible.

Laura's key issues and needs included:

- **Absconding**
- **Concentration**
- **CSE**
- **Relationship difficulties**
- **Self-harm**
- **Self-control difficulties**
- **Verbal insult and aggression**

## Planned strategies

Planned strategies formed part of Laura's care plan at Croekwood, which was accessed by all staff. These included:

- **One-to-one support**
- **An individual, customised timetable to suit Laura's needs**
- **Clear and direct instructions for Laura to be able to take time out when required, and to be able to recognise herself when she needs this time**
- **Having 'My World Discussions' with Laura around her thoughts, feelings, contact, education, etc**
- **Positive coping strategies to reduce her self-harming behaviour**
- **Home contact to be structured and a contact planner to be followed**
- **Laura to be encouraged to attend physically active activities with staff and other young people**
- **Laura to build on her life skills, including self-travelling home and participating in her wider achievements, including helping in our Galaxy Café, where Laura would be serving members of the public**

## Achieving positive outcomes

We have seen a vast improvement in relation to the risk taking behaviours Laura was displaying at her previous placement. Laura is growing into a more confident individual, who is flourishing as time progresses. Laura was the first young person within Croekwood and this seems to have played an important part in her progression.

Laura has had no periods of absconding, substance misuse or CSE concerns since arriving at Croekwood. She is also using her mobile phone in a responsible manner. Laura still struggles within education, however she is now able to speak to staff, tell them what subjects she has difficulty with, and staff make suggestions on how to support her with this.

Laura's progress is due to the location of Croekwood, the matching process for any of our peers and also from the therapeutic and consistent support that Laura has received from the staff at Croekwood.



# Dovecote Hall Cottage case study



## Andy's story

Andy\* arrived at Dovecote Hall Cottage from a previous placement that unfortunately broke down. This was due to the level of trauma that he had experienced in his younger years. Andy displayed considerable levels of risk taking behaviour and was aggressive towards others. It became increasingly difficult to manage these behaviours at his previous placement and to provide the correct support, enabling Andy to progress and develop.

Andy's key issues and needs included:

- Aggression
- Post-traumatic stress disorder (PTSD)
- Relationship difficulties
- Risk taking behaviour



## Planned strategies

With a successful risk management plan implemented at Dovecote Hall Cottage, the residential and education departments worked closely together to devise an adapted timetable to ease Andy back into education. Andy had not been in an educative environment for a number of months prior to him moving to Dovecote Hall Cottage. Andy was also diagnosed with PTSD, due to his past. This was apparent in his behaviour and how he would display when he was in a period of crisis.

To support Andy, a robust team consisting of our therapeutic crisis intervention co-ordinator, education specialists, social workers and the CAMHS team, came together to devise a robust individual risk management plan that would support Andy during the most difficult times. Various tools were used and strategies implemented, that allowed Andy to be aware of the level of care and support his team had for him at Dovecote Hall Cottage, and that they would support him to the best of their ability. This was a continuous live document that was updated regularly to reflect any changes and any new approaches taken to further support Andy.

## Achieving positive outcomes

After a period of five months, positive changes and outcomes started to become apparent, including a reduction in the level of aggression and risk taking behaviour Andy displayed. This indicated that he was ready to transition into a new stage of his life.

To walk hand-in-hand with Andy through this new stage, the team again came together to adapt strategies and to provide Andy with more responsibility and ownership of his life and care. This was an instant success, with Andy responding more positively to direction. He began to take on board the advice and developed better relationships with his peers and the staff supporting him. Over a few months, Andy progressed further in relation to his risk taking behaviour and the level of aggression towards others, so much so, that his aggression stopped completely. This allowed for imperative work to be done with Andy, which included positive reinforcement and incentive-based tasks, further adding to his success.

Over the summer months, Andy even went on holiday with his peers and support staff, something that could not have been facilitated before. This was a huge success and progression continued at a steady pace. Due to this progress, the care package for Andy was reduced from a ratio of 2:1 in the home to 1:1, and this was subsequently reduced even further, where there was no documented concerns in specific activities and hobbies Andy liked to do.

Andy now attends school on almost a full-time basis and he is only educated within the home one morning a week, (a reduction from four mornings per week). He has achieved awards in his rugby and has been nominated for the most influential young person at his local authority awards.

Andy is a happier and more confident young man, who strives to do his best. He understands that working together will help him to achieve personal goals and guide him to his ultimate goal of being able to spend more time with his family, as well as take part in other hobbies out of the home, where he can build on and make friendships with people his age.

# Waterside case study



## Sarah's story

Sarah\* arrived at Waterside from a previous placement in England, which had broken down due to Sarah setting fire to the laundry room during the night. Sarah had been charged with arson and endangerment of life. Sarah had been in care for approximately one year prior to her admission to Waterside and had several placements during this time.

Sarah had a self-proclaimed prophecy that she could end a placement within 12 weeks and didn't build relationships with staff. Sarah stated that there was no point in building relationships, as she didn't stay in a placement for long enough.

In previous placements, Sarah was verbally and physically aggressive and abusive towards staff. Sarah struggled to engage with her education, was frequently absconding from her placement, and was at risk due to misusing drugs and alcohol. There were also

child sexual exploitation (CSE) concerns when Sarah previously resided with her family.

When Sarah first arrived at Waterside she struggled to engage with staff, set fire to her bedroom curtains and assaulted a member of staff. The current indicators that were witnessed by staff when Sarah was struggling to manage her behaviour, included changes in her facial expressions, loss of appetite and changes in her personal hygiene and sleeping routines.

Sarah's key issues and needs included:

- **Mental health needs**
- **Impulse control**
- **Education attendance**
- **Risk taking behaviours**
- **Drug and alcohol misuse**

## Planned strategies

We put together a range of strategies to support Sarah during her time at Waterside. For example, when changes were noticed in Sarah's behaviour, staff would encourage her to take time away from communal areas to regulate her emotions, redirect her to another activity, engage in a calm tone and encourage Sarah to utilise her agreed coping strategy. Sarah was referred to CAMHS as well, due to the concerns over her presentation, anger issues and risk taking behaviour. Sarah was also supported by two members of staff at all times, when out in the community and during education.

Sarah attended CAMHS weekly and this was subsequently reduced to fortnightly. Sarah was then discharged from the service.

Sarah completed an impulsivity programme with staff and met with the fire service to complete intervention work. We also created a therapeutic plan to support Sarah to build trusting relationships with staff. This included:

- **Encouraging Sarah to write her feelings down, as she uses this as a coping strategy within her own notebook. Sarah has the option to also share this with staff and with her social worker**
- **Engaging in a pamper night with staff every Friday at 7pm. This includes face masks, hair masks and nail polish**
- **Using a foot spa twice per week. This will help her to feel more relaxed**
- **Attending the gym and also discuss other fitness options, such as fitness classes**
- **Going for a long country walk at least once per week. This should be at the weekend and Sarah can choose which day suits her best. This will help promote a healthy lifestyle for Sarah, as well as giving her time away from her peers**

- **Providing Sarah with a notebook, which will allow her to write down and express her thoughts and feelings. To allow for privacy, Sarah has been provided with a locked box. Sarah and staff within Waterside both have a key for this box, due to safety purposes. Sarah has been reassured that staff will only ever access this box, if they have cause for concern that there may be something in this that poses a risk to Sarah or anyone else**

- **Sarah will also keep her notebook in this box and will share the contents with her social worker during visits. This is to ensure that the content is appropriate and that there are no concerns for Sarah's wellbeing within the content. Sarah can share the content with any staff member at any time if she wishes**

At Waterside, we have also created a supportive plan to aid Sarah's sleeping pattern, as this was an area of difficulty highlighted during CAMHS sessions, which impacted on Sarah's frame of mind on a daily basis. The supportive plan included:

- **Staff encouraging Sarah to spray lavender spray in her room and on her pillows. Lavender has qualities to help with insomnia. The spray will create a calming and soothing atmosphere, which will hopefully promote a healthier sleep pattern**
- **Sarah should drink chamomile tea or Ovaltine at bedtime**
- **Sarah is to utilise the mood lamp in her room. Staff will encourage Sarah to put this on if they see her mood dip**
- **Sarah will have access to books to read before bedtime**
- **Sarah should turn off her television at 11pm**

## Achieving positive outcomes

Since Sarah's arrival to Waterside, we have seen a significant improvement in her attendance at school and the management of her emotions. This has been supported by developing coping strategies and continuing to develop positive relationships with staff. Sarah completed her schooling at Aspire Scotland's Radio City campus, before successfully gaining a place at the local college.

Although Sarah still struggles with her emotions, she is able to self-regulate and will utilise her coping strategies. After Sarah's first difficult month, she has followed her care plan, has not displayed any physically aggressive behaviour and has not received any further charges. Sarah has also developed good relationships with the staff team and continues to see her social worker regularly, as well as contact with her mum every three months.

Sarah is continuing to work on her independent living and cooking programme at Waterside. Staff are also currently supporting Sarah in moving into semi-independent living accommodation in her own local authority in Cambridgeshire, for when she turns 17 years old.

# Woodend Farm case study



## Gemma's story

Gemma\* is 18 years old and has a complex variety of mental health, social and emotional needs. Gemma transitioned to Woodend Farm from a placement in the North West of England, after it was deemed that they could no longer keep her safe due to her high levels of self-harm and suicidal ideation.

Gemma regularly put herself at risk by absconding to consume alcohol, and on two occasions had consumed cleaning products to cause harm to herself. Gemma's previous placement also wasn't able to offer her a suitable education package for her senior years, and the decision was made that Gemma should transition to Woodend Farm to receive an individualised education and care plan.

Gemma has been in care since the age of three, due to family issues including her mother's poor mental health, domestic abuse and neglect of Gemma and her siblings. Gemma continued to have regular contact with her parents through a contact centre until her father passed away in 2010. Gemma has since only had contact with her mother and siblings, which can cause Gemma distress and lead to self-harming behaviours afterwards.

Gemma has resided in nine previous placements in total, seven being in foster care and two in residential care. During this time, she has experienced traumatic events in one of her foster placements and has since been working with CAMHS and other professionals to gain closure.

Since Gemma moved to Woodend Farm, she has benefited from a therapeutic, nurturing environment, living alongside four other young people. Gemma receives 24-hour support from experienced support staff, who follow her individual care plan, which meets her needs through a person-centred approach and a personalised outcome tracker.

Gemma's key issues and needs included:

- **Attachment disorder**
- **Relationship difficulties**
- **Physical aggression towards others**
- **Self-harm**
- **Self-control difficulties**
- **Gaps in education**

## Planned strategies

Gemma found building relationships and trusting others difficult, and would see them as being a threat. She had also missed out on her education and required an educational package to be put in place, which would meet her individual needs.

The planned strategies formed part of Gemma's care plan which was accessed by all staff. These included:

- **1:1 support whilst attending education**
- **An education timetable completed in conjunction with Gemma's needs. For example, it was decided that she could have later starts in the morning due to her taking evening medication, which had an effect on her in the morning. Gemma also struggled to manage in a classroom setting so she had her own classroom, where she was supported daily by a staff member**
- **Key workers identified to work closely with Gemma to allow her to build positive and trusting relationships**
- **Staff to support Gemma with her mental health needs, by sourcing and supporting her to attend CAMHS**
- **Gemma to make use of the 'thoughts and feelings' book when feeling low**
- **Gemma to use strategies in-line with her individual crisis management plan, when feeling the urge to self-harm. For example, glow sticks and ice**



## Achieving positive outcomes

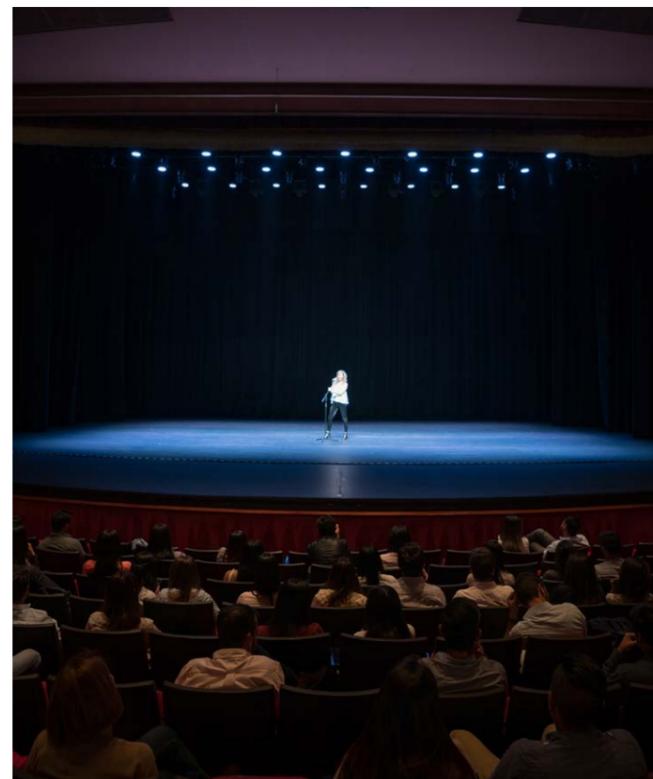
We have seen a great improvement in Gemma's behaviour and overall presentation since arriving at Woodend Farm, with her now showing a sense of belonging and trust in others. Within education, Gemma managed really well and achieved her National 5 in English and Maths. She then went on to college, where she studied Uniformed Services in her first year and passed with flying colours. Gemma is currently at college studying Medicine and Nursing.

Gemma's wellbeing has also greatly improved with there being a reduction in any incidents involving self-harm. She feels comfortable in talking with staff at any time when she is feeling anxious or worried, which appears to be helping her to manage her feelings.

Gemma has gone from a shy, quiet young girl to a confident young lady, who is a pleasure to be around. Gemma is a great singer, and staff and other young people will often listen to her singing her own songs from her bedroom, which is great to hear. Staff have also supported Gemma in pursuing her singing career, as she has auditioned for the X Factor and The Voice.

Gemma now volunteers as a young inspector with the Care Inspectorate, where she is involved in the inspections of services for children and young people throughout Scotland. Gemma feels that she has had past experiences of being looked after away from home and feels that she could be a good support to others.

Overall it has been a really positive journey for Gemma and she has enjoyed her time living at Woodend Farm. Gemma is now 18 years old and is due to transition on to her own tenancy within the local community in the near future.





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## **Get in touch**

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For more information on the range of services at Aspire Scotland or to make a referral, please contact us today:

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\*Names and images have been changed to maintain confidentiality.

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