

DUNDEE CITY COUNCIL

REPORT TO: SCRUTINY COMMITTEE – 23 SEPTEMBER 2020

REPORT ON: EXTERNAL INSPECTION REPORT FOR GILLBURN ROAD CHILDREN'S RESPITE HOUSE

REPORT BY: EXECUTIVE DIRECTOR OF CHILDREN AND FAMILIES SERVICE

REPORT NO: 234-2020

1.0 PURPOSE OF REPORT

- 1.1 To provide an outline of recent external inspection report of Gillburn House, Children with Disabilities Respite House which, over 2 categories of inspection, received grades of Adequate and Good. Gillburn House was inspected in relation to supporting children and young people's wellbeing and care and support planning.

2.0 RECOMMENDATIONS

- 2.1 It is recommended that members:
- i. note the attached summary of the inspection report on Gillburn Road;
 - ii. remit the Executive Director of Children and Families to ensure that the areas for improvement are acted upon.

3.0 FINANCIAL IMPLICATIONS

- 3.1 None.

4.0 MAIN TEXT

- 4.1 This summary report provides an outline of the recent inspection of Gillburn House. The inspection was carried out in November 2019. At the time of the inspection, the service had a temporary variation to the conditions of registration, as it was providing long-term support to two Looked After Children rather than the usual remit of short breaks and respite for children with disabilities. The inspection identified many positives but the adequate grade represents a decline from past inspection reports. This was the first inspection based under the new indicators of the Care Inspectorate Quality Assurance Framework and the Health and Social Care Standards.
- 4.2 The inspectors did not make any formal requirements but there was an Area for Improvement alongside another Area for Improvement from the previous year's inspection. They included actions in relation to how well the care and support was planned and to support staff to develop and improve through reflective practice by ensuring they had access to regular, planned supervision. In terms of care and support, consistent with all our houses, the team have benefitted from peer learning as training was delivered to Gillburn Road staff by an experienced Senior Staff member from another house about planning, care and support arrangements, how to record and implement care plans, and how to ensure the young person is at the heart of this. All of which have been acted upon and implemented by the House Manager who has devised an improvement action plan. The Senior Manager for Resources has management oversight of this process and is ensuring these actions continue to be progressed and through audits and regular visits can confirm that both these areas have seen improvements.

4.3 Copies of the inspection report have been passed to the Lord Provost, Group Leaders and Councillor Murray.

5.0 POLICY IMPLICATIONS

5.1 This Report has been subject to an assessment of any impact on equality and diversity, fairness, poverty, environment and corporate risk. There are no major issues.

6.0 CONSULTATIONS

6.1 The Council Management Team have been consulted in the preparation of this report.

7.0 BACKGROUND PAPERS

7.1 Gillburn Road Inspection Report.

Paul Clancy
Executive Director

Mark MacAulay
Senior Manager

June 2020

Theme	Grading History, based on previous inspection framework quality themes		
	Nov 2018	Oct 2017	Dec 2016
Quality of care and support	5 - Very Good	4 Good	5 – Very Good
Quality of environment	Not Assessed	Not Assessed	Not Assessed
Quality of staffing	Not Assessed	Not Assessed	5 – Very Good
Quality of management and leadership	4 - Good	4 - Good	Not Assessed

Latest Grades Awarded based on Revised Inspection Framework Quality Themes - Nov 2019

Theme	Grades:
How well do we support children and young people's wellbeing?	4 - Good
How good is our leadership?	Not Assessed
How good is our staffing?	Not Assessed
How good is our setting?	Not Assessed
How well is our care and support planned?	3 - Adequate

Summary

The inspector spoke with one young person who was able to give his views directly and spent a short time with another. The inspector also spoke to the parent of one of the young people. The feedback was very positive. A young person awarded the home eight out of ten, with the same rating for food! He got on well with staff though didn't elaborate on why, though was particularly fond of one.

Parental feedback indicated a high level of satisfaction with the service, with positive comments about staff and the relationship they had formed with his son. He also told us about some of the interests and activities staff supported. He described the standard of care as very good.

The service received a Grade 3 Adequate for How well is our care and support planned because although there had been noticeable improvements in the format of care plans since the last inspection, this was based on the established remit of providing respite and short breaks. The inspector found that current plans for children accommodated on a longer term-basis had not been developed using a SMART (specific, measurable, achievable, relevant and time-bound) or outcome focused format. It was also felt that the plans did not identify the extent to which young people had been involved in their development. Nevertheless there was lots of very individualised information about young people's routines and personal care, showing a very good understanding of what they needed on a day- to- day basis. For one young person though this information had not been updated with more recent changes.

What The Service Does Well

Relationships between staff and young people were characterised by warmth, empathy and good humour. This was a stable staff team providing very good continuity of care, enabling young people to experience security and predictability. They demonstrated respect in their day-to-day interactions with young people, protecting their privacy, dignity and confidentiality, including for example their right to be alone. Where young people's decisions about aspects of their healthcare might be potentially harmful in longer-term, they talked this through with them and ensured they were well informed, whilst providing gentle encouragement.

The service had arranged for key documents to be translated to overcome language barriers for young people. They had been provided with independent advocacy to ensure their views could be heard when significant decisions were being made and had also taken part in the selection process for new staff.

Staff knew young people very well and used this knowledge to inform their day-to-day lives and routines, including ensuring they got to do things they enjoyed. Staff knew their roles and responsibilities for keeping children safe, including awareness of formal child protection procedures, though need to ensure a record of all communication with other agencies is kept. One young person had made it clear that he saw Gillburn House as his safe space. Whilst some young people's behaviour was sometimes unpredictable and caused others to feel vulnerable, staff took prompt action to provide safety and reassurance.

Young people received warm, caring and nurturing support from staff who used a relationship-based approach to supporting their development. They used positive reinforcement, using gentle challenge where appropriate, and enabling young people to feel secure, develop consideration for others and build self-esteem. Their low-key approach to heightened or distressed behaviour, with a focus on de-escalation and identifying indicators of pain, was usually very effective and allowed young people to regulate their emotions by finding suitable strategies that worked for them.

What the Service Could do Better

In terms of **How well is the care and support planned**, the Inspector felt that the provider should improve the quality of personal plans in order to more effectively meet young people's needs. The Inspector noted there was limited evidence of evaluation of progress and it was difficult to identify the extent to which young people had been involved in their development plans, though staff were able to describe how they had actively involved one young person in particular.

Within this Inspection Report there was 1 new Area for Improvement and 1 previous Area for Improvement

1 New - The provider should improve the quality of personal plans in order to more effectively meet young people's needs.

1 Previous - In order to support staff to develop and improve through reflective practice, the provider should ensure they have access to regular, planned supervision.

Actions from Areas for Improvements

1 New - A Peer Learning process has taken place. Senior staff from Gillburn House have linked with other senior staff from our other Residential Houses to work alongside them in familiarising themselves with care plan formats for children looked after on a longer-term basis, in order to draw on that experience and improve the quality of plans. Staff have received training covering long term care planning process, recording and monitoring, setting goals and measuring outcomes through care planning. The Senior Manager for Resources has also carried out unannounced visits from a quality assurance perspective to check on the progress of this action and it is clear that definite progress is being made. This is being reinforced with Senior Officers instructed to focus on Care Plans when Chairing LAC Reviews.

1 Previous - Supervision levels have already increased and a record log is now being kept for easy scrutiny and quality assurance by the Senior Manager.