

**ITEM No ...2.....**

**DUNDEE CITY COUNCIL**

**REPORT TO: SCRUTINY COMMITTEE 29 JUNE 2016**

**REPORT ON: EXTERNAL INSPECTION REPORT FOR WHICH ALL GRADES ARE GOOD OR BETTER**

**REPORT BY: EXECUTIVE DIRECTOR OF CHILDREN AND FAMILIES**

**REPORT NO: 238-2016**

**1.0 PURPOSE OF REPORT**

To provide a summary of recent external inspection reports which do not require in-depth scrutiny.

**2.0 RECOMMENDATIONS**

It is recommended that members:

- 2.1 Note the attached summaries of the inspection reports on, Millview Cottage, Gillburn Road and Fairbairn Street Young People's Houses all of which received grades of good or better in all areas covered by the inspections.
- 2.2 Remit the Executive Director of Children and Families to ensure that the areas for improvement, requirements and recommendations included in the reports are acted upon, both in relation to the particular services inspected and as guidance on good practice for other services.

**3.0 FINANCIAL IMPLICATIONS**

None.

**4.0 MAIN TEXT**

- 4.1 The remit of the Scrutiny Committee states that, where the grades awarded in external inspection reports are all good or better, and the reports would not benefit from in-depth scrutiny, summary scores from the inspections will be reported to the Committee, together with examples of best practice and areas for improvement. Summaries of recent inspection reports which fall into this category are attached.
- 4.2 Three summary reports are included from the Children's Residential Service. The areas for improvement listed below will be actioned for all the regulated residential services in Children's Services.
- This last year has seen the introduction of a new Inspector for Gillburn Road, with the same Inspector as before for Millview Cottage and Fairbairn Street.
  - Copies of the inspection reports have been passed to the Administration and Opposition Group Leaders and to the Conservative, Liberal Democrat and Independent members.

**5.0 POLICY IMPLICATIONS**

- 5.1 This Report has been screened for any policy implications in respect of Sustainability, Strategic Environmental Assessment, Anti-Poverty, Equality Impact Assessment and Risk Management. There are no major issues.

**6.0 CONSULTATIONS**

6.1 The Chief Executive, Executive Director of Corporate Services and Head of Democratic and Legal Services were consulted in the preparation of this report.

**7.0 BACKGROUND PAPERS**

None.

Michael Wood  
Executive Director  
Children and Families Service

DATE: 9 June 2016

<b>Inspection of:</b> Millview Cottage				
<b>Inspection by:</b> Care Inspectorate				
<b>Grades:</b> <b>Theme</b>	<b>Latest Grade Awarded</b>	<b>Grading History</b>		
		<b>Mar 2015</b>	<b>Jan 2014</b>	<b>Feb 2013</b>
Quality of care and support	4 Good	4 Good	5 Very Good	5 Very Good
Quality of environment	5 Very Good	5 Very Good	5 Very Good	5 Very Good
Quality of staffing	4 Good	4 Good	4 Good	5 Very Good
Quality of management and leadership	4 Good	4 Good	5 Very Good	4 Good

### **Summary**

Since the last inspection, the service has improved the quality of managing medication through the use of an audit tool, has improved records of child protection concerns and has brought about an overall improvement in the morale of the staff group.

### **What the Service Does Well**

Young people have a range of opportunities to express their views, influence the service and bring about improvements. The young people receive good nurturing care and support in a well-maintained, safe and spacious environment. The service has evidenced a range of quality assurance processes that aim to make improvements.

### **Overall**

Millview Cottage provides young people with a safe and caring environment to live in. The staff team make good relationships with the young people and support them to make progress in their lives and offer positive experiences. The service does need to be more effective in risk assessment and planning for outcomes including evaluating the success of interventions that are used, coupled with ensuring staffing levels are meeting the needs of the young people.

### **Quality of Care and Support**

The service engaged effectively with young people and their parents and carers to ensure they had access to information about the service. Young people effectively contributed to the brochures and leaflets created. Young people had a say in many aspects of the service including personalising their rooms, seeking their views on having students on placement and through attending specific meetings for the young people. Who Cares? Scotland visit regularly to ensure the option of independent advocacy is available to all the young people. One outcome from this was that pocket money and Christmas money has increased for the young people. The care plans of the young people further evidenced that their views were listened to and that they had opportunities to take part in developing their care plans.

Young people were evidenced to have a good degree of choice in their lives including activities and the food within the house. The service also used risk assessment and management approaches to keeping young people safe and supported. This included staff supporting young people to use strategies for keeping themselves safe with the use of an external agency working with young people to develop awareness of online safety and sexual health.

Young people were in good physical health, with many taking part in regular physical activities including riding their bikes, swimming and attending the gym. Improvements were also noted in terms of medicine arrangements in the house. Staff promoted healthy sleep patterns and improved diets for the young people too.

A nurturing approach to support was evidenced in a number of ways including personalised bedtime support for younger children, promoting contact with family members and providing encouragement and reassurance during difficult transitions. Staff also supported young people in attending school and when there were difficulties developed a learning programme linked to the curriculum. Further support for learning was evidenced through significant changes in young people's attendance at school alongside developing extra-curriculum activities.

### **Quality of Environment**

The service met all aspects of this statement and received a very good standard to ensure children's safety. This was shown through staff implementing a risk management approach to the environment and related activities. Annual health and safety inspections were completed as well as an effective system for managing repairs and maintenance. Effective storage for food and medication was noted as well as the storage of confidential information.

The home itself offers a spacious environment for the young people to live with plenty of outdoor space too. Young people's rooms are personalised and the young people have access to the kitchen to make snacks etc.

### **Quality of Staffing**

The service performs to a good standard in relation to staffing with important strengths witnessed. All staff are registered and access relevant training. Staff highlighted recent difficulties in relation to challenging behaviour. However, staff felt that morale was improving and that they were able to express their views about the operation and management of the house. Regular team meetings allowed staff the opportunity to discuss work and team development days offered a further opportunity to plan for the year ahead and look in more depth at practice issues. Staff conduct was managed appropriately and supervision records highlighted reflective practice. Young people were spoken to about the staff and their feedback was positive on the whole.

The service highlighted a good commitment to the ethos of respect evidenced by staff awareness in training and supervision. Young people were consulted with about issues that affect them in the house and had access to a telephone to make calls in private. Policies and procedures provided a framework to ensure respect was prioritised and staff were reminded about codes of practice.

### **Quality of Management and Leadership**

In terms of leadership staff had opportunities to take on designated responsibilities for specific areas of work within the house including medication, fire safety and mentoring new staff and students. There was also evidence of a clearer career pathway for staff interested in promotion. Senior staff were supported to obtain higher level qualifications and were accessing training on supervision skills. Shift leaders also had the opportunity to develop leadership skills and gain experience in planning and communication.

The wider residential service had drawn up an improvement plan based on the National Well-being Indicators (SHANARRI). The service evidenced that it was working to this plan and staff were taking on clear roles and responsibilities in meeting objectives. The service evidenced ongoing reviews of procedures and ensured that the Care Inspectorate were notified of any significant events. Managers and staff undertook case file audits and a more effective medication audit had led to improvements in the quality of medication management. Supervision frequency had improved and external management of the service was effective with regular planned and unannounced visits and meetings with staff and children.

**The following areas for improvement were noted:**

- Include the young person's views in the risk assessments for whether young people require support to manage their own medication.
- Records of staff meetings could be improved to show more clearly how they had responded to young people's comments and requests.
- Staff to continue to build on strengths to improve the impact on young people's care and experiences.
- Progress is needed in improving personal plans for young people, ensuring measurable outcomes and clearer timescales are displayed. Management are to have clear oversight of this.
- Quality of risk assessments was noted as inconsistent at times.
- Staff to ensure they implement the food safety system and maintain records more consistently.
- The living room to be made more homely.
- Manager to analyse training records of staff and ensure that any training gaps are filled.
- One young person raised why he had to sign for pocket-money. Discussion to take place with him about his options of choice in this area.
- The service should investigate how they can make use of the SSSC's Step Into Leadership programme for increasing leadership capacity within the staff team.
- Whilst the service had adhered to minimum numbers of staff on duty, there had been occasions where the needs of the children and staff numbers had not been matched in terms of numbers and training in regards to restraint.
- Additional improvement plan to compliment the overall residential plan will allow the staff to identify and act on areas for improvement.
- Some incident records did not indicate that they had been overseen and analysed by the manager.
- A more effective and structured staff handover.

**Within this Inspection Report there were no Requirements made but 3 Recommendations were noted:**

- The provider should improve the quality of risk assessments and personal plans in order to ensure that the service is keeping children and young people safe and meeting their needs.
- The provider should ensure that the service maintains a record of the assessment of staffing levels as detailed in the Care inspectorate Guidance in order to ensure that the service meets all young people's needs.
- The provider should ensure that there is prompt oversight of incidents by the manager or senior staff member.

These recommendations and areas for improvement are reflected within the current action plan for Millview Cottage. Monthly assessments are now documented in relation to staffing levels in response to risk and need along side staff awareness of recording all instances of restraint – physical and non-physical. Staff supervision is a priority for the year ahead with recruitment drives to ensure staff levels are appropriate and allow capacity for regular supervision to take place. The action plan also reflects the development of young people's personal plans and that risk, need and opportunities are reflected purposefully. Staff appraisals are being undertaken across the houses and this will encompass developing leadership skills, training and development opportunities.



<b>Inspection of:</b> Gillburn Road				
<b>Inspection by:</b> Care Inspectorate				
<b>Grades:</b>  <b>Theme</b>	<b>Latest Grade Awarded</b>	<b>Grading History</b>		
		<b>Mar 2015</b>	<b>Mar 2013</b>	<b>Feb 2012</b>
Quality of care and support	5 Very Good	4 Good	5 Very Good	5 Very Good
Quality of environment	5 Very Good	5 Very Good	5 Very Good	5 Very Good
Quality of staffing	5 Very Good	5 Very Good	5 Very Good	Not Assessed
Quality of management and leadership	4 Good	5 Very Good	5 Very Good	Not Assessed

### **Summary**

Since the last inspection the service has developed the support plans used to incorporate the Getting it Right for Every Child (GIRFEC) national framework and have developed outreach support alongside further consideration of improving the support offered to young people and their families.

### **What The Service Does Well**

The service is flexible to the needs of young people and their families. It provides a warm, welcoming and homely environment and young people have the opportunity to be involved in interesting activities, supported by staff who know them well and are committed to their care and support.

### **Overall**

Gillburn Road provides a flexible needs led service for young people and their families. Young people are supported by a caring and professional staff team who are highly committed to their care and wellbeing.

### **Quality of Care and Support**

The Inspector noted that there was good evidence young people were encouraged and enabled to participate in assessing and improving the service. Young people were encouraged to make choices in all aspects of life in the house and staff used their knowledge of the young people to offer them choice appropriate to their level of understanding. It was evident that staff knew the young people they cared for well and were highly committed to their care and well-being.

Participation of young people and their families was evidenced through an annual consultation, fun day, questionnaire and a 'warts and wishes tree'. This informed the service's action plan. The service also produced a DVD to provide information to people interested in Gillburn Road in which staff, parents and young people all contributed.

Young people are well supported towards the transition of their first overnight and staffing rotas are planned in a way that the young person will see the staff they are most familiar with making this transition easier. Parents are involved in planning the 4 month respite rota and parents fed back that the service was very accommodating and flexible in this regard. Young people complete work to show how their stay was and feedback any views they have in a

flexible format. Developing independent living skills was also viewed positively within the service as well as learning other skills such as decision making, planning, negotiation and compromise.

### **Quality of Environment**

The environment is warm, welcoming and nurturing where staff have established caring relationships with young people and their families. The house has ample space and communal areas are well decorated and furnished to allow sensitive supervision and observation to occur.

Young people could choose which room they wanted to stay in and their rooms were made up specifically for them when they arrived with flexibility to make changes as needed. The accommodation ensured the privacy of young people and this was seen as a major strength of the service. The safety and privacy of young people was upheld by staff sensitively.

A young person said; "Gillburn Road is in a good condition. The staff are very nice and polite, and my room is very good now... I love spending time there. I asked for a new taxi car because the bus was broken and old and all the other units have their own car. So we got our own taxi car and it is good to get out."

### **Quality of Staffing**

The staff team were observed as enthusiastic, highly motivated, well trained and professional who were committed to provide the best possible support to young people. Almost all the staff have a professional qualification with others working towards one. Staff reported that the training opportunities were good with training records maintained and discussed within supervision. Staff were also supported within the team and regular team meetings, supervision and peer support were evidenced.

Good practice is encouraged through staff meetings and external professionals also attend to enhance the knowledge of the team on specific topics relevant to the care and support of young people. Student placements are common and enhanced the development of the staff team as well as the service through undertaking specific pieces of research and other work.

Staff were graded as excellent in terms of the respect they have for young people and each other. Core child-centred values of the service were clearly evidenced and the staff described being part of a strong team that were able to reflect to ensure best practice.

### **Quality of Management and Leadership**

There was very good evidence that staff were involved in determining the direction and future objectives of the service. All staff have regular supervision, attend team meetings and have access to management. Staff have access to manager's meeting minutes and feel informed and consulted with in regards to organisational developments.

There was good evidence that the service promoted leadership values throughout the workforce. Staff reported that they felt empowered to make appropriate decisions and had access to senior staff to clarify as required. There is a collective responsibility to coordinate the care and support to young people in the service.

**There were no requirements made but the following areas for improvement were noted:**

- A parents group was established that offered parents a good opportunity to meet socially as well as contribute to service development. This is no longer running and staff are hopeful in re-establishing this.
- The newly developed support plans could be improved through more specific information, strategies and target dates.



- Risk assessments would benefit from detailed agreed strategies of support where young people's complex behaviour could present significant risks.
- The service should continue to ensure that the environment allows young people to have as positive a quality of life as possible.
- The service should continue to consider how the privacy of young people is respected.
- Staff development through Employee Performance Development Review (EPDR) will provide further professional development opportunities for staff.
- The service should continue to ensure that everyone working in the service has an ethos of respect towards service users and each other.
- Developments to staff annual appraisal will support the continued opportunities for staff to influence the future of the service.
- Through the use of the Employee Performance Development Review and the Continuous Learning Framework there will be increased opportunities to promote leadership values.
- Staff had been made aware of the SSSC 'Step Into Leadership' development tool with the intention that it would be discussed further at the annual team day later in the year.

**Within this Inspection Report there was 1 Recommendation:**

- Systems should be in place to ensure all young people have the required documentation to contribute to effective risk assessment and management. This should include staff training and auditing.

Since the Inspection Report, Gillburn Road has produced their action plan for the year ahead encompassing the 1 recommendation made as well as the areas for improvement noted above. The action plan will form the basis of staff appraisal and development and will also aid in developing a greater focus on risk and needs awareness for each young person. This will allow staff to make better assessments in regards to specific risks and needs that will be reflected within the young person's care plan and outcome wheel.



<b>Inspection of:</b> Fairbairn Street				
<b>Inspection by:</b> Care Inspectorate				
<b>Grades:</b> <b>Theme</b>	<b>Latest Grade Awarded</b>	<b>Grading History</b>		
		<b>Dec 2014</b>	<b>Dec 2013</b>	<b>Jan 2012</b>
Quality of care and support	4 Good	4 Good	2 Weak	5 Very Good
Quality of environment	5 Very Good	5 Very Good	5 Very Good	5 Very Good
Quality of staffing	5 Very Good	4 Good	4 Good	Not Assessed
Quality of management and leadership	4 Good	4 Good	4 Good	Not Assessed

### **Summary**

Since the last inspection, the service has made improvements in the quality of medication management with more effective audits. The frequency of staff supervision has increased and the staff team are more involved in the completion of the self-assessment. Quality assurance processes have also improved.

### **What The Service Does Well**

The service provides a supportive and individualised approach to meeting young people's needs within a safe and comfortable environment. The staff group are stable and motivated, develop positive relationships with young people and respond to regulation requirements and continuous improvement.

### **Overall**

The service is well-managed and provides a nurturing and supportive environment for young people. Staff develop positive working relationships and young people view the service positively. However, the service needs to continue to improve the quality of personal plans so they can more effectively support young people.

### **Quality of Care and Support**

Young people and their parents / carers had access to information about the service and were clear about what to expect. Young people's plans evidenced their participation through sharing of their views through to developing the plan. Young people were involved in developing the service too through assistance from a Who Cares? Scotland Independent Advocacy worker and were involved in the recruitment process of new staff. Young people were also involved in personalising their rooms and other aspects of the environment including choosing food and activities.

The service uses a risk assessment and management approach to keeping young people safe and staff supported them to develop their own protective strategies. This is also encompassed within a pilot scheme with the Police for managing young people who go missing from care. Staff support young people to attend health appointments, access physical activities and take part in trips and holidays. Staff's relational approach was noted to create a positive and relaxed environment with good outcomes for young people including increased independent skills and improvements at school.

### **Quality of Environment**

Some major strengths were noted here including implementing a risk management approach to keeping the environment and activities as safe as possible. The building was regularly maintained and a safe space to live.

The home was comfortable, well furnished and homely. Some redecoration is planned for later in the year. Young people had a say in this and were able to personalise their rooms. Young people had access to the kitchen to make snacks and meal times were pleasant with good food available.

### **Quality of Staffing**

The staffing also had some major strengths with all staff registered with the SSSC and accessing core and advanced training to meet the needs within their posts. Supervision records evidenced reflective practice and the use of action points for improving skills and knowledge. Regular team meetings took place giving staff opportunities to discuss key aspects of the service and improve planning. Staff reported that they felt well supported and enjoyed their work with feedback that their views were listened to. Staff have positive relationships with the young people and are interested in their welfare.

Young people fed back that staff treat them with respect and young people's privacy is upheld through effective storage of confidential information and the ability for young people to make calls in private.

### **Quality of Management and Leadership**

There are opportunities for staff to take on designated responsibilities for specific areas of work including medication, fire safety and behaviour management. There is a clearer career pathway for staff interested in promotion and senior staff could access training in supervision skills. Shift leadership role gave an additional opportunity for staff to develop skills and experience in coordination and planning.

The Residential Service Plan had been developed in line with National Well-being indicators. The service also had an improvement plan in place with evidence of progress being made. The manager had involved staff in the self-assessment and there was good evidence of quality assurance leading to improvements. The external manager made regular visits to the house and also met regularly with the manager to provide supervision and oversee the operation of the house.

**There were no requirements made but the following areas for improvement were noted:**

- Risk assessments used to help decide whether young people required support to manage their own medication did not include young people's views.
- Progress needed in improving corporate personal plans with specific, measurable outcomes.
- Staff to make clearer records of assessment and decision-making processes following welfare concerns.
- Risk assessments to help decide if the young person requires support to manage their medication needs to be improved.
- A wider range of reading materials to be available for young people.
- Suitable hand washing equipment should be provided in the laundry room for better infection control.
- The service should consider providing somewhere suitable for young people to lock away their personal belongings.
- Grouting in one of the bathrooms needed attention.
- The service should continue to improve the frequency of supervision.
- The service should investigate how they can make use of the SSSC's Step Into

Leadership' programme.

- Manager made aware of the Care Inspectorate guidance on record-keeping in relation to staffing levels.
- Some inconsistencies in the frequency of staff supervision, however this has improved since the last inspection.

**Within this Inspection Report there were no Recommendations.**

