DUNDEE CITY COUNCIL

REPORT TO: SOCIAL WORK AND HEALTH COMMITTEE - 25TH JUNE 2012

REPORT ON: OPTIONS APPRAISAL - ELMS SECURE UNIT

REPORT BY: DIRECTOR OF SOCIAL WORK

REPORT NO: 241 - 2012

1.0 PURPOSE OF REPORT

This report for the Elms Secure Services outlines the background, history and drivers culminating in this Options Appraisal report. The Options Appraisal report (attached) details three options and then seeks agreement to the preferred option.

2.0 RECOMMENDATIONS

It is recommended that the Social Work and Health Committee:

- 2.1 Acknowledge the Options Appraisal report (Appendix 1)
- Agree its contents and the preferred option as outlined in the report to change the use of the secure unit and use alternative secure care providers and create further intake provision to operate alongside Drummond House which is part of the Elms Complex. This new resource having a specialised multi agency approach.
- 2.3 Agree that the Director of Social Work will bring forward a further report outlining the way forward for the preferred option
- 2.4 Agree the phased change of use of the Secure Unit at the Elms over the next six months

3.0 FINANCIAL IMPLICATIONS

- 3.1 There are no direct and immediate financial implications from the approval of this report. However, it is anticipated that more effective and efficient use of resources will result from both the use of external secure care providers and the expansion of further intake provision.
- 3.2 The Council has approved capital expenditure of £0.5m in 2012/13 within the current approved Capital Plan.

4.0 MAIN TEXT

- 4.1 The building is comprised of two distinct but adjoined wings providing distinct services. The non secure wing, Drummond House, provides emergency intake accommodation for 5 young people and would continue to be operated by Dundee City Council staff for this purpose
- 4.2 Since June 2000, Dundee has operated it's own Secure Unit for children requiring secure care as outlined in the Children's (Scotland) Act 1995. This service is licensed by the Scotlish Government and can detain children for up to a period of three months
- 4.3 During the last 12 years the service has been included in the Scottish Secure Estate and has at times taken children from other Authorities. There is only one other Local Authority provider of secure care in Scotland, the other three are independent providers

- 4.4 The service seeks to keep children safe from harm and provide good care, helping them to understand the significant risks they were taking prior to their admission. In providing a nurturing environment it is hoped that we are able to address individual needs through universal and specialist services
- 4.5 The unit provides education on site. It is a regulated service that is inspected every year
- The unit is built on a small scale which means it does not have the full facilities of larger units; this smaller more nurturing environment has proved positive for a specific type of child and has therefore been under used at times given the complex issues of the children whose needs are best met in such an environment. It can therefore only serve a specific minority of children who have required secure care. We have cared for specific children, sometimes in singleton placements within the unit and, while this has been for the right reasons, this has meant a reduction in our overall capacity and we have had to move other children outwith their communities to external provision
- 4.7 The building itself has undergone significant repairs and maintenance to keep up to National Care Home Standards
- 4.8 The last few years have brought significant changes, not only in the provision of service but in the national picture of secure care. The introduction of the Intensive Support and Monitoring Services (ISMS) and specialist fostering resources has reduced the number of children requiring secure care, although the trend remains variable. The belief that more community based "wraparound" packages are more effective for some children has also meant an increase in community resources.
- 4.9 Three significant developments or drivers over the last few years coupled with changing trends and the ongoing difficulties have led to this Options Appraisal report:
- 4.9.1 The first major initiative was the National Residential Child Care Initiative this initiative launched by the Scottish Government instructed a group to look at Secure Care. The group headed as SOFI (Securing our Future Initiative) made a number of recommendations
 - Early and effective intervention
 - Commissioning
 - · Care planning and transitions
 - Health and wellbeing
 - Targeted reduction in the Secure Estate
 - Mental health
 - Vulnerable young offenders continuum of care

It's overall vision was that in the future no child would be in secure care but in the meantime secure care would only be seen as part of a planned journey with re-integration as it's goal

- 4.9.2 The second major driver was the development and implementation of the national contract and governance framework for secure care. This led, as per the recommendations in the SOFI report to the reduction of capacity within the estate and set the fees for secure care. Through this process it became clear that Dundee, as a smaller service provider was not as financially viable as the larger independent providers. We realise that financially and due to under capacity at times, that it is difficult to compete in this market
- 4.9.3 The third major development was the Audit Scotland report "Getting It Right for Children in Residential Care". It challenged Local Authorities to have clear plans and strategies for looking after children, which had to be supported by reliable information systems. It also challenged the poor long term outcomes for our looked after children who experience residential care. Our information systems on analysis would concur with the poor outcomes for some of the young people accommodated in external provision
- 4.10 It was within this background and context the options appraisal was written, and the preferred option identified. We want to change the remit of the service provided from this residential unit and would want to develop a multi-agency approach/response to children

who place themselves at risk. This preferred option is detailed and is the subject of a further report for approval. This option seeks to maintain our provision to buy the secure service externally if required by any young person who meets secure care criteria.

4.11 This option recommends the phased change of use of the secure unit over a six month period and the withdrawal from the Secure Estate for Scotland.

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

The Chief Executive, Director of Corporate Services and Head of Democratic and Legal Services have been consulted in preparation of this report.

DATE: 14th June 2012

7.0 BACKGROUND PAPERS

Options Appraisal Report dated 2011

Mr A G Baird Director of Social Work

OPTION APPRAISAL - The Elms - Secure Unit

THE PROJECT'S STRATEGIC CONTEXT

The Elms was built between February 1999 and June 2000. The building was designed in accordance with the draft guidelines 'Secure '2000" and with the knowledge and experience available at the time.

The primary task of the Secure Unit is to provide a supportive environment which gives order and control to young people who are placing themselves (and in some cases, other people) at risk. For a young person to be admitted to secure care they have to meet the criteria set out in section 70(10) of the Children (Scotland) Act 1995. There are several ways a child can be admitted to Secure Care - either through a Children's Hearing, a Court (provision being under the Criminal Procedure (Scotland) Act 1995, or on the authority of the Chief Social Work Officer and the Head of the Secure establishment. However, there is guidance in place which states clearly that 'secure placements once made should only be for so long as it is in the best interests of the child'.

The Elms Secure Unit is part of the Secure Estate for Scotland and designated as a national resource. Only 13% of the Secure Estate in Scotland is owned and managed by Local Authorities. The 4 beds in the secure unit are licensed by the Scotlish Government and can keep young people detained for up to three months. The Secure Unit offers on site education for young people who are detained.

An option appraisal completed on the adjoining section of the Elms building and reported to the Social Work & Health Committee in December 2010 stated that the Secure Unit would be investigated in conjunction with Education, the reconfiguration of the Intensive Support and Monitoring Service (ISMS) and the Best Value review of Residential schools.

Adolescent services in the Social Work Department were recently redesigned as set out in report 78-2011, following approval at the Policy & Resources Committee on 10 February 2011. A specific Adolescent Team has been established to make best use of professional resources, increase the overall resilience of services and enable a consistent focus on adolescents who experience or present high levels of risk by virtue of their exposure to or involvement in risk taking or offending behaviour.

Since the earlier option appraisal on the Elms, a National Secure Care Contract has been developed by Scotland Excel, all local authorities, and the providers. It is a framework agreement that includes the following providers: Rossie Secure Accommodation Services (18 places); St Mary's Kenmure (24 places); Good Shepherd Centre (18 places); and Kibble (18 places). The two local authority providers forming part of the Secure Estate (the Elms and Edinburgh Secure Services) are not included in the National Contract.

The main reasons for implementing the National Secure Care Contract were enabling the standardizing of terms & conditions, and for the sector to agree costs on a national basis. An outcome of the contract for Dundee City Council is a reduction in the daily rate charged by Rossie Secure Accommodation Services

THE NEED FOR AND OBJECTIVES OF THE PROJECT

The number of looked after children in Dundee has continued to rise resulting in continued pressure on city based placements and increasing use of out of city placements.

The demand for secure care had fallen on average over the last 3 years due to the use of alternatives to secure care such as specialist fostering resources, the use of ISMS, and the increase in the range of community resources. Demand is however subject to fluctuations and the number of young people requiring secure care has increased recently. The changes in the private market in terms of residential care and the growth of "crisis" type provision have also had an impact. This trend in Dundee is indicative of the national picture.

The Unit Manager post for the Elms has traditionally been difficult to recruit to given the specialised nature of the service in the secure unit. The economies of scale of a comparatively small unit in comparison to other secure establishments nationally, seems to present recruitment and retention difficulties for an appropriate Unit Manager. Managing a staff team and getting the balance right between care and punishment has always been a difficult task and requires a specialised staff team.

Whilst the demand for secure care provision fluctuates by nature and is reducing in general, the demand for ordinary and emergency residential care is in constant demand. This is borne out by the other residential units for young people within the city being continually at capacity and an ever increasing trend in the number of external placements being purchased from external providers.

The current model of service delivery needs to be reviewed in light of these findings, to ensure that the current service model is both responsive to the service demands and continues to meet objectives in a cost effective manner. It also has to take cognisance of the recent reports and publications on the commissioning of residential care for young people.

OPTIONS

1. Continue with the current model

Assessment - Not feasible

This is becoming an under-utilised resource as the trends change and the numbers of children requiring secure care is falling. The unit does not offer the range of facilities offered by the larger secure units and it has become an excellent resource for a very small group of children with specific needs. We will take young people from other Local Authorities if we can met their needs. This provision is financed by these other authorities. Due to it's evolving limitations it is not cost effective and has led to young people from Dundee requiring a less specialised service, and having to be located out with the area since general resources are at capacity level.

2. Change the use of the secure unit and use alternative secure providers, create further intake provision to operate alongside Drummond House. This new resource having a specialised multi agency approach.

Assessment - Feasible

Flexibility and control of 4 secure beds would be lost along with the benefits of keeping young people in their own communities, which is in the longer term better child care practice and more cost effective.

The creation of a further 4 person unit with an intake capacity would allow for the expansion of current provision and also allow the development of a multidisciplinary and intensive support service to work with the aim of preventing the secure admission for children who are placing themselves at risk. The partners would include Education, NHS, Community Adolescent Team, Throughcare and Aftercare team and the Voluntary sector partners.

3. Contract with an external care provider to lease the building and manage the service.

Assessment - Not feasible

The building is comprised of two distinct but adjoined wings providing distinct services. The non secure wing, Drummond House, provides emergency intake accommodation for 5 young people and would continue to be operated by Dundee City Council staff for this purpose. Managing distinct services in a co-joined building may present operational difficulties for both parties.

Management of the secure resource by an external provider would result in children from out with the area being accommodated. There would be no control over admissions and discharges.

IMPACT STATEMENT

Objectives	Options		
	1	2	3
Deliver services which continue to improve and meet National Standards for Care and enable full utilisation of resources.	х	V	V
Achieve best value and best practice in managing our people and resources.	V	√	Х
Develop a multidisciplinary and intensive support service.	Х	√	Х
Ensure that professional resources are available to deliver a revised model of service.	Х	\checkmark	Х
To achieve a cost effective option.	х	$\sqrt{}$	√

IDENTIFY THE CHOSEN OPTION AND PRESENT THE RESULTS

The preferred option for the Council is Option 2 - to change the use of the secure unit and use alternative secure providers and create further intake provision. A future strategy for accommodated children should be a priority through our integrated planning process. The GIRFEC agenda requires us to work collaboratively with all services that children will require to grow and develop successfully. This strategy should be based on a comparative study of commissioning and in house investment. At present although a current rise in secure care demand has been experienced, this does fluctuate and trends over the years have proven that. There is always a constant crisis in terms of the provision of resources that can offer an emergency response to a child experiencing distress which can often result in them placing themselves at the cusp of meeting secure criteria. These children are usually older and outwith the control of their parents. The most recent reports show that outcomes for children looked after away from home are the poorest and many children who have been placed in secure care return to their communities for a short period of time before meeting secure criteria again. Trying to prevent children going to secure care in the first place and then stopping them returning may prove more effective and may improve their life chances in their own communities.