

DUNDEE CITY COUNCIL

REPORT TO: SOCIAL WORK AND HEALTH COMMITTEE – 27 JANUARY 2014

REPORT ON: CARE SERVICE INSPECTION REPORTS ON ADOPTION AND FOSTERING SERVICES

REPORT BY: DIRECTOR OF SOCIAL WORK

REPORT NO: 35-2014

1.0 PURPOSE OF REPORT

This report advises committee members of the outcome of the inspections undertaken by the Care Inspectorate in August 2013. It also advises committee of the proposed actions by the adoption and fostering services in relation to recommendations and requirements arising from these inspections.

2.0 RECOMMENDATIONS

It is recommended that the Committee:

- 2.1 notes the contents of the inspection reports (Appendices 1 and 2); and
- 2.2 notes the actions in respect of the recommendations and requirements contained therein (please refer to paragraphs 4.8 and 4.9).

3.0 FINANCIAL IMPLICATIONS

None.

4.0 MAIN TEXT

- 4.1 The Care Inspectorate undertook announced, low intensity inspections of both the fostering and adoption services during August 2013.
- 4.2 The services achieved the following grades:

Adoption Service

Date	Quality of Care and Support	Quality of Environment	Quality of Staffing	Quality of Management and Leadership
05 Sep 2013	5 - Very Good (I)		4 - Good (I)	4 - Good (I)
17 Nov 2010	5 - Very Good (I)		Not Assessed	Not Assessed
20 Jan 2010	5 - Very Good (I)		4 - Good (I)	Not Assessed
28 Jan 2009	4 - Good (I)	Not Assessed	4 - Good (I)	4 - Good

Fostering Service

Date	Quality of Care and Support	Quality of Environment	Quality of Staffing	Quality of Management and Leadership
05 Sep 2013	5 - Very Good (I)		4 - Good (I)	4 - Good (I)
17 Nov 2010	5 - Very Good (I)		Not Assessed	Not Assessed
20 Jan 2010	5 - Very Good (I)		4 - Good (I)	Not Assessed
	5 - Very Good (I)	Not Assessed	4 - Good (I)	4 - Good (I)

- 4.3 The Care Inspectorate reports noted a number of areas in which the services performed very well.
- 4.4 The report on the adoption service commented positively on the family finding and recruitment activities that Dundee undertakes on its own and in conjunction with neighbouring authorities, local and national organisations to improve the availability of suitable adoptive families.
- 4.5 The report noted the systems that were in place to support permanence planning and reduce drift, a priority area for the Scottish Government.
- 4.6 The agency also had very good arrangements in place to ensure that the health and wellbeing needs of children, foster carers and adopters were met.
- 4.7 The inspectors noted the effectiveness of the Fostering Panel and the significant quality assurance function it fulfilled.
- 4.8 The Care Inspectorate made one recommendation, applicable to both services, to establish a staff appraisal scheme. The services will appraise staff in terms of their development and training needs via regular supervision and will align themselves with the council's staff appraisal scheme.
- 4.9 The Inspectorate also required both services to follow Care Inspectorate guidance in relation to reporting notifications of significant incidents and changes to fostering households or details of the service provider such as change of address. The adoption and fostering services have established systems for recording and notifying incidents and have invited the inspectors to meet with staff from the service to ensure that such systems are clear and consistent and meet the expectations of the Inspectorate.

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. No major concerns were found.

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.

7.0 BACKGROUND PAPERS

None.

**JENNIFER G TOCHER
DIRECTOR OF SOCIAL WORK**

DATE: 16 JANUARY 2014

Care service inspection report

Dundee City Council – Adoption Service

Adoption Service

Social Work Offices
Jack Martin Way
Claverhouse East
Dundee
DD4 9FF
Telephone: 01382 436004

Inspected by: Lorna Black

Lisa Kirkbride

Type of inspection: Announced

Inspection completed on: 5 September 2013

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Service provided by:

Dundee City Council

Service provider number:

SP2003004034

Care service number:

CS2004082550

Contact details for the inspector who inspected this service:

Lorna Black

Telephone 01382 207200

Email enquiries@careinspectorate.com

Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

We gave the service these grades

Quality of Care and Support	5	Very Good
Quality of Staffing	4	Good
Quality of Management and Leadership	4	Good

What the service does well

Adopters told us and we confirmed that staff were skilled and knowledgeable about the adoption task.

The service has developed good working relationships with neighbouring local authorities and local organisations to improve the availability of adopters for children and training opportunities for staff and adopters.

The service had some good quality assurance systems in place to monitor, evaluate and improve the service.

What the service could do better

We thought the service would benefit from developing an appraisal system for staff.

What the service has done since the last inspection

The Agency has continued to recruit adopters for children. They have developed their Adoption Service plan and this identifies key objectives for the Agency in meeting the needs of children and reducing drift for children in need of adoption.

The service continues to develop and improve. The panel system has been reviewed, a website has been developed and the Agency has continued to consider how best to improve participation opportunities for birth families.

Conclusion

Dundee City Council's Adoption Agency continues to strive to meet the needs of adopters and children within the local authority area.

Who did this inspection

Lorna Black
Lisa Kirkbride

1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Prior to 1 April 2011, this function was carried out by the Care Commission. Information in relation to all care services is available on our website at www.scswis.com.

The service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

Requirements and recommendations

If we are concerned about some aspect of a service, or think it could do more to improve, we may make a recommendation or requirement.

- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service, but where failure to do so will not directly result in enforcement. Recommendations are based on the National Care Standards, relevant codes of practice and recognised good practice.

- A requirement is a statement which sets out what is required of a care service to comply with the Public Services Reform (Scotland) Act 2010 and Regulations or Orders made under the Act or a condition of registration. Where there are breaches of Regulations, Orders or Conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Inspectorate.

Dundee City Council Adoption Agency provides a service for children and young people, aged from birth to 18 years, and their families who are assessed as in need of this service. The agency recruits and supports adoptive parents to provide families for those children who cannot live with their birth parents or extended family members and who needs have been assessed.

The service is provided by the Adoption and Fostering Resource Team based in Dundee. At the time of the inspection, the team comprised one senior social worker, four social workers and one resource coordinator. The Adoption agency was managed by a service manager who also managed residential resources within the council. Most staff support both permanent foster carers and adopters.

At the time of the inspection we noted that the team manager for the fostering service post was vacant and the team manager for the Adoption and Permanence team was providing some cover for staff in the fostering service. The service were actively recruiting for this post.

A senior officer maintained an overview of permanence planning within the service and reported directly to the service manager.

From 1 January until 31 December 2012 the service had 13 approved adopters. Nine adopters had been approved during the year and seven adoptive families were awaiting placement. Twelve children had been approved by the adoption agency as in need of adoption and had been placed with an adoptive family. A further 12 children had been approved by the adoption agency as in need of adoption and were awaiting a placement.

The aim of the service was to "provide a full and comprehensive range of adoption and adoption support services, available to all parties affected by the adoption process that will be consistent with best practice and national standards and requirements

Based on the findings of this inspection this service has been awarded the following grades:

Quality of Care and Support - Grade 5 - Very Good

Quality of Staffing - Grade 4 - Good

Quality of Management and Leadership - Grade 4 - Good

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0845 600 9527 or visiting one of our offices.

2 How we inspected this service

The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What we did during the inspection

We wrote this report after an announced inspection which took place between Tuesday 27 August and Thursday 5 September 2013. The inspection was undertaken by Lorna Black and Lisa Kirkbride, Care Inspectors.

As requested by us, the Adoption Agency sent us an annual return. The Adoption Agency also completed a self-assessment of their service prior to the inspection starting.

In this inspection we gathered evidence from various sources, including the relevant sections of policies, procedures, records and other documents including:

- evidence from the Agency's most recent self evaluation
- information packs for adopters
- Adoption Service Development Plan
- management information with regard to reducing drift for children in need of adoption
- minutes of various groups including the recruitment group and panel business meetings
- minutes of meetings with neighbouring local authorities
- responses from social workers to questions we asked about the service
- surveys completed by panel members and panel chairpersons for the Care Inspectorate
- adopter's files
- children's files.

We spoke with:

- the service management team
- the adoption agency staff
- the senior officer with a lead role in permanence
- agency decision maker
- post adoption support worker
- review officer
- adopters.

We observed:

- the family finding group.

Grading the service against quality themes and statements

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

Inspection Focus Areas (IFAs)

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

Fire safety issues

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at www.firelawscotland.org

The annual return

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

Annual Return Received: Yes - Electronic

Comments on Self Assessment

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

The self assessment was completed to a satisfactory standard and contained information about what the service did well and some areas for further development. We discussed the quality of the self assessment with the manager at feedback. To improve the self assessment, the agency should continue to ensure that the information it contains is outcome focussed and relevant to the work of the agency.

Taking the views of people using the care service into account

We spoke with adopters who told us about their experiences of the adoption agency. Some had had a better experience than others. Adopters were able to reflect on their experience and tell us what the agency did well and considered some areas where they thought the agency could improve. Generally adopters felt well supported by the staff of the Adoption Agency who they saw as knowledgeable about their role.

Taking carers' views into account

We did not speak with birth parents as part of this inspection.

3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service strengths

We found that some arrangements were in place so that people could influence the operation and future development of the Agency. From the self-assessment completed before the inspection, written evidence provided, and through our interviews with people who used and worked in the Agency we found a number of strengths.

People who wished to adopt were given a range of information about adoption including the National Care Standards for Adoption Agencies at the time of making an enquiry. This helped prospective adopters make decisions about making a formal application to adopt and informed them about expectations in relation to good practice throughout their assessment.

Adopters confirmed that their views were sought after each stage of the preparation process and staff discussed any issues raised. This included a "second opinion visit" made by the team manager of the Adoption team. Some adopters took part in the preparation of new adopters and in discussing with the Adoption Agency how recruitment could be improved. This meant that they could in some way influence the quality of support that children would receive.

Adopters felt confident that the Form F assessments considered by the Adoption panel represented an accurate assessment of their capacity to provide good quality parenting to children. Adopters confirmed that they had contributed to their adoption assessments. Adopters had the opportunity to ask for changes to be made before the form was submitted to the adoption panel.

We saw some collated feedback from adopters who had attended the adoption panel. We noted that where issues had been raised that these had been subsequently discussed with the adoption panel members. This had been a recommendation at the time of the last inspection.

We saw evidence of support groups being held for people who were in the process of adoption or who had adopted. One adopter we had spoken with had attended the support groups and had found these helpful. Adopters had requested that these happen approximately four times each year and that on each occasion there was the opportunity to discuss a different topic chosen by adopters and also time to meet with other adopters informally.

Most Adopters told us of the very good relationships they enjoyed with their link workers. The quality of this arrangement meant that most adopters felt they could discuss any issues with their link worker.

Birth parents were invited to attend permanence panels to give their views about plans for their children and could express their views during their child's review and to their child's social worker. We saw some evidence of birth parents views about the child's plan being included in the child's assessment for adoption.

Areas for improvement

The service were currently developing their website. When launched, this will provide an interactive forum for adopters to raise any issues and to keep in touch with any changes in the service.

We noted that the service had recognised the need to improve participatory opportunities for birth parents and those seeking adoption support services.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

We ensure that service users' health and wellbeing needs are met.

Service strengths

We found that the Agency had very good arrangements in place to ensure that the health and wellbeing needs of people who use the service were met.

Corporately Dundee Council has set out specific actions for improving the health and wellbeing of adults and children in Dundee. We assessed that the adopters we spoke with were aware of healthy life style choices and the need for balanced diets and activity.

Adopters felt well supported in relation to health matters. For example, all adopters had full medical examinations as part of the assessment process. This informed the assessment of their capacity to provide good quality adoptive homes for children.

Following approval, adopters were given some further reading in relation to attachment and telling their children about adoption.

The three children we tracked as part of this inspection had received an adoption medical which highlighted their current health needs. We noted that there was an appropriate system in place to ensure that all children had a medical prior to attending panel.

Adopters reported good information about children's health needs through the Form E. Both adopters had been able to speak to the Agency Medical Advisor about their children's health needs and the impact of their early life in relation to their health needs in the future.

The service told us that they had commissioned a psychotherapy service for children and young people who were assessed as in need of permanence including adoption. The service was able to provide direct therapy opportunities for children as well as consultation for adopters. Although we did not see this as part of the Adoption inspection, one foster carer told us that the quality of the support from this service was excellent.

The service monitored and reported on the process and timescales for achieving permanence for children. They had systems in place to support permanency planning through a permanence group which all staff could attend and discuss any issues, training for social work and staff in other departments and family finding. The agency had planned a local adoption and permanent fostering exchange day with neighbouring local authorities. The aim of this was to create more links for Dundee children with families who could care for them throughout their lives.

The process of linking and matching children with prospective adoptive families was of a very good quality. Children's needs were well documented as well as the capacity of adopters to meet these needs.

Adopters confirmed they had good access to primary health care services. Health visitors were invited to attend coordination meetings to ensure a smooth transition of health information when children moved to their adoptive families.

Adopters told us that some life story work had been carried out for children and that social workers had written later life letters for their children. The Later Life Letter gives the child an explanation of why he/she was adopted and the reasons and actions that led up to this decision being made.

Foster carers were noted as carrying out a very good quality of work preparing children to move to their adoptive families and ensuring that lots of information about early life was contained within memory boxes.

Life story work is important in supporting a child's sense of identity throughout their life.

A post adoption support worker was in place and supported people in the community who were affected by adoption. This may be in relation to accessing files.

Areas for improvement

The service noted the need to extend access to mental health services and therapeutic support to children who were in the process of being adopted or who had been adopted.

The service planned to continue to develop links with neighbouring local authorities to recruit adopters for local children.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 4 - Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service strengths

We found that the Agency had some arrangements in place to involve service users in assessing and improving the quality of staffing. Information recorded under Quality Theme 1, Statement 1 has also been taken into account here.

Adopters had some opportunities to assess and improve the quality of staffing within the service. Adopters were asked about the quality of support they received from their link workers throughout the adoption process.

Adopters could complain about any area of the service, including staffing, if they were unhappy.

Areas for improvement

We thought the service could do more in this area. For example, they could include adopters in the recruitment of staff or make clearer links between feedback from adopters and the performance of staff.

The service told us that they planned to offer more opportunities for adopters to report on the quality of staffing within the service.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Service strengths

The staff team presented as motivated and knowledgeable and had a good awareness of the National Care Standard and the latest best practice.

Adopters told us that staff were skilled in their work and were committed to providing a high quality adoption service.

Staff told us and we confirmed that all social workers were registered with the Scottish Social Services Council as required and worked to appropriate codes of practice.

During the inspection we found that staff had good access to training from internal and external sources.

Staff members we spoke with told us that they had regular supervision for which time was prioritised. Most staff thought this was of a good quality and afforded them the opportunity to reflect on their practice.

Staff told us that they had opportunities to meet regularly as a team to discuss resource issues as well as practice issues. Staff told us that they found these helpful.

Although space was limited, the Agency was very well resourced and the library contained a wide range of materials to assist adopters and staff to continue to develop their skills. Some information was also available electronically to staff. Staff had very good access to legislation, good practice guidance and research findings and used these to reflect and develop the service at their regular development days.

Staff members were given opportunities to have lead roles in areas of practice such as:

- training
- family finding
- supporting the creation of accessible children's profiles.

Staff told us they valued these leadership roles and the opportunity to further develop their skills.

Staff confirmed very good working links with a range of partner agencies including neighbouring local authorities, British Association of Adoption and fostering (BAAF) and Adoption UK. Staff told us they saw this as opportunities to discuss issues and share good practice.

Areas for improvement

The service planned to develop a training strategy for staff in the Adoption Agency. These plans should be progressed to ensure that routine opportunities are given to staff to refresh skills and knowledge in core areas of practice.

We noted that no appraisal system was in place for staff. Although staff told us that they continued to identify and access training and discuss their performance, we thought the service should ensure that staff have regular annual appraisals as stated in the national Care Standards, Adoption Agencies (see recommendation under Quality Theme 3, Quality Statement 3).

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The service should develop an appraisal system for staff.

National Care Standards, Adoption Agencies, Standard 32 Providing a good quality service.

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 4 - Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Service strengths

We found the Agency had some arrangements in place to involve service users in assessing and improving the quality of the service to Adoptive families. Information recorded under Quality Theme 1, Quality Statement 1 has been taken into account here.

Adoptive parents were active members of the adoption panel and of other practice groups within the service such as the group currently looking at developing recruitment. This meant that they could influence the wider work of the service in relation to the quality of assessments, the quality of planning and influence the future direction of the service.

Areas for improvement

The service advised they planned to continue to involve adopters more in the development of the service overall in the next 12 months.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide

Service strengths

The service had good systems in place to make sure that the quality of the work they did was consistent and any necessary improvements identified and actioned.

The service monitored the timescales for planning permanence and the senior officer reported directly to the resources manager.

Very good systems were in place to identify any issues when adoptive placements ended in an unplanned manner. Any learning from this was used to improve practice.

The Adoption Panel provided an important quality assurance function within the Adoption Agency. We attended and observed a Fostering Panel as part of this inspection. The panel was conducted in a professional and efficient manner.

We saw through business meetings that members of the permanence panel discussed the quality of the work of the adoption agency regularly. Emerging trends were identified and discussed with the team leader and any action points were noted. We saw examples where the panel had raised issues in relation to best practice, training and the quality of reports. Attendees were asked to feedback their views about the panel and these were recorded in the annual report produced by the panel about their work.

The service had recently carried out a review of panel membership and policies and procedures governing the running of the panel. A training needs analysis had been completed and training was delivered through the business meeting as well as panel members being able to attend foster carer training.

Panel members were appraised every two years at the time of their panel tenure reviews. This was an opportunity to identify their strengths as a panel member and any improvements in the function of the panel.

We saw a range of measures aimed at ensuring the quality of work within the service.

This included:

- case file audits
- management meetings
- family finding meetings
- permanence group
- Shared Services Liaison meetings with neighbouring local authorities (benchmarking)
- developing action plans
- collecting information in relation to Key Performance Indicators.

Areas for improvement

The Adoption Agency should consider who their stakeholders are and how they seek their views so that they can more systematically inform service development.

The service told us that "as a department we use a recognised performance improvement model as a quality assurance framework for achieving continuous improvement and organisational development.

We asked the service to tell us what the impact of this improvement model had had on the adoption service. They subsequently advised us that this had not been used for some time. We think the service could improve the quality of their self assessment to ensure that this accurately assesses the quality of the service and highlights areas for improvement.

The service had not notified the Care Inspectorate appropriately on all occasions in accordance with SSI/2011/28 Regulation 4(1)(b). (Guidance on the details of notifiable incidents can be found in "Records that all registered services must keep and guidance on notification reporting V.2 - Publication code: OPS-0212-119 on www.careinspectorate.com.) (see requirement made under Quality Theme 4, Quality Statement 4).

Grade awarded for this statement: 4 - Good

Number of requirements: 1

Number of recommendations: 0

Requirements

1. The service must notify the Care Inspectorate of incidents in accordance with SSI/ 2011/28 Regulation 4(1)(b).

Timescale for notification: upon publication of this report.

4 Other information

Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

Enforcements

We have taken no enforcement action against this care service since the last inspection.

Additional Information

Not applicable

Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in the Care Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme being re-graded as unsatisfactory (1).

5 Summary of grades

Quality of Care and Support - 5 - Very Good	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
Quality of Staffing - 4 - Good	
Statement 1	4 - Good
Statement 3	5 - Very Good
Quality of Management and Leadership - 4 - Good	
Statement 1	5 - Very Good
Statement 4	4 - Good

6 Inspection and grading history

Date	Type	Gradings
17 Nov 2010	Announced	Care and support 5 - Very Good Staffing Not Assessed Management and Leadership Not Assessed
20 Jan 2010	Announced	Care and support 5 - Very Good Staffing 4 - Good Management and Leadership Not Assessed
28 Jan 2009	Announced	Care and support 4 - Good Staffing 4 - Good Management and Leadership 4 - Good

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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Translations and alternative formats

This inspection report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

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Telephone: 0845 600 9527

Email: enquiries@careinspectorate.com

Web: www.careinspectorate.com

Care service inspection report

Dundee City Council - Fostering Service

Fostering Service

Social Work Offices
Jack Martin Way
Claverhouse East
Dundee
DD4 9FF
Telephone: 01382 436006

Inspected by: Lisa Kirkbride

Lorna Black

Type of inspection: Announced (Short Notice)

Inspection completed on: 5 September 2013



HAPPY TO TRANSLATE

Care service inspection report

Dundee City Council - Fostering Service

Fostering Service

Social Work Offices

Jack Martin Way

Claverhouse East

Dundee

DD4 9FF

Telephone: 01382 436006

Inspected by: Lisa Kirkbride

Lorna Black

Type of inspection: Announced (Short Notice)

Inspection completed on: 5 September 2013

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Service provided by:

Dundee City Council

Service provider number:

SP2003004034

Care service number:

CS2005097782

Contact details for the inspector who inspected this service:

Lisa Kirkbride

Telephone 01382 207200

Email enquiries@careinspectorate.com

Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

We gave the service these grades

Quality of Care and Support	5	Very Good
Quality of Staffing	4	Good
Quality of Management and Leadership	4	Good

What the service does well

Children and young people who live with foster carers who are recruited and supported by Dundee City Council, have their health and wellbeing needs met.

There were a number of forums for foster carers to share their views about the foster care service and the service were aware of the need to continue to listen to foster carers.

The service provided very good training opportunities for foster carers to more effectively look after children and young people.

Staff also had very good training opportunities. They mostly received regular supervision which they found effective and supportive. There were good opportunities for informal support within the staff team.

The service had some good quality assurance systems in place to monitor, evaluate and improve the service.

What the service could do better

The service should continue to make sure that changes within the service are clearly communicated to foster carers and that foster carers are supported to manage changes in policies and practice.

The service had a number of vacancies across team manager, resource worker and

assistant resource worker roles. An administrative assistant had recently come into post. Although the service had been actively recruiting and recently appointed to the resource worker posts, at the time of the inspection the fostering team were stretched to cover all of their commitments effectively.

What the service has done since the last inspection

The service continues to develop and improve. Several initiatives had been progressed including the development of a website which aims to promote recruitment and retention so that more Dundee City Council foster carers are available and able to meet children's needs.

The panel process had been reviewed to ensure more effective quality assurance and decision arrangements were in place.

Conclusion

Dundee City Council are committed to recruiting and supporting a wide range of foster carers to meet the needs of children and young people and where possible, keep children in their own community. They have focussed on reviewing current practice and have further involved foster carers to develop a quality service for children and young people who require a foster family.

Who did this inspection

Lisa Kirkbride
Lorna Black

1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at www.careinspectorate.com

This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

Requirements and recommendations

If we are concerned about some aspect of a service, or think it could do more to improve, we may make a recommendation or requirement.

- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service, but where failure to do so will not directly result in enforcement. Recommendations are based on the National Care Standards, relevant codes of practice and recognised good practice.
- A requirement is a statement which sets out what is required of a care service to comply with the Public Services Reform (Scotland) Act 2010 and Regulations or Orders made under the Act or a condition of registration. Where there are breaches of Regulations, Orders or Conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Inspectorate.

Dundee City Council Fostering Service provides a fostering and family placement service for children and young people aged from 0 to 18 years who are assessed as in need of this. The service recruits and supports carer families to provide a fostering service to a range of children and young people mostly within Dundee and also in Fife, Angus and Glasgow. The service operates from a base in Dundee. The aims and objectives of the service were stated within the context of Dundee City Council's duties towards children and families.

The service is provided by the fostering resource team. At the time of the inspection, the team comprised of six resource workers. The team manager post was vacant as was a resource worker post and the social work assistant. One resource worker was currently on planned absence. The fostering service was managed by a service manager who also managed residential resources within the council. A senior officer maintained an overview of permanence planning within the service and reported directly to the service manager.

From January to December 2012, the service supported 55 short term foster carers, 24 long term foster carers and 25 carers who provided both short and long term placements. Twelve new approvals were made in this 12 month period.

At 31 December 2012 there were 107 children and young people in short term foster placements, 54 in long term foster placement and six in pre adoptive placement care.

Based on the findings of this inspection this service has been awarded the following grades:

Quality of Care and Support - Grade 5 - Very Good

Quality of Staffing - Grade 4 - Good

Quality of Management and Leadership - Grade 4 - Good

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0845 600 9527 or visiting one of our offices.

2 How we inspected this service

The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What we did during the inspection

We wrote this report following an inspection announced at short notice. This was carried out by Inspectors, Lorna Black and Lisa Kirkbride. The inspection took place between Tuesday 27 August 2013 and Thursday 5 September 2013.

We gave feedback to the registered manager of the service on Thursday 5 September 2013.

As part of the inspection, we took account of the completed annual return and self assessment forms that we asked the provider to complete and submit to us.

During this inspection, we gathered information from various sources, including the following:

- The management team and senior officer with a lead role in permanence
- The Looked After Children's nurse
- The reviewing officer
- Two placing social workers who had responsibility for children placed with foster families
- A group of five foster carers
- Three individual foster families in their homes
- Two children/young people who were being looked after by foster carers
- We observed foster carer's interaction with other children they were looking after
- Two birth children of foster carers
- Two independent panel members

We looked at:

- Three foster carer files
- Three children/young people's files

- The draft handbook
- Foster carer newsletters
- A fostering induction pack
- Records kept about a range of meetings.

We looked at the newly developed website.

We attended and observed a Fostering Panel.

We attended and observed a meeting to consider and review the ACE Carers scheme.

We attended and observed a meeting to review the foster carers' handbook.

Grading the service against quality themes and statements

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

Inspection Focus Areas (IFAs)

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

Fire safety issues

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at www.firelawscotland.org

What the service has done to meet any recommendations we made at our last inspection

One recommendation was made at the last inspection and this had been addressed.

The annual return

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

Annual Return Received: Yes - Electronic

Comments on Self Assessment

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

The self assessment was completed and submitted as requested. There were some issues with information being used which related to other parts of the service and some issues around outdated information. We discussed the quality of the self assessment with the manager at feedback. We suggested that the self assessment would benefit from being specific to the fostering service with outcome focussed information being included alongside information on inputs.

Taking the views of people using the care service into account

Foster carers' views were sought and considered and reported within this report.

Taking carers' views into account

The views of birth families and foster carers were taken into account through the records sampled which were provided by the service.

3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service strengths

The information we looked at showed a range of opportunities for foster carers and children and young people to be involved in the development of the service.

Most foster carers told us they had good working relationships with their individual link workers who visited on a three/four weekly basis. There was evidence of regular telephone contact and emails supporting foster carers, providing them with opportunities to express their views about the service. Foster carers told us that if their link worker was not available, they would be able to speak with the duty worker. Messages left were responded to without undue delay.

Fostering agreements were in place that detailed the responsibilities of the fostering service and the expectations of the foster carers.

Foster carers had formal opportunities to give feedback to the service including through a consultation group, attendance on working groups and support groups. Foster carers told us that support groups provided them with peer group support and an opportunity to discuss fostering issues. Resource workers were in attendance and issues raised were considered by the fostering team.

Foster carers were asked to contribute ideas and suggestions for training and most of the topics were included in the training calendar. We saw in supervision records that foster carers were expected and encouraged to share their views about the quality of the training.

We saw the newsletter and draft website had been developed to promote more

involvement and information sharing on improvement action. This addressed the recommendation made at the last inspection.

Some foster carers were involved in the preparation of new foster carers. Foster carers and staff told us how valued their input was. One foster carer said:

"They opened my eyes to the reality, the situations they described really made me think hard about if fostering was for me, but they managed through and got the back up they needed so I thought to myself I can do this to".

Children and young people's views were sought at their own reviews and at carer reviews. We saw examples of questionnaires completed by young people commenting on the quality of their care.

Children and young people were given the opportunity to complete a feedback questionnaire for their foster carers' annual reviews.

The views of looked after children and young people were being raised by the Dundee Champions Board and shared with the fostering service as appropriate.

Records we looked at and discussion with foster carers showed that foster carers own children were involved in the assessment process. Resource workers spoke with carers' children when they visited and children could provide written comments for their parents' review.

Although it was not possible to interview birth parents as part of this inspection, there was evidence in children's files which showed parents were involved in planning for their child. Following consultation with the child's social worker, birth parents or other relatives were sent a questionnaire where they could share their views about the fostering service. These were considered at the carers' annual review.

We took all of the above into account and considered some areas for improvement. Overall we assessed quality in this area as very good.

Areas for improvement

The service recognised a number of improvements could be made, for example it was thought that increased links with the children's rights worker would support better information gathering of the views of young people leaving the service.

They thought they should develop better ways to gather and consider the views of birth families and very young looked after children.

Although there was a very good range of opportunities for foster carers to participate in service developments, some foster carers did not feel they had always been listened to. We discussed this with the service manager and were confident that

they saw the need to continue to work in partnership with all foster carers and support individual needs.

We found a very good range of opportunities for young people and foster carers to be involved in assessing and improving on the quality of care and support, however, more work needed to be done to ensure more regular collation and analysis of the views being used carried out and used to drive improvement.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

We ensure that service users' health and wellbeing needs are met.

Service strengths

We found very good evidence that the health and wellbeing needs of people who used the service were being met.

Meeting children's health needs was an element of the preparation group for prospective foster carers. This gave applicants the opportunity to learn about child development and attachment and how it could be delayed or damaged through children and young people's traumatic life experiences.

Applicant foster carers had opportunity to learn about the individual roles of a range of professionals including the Agency Medical Advisor and the Looked After and Accommodated Child (LAAC) nurse.

All foster carers had full medicals with their G.P. as part of the assessment process. Reports were scrutinised by the Agency Medical Advisor who commented on the applicant's suitability to become foster carers. The Medical Adviser provided guidance and advice to staff undertaking assessments. We saw that foster carer assessments included consideration of how they would meet the health needs of children placed with them, including children's mental and emotional health. We saw that foster carer assessments and reviews included a risk assessment of the carers' home and environment. This made sure that children and young people were cared for in a safe and secure environment.

Records we sampled showed that statutory checks of foster carers were undertaken, including Protection of Vulnerable Groups, Local Authority, personal references, employer references and health visitor and school references if appropriate.

We found that children and young people who were being looked after away from home were provided with a comprehensive service to meet their health needs.

Records and information from the LAAC nurse confirmed that children were being offered a health assessment appropriate to their age soon after being placed in a foster family. This included meeting with the child and carer and parent (if possible). Any health needs were identified and a health plan produced that would form part of the child's integrated plan. This assessment included age appropriate discussion about sexual health with young people.

The service told us that access to mental health and therapeutic services for children and young people remained restricted. The fostering service had commissioned a psychotherapy service and foster carers confirmed how invaluable this had been for individual children. One foster carer said:

"I learned so much from the psychiatrist, about the reasons why she (the child) behaved the way she did. I wish I had known more about why some of my other foster children behaved the way they did. I would have made different decisions or reacted differently if I had known then what I know now."

From discussions with foster carers and children and young people, we found that children were encouraged and supported to stay active and lead healthy lifestyles.

Records we looked at and discussions with foster carers told us that carers were confident in meeting children's health needs. Overall there was very good support from resource workers to ensure foster carers could make sure children attended all health appointments and meet the service expectations.

Foster carers were provided with a wide range of training to support them in looking after children including child protection and promoting wellbeing, attachment and loss, GIRFEC (Getting it Right For Every Child), recording and report writing.

Foster carers told us they valued the training they received and found it was relevant to the fostering task. There was an expectation in the service that foster carers evidence their learning from training and how this would improve the service they provided to children. This was monitored at the foster carers' annual review so that the service could ensure foster carers were improving their practice to be more effective carers.

We had a look at the developing website which had information for foster carers. This included reference to other links such as the Fostering Network. We thought that this would offer foster carers even more opportunity to learn about current issues and best practice for foster carers.

We took all of the above into account and some areas for improvement and assessed overall quality in this area as very good.

Areas for improvement

We thought that the service should continue to aim to have annual reviews and update checks in line with the Guidance on Looked After Children (Scotland) Regulations 2009.

More dynamic risk management plans could be developed and used to ensure effective analysis of foster carers risk assessments with those of children and young people. This will support placement planning arrangements and reduce placement disruption.

The service identified the need to continue to improve access to therapeutic support services for more children and young people placed with foster carers.

We discussed with the service, the importance of supporting continued links between foster carers with children who have moved on. For example, previous foster carers could be involved in supporting children to settle into new placements.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 4 - Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service strengths

Evidence recorded in Quality Theme, Care and Support, Statement 1 has also been taken into account in assessing the grade for this statement.

In the self assessment the service told us:

"Carers are very clear about the process if they wish to complain about any aspect of the service they are receiving. Feedback on support groups and preparation groups is given on staff involved. Issues on carers review forms are picked up on and addressed...".

Foster carers and records we sampled told us that overall foster carers did feel able to express their views about staff members and that these views were taken into account by the staff members and managers. This led to good relationships between foster carers and their resource workers.

Taking all of the above into account and the areas for improvement identified, we assessed quality in this area as good.

Areas for improvement

The service identified the need to involve more foster carers and young people in the recruitment of staff. This had not been progressed at the time of our inspection. We will monitor this at our next Inspection visit.

The service should consider involving foster carers and young people in monitoring staff performance. This will provide further opportunities for involving service users in assessing and improving the quality of staffing in the service.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Service strengths

Foster carers were supported in meeting children and young people's needs by professional, trained and motivated staff.

Staff within the service were knowledgeable and skilled in the work they undertook. All staff were registered with the Scottish Social Services Council (SSSC) which regulates staff in social care settings. Staff knew about the SSSC codes of practice and these codes underpinned their work.

Staff had access to Dundee City Council policies on the Council intranet and this included equal opportunities and whistle-blowing.

Staff benefited from a wide range of training opportunities both internal and external that supported them in the work they did.
In the self assessment the service told us:

"There is additional information on practice provided by our senior officer via emails, distribution of research information and practice guides. We also use consultation exercises with staff and communicate feedback from service group meetings and management team meetings".

The information we gathered from staff supported this statement.

Staff we spoke with confirmed they received regular and effective supervision. They also valued the opportunity for informal supervision from managers and valued peer support particularly at the present time of having a vacant team manager post.

Staff worked in partnership with other agencies to ensure children and young people's needs were met. This was confirmed by other professionals we spoke with such as the independent panel members. Placing social workers we spoke with welcomed working in partnership with the family placement team. They were confident that any issues they raised about a foster placement were addressed with the child's needs at the centre. Placing social workers told us they saw that foster carers had a good understanding of key issues, such as working effectively with parents and progressing a plan for a child to move to permanent carers.

We considered all of the above information and some areas for improvement, we assessed quality in this area as very good.

Areas for improvement

The service planned to develop a training strategy for staff in fostering work. These plans should be progressed to ensure that routine opportunities are given to staff to refresh skills and knowledge in core areas of practice.

The service could consider developing leadership roles for staff members who could use their knowledge and skills in particular areas to motivate others in the team and foster carers in developing understanding of specific issues.

We noted that no appraisal system was in place for staff. Although staff told us that they continued to identify and access training and discuss their performance, we thought the service should ensure that staff have regular annual appraisals as stated in the National Care Standards.

(See Recommendation 1 Quality Theme 3, Statement 3)

The service should continue to improve on the current very good practice in this area.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The service should develop an appraisal system for staff.

**National Care Standards Foster care and family placement services
Standard 13.4.**

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 4 - Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Service strengths

Evidence recorded in Quality Theme, care and support, Statement 1 and staffing, Statement 1 has also been taken into account in this statement.

Foster carers we spoke with felt some involvement in the overall development of the service. They had opportunities to express their views to the Dundee Foster Carers Association and to the consultative group. For carers who did not attend these meetings, information about proposed changes was included in support group discussions and in newsletters.

In the self assessment the service told us:

"The development of the Champions Board in Dundee has introduced young people who are developing peer mentoring and a service user involvement strategy aimed particularly at children and young people in foster care. The group provided a "LAAC attack" meeting for children in foster care to give their views and question leaders and policy makers".

Some foster carers knew who the service manager, senior officer and team leader were and had information about their roles. We heard that through the Dundee Foster Carers Association some foster carers had met with the head of children's services and some councillors to discuss issues including management and leadership.

We took all of the information above and some areas for improvement into account and assessed quality in this area as good.

Areas for improvement

The service should consider involving more foster carers and young people in the recruitment of managers and in their performance review. This will provide further opportunities for involving service users in assessing and improving the quality of staffing in the service.

The self assessment highlighted that the service planned to make use of more focused consultation with foster carers in relation to the management and leadership of the service. This could include for example, regular meetings with the Director of Social Work and Social Work Committee members.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide

Service strengths

The service had good systems in place to make sure that the quality of work they did was consistent and any necessary improvements were identified.

Procedures were in place to record performance information including the work of the fostering team such as the number of carers, numbers of children awaiting placements and numbers of placement disruptions.

There were times when the service had to ask foster carers to look after children outwith their approval. The service had a clear system in place when this happened including completing a risk assessment, and receiving agreement from the Agency Decision Maker. Such placements were monitored by the service and reviewed by panel where they go on for longer than eight weeks.

Some fostering panel members attended training provided to foster carers and staff and this supported a team working and learning culture.

The fostering panel had regular business meetings to review, monitor and evaluate their work and to make sure they were discharging their duties effectively and identifying improvements.

We attended and observed a fostering panel. We found the panel was well organised and effectively chaired. Panel members treated attendees with respect and made efforts to put people at ease. All panel members were well prepared and had clearly read all relevant reports, highlighting key areas for discussion and clarification. Clear recommendations were made to the Agency Decision Maker.

We looked at fostering panel minutes and found them to be clear and concise.

The work foster carers undertook was monitored in the following ways:

- Regular supervision visits which were recorded. There was evidence that link workers monitored written records kept by foster carers.
- Annual unannounced visits.
- Feedback from children's social workers which included birth parents' views. This included end of placement reports.
- Feedback from other agencies such as health and education.
- Reviews through the Fostering Panel.

The work staff undertook was monitored in the following ways:

- Regular supervision that included reflective discussions as well as case discussions.
- Informal opportunities to discuss their work with managers.
- Joint visits when required with the team manager.
- Joint visits with the team manager to applicants during their assessment.
- Management attendance at the fostering panel.
- 2nd opinion visit carried out by the team manager during the foster carer assessment.

Unfortunately, in some situations, foster placements break down. To understand why this happened and to learn from it, the service had arrangements in place for service managers with line management responsibility for the children involved, or their delegates to scrutinise these circumstances. The outcome of this was made available to senior management and was fed in to service developments.

We saw that file audits had been carried out in some cases to make sure written records were complete.

The fostering panel provided an important quality assurance function within the service. We saw helpful comments about the quality of reports in business meeting minutes and we heard how this information was being used to promote effective practice discussion between managers.

The service had a complaints policy in place which included the Care Inspectorate contact details. The service told us that they had not received any complaints during the last 18 months. Some appropriate notifications had been made to the Care Inspectorate to ensure awareness of significant situations such as child protection, accidents and incidents and management changes.

We saw a recent draft annual report produced for committee. This outlined current strengths and direction of travel and made recommendations for increased efficiencies in the service.

We took all of the above information and some areas for improvement into account and assessed quality in this area as good.

Areas for improvement

The service told us that they used a recognised performance improvement model as a quality assurance framework for achieving continuous improvement and organisational development. When we asked the service about this they advised us that this had not been used for some time. We noted that the service should improve the quality of their self assessment to ensure this accurately assesses the current context and highlights areas for improvement.

The Fostering Service should consider who their stakeholders are and how they seek their views so that they can more systematically inform service development. This could include for example, stakeholders such as the LAAC nurse, psychotherapists, trainers, placing social workers and independent panel members. We will monitor this at the next inspection.

The service had systems in place to monitor children placed outwith foster carers' approval. We thought that the service should extend monitoring to consider any direct links between carers over numbers and placements breaking down.

The service had not followed Care Inspectorate notifications procedures on all occasions. We discussed this with the manager of the service and provided a copy of the notifications guidance.

(See Requirement 1)

Grade awarded for this statement: 4 - Good

Number of requirements: 1

Number of recommendations: 0

Requirements

1. The provider must follow Care Inspectorate guidance in relation to reporting notifications of significant incidents.

This is in order to comply with:

The Social Care and Social Work Improvement Scotland (Registration) Regulations 2011, 4(1)(b) notifications of matters to the Care Inspections.

Timescale: Immediate upon receipt of this report.

4 Other information

Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

Enforcements

We have taken no enforcement action against this care service since the last inspection.

Additional Information

None.

Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in the Care Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme being re-graded as unsatisfactory (1).

5 Summary of grades

Quality of Care and Support - 5 - Very Good	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
Quality of Staffing - 4 - Good	
Statement 1	4 - Good
Statement 3	5 - Very Good
Quality of Management and Leadership - 4 - Good	
Statement 1	4 - Good
Statement 4	4 - Good

6 Inspection and grading history

Date	Type	Gradings
17 Nov 2010	Announced	Care and support 5 - Very Good Staffing Not Assessed Management and Leadership Not Assessed
20 Jan 2010	Announced	Care and support 5 - Very Good Staffing 4 - Good Management and Leadership Not Assessed
28 Jan 2009	Announced	Care and support 5 - Very Good Staffing 4 - Good Management and Leadership 4 - Good

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

ی.رخأ تاغل بو تاقي سينتب ببلطلا دن ع رفاوتم روشنملا اذه.

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Telephone: 0845 600 9527

Email: enquiries@careinspectorate.com

Web: www.careinspectorate.com