

**DUNDEE CITY COUNCIL**

**REPORT TO:                SCRUTINY COMMITTEE 11 DECEMBER 2019**

**REPORT ON:             EXTERNAL INSPECTION REPORT ON MILLVIEW COTTAGE**

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

**REPORT NO:             410-2019**

**1.0            PURPOSE OF REPORT**

To provide an outline of recent external inspection report of Millview Cottage which, over 4 categories of inspection, received grades of Adequate to Good. Millview Cottage was inspected in relation to supporting children and young people's wellbeing, leadership, staffing, care and support planning.

**2.0            RECOMMENDATIONS**

It is recommended that members:

- 2.1            Note the attached summary of the inspection report on Millview Cottage;
- 2.2            Remit the Executive Director of Children and Families to ensure that the areas for improvement are acted upon.

**3.0            FINANCIAL IMPLICATIONS**

None.

**4.0            MAIN TEXT**

- 4.1            This summary report from the Children's Residential Service provides an outline of the recent inspection of Millview Cottage. The inspection identified many positives but the adequate grades represent a decline from past inspection reports. The inspection was carried out in July 2019 and the grades reflect difficulties experienced at the time with providing care and support to a group of particularly vulnerable young people who were also influencing one another negatively alongside a climate of staff change, different staff approaches, absence and vacancies. Whilst additional management oversight was provided and resources were transferred to the house once these issues were identified, these factors had nevertheless had an adverse impact on the continuity and quality of care.
- 4.2            The inspectors did not make any formal requirements and the environment at the house has since stabilised with all young people now much more settled but they did identify some key areas for improvement. They included actions in relation to supporting children and young people's wellbeing, developing an improvement action plan, quality assurance, incident analysis, assessment of staffing levels and models of practice, all of which are currently being acted upon and implemented. The Senior Manager for Resources has management oversight of this process and is ensuring these actions continue to be progressed.
- 4.3            Copies of the inspection report have been passed to the Lord Provost, Group Leaders and Councillor Murray.

**5.0            POLICY IMPLICATIONS**

- 5.1            This Report has been 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 Council Management Team were consulted in the preparation of this report.

## **7.0 BACKGROUND PAPERS**

- Millview Cottage Inspection Report

Paul Clancy  
Executive Director  
Children and Families Service

DATE: 25 November 2019

Theme	Grading History, based on previous inspection framework quality themes		
	Nov 2018	Oct 2017	Dec 2016
Quality of care and support	4 Good	4 Good	3 Adequate
Quality of environment	Not Assessed	5 Very Good	Not Assessed
Quality of staffing	4 Good	4 Good	Not Assessed
Quality of management and leadership	Not Assessed	5 Good	4 Good

### Latest Grades Awarded based on Revised Inspection Framework Quality Themes

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

### Summary

The inspection for Millview Cottage was completed on 26 July 2019. During the inspection the Inspector obtained the views of 2 young people in the form of a questionnaire and a face to face discussion with another. They had mixed views about the service, with two being satisfied overall. One had good relationships with most staff and felt safe. The Inspector also spoke with a family member who felt that staff had done a good job ('bending over backwards') and kept their child safe. They described the house as homely and comfortable.

### What The Service Does Well

It was noted that by and large young people had positive and warm relationships with some staff. There was evidence of young people being respected, having their dignity protected and of action being taken where expected standards had not been met.

Good practice in regards to Child Protection was evident. The service's management of child protection concerns had contributed to young people becoming safer over time, clear examples noted a reduction in the frequency of incidents, attendance by emergency services and of children being reported missing.

The service cooperates with multi-agency planning and decision-making processes and the provision of additional specialist learning and development had also improved staff awareness of risk indicators and strategies. This includes support from 3<sup>rd</sup> sector child protection agency Barnardo's and the integrated work between care staff and colleagues in Education Psychology was also seen as valuable.

It was noted that there were some positive outcomes and experiences over time for the young people. These included improved physical health and self-esteem and development of communication skills. Some very positive work had also been done by staff on challenging young people's negative perceptions and supporting them to learn about healthy lifestyle choices, further noting that this needs to be sustained longer term.

Overall staff managed most aspects of young people's medication safely, with no indication that there were any recurring or significant issues.

External Senior managers had responded positively to escalating concerns about the service's performance, including pressures on a staff group depleted by absence and some significant events involving young people. Senior managers deployed an enhanced level of staffing support to the home allowing for the clearer establishment of management and supervisory structures. There were indications that some headway had started to be made as a result of additional leadership and support during a short absence by the manager.

The inspection noted specific pieces of staff practice that demonstrated the development of positive relationships with young people as the basis for moving forward. The frequency and regularity of supervision was also very good for the large majority of staff whose records were reviewed. A number of staff also described receiving good quality, sensitive support. There were regular opportunities for team meetings and team development days had also taken place.

Overall, the inspection found improvements to the quality of personal plans since the last inspection, which had benefited from increased oversight by senior staff. They were by and large more clearly outcome-focused, though staff need to continue to ensure records of planning meetings are completed consistently.

The inspection found that the service had adopted a new and more personalised way of recording day-to-day events in young people's lives, addressing them directly. The inspector found a number of examples of uplifting, affectionate and humorous records which contrasted well with the rather impersonal or formal approach normally seen. If used well, these have the potential for supporting the development of positive relationships with young people.

#### **What the Service Could do Better**

Regarding **how well we support children and young people's wellbeing**, overall the inspector felt the service needed to build on the improvements they were already beginning to make and demonstrate that they could be sustained. Recognising that staff generally manage the day to day inter-personal relationships very well between our young people in the group living environment, particularly when there is a high level of peer pressure and misuse of power between young people in the group setting. However, the Inspector still felt that the provider should improve recording and monitoring of these interactions between children. Although the service had identified escalating concerns about these type of behaviours and took action, the Inspector felt that further work was needed to identify expectations in this area given the potential for harm. The Inspector felt that some instances of peer pressure and manipulation between the young people were not recognised or recorded as incidents (see Area for Improvement 1).

In terms of **how good is our leadership**, the Inspector noted that In order to ensure high-quality, positive outcomes and experiences for young people, the provider should develop an improvement action plan, clearly identifying the next steps, including timescales. Managers should be clear what outcomes they are expecting (both for staff and young people) and how these will be measured. (See Area for Improvement 1).

It was also acknowledged there had been a lack of systematic, prompt incident analysis to ensure learning following significant events. This was also an area identified in previous inspection reports. The Inspector detailed that in order to ensure that staff practice is monitored, plans reviewed as appropriate and any learning implemented for the benefit of young people, the provider should ensure that managers and senior staff carry out, and document, analysis of incidents. (See Area for Improvement 2)

Within the quality theme **how good is our staff team**, discussion took place between the Inspector and management in regards to evidencing staffing level decisions within the house to effectively meet the needs of young people. Despite the fact the manager had developed a system for assessing staffing levels and deployment of staff, the Inspector noted that it was still under-developed in that in most instances it fell short of specifying the actual numbers or skills mix required to meet needs and reduce risk (See Area for Improvement 1).

The Inspector found that there were still long-standing differences of opinion amongst staff about the approach to key aspects of young people's care and support. Most established staff had taken part in training on the 'nurture model' but it was clear that interpretation of the model and how to implement it varied. Therefore the inspector detailed that in order that staff can work confidently to provide high quality care and the best possible outcomes for young people, the provider should ensure that they receive appropriate support and guidance to consistently implement and embed appropriate approaches and models of practice. (See Area for Improvement 2).

#### **Within this Inspection Report there are 5 Areas for Improvement**

- 1 In order to improve keeping young people safe and promote their wellbeing, the provider should improve recording and monitoring of bullying in the service.
- 2 In order to ensure high-quality, positive outcomes and experiences for young people, the provider should develop an improvement action plan, clearly identifying the next steps, including timescales.
- 3 In order to ensure that staff practice is monitored, plans reviewed as appropriate and any learning implemented for the benefit of young people, the provider should ensure that managers and senior staff carry out and document analysis of incidents.
- 4 In order to meet young people's needs, the provider should implement a system for regular assessment of staffing levels and deployment throughout the day.
- 5 In order that staff can work confidently to provide high quality care and the best possible outcomes for young people, the provider should ensure that they receive appropriate support and guidance to consistently implement and embed appropriate approaches and models of practice.

#### **Actions from Areas for Improvements**

- 1 The manager has arranged training and guidance for staff in relation to how information is recorded. They are now implementing the same approach and recording system as our Secondary Schools, utilising the 'Respect Me' anti-bullying national guidance. Problematic inter-personal relationships between our young people are now being recorded on official Behaviour of Concern Forms/Reports. Management also now receive an electronic notification of this on our recognised electronic recording system MOSAIC. Approaches and recording of behavioural incidents between our children are now being discussed, agreed and implemented in regular staff supervision sessions.
- 2 The manager has completed an Action Plan identifying actions, outcomes and timescales for implementation. This covers all Areas for Improvement and External Resources Senior Manager will track and monitor this ensuring actions are followed and completed. A team development day has been organised to ensure that a whole team approach is taken to support understanding, change, development and implementation of this action plan.

- 3 The service now has a standing agenda item at a monthly Seniors Meeting to ensure information is mapped and appropriate interventions are put in place. In-house training is now scheduled to be implemented drawing from case examples of good Behaviour of Concern reports. The manager will map and analyse data, which will be further scrutinised at monthly senior team meetings. A member of the management team will be identified to follow up with a formal debrief and learning session.
- 4 The manager is ensuring the existing Staffing Assessment Plan is utilised on an ongoing basis with staff deployed according to young person's needs. This is then informing diary planning. In addition, additional Human Resources support is being deployed to appropriately manage staff absence. Two additional temporary 37 hour posts have been agreed to maintain capacity in the interim.
- 5 A number of training initiatives are planned. All staff will undertake training in the nurture approach and this is being adopted as a model of practice. Growth Mind-Set training is currently being delivered. Respect Me anti-bullying training is scheduled. The Education Psychologist is available for consultation with staff and observation of staff practice at an operational level. The Educational Psychologist has also agreed to train all senior staff in Video Enhanced Reflective Practice to support this team approach to training. All training and practice approaches are being embedded through regular and structured supervision sessions and Keyworking meetings. The manager will develop the nurture approach and challenge staff to view practice through a nurture lens (i.e. language, recording, analysis).

#### **Further Actions**

- Management and Staffing Structure – Manager now working full time regular hours across the full week, rota now structured to allow for management and senior staff cover throughout the full week including evenings and weekends.
- Resources Senior Manager recruited on a permanent basis, has excellent residential experience and credentials, who will have daily contact and extra manager oversight, who will carry out unannounced visits for practice scrutiny.
- Comprehensive training strategy now in place.
- Recruitment – All vacancies now filled, 2 additional staff recruited to support existing staffing levels, full staff levels with no absence following support from HR. All new staff will receive a comprehensive and robust induction process.
- Quality Assurance - The Management team will conduct regular case file audits quarterly and this is reflected in the quality assurance framework which is now being implemented.