**ITEM No …4……..**

**DUNDEE CITY COUNCIL**

**REPORT TO:** **SCRUTINY COMMITTEE – 09 FEBRUARY 2022**

**REPORT ON:** **EXTERNAL INSPECTION REPORT FOR FAIRBAIRN STREET CHILDREN'S HOUSE**

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

**REPORT NO:** **48 - 2022**

## 1.0 PURPOSE OF REPORT

1.1 To provide a summary of a recent external inspection carried out by the Care Inspectorate on Fairbairn Street Young Person's Home in October 2021, which does not require in-depth scrutiny. Over 3 categories of inspection, Fairbairn House received grades of Good in each. The inspection focused on supporting children and young people's wellbeing, how good is the staff team and how well is the care of young people planned.

## 2.0 RECOMMENDATIONS

2.1 It is recommended that members:

i. Note the attached summary of the inspection report on Fairbairn Street Young Person's Home which received grades of Good in all areas covered by the inspection

ii. Remit the Executive Director of Children and Families to ensure that the areas for improvement are acted upon.

## 3.0 FINANCIAL IMPLICATIONS

3.1 None.

## 4.0 MAIN TEXT

4.1 The remit of the Scrutiny Committee states that, where the grades awarded in external inspection reports are all Good or better and the reports would not benefit from in-depth scrutiny, summaries from the inspections will be reported, together with any examples of best practice and areas for improvement.

4.2 Fairbairn Street is a Young People's Home for 5 young people aged 13 to 21 years. As the inspection took place during the Covid-19 pandemic, it followed revised methodology to conform with public health restrictions. It was the earliest opportunity for the house to be inspected since the last one in November 2019, when the house received grades of Good.

In the context of the many challenges presented by the pandemic, the Inspector notes that care and support continued to be of a Good standard, with important strengths. Positives in the report include the strength of the relationships and strong connections between staff and young people. There were also 3 Areas for Improvement, summarised below.

It is noteworthy that during the pandemic the team has been required to apply a range of public health measures to minimise risk of infection whilst maintaining a homely environment and providing care and support. This includes during periods of lockdown and when staff have been absent from work due to self-isolation.

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

**5.0 POLICY IMPLICATIONS**

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

**6.0 CONSULTATIONS**

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

**7.0 BACKGROUND PAPERS**

7.1 Care Inspectorate Report

Audrey May
Executive Director

Mark MacAulay
Service Manager

January 2022

**Previous Grades Awarded from Inspections**

| **Quality Theme:** | **Grading History** | | |
|---|---|---|---|
| | **Nov 2019** | **Feb 2019** | **Nov 2017** |
| Quality of care and support | 4 - Good | 4 Good | 4 Good |
| Quality of environment | Not Assessed | Not Assessed | Not Assessed |
| Quality of staffing | Not Assessed | Not Assessed | 5 Very Good |
| Quality of management and leadership | Not Assessed | 5 Very Good | Not Assessed |
| How well is care and support planned | 4 - Good | | |

**October 2021 - Latest grades awarded from this Inspection**

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

**Summary**

During this inspection the Inspector received two responses to a survey sent to young people. The Inspector also spoke with three young people in person during the visits. The comments the young people made suggested they had mixed views about some aspects of living at Fairbairn, though many were positive. Some of these comments need to be seen in the context of their specific needs and

indeed the pandemic and lockdown circumstances, alongside higher levels of staff absences caused by infection, isolation and shielding. This caused changes to the continuity of staff but it is important to emphasise that staffing levels of 2 members of staff in the house at any time were always maintained.

One of the young people felt there were sometimes not enough staff, that living in a group with other young people could be difficult and had found it hard seeing staff he liked leaving. He said lockdown had been hard. However, he got on well with all the staff, who treated him well. One didn't like living in a care home and wanted more independence. Young people commented positively on staff being kind, spending time with them, being supported to understand their rights and usually being treated with respect.

The inspector also spoke to two family members by phone. They made very positive comments about the service, with one saying that some initial difficulties with communication by staff had been resolved. They couldn't fault staff now and felt they had good relationships with the young person. Staff were supportive of the family and were always there to help and would 'go the 'extra mile'. They described 'massive changes' (for the better) in the young person, who was in what they said was the only stable home they had ever known. The other family member felt it was 'amazing' the young person was at Fairbairn. Staff were good with the family and kept them involved. They couldn't think of anything that needed to improve.

The Inspector also noted most young people had long-standing, positive and meaningful relationships with staff and for those who had arrived more recently, these relationships were developing. Staff used good humour and through activities and trips they built good relationships, having fun and creating good memories. Other strengths noted were young people clearly felt able to make good use of the complaints system, young people exercised choice in most aspects of their daily lives, staff supported all of them to keep in touch with family members and had welcomed them to the house for special occasions, which made them feel included, successful education experiences and skills development for young people and appropriate responses by staff to child protection measures. It was clear from the inspection that staff took their responsibilities for keeping young people safe during the pandemic seriously in very difficult circumstances.

There were also 3 Areas for Improvement noted relating to the following areas: 2 errors made when administering medication to young people involving medication being issued at the wrong time of day to one young person and the wrong medication issued to another, although neither had come to any harm and the inspector noted managers had already identified some learning and made changes; the system for assessing staffing levels and skills mix needed to be developed further; and some of the care and assessment plans reviewed for young people were brief and varying in quality. These are all noted below with action points currently being implemented or planned to be taken.

**Areas for improvement**

1. The provider should safeguard and promote young people's health and wellbeing by improving how medication is managed and specifically by ensuring that the required training has been completed by all staff.

**Action** - we have identified an individual staff member to become the Lead Medication Officer for the house to coordinate delivery of training and ensure this is implemented across the team. The Inspector recommended that all staff undertake online medication training available through the SSSC and the current Depute Manager is ensuring this takes place. The staff involved in the errors have already received training from the Lead Medication Officer. There has also been a change to the procedure, where all medication is now checked, approved and issued by 2 members of staff.

2. In order to meet young people's needs, the provider should implement an effective system for assessing the staffing levels, skills and deployment that are required in all parts of the service throughout the day.

**Action** – following this inspection and since November 2021, aligned with staff rota arrangements, we have implemented a template for staff planning and movements ensuring it is in line with the young people's needs and diary appointments. Each week, the house manager is expected to make an assessment of the number and needs of young people in the house and their activity schedule to

inform decisions on the required staffing level and skill mix. The current Depute Manager now has daily oversight of this system.
3. In order that young people have the best possible outcomes and experiences, the provider should ensure that the service develops high-quality, effective plans.

**Action** – building on developments across the wider service, which have been commended in the Inspection for Children and Young People at Risk of Harm, a Practice Manager from the Senior Management Team has been working closely with the houses and the Care Inspectorate to develop a Residential Plan template called 'My House Plan'. The team is currently piloting this and being trained in the use of this with a view to going live 1st March 2021. This will align with locality team plans, permanence plans and review processes. A new quality assurance audit tool is also being developed to ensure that the plans are needs led and evidence strong outcomes for our young people. Similarly, in line with wider developments, these plans will be randomly audited every 3 months.