

DUNDEE CITY COUNCIL

REPORT TO: SCRUTINY COMMITTEE 14 FEBRUARY 2018

REPORT ON: CARE INSPECTORATE INSPECTIONS OF FORRESTER AND DRUMMOND HOUSE AND FAIRBAIRN HOUSE

REPORT BY: EXECUTIVE DIRECTOR OF CHILDREN AND FAMILIES

REPORT NO: 54-2018

1.0 PURPOSE OF REPORT

The purpose of this report is to provide a summary of recent external inspection reports which do not require in-depth scrutiny.

2.0 RECOMMENDATIONS

It is recommended that members:

- 2.1 Note the attached summaries of the inspection reports on Forrester and Drummond House and Fairbairn House, each of which received grades of Good or better in all areas covered by the inspections;
- 2.2 Remit the Executive Director of Children and Families to ensure that the areas for improvement, requirements and recommendations included in the reports are acted upon, both in relation to the particular services inspected and as guidance on good practice for other services.

3.0 FINANCIAL IMPLICATIONS

None.

4.0 MAIN TEXT

- 4.1 The remit of the Scrutiny Committee states that, where the grades awarded in external inspection reports are all good or better and the reports would not benefit from in-depth scrutiny, summary scores from the inspections will be reported to the Committee, together with examples of best practice and areas for improvement. Summaries of recent inspection reports which fall into this category are attached.
- 4.2 There were no requirements but two recommendations. Both these and the areas for improvement listed in the summaries will be actioned across all the regulated residential services in Children's Services.
 - Copies of the inspection reports have been passed to the Lord Provost and Group Leaders.

5.0 POLICY IMPLICATIONS

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

6.0 CONSULTATIONS

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

7.0 BACKGROUND PAPERS

- Drummond House (includes Forrester House).
- Fairbairn.

Paul Clancy
Executive Director
Children and Families Service

DATE: 23 January 2018

Inspection of: Drummond and Forrester House				
Inspection by: Care Inspectorate				
Grades: Theme	Latest Grade Awarded	Grading History		
		Dec 2016	Jan 2016	Nov 2014
Quality of care and support	4 Good	4 Good	4 Good	4 Good
Quality of environment	Not Assessed	Not Assessed	5 Very Good	5 Very Good
Quality of staffing	5 Very Good	Not Assessed	5 Very Good	4 Good
Quality of management and leadership	Not Assessed	4 Good	4 Good	4 Good

Summary

The Inspection for Drummond and Forrester was completed on 27 September 2017. Young people's views were sought through 2 questionnaires and 6 face-to-face discussions. One young person felt that some aspects of the physical environment needed updated but that he got on well with staff and was respected and listened to. He also said that he was doing better in education since living in the House and also at making friends. Another young person felt respected and that it was the right place for him to be living. One young person did raise an issue of bullying but advised that staff had tried their best to stop it and that things were much better now. The food was seen to be a strength of living in the house as well as having views listened to and acted upon.

What the Service Does Well

There was good evidence of staff implementing risk-reducing strategies for young people and promoting young people's safety through awareness of vulnerabilities and information sharing. There was also good evidence of staff working to divert young people from negative influences and risks in the community. There was good evidence of staff supporting a young person to reduce challenging behaviour and develop empathy to assist in building relationships. There was further evidence of nurturing care as well as supporting and encouraging young people to contribute to their plans.

Staff promote educational engagement through providing support and incentives and work hard to achieve positive outcomes, which at times can be challenging. The Inspector noted the role of the link Educational Psychologist, which is a new development and this is planned to improve the link between the care and educational settings.

The Inspector noted that the staffing quality was very good overall, with major strengths based upon positive relationships with young people. Senior staff were seen to be actively supporting the teams to be creative and persistent in supporting the young people. Staff feedback highlighted that they feel supported and safe at work with opportunities for staff to develop leadership skills through mentoring others, taking on delegated responsibilities and applying for promoted posts.

What the Service Could do Better

The main negative outcome for young people was caused by bullying within the house and the effects on the people and the fabric of the building. There was evidence that the service had made efforts to address this and made recent improvements, but the inspector noted that this had impacted the services provision of care and support.

Young people's outcome focused plans were also highlighted as an area for improvement. The introduction of the department's new data management system was partly responsible for this although there was still room within the service to adapt and improve practice. There was evidence that the service sometimes struggled to capture good quality, evaluative evidence of young people's outcomes (Recommendation 1).

Some minor improvements could be made to the management of medication, although overall this is an area that has improved overall.

Young people who make complaints should be given information about what their options are if they are unhappy with the outcome.

The frequency of staff supervision continued to be variable along with employee performance and development reviews being implemented. Staff training records were limited and generally only highlighted corporate training that had been undertaken with the need for more varied training linked to the needs of the staff team (Recommendation 2).

Within this Inspection Report there were 2 Recommendations:

- The provider should improve the quality of assessment, planning and evaluation for young people by:
 - (i) Identifying any gaps in knowledge and confidence
 - (ii) Implementing a programme of suitable learning and development
- The provider should ensure that staff support includes regular, planned supervision.

Actions From Recommendations

The Senior Manager has instructed the Resource Manager to undertake an audit of young people's plans across all the houses with a specific focus on the identification and recording of needs and outcomes. This audit will be completed by March 2018 with the report outcomes informing the service and house action plans which will identify gaps in knowledge and confidence and inform a suitable programme of learning and development with support from our Learning and Organisational Development Service.

Staff supervision is a priority area for the service in 2018. The Senior Manager has instructed the Team Managers to undertake regular audits of supervision and to ensure that all staff receive supervision 4-6 weekly. The Senior Manager will ask for staff supervision updates at each 4 weekly supervision with the Team Managers to ensure supervision is occurring within these timescales.

Further Actions

In regards to the bullying, staff encouraged professional's meetings to occur to address the issue and these meetings were successful in addressing this and supporting the young people. Focused team meetings have encouraged staff to reflect further on identifying what can be done to avoid further future incidents of this nature.

The outcome of young people's complaints will be actioned within the house plan for 2018-19.

Inspection of: Fairbairn				
Inspection by: Care Inspectorate				
Grades: Theme	Latest Grade Awarded	Grading History		
		Nov 2016	Feb 2016	Dec 2014
Quality of care and support	4 Good	5 Very Good	4 Good	4 Good
Quality of environment	Not Assessed	Not Assessed	5 Very Good	5 Very Good
Quality of staffing	5 Very Good	Not Assessed	5 Very Good	4 Good
Quality of management and leadership	Not Assessed	5 Very Good	4 Good	4 Good

Summary

The Inspector obtained the views of 4 young people through questionnaires and face to face discussions. Young people commented on the food being too healthy and unhappy about there being rules in place about bedtime and turning the TV off at night. Another young person commented that the building fabric needed to be upgraded. Young people felt that staff are supportive, the garden being great, knowing how to make a complaint and supported to attend meetings and remember family events.

What The Service Does Well

Young people were seen to be in good health with regular access to primary care and the Looked After Nurse. Robust risk management process contributed to keeping young people safe along with staff awareness raising through training in Child Sexual Exploitation.

The house had a relaxed and friendly atmosphere and staff were seen to be supporting young people to maintain relationships. Young people are accessing independent advocacy and outreach work is being undertaken with former residents who were experiencing difficulties.

Staff promote educational engagement through providing support and encouragement to attend. The Inspector noted the role of the link Educational Psychologist, which is a new development and this is planned to improve the link between the care and educational settings.

The standard of staffing quality was very good with major strengths. Relationships between staff and young people were positive and characterised by real stability and a good awareness of young people's needs.

Staff met regularly to discuss their work and development days were noted to have been very useful for focused discussion and planning improvements. There was evidence of improvement in relation to staffing quality from the previous inspection and staff felt well-supported and was further evidenced through reflective approaches to practice. The new development of an Educational Psychologist was also seen to be a useful resource for staff once embedded.

There was a range of opportunities for staff to develop leadership skills including mentoring new staff and promoted posts.

What the Service Could do Better

Young people's outcome focused plans were highlighted as an area for improvement. The introduction of the Department's new data management system was partly responsible for this although there was still room within the service to adapt and improve practice. There was evidence that the service sometimes struggled to capture good quality, evaluative evidence of young people's outcomes (Recommendation 1)

Some noise and disruption through the night had disturbed young people's sleep at times which had a negative impact on young people. There was evidence of Senior staff continuing to monitor this.

Senior staff need to ensure the reporting of incidents has further analysis and that the systems for doing so are in place.

Most of the young people in the house smoke, despite staff's best efforts to promote healthier lifestyles and disrupt the availability of cigarettes to under-age smokers locally.

The outcome of complaints was not always clear from the records as was young people's involvement in the development of risk assessments.

There were inconsistencies in the frequency of staff supervision (Recommendation 2).

Within this Inspection Report there were 2 Recommendations:

- The provider should improve the quality of assessment, planning and evaluation for young people by:
 - (iii) Identifying any gaps in knowledge and confidence
 - (iv) Implementing a programme of suitable learning and development
- The provider should ensure that staff support includes regular, planned supervision.

Actions From Recommendations

The Senior Manager has instructed the Resource Manager to undertake an audit of young people's plans across all the houses with a specific focus on the identification and recording of needs and outcomes. This audit will be completed by March 2018 with the report outcomes informing the service and house action plans which will identify gaps in knowledge and confidence and inform a suitable programme of learning and development.

Staff supervision is a priority area for the service in 2018. The Senior Manager has instructed the Team Managers to undertake regular audits of supervision and to ensure that all staff receive supervision 4-6 weekly. The Senior Manager will ask for staff supervision updates at each 4 weekly supervision with the Team Managers to ensure supervision is occurring within these timescales.

Further Actions

In regards to the night disturbance, the Educational Psychologist assisted staff in assessing and working towards improvements. There have been significant improvements in this area since the date of the inspection.

The reporting of incidents has also greatly improved. Work was undertaken alongside the health and safety officer on the development of a new Behaviour of Concern report that has led to better, timeous reporting with clearer evidence of analysis.

Outcome of complaints and young people's input into risk assessments will be actioned within the house plan for 2018-19.