

DUNDEE CITY COUNCIL

REPORT TO: SCRUTINY COMMITTEE 13 FEBRUARY 2019
REPORT ON: EXTERNAL INSPECTION REPORT
REPORT BY: EXECUTIVE DIRECTOR OF CHILDREN AND FAMILIES SERVICE
REPORT NO: 62-2019

1.0 PURPOSE OF REPORT

To provide an outline of recent external inspection reports of 2 Children's Homes which, over 4 categories of inspection, received grades of Adequate to Very Good. One home was inspected in relation to the quality of care and support and the quality of the environment, receiving a grade of Adequate in the latter. The other home was inspected in relation to the quality of care and support and the quality of staffing.

2.0 RECOMMENDATIONS

It is recommended that members:

- 2.1 Note the attached summaries of the inspection reports on Forrester and Drummond House and Millview Cottage;
- 2.2 Remit the Executive Director of Children and Families to ensure that the areas for improvement, requirements and recommendations included are acted upon.

3.0 FINANCIAL IMPLICATIONS

None.

4.0 MAIN TEXT

- 4.1 Two summary reports are included from the Children's Residential Service which provide an outline of recent inspections of 2 Children's Homes. Overall, the grades were positive and reflect sustained high standards in the houses. The grade of Adequate in respect of the quality of environment of one house reflects the initial purpose for which the house was built and was being addressed through an action plan before the inspection took place.
- 4.2 In addition to all other areas for improvement, recommendations to improve the environment will continue to be addressed as outlined in the summary below. Other recommendations relating to support plans, staffing rotas reflecting levels of need, staff supervision records and sessional staff supervision will also be addressed both within the 2 houses and other regulated residential services in the Children and Families Service.
- 4.3 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 Council Management Team were consulted in the preparation of this report.

7.0 BACKGROUND PAPERS

- Drummond House (includes Forrester House).
- Millview Cottage.

Paul Clancy
Executive Director
Children and Families Service

DATE: 23/01/19

Inspection of: Drummond and Forrester House				
Inspection by: Care Inspectorate				
Grades: Theme	Latest Grade Awarded	Grading History		
		Sept 2017	Dec 2016	Jan 2016
Quality of care and support	5 Very Good	4 Good	4 Good	4 Good
Quality of environment	3 Adequate	Not Assessed	Not Assessed	5 Very Good
Quality of staffing	Not Assessed	5 Very Good	Not Assessed	5 Very Good
Quality of management and leadership	Not Assessed	Not Assessed	4 Good	4 Good

Summary

The Inspection for Drummond and Forester was completed on 22 November 2018. Young people's views were sought through questionnaires and face-to-face discussions with young people and an ex-resident. Most of the young people were very positive about their care, the staff and described progress that they were making.

What the Service Does Well

The quality of Care and Support was evidenced to have improved from last year's inspection. There was good evidence of staff having positive and meaningful relationships with young people which was seen to be helping them make progress and feel secure. Staff showed insight into the impact of past trauma through the training they had received alongside Educational Psychology colleagues and this assisted them in their role of supporting and caring for the young people.

The service was seen to promote inclusion with friends and family as well as supporting ex-residents. Good management oversight of staffing levels allows flexibility within the team to provide support to older young people who had moved on from the service. The support provided to older young people within the service was also noted positively through life-skills learning along with the satellite training flat linked to the House allowing young people to develop the skills required for managing their own tenancy when moving on from the service.

Young people's health needs were observed to be met as well as their well-being and safety needs through appropriate safeguarding procedures being followed. It is positive to note that the work with Educational Psychology colleagues was seen as a positive feature within the service. This joint work was evidenced to be contributing to a greater understanding of the support required for working with trauma and enabled shared understanding and approaches between agencies to meet young people's needs.

Young people have access to independent advocacy with good systems in place to ensure that young people's requests are responded to in a timely fashion. This contributes to young people's voices being heard and contributing to service developments. This was further evidenced through the personalisation of young people's bedrooms and their input in the design of relaxation spaces in the building.

What the Service Could do Better

The inspector noted that care plans and risk assessments need to be reviewed and improved. Whilst staff were able to evidence their awareness of young people's needs and progress, the plans did not record these effectively. Similarly, this was noted within risk assessments too. Whilst risk assessments were in place and noted as comprehensive, there needs to be greater recording of how each risk will be specifically managed. The inspector also noted that a wider service risk assessment should be put in place.

In regards to the building itself, Drummond House was noted as having some areas that were not of an acceptable standard, in particular the en-suite bathrooms that still have features of when the House was a secure unit. Whilst the service were seen as doing their best within the environment, it was noted that remedial work is required to improve the living environment for the young people. As such, the environment was inspected as adequate.

Within this Inspection Report there were 2 Recommendations:

1. The service should review support plans and risk assessments to ensure they are outcome focussed and detail individual strategies of support.
2. Immediate improvements should be made to aspects of the environment which do not create a homely environment and which continue to replicate a 'secure' environment.

Actions From Recommendations

1. The Senior Manager has met with and discussed plans and risk assessments with the Team Manager. The recording and understanding of outcomes as opposed to actions within plans and risk assessments continues to be a challenge for some staff. The Manager will support staff to develop their understanding of outcome focussed work alongside consultation sessions with the link educational psychologist for each specific child's plan and risk assessment. This work has already begun and will be reviewed by the Senior Manager through monthly supervision sessions. Further to this, the development of a service wide risk assessment will be completed by April 2019, led by the Senior Manager.
2. In regards to the building improvements, the service has been aware of the need to make changes to Drummond House and in order for the work to be undertaken, a decant facility is required for the young people and staff to live in during the required works. The service is actively in consultation with a housing provider and the Care Inspectorate to secure a suitable building for this purpose. The Care Inspectorate have approved the proposed decant building, with recognition that some minor alterations will be required in order to ensure compliance with both Building regulations and the Care Inspectorate regulations. The housing provider will be able to confirm the use of the proposed decant building by February 2019.

The Senior Manager has also met with young people within Drummond House to discuss this and committed to continue to involve them in any developments and future design of the building space once a decant building has been sourced and continue to provide regular updates of progress to them.

Inspection of: Millview Cottage				
Inspection by: Care Inspectorate				
Grades: Theme	Latest Grade Awarded	Grading History		
		Oct 2017	Dec 2016	Feb 2016
Quality of care and support	4 Good	4 Good	3 Adequate	4 Good
Quality of environment	Not Assessed	5 Very Good	Not Assessed	5 Very Good
Quality of staffing	4 Good	4 Good	Not Assessed	4 Good
Quality of management and leadership	Not Assessed	5 Good	4 Good	4 Good

Summary

The inspection for Millview Cottage was completed on 22 November 2018. The Inspector obtained the views of 2 young people during the inspection. Most of the comments from them were positive, noting that they liked the staff who cared for them. It was also noted that sometimes the behaviour of other young people had a negative impact within the house.

What The Service Does Well

Young people were seen to be physically healthy, with their primary care needs being met. This also included how staff managed young people's medication safely to promote health and wellbeing. Several specific examples of progress were noted for individual young people in regards to their wellbeing with clear evidence of good ongoing support from staff. Relationships between staff and young people were seen to be nurturing and affectionate and this had contributed to further progress for young people and a reduction in challenging behaviour within the house. It was positive to note that young people who had left the service continued to have supportive positive relationships with staff too.

Practice in regards to Child Protection was good with clear evidence of management oversight and close partnership work with the Police for when young people are reported missing.

Young people's education attendance and attainment was noted as a strength in the service with evidence of good partnership work between the staff and a school resulting in progress being made for some young people. The integrated work between the care staff and colleagues in Education Psychology was also seen as valuable.

Young people were given opportunities to express their views about their care plans and the development of the service which included the recruitment of staff within the home. It was positively noted that several young people are supported to engage with the Champion's Board where they are able to further contribute to wider service developments for Looked After Children.

The inspector noted that improvements had been made in the frequency of supervision for staff allowing them to reflect on their work and identify learning and development needs.

Staff reported that regular team meetings encouraged them to express their views and contribute to service developments and improvements.

What the Service Could do Better

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. The Inspector noted that there is a need to develop a proportionate and workable system for management to evidence decisions on staffing levels that link to the needs of young people within their care plans (see recommendation 1).

The Inspector noted that the system for assessment, planning and review needed development and streamlining. In some instances staff had been using old formats to record plans and outcomes with further support required to ensure that plans were also clearly outcome focused (see recommendation 2).

Staff should ensure that records of young people's meetings are legible in order that everyone knows what was discussed and agreed.

The Inspector suggested that the Service's Clear Expectation's Policy should be reviewed to reflect current practice within the home.

It was noted that in a small number of instances, the quality of recording supervision sessions was not of a good enough standard meaning that staff did not have access to a clear and accurate discussion. It was also noted that sessional staff did not have access to supervision sessions (see recommendation 3).

Staff fed back to the Inspector that at times there was a lack of consensus about how best to meet some aspects of young people's needs which had resulted in creating some divisions in the team which in turn affected staff morale.

Within this Inspection Report there were 3 Recommendations:

1. In order to meet young people's needs, the provider should regularly review (and document) assessments of staffing levels and deployment over a 24 hour period and implement these accordingly.
2. In order to meet the full range of children's needs the provider should implement a coherent system for planning and review.
3. In order to support staff to develop and improve, the provider should ensure that:
 - i) They receive prompt and accurate records of supervision.
 - ii) Sessional staff have regular opportunities for supervision.

Actions From Recommendations

1. The current assessment of decision making around staffing levels is contained within the planning meeting minutes for each child in regards to the level of risk and needs. In order for this to meet the Inspection recommendation, a tool has been developed that will ensure weekly (or more regular if required) records of assessment of risk and needs and the number of staff required to meet these risk and needs. The Senior Manager will review this with the Manager during regular supervision sessions.

2. A system for planning and review is already in place, however it is recognised that they need to be more outcome-focussed. The Manager will support staff to ensure that regular reviews and planning meetings are in line with best practice guidance and also to develop their understanding of outcome focussed work alongside consultation sessions with the link educational psychologist for each specific child's plan and risk assessment. This work has already begun and will be reviewed by the Senior Manager through monthly supervision sessions.

3. (i) The manager has already met with the wider house management team to ensure that supervision sessions are recorded in a format that accurately reflects the discussions and actions that took place. The Senior Manager will have oversight of the frequency and quality of staff supervision sessions through regular supervision with the team manager.

(ii) Sessional staff are casual workers for the service and are deployed as required within the rota making them different from regular contracted care staff. In order to meet the requirement, opportunities will be given for sessional workers to attend group supervision sessions or individual sessions if required. The Senior Manager will have oversight of the frequency and quality of sessional staff supervision sessions through regular supervision with the team manager.

Further Actions

The team manager will ensure that records of young people's meetings are legible in order that everyone knows what was discussed and agreed as part of the ongoing quality assurance processes already in place within the House. This will be overseen by the Senior Manager through regular updates in supervision.

The service's Clear Expectation's Policy will be reviewed through the Residential Managers meetings chaired by the Senior Manager. A short life working group will be convened to review this policy, consult with young people and provide the managers with a proposed update to be agreed and implemented by the end of April 2019.

A team Development day will be set before the end of March 2019 to develop agreed consensus about how best to meet young people's needs in light of increased understanding of trauma through regular consultation meetings with Educational Psychology. This day, along with regular team meetings and supervision with staff, will address practice inconsistencies as well as issues associated with low morale.

