# ITEM No ...4......

DUNDEE CITY COUNCIL

- REPORT TO: SCRUTINY COMMITTEE 26 APRIL 2023
- REPORT ON: EXTERNAL INSPECTION REPORT ON MILLVIEW COTTAGE
- REPORT BY: EXECUTIVE DIRECTOR OF CHILDREN AND FAMILIES SERVICE
- **REPORT NO: 129-2023**

# 1.0 PURPOSE OF REPORT

1.1 To provide an outline of recent external inspection of Millview Cottage, which over 3 categories of inspection received grades of Good in how well we support children's rights and wellbeing; Good in leaders and staff having the capacity and resources to meet young people's needs and champions their rights; and Very Good in children and young people feeling safe, loved and getting the most out of life. A copy of the full inspection report is attached as Appendix 1.

# 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 to ensure that the areas for improvement are acted upon.

# 3.0 FINANCIAL IMPLICATIONS

and Aftercare Teams.

None.

# 4.0 MAIN TEXT

- 4.1 The inspection was carried out in September 2022 and the grades represent improvements since the last annual inspection, with 5 areas for improvement being met and surpassed. This included the implementation of staff training focused on key areas of learning and development, improved models of supervision, team development, a staff rota informed primarily by the identified needs of young people and skilled and experience of staff, with a model of trauma informed practice now well embedded.
- 4.2 Some further positives included the managers embedding a culture of value and respect which offers everyone a sense of belonging and worth, with a strong drive to meet the aspirations of The Promise. The young people had been well matched to the house and this resulted in a settled home environment. Quality assurance was well planned and established, ensuring the young people's environment, experiences and outcomes are subject to appropriate scrutiny. There were 3 areas for improvement as follows:
  - 1 To support young people's wellbeing and safety, the service should ensure staff are confident in understanding their role in assessing, documenting and managing risk. This should include but is not limited to implementing a model of risk assessment that recognises all aspects of young people's vulnerability and which informs support plans that clearly details how risk will be managed and mitigated. The service has introduced a new risk assessment template and the teams will be trained in foundational aspects of risk assessment, such as identifying risk and protective factors, analysing types and levels of risk, triggers, risk management plans, contingency plans and defensible decision making, in May 2023. To promote a consistent approach, this training will be delivered to staff in the house alongside other relevant teams, such as Adolescent

2 To support positive outcomes for young people, the service should further implement the principles of the promise. This should include but is not exclusive to, developing service aims and objectives that are aspirational and reflect the rights of young people.

The team and young people are currently co-creating an activity room within the cottage which includes visual displays which explicitly outline how they intend to promote the 5 foundations of The Promise. For instance, the implementation of Mind of My Own (MOMO) and support from Who Cares? Advocacy workers in respect of Voice; help to understand a complex legislative landscape in respect of Scaffolding; and support with maintaining contact with brothers and sisters in respect of Family.

3 To optimise young people's experiences, the service should ensure continuous improvement is well informed. This should include but is not limited to review and update the service development plan that reflects stakeholders' feedback and evaluation of quality assurance processes.

In 2023, all the houses will complete a survey with young people to inform the development of their respective improvement plans. The introduction of MOMO will also enable the team to receive routine feedback from young people and adjust support accordingly. This will be further supported by the random audits of Child's Plans, in collaboration with the young people's Social Workers. A new multi-agency 'Family Around the House' partnership has also been developed.

# 5.0 POLICY IMPLICATIONS

This report has been subject to the Pre-IIA Screening Tool and does not make any recommendations for change to strategy, policy, procedures, services or funding and so has not been subject to an Integrated Impact Assessment. An appropriate senior manager has reviewed and agreed with this assessment.

# 6.0 CONSULTATIONS

6.1 The Council Leadership Team were consulted in the preparation of this report.

# 7.0 BACKGROUND PAPERS

Millview Cottage Inspection Report

Audrey May Executive Director

April 2023

# Previous Grades Awarded from Inspections

Quality Theme:		Grading History		
	Nov 2019	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	3 Adequate	4 Good	Not Assessed	
Quality of management and leadership	3 Adequate	5 Very Good	4 Good	
Quality of support for C&YPs wellbeing?	3 Adequate			

The amended report also states we were inspected in 3 categories, but it was 2 and we received one grade 4 and one grade 5.

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Appendix

# Millview Cottage Care Home Service

3 Kings Cross Road DUNDEE DD2 3PT

Telephone: 01382 432 680

Type of inspection: Unannounced

Completed on: 5 October 2022

Service provided by: Dundee City Council

Service no: CS2003000496 Service provider number: SP2003004034



Inspection report

#### About the service

Millview Cottage is a residential care home for up to six young people. It is provided by Dundee City Council and is located close to the centre of Dundee. The location offers good transport links and easy access to a range of shops and community services.

The service provides modern accommodation on one level in six single bedrooms with en-suite facilities. Young people have use of a large sitting room, dining kitchen, activities room, cinema room and meeting room. The home is surrounded by spacious gardens with an outdoor sports area.

#### About the inspection

This was an unannounced inspection which took place on 27 September 2022 between 10:30 and 19:00, and 28 September 2022 between 09:00 and 16:00. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of this service we:

Spoke to young people living in the service and their representatives, including family members.

Spoke with staff and management.

Reviewed survey responses from young people, staff and external professionals.

Observed practice and daily life.

Reviewed documents.

Spoke with visiting professionals.

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# Key messages

Young people benefited from a settled and homely atmosphere.

Positive, trusting relationships were key to keeping young people safe, however, this was not reflected in risk assessments.

The service ensured positive experiences and outcomes for young people through sporting activities and events.

Young people remained connected to those important to them.

Continuous improvement needs to be driven by the aspirations of the promise, evaluation and feedback.

# From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support children and young people's rights and wellbeing?	4 - Good
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Further details on the particular areas inspected are provided at the end of this report.

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# How well do we support children and young people's rights and wellbeing?

We made an evaluation of good for this key question, as there were a number of important strengths, which outweighed areas for improvement.

4 - Good

Young people in the service were protected through supportive and trusting relationships with staff, who felt responsible for their safety and who worked with a range of professionals to ensure this. Some young people were at an age where they were rightly striving for more independence and autonomy and staff were respectful of this. Young people were protected by a team who knew them well and who were confidently aware of the individual risks they faced, however, this was not consistently reflected in risk assessments. (See area for improvement 1).

Young people experienced warm, nurturing care and support. Some young people felt loved. One person told us "Everyone loves me and I'm living my best life". Leaders were passionate culture carriers of the nurture approach, and recent training was beginning to positively impact upon care, where young people were benefitting from a therapeutic approach that was mindful of their past experiences.

Young people's needs were met through individualised approaches which reflected their diversity. The service collaborated effectively with external services to ensure young people's rights were upheld. One professional told us, "Millview provide excellent care, this young person has flourished, and they ensure their voice is heard".

Young people were encouraged and supported to be involved in making decisions affecting them and had confidence in articulating their views, this was enhanced by regular access to advocacy. The service were strong advocates for young people's right to continuing care, and this ensured young people were clear they had choices that included living at Millview if they wished to do so. We asked the managers to consider how best to support staff to effectively maintain relationships with young people who were becoming more independent and spending increasing time away from the service.

Young people were healthy and involved in a wide range of activities and learning. The staff were very encouraging and creative in their approach to this. Young people had meaningful experiences driven by their preferences. Participation and attendance in sports activities and events, ensured young people were encouraged to feel part of their community and experienced new and exciting opportunities. This conveyed a strong message of value and acceptance, which had a positive impact on physical and emotional wellbeing.

Young people were well supported to stay connected to those important to them. Highly sensitive and thoughtful staff ensured young people could navigate the difficult feelings arising from living away from family. One person told us "Millview is a tight knit community, and I am always welcomed, supported and included".

Mealtimes were a positive shared experience where people came together to enjoy home-cooked, healthy meals. Young people could be involved in planning, and cooking, and visitors where appropriate, were welcomed to share these nurturing experiences.

The managers in Millview have embedded a culture of value and respect which offers everyone a sense of belonging and worth. They have a strong drive to meet the aspirations of the promise where young people

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feel loved and consistently experience the cottage as a stable home. To achieve this the service should ensure their aims and objectives and service development plan reflect this. (See area for improvement 2).

Young people living together in the service had been well matched resulting in a settled home environment. We accepted that external managers had a wider responsibility which may result in young people coming to live in Millview, whose needs are less well matched. In these circumstances the managers should be clear and document how all young people's needs will be met in keeping with Care Inspectorate guidance.

Young people's care was supported by staff who were safely recruited, supervised regularly and who had access to training relevant to their role and which reflected the needs of young people. The service was in the process of moving to two wakened staff overnight, but the additional people recently recruited were not yet in post. This meant existing and sessional staff were working additional shifts, at times sleeping over. We discussed the need to monitor this and ensure young people's experiences of care were consistently positive.

Quality assurance was well planned and structured with external mangers holding an overview. This ensured young people's environment, experiences and outcomes were subject to appropriate scrutiny. These processes were now well established; however, the service should ensure that the analysis and evaluation gained from audit as well as stakeholder feedback should drive continuous improvement and ensure young people receive the best possible care.

# (See area for improvement 3).

Since the last inspection, managers have managed the challenges of the pandemic and used the restrictions to strengthen the team, invest in training and implement a model of practice that ensured young people experience a consistent, high standard of care

#### Areas for improvement

 To support young people's wellbeing and safety, the service should ensure staff are confident in understanding their role in assessing, documenting and managing risk. This should include, but is not limited to, implementing a model of risk assessment that recognises all aspects of young people's vulnerability, and which informs support plans that clearly details how risk will be managed and mitigated.

#### This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20).

To support positive outcomes for young people, the service should further implement the principles of the promise. This should include but is not exclusive to, developing service aims and objectives that are aspirational and reflect the rights of young people.

#### This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I get the most out of life because the people and the organisation who support and care for me have an enabling attitude and believe in my potential' (HSCS 1.6).

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3. To optimise young people's experiences, the service should ensure continuous improvement is well informed. This should include but is not limited to, review and update of the service development plan that reflects stakeholder feedback and evaluation of quality assurance processes.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

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# What the service has done to meet any areas for improvement we made at or since the last inspection

# Areas for improvement

#### Previous area for improvement 1

In order to keep young people safe and promote their wellbeing, the provider should improve recording and monitoring of bullying in the service.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20).

#### This area for improvement was made on 26 July 2019.

#### Action taken since then

The service provided training to staff, updated their policy and procedures and embedded protection concerns into their model of supervision

#### Previous area for improvement 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.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11

#### This area for improvement was made on 26 July 2019.

#### Action taken since then

An action plan was implemented following inspection. Staff consultation informed this process and changes in senior roles within the service effected change.

#### Previous area for improvement 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.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19

#### This area for improvement was made on 26 July 2019.

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#### Action taken since then

The new registered manager, with support from her leadership team, has implemented a well planned and organised timetable of quality assurance activity that encompasses all aspects of care, environment and experiences.

#### Previous area for improvement 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.

This is to ensure that care and support is consistent with the Health and Social Care Standards, which state 'My needs are met by the right number of people' (3.15).

#### This area for improvement was made on 26 July 2019.

#### Action taken since then

Staff rotas are controlled by senior staff and devised primarily by identified need of young people, skill and experience of staff and an ongoing assessment of young people's requirements.

#### Previous area for improvement 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.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state that 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14) and 'My care and support is consistent and stable because people work together well' (HSCS 3.19).

#### This area for improvement was made on 26 July 2019.

#### Action taken since then

Through training, team development and robust support and supervision the nurture model is now well embedded in practice. Collaboration with Educational Psychology evaluates practice and informs how the model should be individualised to meet each young person's needs.

#### Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

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# Detailed evaluations How well do we support children and young people's rights and wellbeing? 4 - Good 7.1 Children and young people are safe, feel loved and get the most out of life 5 - Very Good 5 - Very Good 7.2 Leaders and staff have the capacity and resources to meet and champion children and young people's needs and rights 4 - Good

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