

ITEM No ...5.....

REPORT TO: SCRUTINY COMMITTEE – 4 DECEMBER 2024

REPORT ON: CRAIGIE COTTAGE

REPORT BY: EXECUTIVE DIRECTOR OF CHILDREN AND FAMILIES SERVICE

REPORT NO: 341 - 2024

1.0 PURPOSE OF REPORT

- 1.1 This report follows Committee Report Number 124-2024 and provides an update on the second Care Inspectorate inspection of Craigie Cottage since the house was opened in September 2023. The inspection was published on 2 May 2024 (Appendix 1).

2.0 RECOMMENDATION

- 2.1 It is recommended that the Scrutiny Committee notes the contents of this report and remits the Executive Director to continue to provide a summary of progress following the return to now routine annual Care Inspectorate inspections.

3.0 FINANCIAL IMPLICATIONS

- 3.1 None.

4.0 BACKGROUND

- 4.1 The Scrutiny Committee is aware from the previous report that Craigie Cottage opened in August 2023 to replace Fairbairn Street Children's House. The house was originally to be approved by the Care Inspectorate to care for young people over the age of 12 years.
- 4.2 Following a review of the age profile and needs of children and young people at risk of or in external residential care, the house was repurposed to provide short to medium term residential care for 6 younger children aged between 6 and 12 years.
- 4.3 Soon after being opened, the house was inspected by the Care Inspectorate. Whilst only 3 children were in the house, there were several staff absences carried over from the former team and a planned development programme had not yet been fully implemented.
- 4.4 The inspector acknowledged that the house was a new provision and was very clear that there were strong signs of early progress just 2 weeks after opening. They identified some key strengths, including:
- 4.4.1 External managers had a strong vision for the service and developed a model of quality assurance to measure key areas of performance.
- 4.4.2 Crucial insight into each child's experiences, strengths and stage of development had been shared prior to their arrival.
- 4.4.3 Family views had been sought and this strengthened the children's sense of belonging to the house.
- 4.4.4 Connections to family were recognised as important and were being safely supported by external Social Workers.
- 4.4.5 Staff demonstrated a desire and commitment to provide safe care and children had access to familiar, consistent adults outside the service.

4.5 However, in the context of some team capacity issues and confidence relating to the care and support of younger children, the inspector issued an overall grade of Weak. They outlined 4 requirements and 3 areas for improvement to be met by 28 February 2024.

4.6 These encompassed requirements and areas for improvement on staffing levels, up to date risk assessments, approaches towards restraint, staff training, matching/admissions, links with external services, the provision of age-appropriate experiences and self-evaluation.

5.0 **RETURN INSPECTION**

5.1 On returning to Craigie Cottage 7 months later in April 2024 to carry out a further inspection, the inspector concluded that all 4 requirements and 3 areas for improvement had been met within timescales.

5.2 The inspector evaluated Leadership and Staff Capacity as Good and Children and Young People Feeling Safe, Loved and Getting the Most Out of Life as Adequate, with an overall finding of Adequate based on the grading methodology. They noted:

5.2.1 External managerial oversight ensured that all staff were supported to understand their role in implementing national protection guidance and best practice.

5.2.2 Leaders in Craigie Cottage were highly committed to ensuring children were cared for by a well-trained team who consistently delivered the best standards of practice.

5.2.3 The team had become much more skilled in pre-empting risk and using skilled practice to distract and divert children's focus.

5.2.4 A growing understanding of the impact that children's experiences can have on their development led to most staff understanding that behaviour is a communication.

5.2.5 Matching and staffing were routinely considered, and a layered model of audit meant children's experiences and outcomes were being monitored and evaluated.

5.3 The house had therefore made good progress but inter-related concerns about unrepaired damage to the environment at the time of the inspection and some inconsistent staff recognition of and responses to escalating risk affected the overall grade.

5.4 The inspector therefore issued 1 requirement relating to the minimisation and timely repair of damage, alongside 2 areas for improvement relating to guidance on assessing the likelihood and impact of risks and staff confidently recognising signs of risk and when to intervene.

5.5 The team has since continued to implement improvements and almost all damage has been repaired and decorative change carried out, with a small number of repairs due to be completed by 30 September 2024. The team has been trained in risk assessments and de-escalation.

5.6 As such, the house will now return to the routine annual inspection regime and the next inspection is anticipated to occur in early summer 2025. The external leadership team and house managers will continue to provide support which builds on improvements and strives to excellent care.

6.0 POLICY IMPLICATIONS

- 6.1 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.

4.0 CONSULTATIONS

- 7.1 The Council Leadership Team have been consulted in the preparation of this report and are in agreement with its content.

8.0 BACKGROUND PAPERS

- 8.1 None.

Audrey May

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Glyn Lloyd

Head of Children Services
Chief Social Work Officer

November 2024

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APPENDIX 1



Craigie Cottage Care Home Service

Craigie Cottage
25 Southampton Road
Dundee
DD4 7PN

Telephone: 01382 436 563

Type of inspection:
Unannounced

Completed on:
2 May 2024

Service provided by:
Dundee City Council

Service provider number:
SP2003004034

Service no:
CS2003000483



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Inspection report

About the service

Craigie Cottage is a residential care home for children and young people and has six registered places. The service is provided by Dundee City Council and the aims and objectives set out to provide a short to medium term residential placement for children under thirteen.

The house is a large, detached property, set out over one floor, with six en-suite bedrooms. There is a large living room, kitchen and dining room and there are additional social spaces that can be used flexibly for a range of activities. The house has a large, enclosed garden to the rear. The service is located in a residential area close to the centre of Dundee. The service is close to local amenities and benefits from nearby transport links.

About the inspection

This was an unannounced inspection which took place on 29 and 30 April and 01 May 2024. 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 the service we:

- spoke with all the people using the service and some of their representatives;
- spoke with staff and management;
- observed practice and daily life;
- reviewed documents;
- spoke with visiting professionals.

The provider of this service is a corporate parent, with statutory responsibilities to look after and accommodate children. This may mean that the duty to care for children and young people on an emergency basis, or with highly complex needs, is their highest safeguarding priority.

In these circumstances our expectations, focus on outcomes and evaluations remain identical to those of all other providers. We may, however, provide some additional narrative in the body of the report to reflect the impact of these duties, should it be relevant to this particular service.

Key messages

- Staff prioritised the safety of children but some needed to develop confidence in preventing incidents from escalating.
- Children were safer as a result of the shared responsibility with key professional partners.
- Children's care was warm, nurturing and fun and based on a good understanding of trauma and attachment.
- Children's therapeutic care was compromised by high levels of environmental damage and the cottage was not experienced as a homely space to live.
- Since the last inspection leaders and staff had made significant improvements in all aspects of practice.

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?	3 - Adequate
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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?

3 - Adequate

Overall, the children living in Craigie Cottage were safe the majority of the time. All staff were clear in their responsibility to protect the children in their care and the team had become much more skilled in pre-empting risk, and using skilled practice to distract and divert children's focus into more positive choices. Experienced staff modelled confident and assertive practice when some children were communicating their need for emotional and physical containment and during the inspection we acknowledged this was still an area of developing practice for some staff. Leaders accepted the need to ensure the children had consistent and proportionate responses to risky behaviour and were committed to supporting staff to compassionately but confidently intervene to prevent significant escalation in risks.

A strengthened network of professional partners was ensuring a more joined up approach to protecting children, who all benefited from access to a wide range of adults external to the service including advocacy. This partnership approach was meaningfully contributing to the children's experience of care and protection and children were safer as a result. External managerial oversight ensured that all staff were supported to understand their role in implementing national protection guidance and best practice, and based on one case example, we reiterated the need to follow the robust policy and practice guidance that was in place to ensure that roles and responsibilities in investigation of protection concerns are clearly adhered to.

Since the last inspection, the staff were working hard to ensure the children benefited from a therapeutic and stable experience of care, that was informed by a good understanding of trauma, attachment and child development. An emphasis on routines and daily plans was ensuring that children's need for adults to create predictability was recognised and responded to. Children were being skilfully supported to manage difficult emotions and staff use of de-escalation and distraction techniques, was successfully minimising the likelihood of incidents. However, this skilled practice needed to extend to recognising when risks were likely to rise, and where prompt staff intervention was crucial in ensuring children felt safe and emotionally contained. In recognition of the potential impact this can have on children's sense of safety and containment, we made an area for improvement. (See area for improvement 1).

Children were cared for with warmth, fun and nurture and the meaningful connections with key staff meant children felt valued. One person told us they had great fun with many of the staff who helped them all the time. A growing understanding of the impact that children's experiences can have on their development, led to most staff understanding that behaviour is a communication. This meant the majority of the caring team could offer a compassionate and caring approach when behaviour became challenging. The team recognised their role in supporting children to build their resilience and make positive choices and play was understood to be crucial to children's positive development. However, the environment was not conducive to this trauma informed, nurturing practice. The high levels of destruction within the cottage, as a result of incidents, was extensive and posed a threat to the safety of children, and whilst the staff tried to ensure environmental risks were addressed, we were concerned that the level of damage was significant and needed to be addressed without delay, thus we made a requirement. (See requirement 1).

Since the last inspection the service had developed a culture, where getting up and going to school was a routine part of the day and children's development was now supported as a result of accessing education that was tailored to their needs. Their hobbies and interests were embraced and children were encouraged to try new things. This meaningfully contributed to growing self esteem and the children took pleasure in sharing their achievements. Personal plans and risk assessment had significantly improved since the last inspection and we saw some good examples of how children were being supported to maximise their

potential. However, whilst risk was being continually assessed to reflective of changing need, the process needed further development to ensure all the caring adults had more specific guidance on how to support children in situations that presented the highest risk, including when to notify the Care Inspectorate of incidents, thus we made an area for improvement.

(See area for improvement 2) .

The leaders in Craigie Cottage were highly committed to ensuring children were cared for by a well-trained team who consistently delivered the best standards of practice. Clear leadership roles and responsibilities and strong external oversight had led to meaningful improvements and positive outcomes for children.

Matching was well considered in the context of the provider's statutory duty to care for children, at times on an emergency basis, and where possible, transitions were well planned at a pace that was driven by a good understanding of the children moving in and out of the service. Staffing needs were now routinely considered as part of new children arriving and this ensured that their needs could be met by a team who were well trained.

A layered model of audit and quality assurance meant children's experiences and outcomes were being monitored and evaluated by a number of people and demonstrated a commitment to ensuring children received the best possible care. During the inspection we identified examples of how some principles of The Promise were evident in practice and we felt confident that managers would integrate this more robustly in to their ongoing plans and vision for the service.

Requirements

1. By 30 September 2024, the provider must ensure that children are cared for in an environment that is safe and supports their development and wellbeing.

To do this the provider must, at a minimum:

- a) robustly make safe all damaged windows and doors;
- b) ensure that an assessment of risk is undertaken to prioritise repair of all damage;
- c) ensure that an environmental review is undertaken and a clear plan devised, to minimise further damage and develop a house that reflects the developmental needs of the children living there.

This is to comply with Regulation 4(1)a of The Social care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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

'My environment is secure and safe '(HSCS 5.19) and

'The premises have been adapted, equipped and furnished to meet my needs and wishes'(HSCS 5.18)

Areas for improvement

1. To promote children's safety and sense of wellbeing, the service should ensure that all staff can confidently recognise signs of escalating risk and when to intervene in incidents.

Inspection report

This should include but is not limited to, providing reflective opportunities for the team to consider thresholds of risks and through post incident debrief, consider if intervention was timely and proportionate.

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

'I am protected from harm because people are alert and respond to signs of significant deterioration in my health and wellbeing, that I may be unhappy or may be at risk of harm' (HSCS 3.21)

2. To support children's safety and wellbeing, the service should ensure that risk assessments further develop to ensure all staff have clear guidance when managing and responding to risks.

This should include but is not limited to, accurately detail the likelihood and impact of specific risks, with clearly defined strategies, and responsibilities of what people should do and when. This should include when to notify the Care Inspectorate.

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

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

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 28 February 2024 the provider must ensure that there is effective support available at all times to keep young people safe.

To do this, the provider must, at a minimum:

- a) provide safe staffing levels at all times, clearly determined by individual needs of young people;
- b) ensure risk assessments and care plans are up to date and accurately reflect the needs of the young people.

This is in order to comply with: Regulation 3 of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This is to ensure care and support is consistent with 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).

This requirement was made on 5 October 2023.

Action taken on previous requirement

Senior management team undertaking a weekly staffing needs assessment alongside a monthly prediction of need. This is informed by the changing risks and needs for each young person and in addition a weekly staffing schedule that documents all planned activities, further informs staffing numbers.

Met – within timescales

Requirement 2

By 28 February 2024 the provider must ensure that the use of restraint follows best practice at all times to keep young people safe.

To do this, the provider must, at a minimum:

- a) ensure all staff are trained in a model of restraint that effectively considers children's age and stage of development;
- b) ensure all incidents of restraint are clearly documented, reported to relevant others and a process of analysis is implemented to support safe reduction of restraint practice.

To be completed by: 28 February 2024.

This is in order to comply with: Regulation 4 of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This is to ensure care and support is consistent with Health and Social Care Standards (HSCS) 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).

This requirement was made on 5 October 2023.

Action taken on previous requirement

Staff now trained in CALM. Residential resource worker undertakes a daily review of all incidents to ensure they are documented and the relevant people have been informed and debriefs taken place.

Met - within timescales

Requirement 3

By 28 February 2024 the provider must ensure that children and young people receive support from staff that have the required skills and training.

To do this, the provider must, at a minimum:

- a) implement staff learning and development plans that reflect the known and anticipated needs of the children and young people;
- b) ensure consistent quality assurance processes to monitor competency;

To be completed by: 28 February 2024

This is in order to comply with: Regulation 15(b)(i) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) 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).

This requirement was made on 5 October 2023.

Action taken on previous requirement

The service has implemented a range of activities that determine the needs of staff, including supervision and development sessions. External partners have provided trauma training, practice coaching and observation of practice sessions. Mandatory training is now clearly defined and compliance monitored. A

comprehensive quality assurance programme has been implemented and there is robust external manager oversight in place.

Met - within timescales

Requirement 4

By 28 February 2024 the provider must ensure that the staff can safely and effectively support newly admitted children

To do this, the provider must, at a minimum:

a) ensure that the matching and admissions process clearly assesses, records and plans how they will meet new and existing children's needs.

This is in order to comply with: Regulation 4 of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

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

'I experience stability in my care and support from people who know my needs, choices and wishes, even if there are changes in the service or organisation'. (HSCS 4.15).

This requirement was made on 5 October 2023.

Action taken on previous requirement

Senior management within the organisation have taken responsibility to ensure, where possible, the timing of young people arriving into the service, considers the needs of all young people. Admissions are planned and risks and needs considered.

Met - within timescales

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

To support children and young people's health and wellbeing, the provider should ensure they have effective links with professionals external to the service.

This should include but is not exclusive to, developing professional links to proactively address barriers to healthcare, education and specialised support, and to seek consultation from relevant trained professionals

to promote positive outcomes and reduce likelihood of harm.

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

'My care and support is consistent and stable because people work well together.'
(HSCS 3.19).

This area for improvement was made on 5 October 2023.

Action taken since then

The service has developed a network of external partners that reflects the wide range of needs of the young people living in Craigie Cottage.

Previous area for improvement 2

To support children and young people's development, the provider should ensure children have age appropriate experiences.

This should include but is not exclusive to ensuring the practice and rules of the house support children to make safe friendships

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

'I can be with my peers, including other people who use the service, unless this is unsafe and I have been involved in reaching the decision'. (HSCS 1.11).

'As a child, I can direct my own play and activities in the way that I choose, and freely access a wide range of experiences and resources suitable for my age and stage, which stimulate my natural curiosity , learning and creativity' (HSCS 2.27).

This area for improvement was made on 5 October 2023.

Action taken since then

The service has supported young people to engage in a wide range of activities, particular to their own interests, which has promoted opportunities to develop confidence and have fun.

Previous area for improvement 3

To ensure young people receive the best care possible, the provider should develop effective quality assurance and self evaluation measures that promote safe and effective care.

This should include, but is not exclusive to managers having robust oversight of all incidents including restraint, ensuring risk assessments and care plans reflect children and young people's needs and have specific and developmentally appropriate strategies in place.

This is to ensure 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 my organisation having robust and transparent quality assurance processes.' (HSCS 4.19).

This area for improvement was made on 5 October 2023.

Action taken since then

The service has implemented a comprehensive programme of quality assurance that monitors and evaluates key process that are relevant to positive outcomes for young people which includes audit of care plans, risk assessments, incidents and medication.

Complaints

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

Detailed evaluations

How well do we support children and young people's rights and wellbeing?	3 - Adequate
7.1 Children and young people are safe, feel loved and get the most out of life	3 - Adequate
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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APPENDIX 2

Children and Young Person's House Inspection Findings 2021-24				
Young Person's House	2021	2022	2023	2024
Gillburn Cottage		Good		
The Junction		Good and Very Good	Very Good	
Drummond & Foresters House		Adequate and Good	Good	
Millview Cottage		Good		
Fairbairn/Craigie Cottage	Good		Weak	Adequate and Good

NB

The Care Inspectorate annual inspection programme was disrupted by the Covid-19 pandemic and did not re-commence in full until 2022. Only 1 house has so far been inspected in 2024.

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