

**ITEM No ...2.....**

**DUNDEE CITY COUNCIL**

**REPORT TO: SCRUTINY COMMITTEE**

**REPORT ON: EXTERNAL INSPECTION REPORT FOR WHICH ALL GRADES ARE GOOD OR BETTER**

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

**REPORT NO: 346-2015**

**1.0 PURPOSE OF REPORT**

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 Gillburn Road Residential Respite Unit, Millview Cottage and The Junction, all 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 Services 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 Three summary reports are included from the Children's Residential Service. The areas for improvement listed below will be actioned for all the regulated residential services in Children's Services.
  - This last year has seen the introduction of a new Inspector therefore the grades reflect a different emphasis on the same four themes inspected. This has been helpful and challenging, but sits within our agenda of continuous improvement.
  - The main area for improvement relates to our Looked After children. This is an action point for all children's services so all children and young people will have a Wellbeing Wheel completed at the point of assessment and intervention. When completed these will provide the baseline for measuring progress and outcomes when the young person receives residential care.

- The second improvement area is the recommendation to find an audit tool to consistently monitor the safe administration of Medication. A review of the medication policy has since been completed by a multi-disciplinary group and an audit tool has been initiated for use in all the residential houses. The Management Team is currently planning further training for all staff to ensure consistent and effective management of staff practices.
- Copies of the inspection reports have been passed to the Administration and Opposition Group Leaders and to the Conservative, Liberal Democrat and Independent members.

## **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**

- Millview Cottage
- The Junction
- Gillburn Road short Breaks Service

Michael Wood  
Executive Director  
Children and Families Service

DATE:

CSHEADOFSERVICE/SWCOMM/residential\_houses

<b>Inspection of:</b> Millview Cottage				
<b>Inspection by:</b> Care Inspectorate				
<b>Grades:</b> <b>Theme</b>	<b>Latest Grade Awarded</b>	<b>Grading History</b>		
		<b>Jan 2014</b>	<b>Feb 2013</b>	<b>October 2012</b>
Quality of care and support	4 Good	5 Very Good	5 Very Good	5 Very Good
Quality of environment	5 Very Good	5 Very Good	5 Very Good	N/A
Quality of staffing	4 Good	4 Good	5 Very Good	N/A
Quality of management and leadership	4 Good	5 Very good	4 Good	N/A

**Summary:**

There were no outstanding requirements or recommendations from the previous inspection.

**What the Service Does Well**

**Overall**

The service supports young people to exercise choice and achieve positive outcomes. The service provides a commitment to continuous improvement. There are positive relationships between young people and staff. One comment from a stakeholder suggested that Millview staff had worked collaboratively with the young person and Social Work Department in planning and advancing the young persons plan. One stakeholder fed back that they were impressed by the skills and knowledge of workers in relation to developmental stage and theories.

**Quality of Care and Support**

In this theme there was good evidence that the young people had a say in various aspects of their day to day lives; for example they had been consulted before the Manager made a decision about an SVQ assessor completing a short placement there. Also overall, staff had positive and nurturing relationships with young people.

**Quality of Environment**

The inspection highlighted that the service always covered Health and Safety issues at staff meetings, there was no area for improvement in this indicator and the service was advised to maintain these high standards

**Quality of Staffing**

The service had many strengths including encouragement to be reflective in practice and the service offered good training opportunities.

**Quality of Management and Leadership**

The Manager maintained an oversight of young people's meeting records and followed these up to ensure action was taken in response to comments and suggestions.

**Areas for Improvement:**

There were no requirements made.

- The inspection highlighted some weaknesses in the process for managing medication creating the potential for error, some human error was found in terms of misspelling and staff not copying correctly the label or prescription, see below under recommendation.
- The Inspector wanted a more outcome-focussed assessment and plans. A new template for recording and evidencing outcomes has been implemented across the service, this is in line with Integrated Children's Services commitment to the single child's plan and is fully embedded within the principles of GIRFEC and aims to identify action and outcome areas based on the SHANARRI well-being indicators.
- Staff had not had consistent planned supervision in the 12 months preceding the inspection, as this was already being actioned by the manager it was not given as a recommendation. It was however advised that a more effective monitoring system for supervision would be of benefit. This is an ongoing action point and this lack of supervision was being addressed prior to the inspection, there have been staffing issues but these have now been fully addressed and the movement of senior staff throughout the Residential Service will further address the supervision structure and performance that caused the previous difficulties.
- Staff have taken time to consider team building opportunities and the manager has encouraged a more open discussion forum so that issues can be raised and discussed at team level.

**Within this Inspection Report there was 1 clear Recommendation:** *The provider should ensure that staff keep young people safe by managing their medication effectively and in accordance with best practice. This may require further training to improve staff's understanding.*

- The medication recommendations have been discussed and actioned across the residential service with the introduction of an audit tool. Strategies to address human error have also been discussed and agreed service wide.

<b>Inspection of:</b> The Junction				
<b>Inspection by:</b> Care Inspectorate				
<b>Grades:</b> <b>Theme</b>	<b>Latest Grade Awarded</b>	<b>Grading History</b>		
		<b>Jan 2014</b>	<b>Feb 2013</b>	<b>October 2012</b>
Quality of care and support	4 Good	5	4	4
Quality of environment	5 Very Good	5	5	5
Quality of staffing	4 Good	5	5	2
Quality of management and leadership	4 Good	5	5	5

**Summary:**

There were no outstanding requirements or recommendations from the previous Inspection

**What The Service Does Well**

**Overall**

Despite the grades being lower than the previous year, the service is described as a well-performing service that provides safe effective and nurturing care for young people. We would highlight some excellent comments from service users and stakeholders who advised they *“felt safe and treated with respect and as an individual”, “satisfied with the child centred, accommodating and flexible approach taken when looking after young people”*. The inspection report highlighted that the service has a commitment to continuous improvement

**Quality of Care and Support**

The Inspector noted the positive relationships that existed between young people and staff which provided the foundation for young people to exercise choice and influence the service they received. It also noted a particularly good piece of practice was young people playing an active part in welcoming newcomers to the home and acting as a mentor in the transitional phase to help them settle in.

**Quality of Environment**

The staff supported young people to understand the potential risks associated with the use of the internet and social networking sites.

**Quality of Staffing**

The staff had advised that they felt supported, that their views were valued by Managers, that they enjoyed their work and were motivated to do their best for young people. This was confirmed by a stakeholder comment which said *“the staff within the Junction all appear to like their jobs and care about the children they work with”*.

**Quality of Management and Leadership**

The external Manager made regular visits to the home to satisfy that the young people were receiving the appropriate care and support seen as a safeguard for young people and in keeping with the national guidance for the External Management of Residential Child Care Establishments (June 2013)

**Areas for Improvement:**

There were no requirements made

- It was recommended that the service review some aspects of medication management, see below recommendation.
- That the service continued to develop more outcomes focussed plans to reflect National Guidance. A new template for recording and evidencing outcomes has been implemented across the service, this is in line with Integrated Children's Services commitment to the single child's plan and is fully embedded within the principles of GIRFEC and aims to identify action and outcome areas based on the SHANARRI well-being indicators.
- The service must improve the frequency of planned staff supervision. This has been addressed by a re-organisation of the supervising structure within the establishment
- The Service needs to make sure that all our young people know about National Care Standards. The young people will have the discussion with keyworkers around their expectations and the National care standards.

**Recommendation 1:** *The provider should ensure that processes for managing medication meet best practice guidelines and reduce the likelihood of error.*

- The medication recommendations have been discussed and actioned across the residential service with the introduction of an audit tool. Strategies to address human error have also been discussed and agreed service wide.
- Medical records will now record immunisations and staff will now make use of best practice guidance in terms of the administration of medication. Medical records held will now be discussed in conjunction with the LAAC Nurse in terms of the initial medical and the information they hold for the young person. This will be incorporated into our admissions checklist procedure.

**Recommendation 2:** *The provider should ensure that all care staff have regular, planned opportunities for supervision.*

- The service has since improved the frequency of planned staff supervision. This has been addressed by a re-organisation of the supervising structure within the establishment. A quality assurance framework has been established for the recording and evidencing of this and this will be monitored on an ongoing basis by the external manager.

**Recommendation 3:** The provider should ensure that the manager or senior staff member undertakes regular audits of practice in management of medication.

- As previously highlighted the medication recommendations have been discussed and actioned across the residential service with the introduction of an audit tool. This now sits as part of an agreed Quality Assurance Framework across our service, senior staff audit medication weekly and the House Manager audits monthly. Strategies to address human error have also been discussed and agreed service wide.

<b>Inspection of:</b> Gillburn Road Short Break House				
<b>Inspection by:</b> Care Inspectorate				
<b>Grades:</b>  <b>Theme</b>	<b>Latest Grade Awarded</b>	<b>Grading History</b>		
		<b>Mar 2013</b>	<b>Feb 2012</b>	<b>Nov 2010</b>
Quality of care and support	4 Good	5 Very Good	5 Very Good	5 Very Good
Quality of environment	5 Very Good	5 Very Good	5 Very Good	N/A
Quality of staffing	5 Very Good	5 Very Good	N/A	N/A
Quality of management and leadership	5 Very Good	5 Very Good	N/A	N/A

**Summary:**

The inspection report did not comment on any outstanding recommendations or requirements since the last inspection.

**What The Service Does Well**

**Overall**

The Service had a commitment to listening to the views of children and their parents and carers and provided a flexible service to meet their individual needs. The Service had a caring and committed staff team. The Service also provided a safe and suitable environment.

Feedback from service users and stakeholders, gave the Service ten out of ten as it was a safe building where staff were very competent. Stakeholders found the Service to be responsive and adaptable to best meet the needs of young people and their families.

**Quality of Care and Support**

The inspector found that there existed positive relationships between the staff and the children and the staff's knowledge of the child's personalities and needs provided the foundation for children to influence their stay, for example meals and routines.

**Quality of Environment**

The Manager maintained the maintenance and safety records in very good order to provide ready access and up to date information. The Inspector's only comment in this quality statement was that the service continue to maintain these high standards.

**Quality of Staffing**

The Inspector wrote that she was pleased to note that observations of staff indicated they were caring and patient with young people. They made good use of humour and spoke positively and affectionately about the young people. Staff had regular and planned supervision. Again the Inspector advised the Service to continue to maintain these high standards.

**Quality of Management and Leadership**

Staff meetings and supervision provided opportunities for staff to express their views and contribute to service improvement and identify their learning and development needs.

**Areas for Improvement:**

There were no requirements made

- We need to continue to develop more outcome-focussed plans to reflect national guidance.
- We should routinely ask parents and carers and children where appropriate to sign their personal plans and risk assessments.
- A Social Worker would like the Service to provide more frequent reports when a link is at its early stages.
- The Inspector recommended that the Service should ensure a suitable record of key discussions , assessments and decisions relating to the children using the Service
- Incident records did not include any comments by the Manager as to whether the incident was managed appropriately and the need for review.

**Within this Inspection Report there was 1 clear Recommendation:** *The provider should ensure that staff maintain a suitable record of key discussions, assessments and decisions relating to children using the service, including reviews of personal plans and child protection or welfare concerns. This is aimed at reducing the likelihood of error, misunderstanding and failings in communications and information, and can promote effective involvement of parents, carers and children in important decisions.*

- Providing more outcome focussed reports is a theme across all the residential services. Across Children's Services it has been the target for improvement in terms of the completion of wellbeing wheels and SHANARRI Indicators. These improvements will provide more baseline information which can be used in the residential service to evidence progress.
- The signing off of documents will be an area covered at future reviews/planning meetings. The team will also provide more regular feedback to workers when links are progressed.
- The service will look at the current recording systems and quality assure the information being recorded to confirm its accuracy and if it lends itself to an audit trail where decisions have been made or changes to care plans have been made.