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

DUNDEE CITY COUNCIL

REPORT TO: SCRUTINY COMMITTEE - 26 APRIL 2023

REPORT ON: EXTERNAL INSPECTION REPORT FOR GILLBURN HOUSE

REPORT BY: EXECUTIVE DIRECTOR OF CHILDREN AND FAMILIES SERVICE

REPORT NO: 127-2023

1.0 PURPOSE OF REPORT

To provide a summary of recent external inspection carried out by the Care Inspectorate on Gillburn House Young People's Home. The inspection covered two areas of inspection of firstly children and young people being safe, feeling loved and getting the most out of life, which was graded as Good. Secondly, of leaders and staff having the capacity and resources to meet and champion children and young people's needs and rights, which was also graded as Good. A copy of the inspection report is attached as Appendix 1.

2.0 RECOMMENDATIONS

It is recommended that members:

- 2.1 Note the attached inspection report on Gillburn House, which in both categories of inspection received grades of Good.
- 2.2 Remit the Executive Director of Children and Families to ensure that the areas for improvement are acted upon.

3.0 FINANCIAL IMPLICATIONS

None.

4.0 MAIN TEXT

4.1 The inspection took place in October 2022 and found there were a number of important strengths, including young people in Gilburn House being protected and cared for by a skilled staff team who knew them well and who worked effectively with a wide range of key professionals to ensure their safety. This was balanced with an enabling approach, whereby young people were supported to take positive risks and assume greater independence. There was a warm, caring and respectful atmosphere within the house.

Young people were encouraged to makes choices and there were many examples of skilful support that ensured young people could communicate their needs and express their views. Where young people had the ability to make choices about their future they were fully informed of their rights and for those where this was not possible, arrangements were in place to ensure their legal and human rights were central to decision making. This was reflected within the physical environment which was equipped to be fully accessible.

4.2 The inspection recognised that the previous area for improvement, that the house should improve the quality of personal plans to meet young people's needs more effectively, was met. Leaders within the service have implemented an outcome focussed model of care planning for all young people. The team have been supported to understand specific, measurable, achievable, realistic and timebound (SMART) goals and care planning is now a routine focus in team meetings and supervision. Three new areas for improvement were:

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 the foundational aspects of risk assessment, such as identification of 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 all the houses alongside other relevant teams, such as the Adolescent and Aftercare teams.

To support positive outcomes for young people and ensure they regularly get the most out of life, the provider should undertake a review of the current staffing levels within Gilburn House to ensure staffing levels safely enable this.

At the time of the inspection, a new waking nights rota was being introduced to ensure 2 staff were available to provide support every night. This required additional staff and following some initial recruitment difficulties, the staffing rota has now been increased by 2 and augmented by increased casual cover. To flexibly respond to any increases in risk, as part of a one team approach the Service Manager is also supporting each of the houses to appropriately deploy staff across the houses.

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.

The team has consulted the young people on improvements to their personal rooms and on activities and will be consulting with parents, carers and the wider partnership, such as Kingspark School and NHST services, on improvement plans. The Service Manager is also carrying out routine audits of plans, including in the context of young people's transitions to adulthood in terms of whether they remain in the house or receive alternative support as a young adult.

5.0 POLICY IMPLICATIONS

5.1 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.

6.0 CONSULTATIONS

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

7.0 BACKGROUND PAPERS

Gillburn House Inspection report 2023

Audrey May Executive Director

Last inspection grades November 2019

1.1 Children and young people experience compassion, dignity and respect
5 - Very Good
1.2 Children and young people get the most out of life 5 - Very Good
1.3 Children and young people's health benefits from their care and support
they experience
4 – Good
5.1 Assessment and care planning reflects children and young people's needs
and wishes
3 - Adequate

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Gillburn House Care Home Service

Gillburn House Gillburn road Dundee DD3 OAB

Telephone: 01382 436 580

Type of inspection: Unannounced

Completed on: 1 November 2022

Service provided by: Dundee City Council

Service no: CS2003000495 Service provider number: SP2003004034



Inspection report

About the service

Gilburn House is a care home situated in a residential area of Dundee. It is close to local shops, transport links and a wide range of community services. The service provides care for up to 4 children and young people with disabilities.

The premises consist of a single storey detached building with large, private outside space. The home has four single rooms and young people have access to an open-plan living and dining area, assisted bath and shower rooms, sensory room, kitchen and laundry.

About the inspection

This was an unannounced inspection which took place on 25 October between 10:00 and 19:00, and 26 October between 09:00 and 17:00. 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

- A skilled and committed staff team worked well with a wide range of external professionals to meet the health needs of young people.
- Physical care of young people was carried out to a high standard.
- Staffing levels prevented some young people having consistent access to experiences out with the home.
- The current model of risk assessment does not adequately capture the needs and vulnerabilities of the young people.
- · Leaders in the service were aware of aspects of the service which required improvement.

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?

4 - Good

We made an evaluation of good for this key question, as there were a number of important strengths, which outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a positive impact on the young people's experiences.

Young people in Gilburn House were protected and cared for by a skilled staff team who knew them well and who worked effectively with a wide range of key professionals to ensure their safety. This was balanced with an enabling approach to young people taking positive risks. Where appropriate and safe, this led to increasing independence. One young person told us 'I can go out on the bus on my own to places that are important to me, but I have to let the staff know'.

Young people experienced trusting relationships and a stable environment, where most staff were confident in their safeguarding role; thus, incidents of restraint were rare. However, the current local authority model of risk assessment used within the house, was not comprehensive enough to effectively evaluate a wide range of young people's vulnerabilities. Although highly committed to supporting all young people, this was not consistently informed by a shared understanding of perceived risk. (See area for improvement 1).

Young people enjoyed warm, caring and respectful relationships that led to a positive family atmosphere within the house. This was reflected within the environment which was designed and equipped to be fully accessible. Young people were encouraged to makes choices and we saw many examples of skilful support that ensured young people communicated their needs and expressed their views. Where young people had the ability to make choices about their future they were fully informed of their rights and for those where this was not possible, arrangements were in place to ensure their legal and human rights were central to decision making.

Young people's physical health needs were met through well-established links with other services. Staff were knowledgeable about physical health matters and a plan to deliver trauma training and consultation with other services reflected the manager's commitment to ensuring mental health needs of young people were being met to the same high standard. One person told us, 'the young people's health needs are met to a very high standard'.

At the time of inspection most young people were involved meaningfully in education and college, and one young person was involved in wide range of interests out with the house. Where young people were not accessing education, the team were working with other professionals to understand the barriers and within this process we asked the manager to be more proactive in challenging decisions that were not reflective of young people's individual educational needs.

The young people living together in Gilburn were predominantly well matched. This, alongside consistent leadership and a confident staff team, ensured young people experienced stable therapeutic care. However, staffing levels were not always sufficient to ensure young people were getting the most out of life. Whilst this did not compromise the high standard of day to day care, it limited opportunities for some young people to regularly access a wide range of activities out with the house. The provider should ensure that current staffing levels consistently reflect the needs of the young people. (See area for improvement 2).

Young people's care was supported by staff who were safely recruited and who had access to training which reflected the needs of young people. Whilst all staff had access to supervision we asked the manager to

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ensure their audit process ensured this was carried out regularly and effectively. Involvement in interviews gave young people a sense of value and acknowledged, where possible, that they were experts in their own care. Positive outcomes for young people were underpinned by individualised care plans that captured young people's views.

Whilst there were systems in place to monitor the quality of care, support and environment, these were not sufficient to drive forward a model of service improvement that was informed by the views of young people, staff and key partners. The manager was aware that the service required clearer direction and should ensure that young people's experiences and outcomes are aspirational and positively guided by a whole team approach to service development.

(See area for improvement 3).

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 and ensure they regularly get the most out of life, the provider should undertake a review of the current staffing levels within Gilburn House to ensure staffing levels safely enable this.

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

'I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors'. (HSCS 1.25).

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

The provider should improve the quality of personal plans in order to more effectively meet young people's needs.

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

"My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices" (HSCS 1.15).

This area for improvement was made on 11 November 2019.

Action taken since then

Leaders within the service have implemented an outcome focussed model of care planning that is now in place for all young people. The whole team have been supported to understand SMART goals and care planning is now a routine part of the team meeting and supervision agendas.

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?	4 - Good
7.1 Children and young people are safe, feel loved and get the most out of life	4 - Good

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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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Care Inspectorate Compass House 11 Riverside Drive Dundee DD1 4NY

enquiries@careinspectorate.com

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