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

REPORT TO: SCRUTINY COMMITTEE DECEMBER 2017

REPORT ON: EXTERNAL INSPECTION REPORT FOR WHICH ALL GRADES

ARE GOOD OR BETTER

REPORT BY: EXECUTIVE DIRECTOR OF CHILDREN AND FAMILIES

**REPORT NO:** 437-2017

#### 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 summary of the inspection reports on Gillburn Road and The Junction young people's homes, which received grades of good or better in all areas covered by the inspection;
- 2.2 Remit the Executive Director of Children and Families 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. The summary of the recent inspection reports which falls into this category are attached.
- 4.2 One summary report covering both inspections is included from the Children's Residential Service. The areas for improvement listed below will be actioned by the regulated residential service in Children's Services.
  - Copies of the inspection report 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.
- 5.2 There are no major issues.

# 6.0 CONSULTATION

6.1 The Council Management Team have been consulted in the preparation of this report.

# 7.1 BACKGROUND PAPERS

7.1 The Junction and Gillburn Road Care Inspectorate reports.

Paul Clancy Executive Director Children and Families Service

December 2017

Inspection of: The Junction Inspection by: Care Inspectorate							
Theme		Aug 2016	Jan 2016	Feb 2015			
Quality of care and support	4 Good	5 Very Good	5 Very Good	4 Good			
Quality of environment	Not Assessed	Not Assessed	5 Very Good	5 Very Good			
Quality of staffing	Not Assessed	5 Very Good	5 Very Good	4 Good			

#### **Summary**

leadership

The inspection was completed on 1<sup>st</sup> September 2017. The inspector met with young people who live in the house as well as speaking to staff and management. The inspector noted that young people felt at ease and that views of the service were generally positive. Young people felt that staff showed them respect and that they had made progress since being there.

Not Assessed

4 Good

5 Very Good

4 Good

#### What the Service Does Well

Quality of management and

The service reached a good standard across both quality themes, demonstrating important strengths. Young people were seen to be in good physical health with staff managing any medication and contributing to their wellbeing. Examples of this were that there had been a significant reduction in alcohol use for one young person and another young person has stopped smoking with support from staff.

#### **Quality of Care and Support**

This was scored as a 4 – Good. Staff evidenced good support for young people's health and wellbeing needs. There was also good evidence of staff reviewing risk assessments in response to emerging needs and recognising factors of vulnerability. A nurturing approach in the House was evidenced through staff taking young people on holidays, supporting bedtime routines and encouraging family contact as appropriate. There was also evidence of staff offering further support to young people once they had moved on from the house – recognising the strength in long term relationships. Good evidence of collaborative work between the service and other professionals which in turn led to better outcomes for young people.

# **Quality of Environment**

Not assessed.

# **Quality of Staffing**

Not assessed.

#### **Quality of Management and Leadership**

This was scored as a 4 – Good. The service has an improvement plan in place and this was described as detailed and comprehensive with a focus on continuous improvement under the leadership of management. The plan has a clear focus on improving outcomes for young people. There was good evidence of the external manager providing support to the new

interim manager and contributing to the safeguarding of young people. The service has been promptly notifying the Care Inspectorate of any significant events which has led to a considerable improvement in this area and this is coupled with a responsive management approach to reviewing staffing levels if incidents have occurred.

There was also good evidence in regards to developing leadership skills within the staff group through staff's access to promoted posts, involvement in various working groups, secondments and mentoring of new staff and students.

#### What the Service could do better

There had been a number of incidents and challenging behaviour earlier in the year that had resulted in violence to staff and damage in the home. This had a negative impact on both young people and staff. This situation had improved allowing for recovery but the inspector felt that staffing levels impact could have been better planned for.

New medication procedures are working well with only the need for some minor changes. Staff involved in this procedure were seen to already be taking practice steps in this area.

Some young people were less active and were not always taking up opportunities to work with staff which hampered positive work and plans. These plans were not always evidenced to be involving the young people's views and were not always signed by young people with some risk assessments not always being updated (see recommendation 1).

Child's plans need to be clearer in terms of evaluating progress. The implementation of the new ICT system was recognised as a factor in this and the service had been proactive in seeking support from the Inspector in regards to this.

The unexpected change of the Manager and other staffing difficulties had led to a loss in momentum of implementing the planned improvements for the year. The service plan is detailed but is required to be more specific in timescales. This has been a factor across other houses and will be addressed through oversight at Managers Team Meeting and a development day in the New Year.

Frequency of supervision for staff was variable. However, staff still described the level of support they receive as good (see recommendation 2).

#### There were no requirements but 2 recommendations were made:

- The provider should ensure that the service provides young people with regular opportunities to contribute to assessments and plans and to have their views recorded.
- The provider should ensure that staff have regular opportunities for planned supervision as part of the staff support and development programme

#### **Actions**

- This is being addressed through a focused audit of files across all the houses with a
  focus on outcomes. Management are leading this audit and it will form the basis for
  team development focus in 2018 with all staff involved in the development and
  implementation of more robust processes that clearly identifies how we maximise and
  support young people's involvement.
- This has already been addressed with the interim manager to ensure that a calendar of staff supervision is adhered to with manager oversight of the regularity of supervision within the staff supervision files.

Inspection of: Gillburn Road							
Inspection by: Care Inspectorate							
Grades:	Latest Grade Awarded	Grading History					
Theme		Sept 2016	Jan 2016	Mar 2015			
Quality of care and support	4 Good	5 Very Good	5 Very Good	4 Good			
Quality of environment	Not Assessed	Not Assessed	5 Very Good	5 Very Good			
Quality of staffing	Not Assessed	5 Very Good	5 Very Good	5 Very Good			
Quality of management and leadership	4 Good	Not Assessed	4 Good	5 Very Good			

#### Summary

Inspection was carried out on 21<sup>st</sup> July 2017. The inspector spoke to 2 parents in person and issued 10 questionnaires to children, parents and carers with only 1 response. The feedback indicated a very high level of satisfaction with the service. They felt the induction process was good with families fully involved and that tea visits and overnights were conducted at the right pace. The home was described as having a 'lovely atmosphere' and the staff as 'great'.

The inspector spent time with children staying in the house and observed staff practice. Children appeared relaxed and familiar in the setting with staff and happily engaged in activities.

#### What The Service Does Well

Important strengths are noted within the report that result in a positive impact on children and young people who access the short breaks service. This is especially evidenced through staff approaches to children, young people and their parents and carers.

# **Quality of Care and Support**

The Inspector noted that staff ensured an individualised response to meeting children's needs. There was also good evidence of involving children and their families within the service and this was evidenced within the child's plans and reviews that were inspected.

As many of the children who access the service have complex needs, the management of medication is always rigorously inspected. The inspector noted that this was, on the whole, effective with some minor adjustments to recording noted.

Staff were noted as having warm and positive relationships with children and young people whilst also providing clear boundaries and structure to ensure the care and support they received was very good and appropriate to their needs.

Food and the dining experience was noted as being very positive and nurturing for children and young people with good choices of food and a pleasant and welcoming environment.

#### **Quality of Environment**

Not Assessed. However the inspector noted that the home environment lends itself well to different ages and abilities and that it is safe, comfortable and well-maintained.

#### **Quality of Staffing**

Not assessed. However a number of positive observations about staff skill and approach to children and young people.

# **Quality of Management and Leadership**

Management support children and young people to be actively involved service development and this was evidenced in the recruitment of staff at all levels within the house - including the recruitment of the Team Manager last year.

The inspector noted that the service had made some temporary but important adjustments to children receiving short breaks and longer stays. This had led to a number of cancellations and disruption for parents and children, however it was noted that the inspector was satisfied in that it was managed in a way that promoted children's safety, welfare and positive outcomes.

# There were no requirements or recommendations made but the following areas where the service could do better were noted:

- Supervision of sessional staff was noted as an area of potential difficulty as staff
  providing supervision are not registered on the appropriate part of the SSSC register.
  This has been discussed within the wider management team and agreed that Senior
  Social Care Officers will ensure that they undertake the supervision tasks as they are
  registered to do this.
- There is scope to improve some aspects of the service's care planning and quality assurance processes including more outcome-focused plans, more effective evaluations of progress, clearer medication records, improving management oversight of incidents and involving staff more in improvement processes. This is being addressed through a focused audit of files across all the houses with a focus on outcomes. Management are leading this audit and it will form the basis for team development focus in 2018 with all staff involved in the development and implementation of more robust processes. The new ICT system will also support and address most of these areas as staff increase in their confidence of using the new system.
- Guidance recommends unannounced external manager visits. The external manager has developed an external management tool for looking over quality assurance of process in the house and will undertake unannounced visits throughout the year.