

# Item No: 9

Meeting Date: Wednesday 5<sup>th</sup> September 2018

## Glasgow City Integration Joint Board Finance and Audit Committee

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### CARE INSPECTORATE ACTIVITY – CHILDREN AND FAMILIES RESIDENTIAL SERVICES

<b>Purpose of Report:</b>	To provide the IJB Finance and Audit Committee with a summary of Care Inspectorate Grades / Scores for directly provided Children’s Residential Services, and to update on Service Developments.
<b>Background/Engagement:</b>	All directly provided Residential Children’s units are subject to registration and inspection by the Care Inspectorate. This report is based on the requirements and recommendations reported and an analysis of the service provision and developments.
<b>Recommendations:</b>	The IJB Finance and Audit Committee is asked to: <ul style="list-style-type: none"> <li>a) note the findings of this report in respect of the range of directly provided services inspected, themes arising and trends in relation to grades awarded; and</li> <li>b) note the positive progress in relation to service developments.</li> </ul>

#### Relevance to Integration Joint Board Strategic Plan:

The development and on-going provision of good quality residential homes for children and young people who are looked after by the Council is an important element in our overall transformation programme for Children’s Services.

## Implications for Health and Social Care Partnership:

<b>Reference to National Health &amp; Wellbeing Outcome:</b>	Good quality residential homes for children and young people will help us achieve all the national health and wellbeing outcomes. Furthermore, a home which receives positive inspections will be making significant contributions to the Getting it Right for Every Child wellbeing outcomes for children and young people. These are (Safe, Healthy, Achieving, Nurtured, Active, Respected, Responsible and Included).
<b>Personnel:</b>	There are no personnel implications arising from this report.
<b>Carers:</b>	Our overriding objective is to maintain children and young people at home or with a kinship or foster carer. Our transformation plan is focused on improving supports for families to prevent, wherever possible, children being brought into formal care. However, there will be times when children are unable to remain with their birth parents or with their wider families or foster carers. In these instances, children will be placed within a residential home, provided either by the Council or purchased from the voluntary and independent sector.
<b>Provider Organisations:</b>	Not applicable
<b>Equalities:</b>	There are no equalities issues arising from this report.
<b>Financial:</b>	Strengthening the HSCP's residential provision is critical in the reduction of outwith authority placements, the shift in the balance of care, the efficient use of budget and the internal investment for the city and partnership.
<b>Legal:</b>	There are no legal implications arising from this report.
<b>Economic Impact:</b>	The internal investment into the residential sector has strengthened the employment in the city and contributes to reducing out with authority high cost care.
<b>Sustainability:</b>	There are no sustainability implications arising from this report.
<b>Sustainable Procurement and Article 19:</b>	Not applicable
<b>Risk Implications:</b>	Poor inspections may mean that vulnerable children and young people are not receiving good quality care and are likely to have poor outcomes. There are also risks to the public image of the Health and Social Care Partnership as inspection reports are publicised on the Inspectorate website.

<b>Implications for Glasgow City Council:</b>	Ongoing development of Children's Residential Service in transforming the balance of care.
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<b>Implications for NHS Greater Glasgow &amp; Clyde:</b>	Ongoing development of Children's Residential Service in transforming the balance of care.
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## **1. Purpose of the Report**

1.1 This report provides the IJB Finance and Audit Committee with a summary and analysis of Care Inspectorate activity.

## **2. Grades Awarded**

2.1. There are currently 20 children's units holding the care of 146 young people.

2.2 Unannounced inspections by the Care Inspectorate typically take place annually.

2.3 Grades are awarded under four quality themes:-

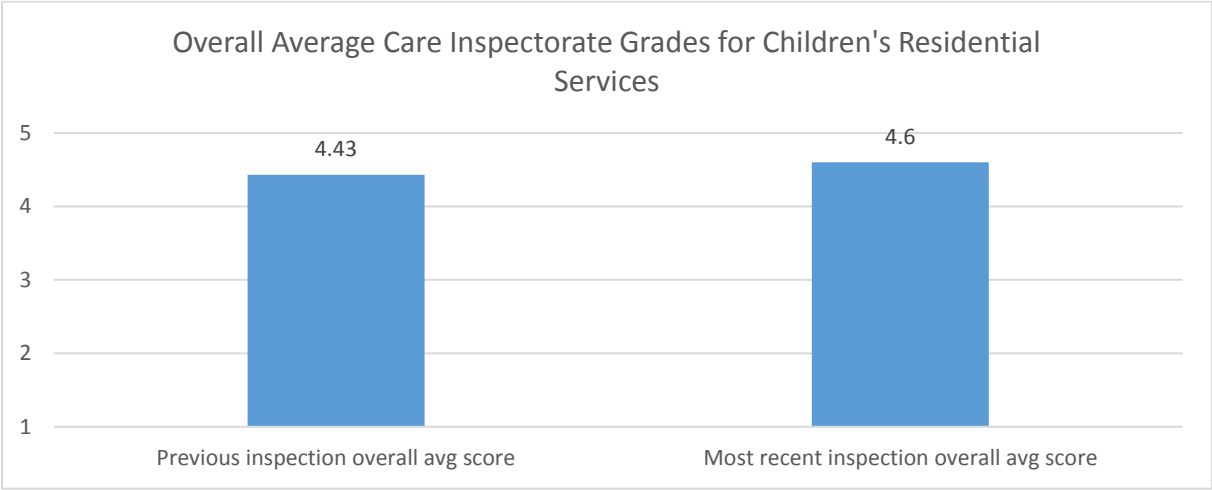
- Care and Support
- Quality of Environment
- Staffing
- Leadership and Management

Grades are awarded as follows:-

- Grade 1 – Unsatisfactory
- Grade 2 – Weak
- Grade 3 – Adequate
- Grade 4 – Good
- Grade 5 – Very Good
- Grade 6 – Excellent

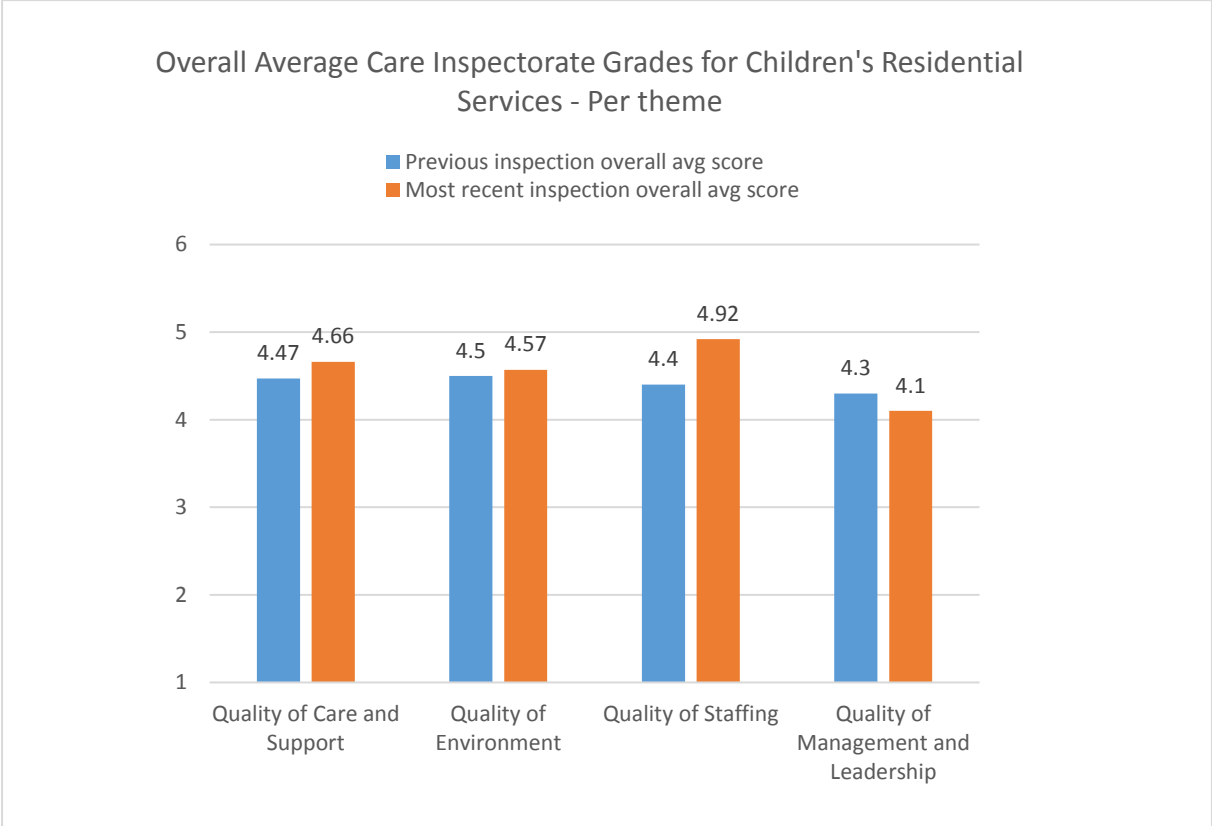
## **3. Overall Average Score for Most Recent and Previous Inspections**

3.1 The graph below shows the overall average score, for all of the quality themes, across all 20 units for the most recent and prior inspections.



There has been an overall increase from an average grade of 4.43 for the previous inspection to 4.6 for the most recent inspections.

### 3.2 Overall Average Score for each Quality Theme



### 3.3 Summary of Scoring for all Quality Themes

The following table shows the percentage of grades awarded across each of the quality themes for all units for the most recent, and previous inspections.

<b>Grade</b>	<b>Previous Inspection</b>	<b>Most recent inspection</b>
Excellent	4%	4%
Very good	49%	66%
Good	34%	16%
Satisfactory	13%	14%
Weak	0%	0%
Unsatisfactory	0%	0%

3.4 Wellhouse was inspected on 21<sup>st</sup> June 2017 and the report finalised in August 2017. Unit received a grade of (2) for Leadership and Management, along with a (3) Care & Support, (4) Environment & (4) Staffing. The Care Inspectorate highlighted factors that resulted in these grades:

- Poor risk management in the community for one or more service users
- Impact on the service and staff moral due to an investigation
- Inadequate staff supervision
- Slow recruitment for staff vacancies

3.5 Much debate took place with Care Inspectorate on the first two points. First, the inspection focused on one young person and did not balance the other 7 young people in the unit. There were areas for improvement in this child's plan but they were multi agency in nature.

3.6 Second point, an investigation will invariably impact on a Unit. The inspection did indeed occur at a challenging time and this context was not reflective of the whole year. Our response was noted and a re-inspection took place on the 13<sup>th</sup> November 2017 where the grade of (2) for Leadership & Management was changed to a (3).

3.7 On 1<sup>st</sup> June 2018, the annual inspection took place. Over the year the Service Manager, Unit Manager and Wellhouse staff followed a robust action plan to raise overall grades. Safety plans were developed for all young people to include challenges in the community. Placement plans were also developed to evidence the daily work and engagement with staff. Regular supervision had taken place and staff involved in the investigation were supported accordingly. At the time of inspection the service was fully staffed apart from one Senior off Long Term Sick. Consequently the service graded, Care & Support (5), Environment (5), Staffing (5), and Leadership & Management (4). This is now the best grade achieved since the service opened in 2016.

- 3.8 Hinshaw Street Inspection of 3<sup>rd</sup> November 2017 graded the service at weak (2) in the quality themes Care and Support, and, Staffing. Post inspection the service questioned the grading's via an error response and discussions with the inspector and her team manager. The weak grading reflected issues about morale, staffing levels and the aftermath of a particularly difficult spell with community issues, and a high level of violence and vandalism in the unit.
- 3.9 With respect to staffing, the service highlighted the considerable commitment, strain and impact as a result of the emergency humanitarian response to the young woman transferred at short notice to Centre Street. While the Care inspectorate were supportive of that specific initiative and compassionate response, their tolerance of the staffing implications across the system were less accepting. Significant debate also took place with the Care Inspectorate into the matching process of children/ young people into and from emergency placements.
- 3.10 Following the report a change of manager was implemented, this was in part a response but also a planned move. The unit is being covered by another unit manager.
- 3.11 A follow up visit by the Inspector in July 2018 was carried out to see what progress was being made on the recommendations and requirements noted in the original report. The inspector was accompanied on this visit by a Young inspector. The unit was not regraded at this visit, this will be carried out when the next inspection takes place and we anticipate this will be in October.
- 3.12 All recommendations and requirements have been met within the expected timescale and the inspector's notes good progress in all areas relating to care planning, risk assessment, staffing and leadership, with particular progress noted on positive outcomes for young people and the level of staff supervision.
- 3.13 Broomfield Children's Unit received a 6 (excellent) score under the Quality of Care and Support, and Quality of Staffing Themes in their most recent inspection.

Information on grades awarded across all Units for each of the quality themes is provided at Appendix 1.

Please note that if Units achieve 4 grades of either Good or above, only 2 quality themes are assessed in the following inspection.

#### **4. Recommendations and Requirements**

- 4.1 The Care Inspectorate made a number of recommendations and requirements as part of their findings from the most recent inspections across the 20 Units. Recommendations made more than once are listed in the table below. In addition to the recommendations listed there were a number of single issue recommendations. These are included in the full table as appendix 2 to this report.

Recommendations	Number of times
The service provider should consider ways of streamlining the different systems in place for gathering, sorting, and sharing information as a means of reducing repetitive administrative tasks for staff.	X 2
The service provider should ensure that young people should have access and methods of maintaining contact with families and friends, as well as having effective access to online learning opportunities linked to school and college placements	X 2
The provider should ensure that young people can access online learning resources and communication opportunities in the same way as these are available in family homes. This would mean that they would not be disadvantaged compared to friends, fellow students and workmates.	X 2

Individual Units have already responded, or are in the process of addressing each of the recommendations and requirements made, with the support of the external management team, colleagues and partners.

4.2 The Care Inspectorate also recognised many positive aspects of the service that were having a positive impact on young people. These included:-

- Good relationships between staff and young people
- Young people achieving well at school, in training, or in employment.
- Young people engaged with a range of community activities.
- Young people going on holidays abroad
- Young people successfully moving on to more independent placements

## 5. Service Developments programme

5.1 The modernisation programme in provided children's residential care has continued, a total of 11 new units have been built and are now fully operational:

- Kempsthorn
- Plenshin Court
- Main Street
- Broomfield Crescent
- Dalness Close
- Wallacewell Quadrant
- Wellhouse Crescent
- Milncroft Road
- Hinshaw Street (replacing St Vincent Crescent)
- Crossbank (replacing Sherbrooke)
- Balmore (replacing Liddesdale)

## 5.2 In terms of future developments:-

- In September 2018 the existing 6 bedded Unit at Newark Drive will be closed and replaced by a new 8 bedded Unit at Newlands Road.
- During the course of 2018/19 the 6 bedded unit at Norse Rd will be replaced by a new 8 bedded Unit. Current projected timescale is March 2019.
- The unit at Chaplet Avenue will also be fully refurbished by end of 2018.
- Early planning is underway to replace the 5 bedded Unit at Airth Drive with a new build 8 bedded unit. A site for the new build has yet to be identified.
- Airth Drive will be retained as a Continuing Care resource.
- St Vincent Crescent is also being developed as a Continuing Care Resource.
- The final stage of the current programme will involve the 6 bedded Unit at Seamill St being replaced by a new 8 bedded Unit.
- A further new build site has been identified in Butterbiggin Rd as part of a new housing complex. This is still in early stages of planning and development

This will see the number of residential beds increase from 146 as at April 2018 to 155 when all the above work is complete, plus 8 continuing care beds.

- 18 X 8 Bed units = 144 Beds
- 1 X 6 Bed unit = 6 Beds
- 1 X 5 Bed unit = 5 Beds
- 2 X 4 Bed Continuing Care Units (Airth Drive and St Vincent Crescent) for young people aged 16+

5.3 The Service continues to work hard to look after young people with increasingly complex needs. The skilled and committed workforce has contributed to only 10 young people, from a total of 240 looked after in provided units in 2017, requiring to move from a provided residential unit to a purchased residential service. A particular feature of this complexity is the increased number of younger children being placed into a residential setting, often after a disruption to a long term foster placement. At present we have 61 young people accommodated who previously were in a foster placement and this represents 43 % of our overall population. This presents particular challenges in managing groups of young people with a wide age and needs range.

5.4 Work is ongoing to identify young people in external (high cost) residential placements and, where appropriate, support them to return to placements (including provided residential placements) within Glasgow. Good progress is being made in this area with the overall number of young people in external placements reducing from 116 in February 2016 to 61 as at 10<sup>th</sup> August 2018. Working to further reduce the number of young people in purchased residential placements will continue to be a priority area moving forward.

5.5 Residential services continue to be a vital support to look after young unaccompanied asylum seekers who come to the city. Often the initial response to caring and assessing their needs is in a residential setting, particularly if the young people claim to be under 16. In conjunction with the city's Asylum Team assessment and support is provided. We currently have



16 unaccompanied asylum seeking young people in children's units, predominantly, at this time from Vietnam. The rate of referral is consistent and young people are often accommodated out of hours and through our emergency services. We utilise existing housing options for the young people and are developing positive links with other housing providers, such as the use of student flats to offer positive destinations. A city wide campaign to recruit and identify host families for young people has also been successful in offering family based alternatives.

- 5.6 As part of the Transforming Glasgow Agenda the Children's Residential Service will be subject to a Service review involving CELCIS (Centre for Excellence for Looked After Children in Scotland). The review will consider a range of service development options that would aim to support improved outcomes for young people, ensure service efficiency and further joint working with partner agencies. Essentially, the foundations remain ideal to ensure that the service capitalizes on much more integrated networks of care that support more young people to succeed in Glasgow. CELCIS have been actively involved in providing direct support to our analysis and plans for moving young people back to Glasgow resources, and in identifying implementation strategies to enable a more integrated approach to the care of young people in Glasgow.
- 5.7 Glasgow continues to develop its Corporate Parenting strategy and the involvement of young people from residential care settings is integral to this. Through their involvement in the recently constituted Young people's Champions Board our young people and their advocacy support workers support and influence the agenda of the group through their representations and comments on policy and service development. A continuation of the participation and involvement of our young people underlines their role in service development.
- 5.8 The service is currently in the process of recruiting to a new peripatetic staff team, which will provide flexible and responsive support to units in the city. This team will be deployed based on the needs of young people and units and also provide support to staff team due to absence, maternity leave and annual leave. This team of residential workers will be managed externally and fill gaps across the city and crucially provide specific support to units and young people at times of crisis and need. This will be crucial in supplementing the work the service undertakes in meeting the needs of young people with increasingly complex needs, who might otherwise have been cared for elsewhere and not in Glasgow's own resources.
- 5.9 As part of the wider transformational agenda the service is investing in an 'Edge of Care ' team and this will work to redress the balance of care and target resources and services towards community based support to families and young people. This team will endeavor to reduce admissions into care of older children, and, in close work with residential services seek to return to families young people admitted in an emergency to prevent the impact of being in care affecting the prospect of a return home sooner.

5.10 Finally, regular liaison meetings have been set up between the Children's Residential external management team and the team of inspectors from the Care Inspectorate. The meetings have so far proved helpful in enabling both organisations to communicate current priorities, future developments and in supporting joint work to take place.

## **6. Recommendations**

6.1 The IJB Finance and Audit Committee is asked to:

- a) note the findings of this report in respect of the range of directly provided services inspected, themes arising and trends in relation to grades awarded;  
and
- b) note the positive progress in relation to service developments.

## Appendix 1

Unit Name	date of final report	date inspection carried out	Quality of Care and Support	Quality of Environment	Quality of Staffing	Quality of Management and Leadership
Airth Drive	30/08/2017		4	3	5	3
Airth Drive	14/09/2016		4			4
Balmore	12/04/2018	15/03/2018	5			5
Balmore	16/03/2017		5	5	5	5
Broomfield	26/04/2018	27/02/2018	6			6
Broomfield	01/03/2017		5			6
Chaplet Avenue	05/04/2018	16/02/2018	5			5
Chaplet Avenue	16/03/2017		4			4
Crawford Street	07/08/2017		5	5		
Crawford Street	21/12/2016		5	4	5	5
Crossbank	12/03/2018	23/01/2018	5	4		
Crossbank	14/09/2016		4			4
Dalness	26/09/2017	30/08/2017	5			5
Dalness	05/08/2016		5			4
Hamilton Park Avenue	not yet finalised	06/07/2018				
Hamilton Park Avenue	30/06/2017	15/05/2017	4			3
Hinshaw Street	not yet finalised	12/07/2018				
Hinshaw Street	23/05/2018	03/11/2017	2	5	2	3
Kempsthorn	30/11/2017	13/10/2017	5		5	
Kempsthorn	28/10/2016		5			5
Main Street	05/05/2018	12/02/2018	5			5
Main Street	01/03/2017		5		5	
Milncroft	24/10/2017	02/10/2017	5			5
Milncroft	27/10/2016		5	5	5	5
Monreith	05/06/2018	04/05/2018	4		5	
Monreith	04/08/2017	21/06/2017	4	4		
Netherton	17/04/2018	15/02/2018	5		5	
Netherton	28/03/2017		5			6
Newark Drive	07/12/2017	09/11/2017	4		4	
Newark Drive	07/12/2016		5			5
Norse Road (lidesdale)	11/04/2018	16/03/2018				
Norse Road (lidesdale)	28/08/2017	05/07/2017	3			3
Plenshin court	08/11/2017	10/10/2017	5	5		
Plenshin court	09/11/2016		5			5
Seamill Street	29/03/2018	07/03/2018	5		5	
Seamill Street	01/02/2017		5			4
Wallacewell	10/11/2017	11/10/2017	5	5	5	5
Wallacewell	15/09/2016		4	4	4	3
Wellhouse	02/07/2018	01/06/2018	5	5	5	4
wellhouse	19/12/2017	13/11/2017	3	4	4	3

## Appendix 2

### Summary of Inspection Recommendations

Recommendations	Number of times
The service provider should consider ways of streamlining the different systems in place for gathering, sorting, and sharing information as a means of reducing repetitive administrative tasks for staff.	X 2
The service provider should ensure that young people should have access and methods of maintaining contact with families and friends, as well as having effective access to online learning opportunities linked to school and college placements	X 2
The provider should ensure that young people can access online learning resources and communication opportunities in the same way as these are available in family homes. This would mean that they would not be disadvantaged compared to friends, fellow students and workmates.	X 2
The service provider should ensure that all young people have access to appropriate learning facilities within a reasonable timescale of their admission.	
The service provider should confirm management arrangements for the service to support the work of the staff in meeting the assessed needs of the resident young people	
Where possible , ,the provider should try to take account of the make up of the resident group when organising new admissions	
The provider should take prompt action to properly repair the heating system to ensure the comfort of resident young people	
The provider should ensure that appropriate support is in place for the manager of the service. This should include regular supervision, with records for each meeting, and greater involvement of the manager in relation to admissions to the service.	
The provider needs to ensure that safety management plans are in place	
The provider should ensure that all staff receive supervision	
The service should improve care plans to ensure they are concise, outcome focussed, involve young people in their development, and use a strength based approach	X 2
<i>The service provider needs to produce a placement plan for all young people</i>	
The service should ensure that staff receive appropriate training to support their development needs of staff in their induction period	
The number of young people accommodated and use of all areas of the house should be reviewed to ensure that the quality of life for residents is as good as it can be and that staff are able to fully care for them without compromising privacy and confidentiality	
While the young people and staff are preparing for a move to new premises, new admissions which place the service over its registered numbers should be avoided if at all possible.	
<i>The service provider should produce a Development Plan</i>	
Team meetings need to take place regularly	
<i>Young people need to be involved in developing their own placement / care plans, and for plans to be regularly reviewed</i>	

<b>Requirements</b>	
<i>The provider must ensure that all young people, who required support to produce a Pathways Plan to identify their future needs, receive this support within an appropriate timescale.</i>	
<i>The provider must review risk management plans for all young people to ensure that these are robust and address risk both within the house and in the community. Safety plans should be introduced for young people if appropriate.</i>	