



Item No. 12

Meeting Date **Wednesday 4th September 2019**

Glasgow City Integration Joint Board Finance, Audit and Scrutiny Committee

Report By: Pat Togher , Assistant Chief Officer, Public Protection and Complex Needs

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CARE INSPECTORATE ACTIVITY – CHILDREN AND FAMILIES RESIDENTIAL SERVICES
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Purpose of Report:	To provide the IJB Finance, Audit and Scrutiny Committee with a summary of Care Inspectorate Grades / Scores for directly provided Children’s Residential Services, and to update on Service Developments.
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Background/Engagement:	All directly provided Residential Children’s homes are subject to registration and inspection by the Care Inspectorate.
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Recommendations:	The IJB Finance, Audit and Scrutiny 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.
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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.

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Implications for Health and Social Care Partnership:

Reference to National Health & Wellbeing Outcome:	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).
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Personnel:	None
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Carers:	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 biological 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.
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Provider Organisations:	None
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Equalities:	None
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Fairer Scotland Compliance:	None
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Financial:	Strengthening the HSCP's residential provision is critical in the reduction of out of authority placements, the shift in the balance of care, the efficient use of budget and the internal investment for the city and partnership.
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Legal:	None
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Economic Impact:	The internal investment into the residential sector has strengthened the employment in the city and contributes to reducing out of authority high cost care.
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Sustainability:	None
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Sustainable Procurement and Article 19:	None
Risk Implications:	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 Care Inspectorate website.

Implications for Glasgow City Council:	Care Inspectorate gradings for services directly provided by Glasgow City Council/Health and Social Care Partnership have a direct impact on the public perception of the Council, and by extension the Health and Social Care Partnership.
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Implications for NHS Greater Glasgow & Clyde:	Care Inspectorate gradings for services directly provided by Glasgow City Council/Health and Social Care Partnership have a direct impact on the public perception of the Council, and by extension the Health and Social Care Partnership.
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1. Purpose

1.1 This report provides the IJB Finance, Audit and Scrutiny Committee with a summary and analysis of Care Inspectorate activity, and an update on service developments and challenges.

2. Grades Awarded

2.1 There are currently 20 Children's Homes holding the care of 149 young people.

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

2.3 Grades are awarded under four quality themes:-

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

Grades are awarded as follows:-

Grade 1 – Unsatisfactory

Grade 2 – Weak

Grade 3 – Adequate

Grade 4 – Good

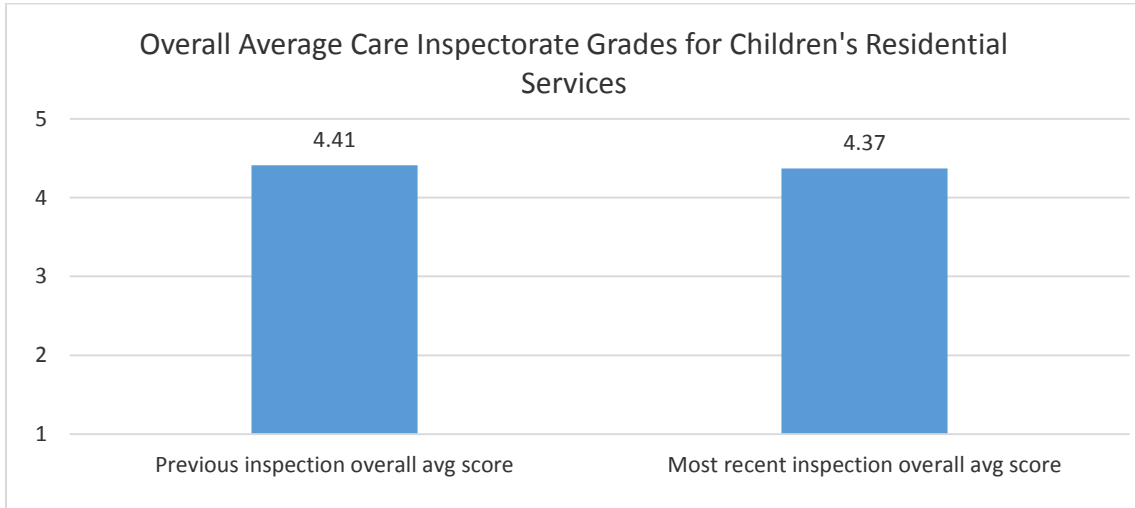
Grade 5 – Very Good

Grade 6 – Excellent

2.4 The Quality Framework for Inspection has now changed and will have implications for future inspection which is detailed in the body of this report.

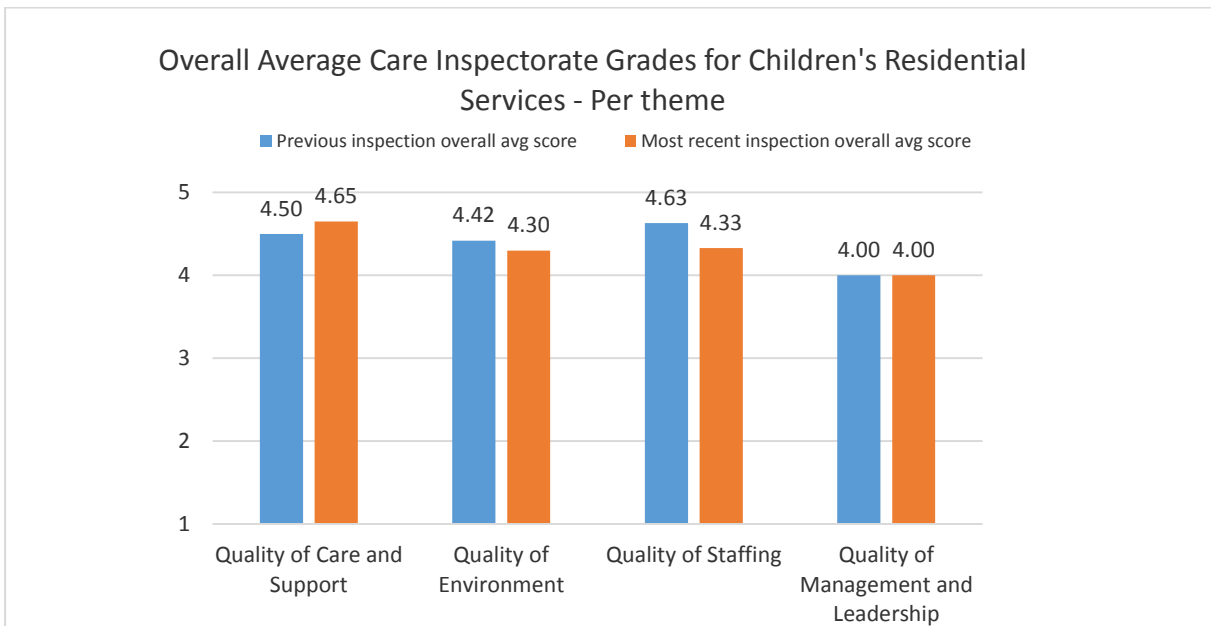
3. Overall Average Score for Most Recent and Previous Inspections

3.1 The graph below illustrates the overall average score, for all of the quality themes, across all 20 homes for the most recent and previous inspections. Reporting on average scores across 20 homes helps to provide a service/city wide perspective on trends and performance. However scores for individual homes are provided in Appendix 1 and 2.



There has been a small reduction in the overall average grade from 4.43 for the previous inspection to 4.37 for the most recent inspections.

3.2 Overall Average Score for each Quality Theme



3.3 The most recent inspections illustrates an improvement in the overall average score for quality of care and support.

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- 3.4 In terms of quality of environment, Liddesdale Road and Airth Drive both scored 3's in the most recent inspection which contributed to the slight reduction in the overall average score. Since this inspection was carried out young people and staff in Liddesdale Road have transferred to a new build unit at Norse Road, and Airth Drive is due to close in Autumn 2019.
- 3.5 In relation to staffing quality there has been a small reduction. This relates to a longer than anticipated recruitment process from late 2018 through to early 2019 which has led to increased staffing challenges and a requirement to deploy existing staff more flexibly. This recruitment process is now complete and more frequent recruitment will take place in the future. In addition to this we have introduced a peripatetic team which will considerably enhance additional support arrangements across the city.
- 3.6 Summary of Scoring for all Quality Themes

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

Grade	Previous Inspection	Most recent inspection
Excellent	4%	0%
Very good	58%	52%
Good	17%	38%
Satisfactory	17%	10%
Weak	4%	0%
Unsatisfactory	0%	0%

- The service currently has no Weak or Unsatisfactory grades.

- 3.7 Graphs for individual homes illustrating the most recent grades for each of the quality themes inspected are provided in Appendix 1.
- 3.8 A table showing grades awarded across all homes for each of the quality themes is provided at Appendix 2.

4. Recommendations and Requirements

- 4.1 The Care Inspectorate made a number of requirements and recommendations as part of their findings from the most recent inspections across the 20 homes.
- 4.2 The two requirements are listed in the table below:

Requirements
In order to ensure that young people's care plans are appropriate to their needs, the provider must work closely with all partner agencies to ensure the wellbeing of all young people is met without any undue delay. This should include ensuring young people are safe at all times, and appropriate action should be taken if there are any welfare concerns. Children and young people should be supported to be fully involved in developing and reviewing their care plan.

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The provider must ensure that suitable staffing arrangements are in place to meet the needs of young people living at the service. Staffing arrangements should also take account of the skill mix of staff on duty in order to reflect how young people are being supported in key aspects of their lives.

4.3 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 3 to this report.

Recommendations	Number of times
Ensure suitable staffing arrangements including consideration of suitable skill and gender mix for staff on shift.	3
Development of young people's care plans	2
Ensure staff supervision (including night shift) is carried out in accordance with HSCP supervision policy	2

4.4 Individual homes 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.

4.5 In recognition of the importance of carrying out regular formal supervision with staff the service commenced an audit process for all homes in May 2019. The process has focused on the supervision frequency for all staff, and well as evaluating the system in place in each home to ensure full compliance with GCHSCP supervision policy. A report is produced after each audit which identifies to what extent supervision is being carried out and sets out actions required where necessary. A follow up audit is then carried out to ensure action has been taken.

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

- Relationships between staff and young people were characterised by warmth and respect.
- We found that care plans for young people were of a very good standard.
- We found that a learning culture existed within the service. A recent team development day had focused on trauma informed care, and there was clear indications that this had been beneficial and staff were practicing in a trauma informed manner.
- Young people told us their views were respected by staff and that they felt supported to pursue activities of interest.
- We were interested to hear about the proposed impact of different approaches to promoting family involvement and in particular those which enabled extended family members to contribute to the care of some young people living at the service. This proactive approach to enabling family members to connect relatives offered new opportunities for some young people living at the service.

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5. Care Inspectorate Developments

5.1 In May 2019 the Care Inspectorate began to implement a new quality framework for care homes for children and young people.

5.2 The framework is based on the new National Care Standards which focus on the following areas:-

- Dignity and Respect
- Compassion
- Be included
- Wellbeing
- Responsive Care and Support

5.3 The new framework is based on European Foundation for Quality Management and is designed to help organisations to:

- Assess where they are on the path to excellence
- Provide a common vocabulary and way of thinking about the organisation
- Integrate existing and new initiatives and plug any gaps
- Provide a basic structure for the organisation's management structure.

5.4 The framework is based on 5 key questions:

- 1) How well do we support children and young people's wellbeing
- 2) How good is our leadership
- 3) How good is our staff team
- 4) How good is our setting
- 5) How well is our care and support planned

The grading scale from 1 – Unsatisfactory to 6 - Excellent will remain the same.

5.5 One of the key aspects of the new inspection framework is the limit / maximum of a grade of 3 if a requirement is made for a particular quality theme. An award of a 3 will result in a re-inspection of a service which will take place sooner than if a higher grade had been achieved to enable the service to respond with an action plan for improvement.

5.6 On 13th June 2019 the Children's Residential Service and the Care Inspectorate held a joint Improvement Support Day attended by approximately 80 residential staff. The purpose of the day was to raise awareness of quality improvement approaches, learning from research into what makes a good personal plan, and an update on the new inspection framework.

5.7 This new approach will ensure shared learning towards improved outcomes and standards through a collaborative and transparent partnership.

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6. Service Developments and Challenges

6.1 Development of Service Strategic Objectives

The Residential Service has recently gone through a collaborative process to agree 7 key improvement areas / strategic objectives aligned to GCHSCP Children's strategic planning objectives which are set out below.

- **Workforce Development:** ensuring a strong committed workforce who are equipped and skilled to perform the role and function of residential care practitioners.
- **Achieving Best practice in Residential Care:** will require contemporary review of practice models and core values associated with working with children and young people.
- **Performance Reporting Framework:** underpinned by key targets, accountability and continuous improvement
- **Health and wellbeing:** Providing greater self-determination and choice. Applying early intervention, prevention and where necessary harm reduction
- **Preparing for adulthood:** Ensuring young people are empowered with skills and abilities ensuring greater resilience and stronger sense of independence
- **Young People Participation:** including young people in their care plans and the design and development of our services
- **Improving and sustaining family connections:** Introducing model of Lifelong links I residential care and promoting extended family network searching.

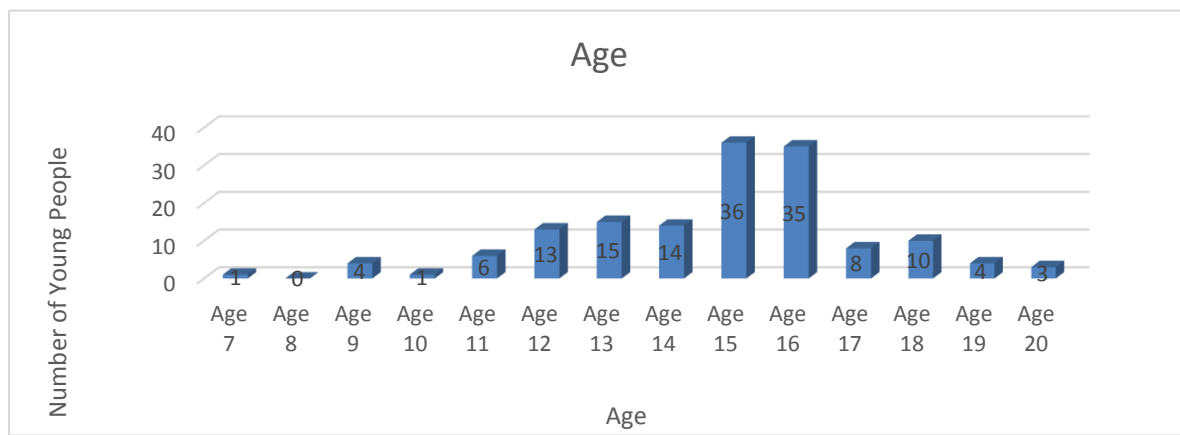
Implementation for each theme is being taken forward on a multi-agency basis and progress will be reviewed bi-monthly through a steering group of Service Managers and Unit Managers.

- 6.2 The Service has also recently agreed on key "Principles of Residential Care", which acts as a way of delivering a consistent set of standards/expectations across all 20 children's homes. After the final steps of consultation with staff teams and young people this will be rolled out across the service.
- 6.3 The Service typically operates at, or slightly above, capacity in terms of numbers of registered beds. In order to provide a more sophisticated matching process in relation to young people needs and the mix already living in the house, we will need to continue work on reducing the number of people requiring care so that the system has some 'breathing space' to ensure best practice around placement matching.
- 6.4 Only 1 young person required to move from a provided residential home to a purchased residential service in 2019 which is an extremely positive step towards our commitment to long term placement stability.
- 6.5 The service requires to provide care for young people with increasingly complex needs in relation to mental health, trauma, and young people who present a high risk to themselves and others. This is becoming increasingly challenging within the environment of 6 and 8 bedded homes and remains a key focus as we progress.

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The age range of young people looked after as at 26.7.19 is provided below.



- 6.6 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.
- 6.7 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, which brings additional challenges. In conjunction with the city's Asylum Team, assessment and support is provided currently supporting 19 unaccompanied asylum seeking young people in our provided children's homes.
- 6.8 In the past year we have developed new initiatives and enhanced partnership arrangements with key housing providers utilising housing options for the young people and extending out usage 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.
- 6.9 In keeping with Glasgow's Children's Services transformational change programme we have completed stage one of a consultation with CELCIS (the Centre for Excellence for Children's Care and Protection). As part of the consultation we learned from experts in relation to implementation science and sector leading practice. Stage two of this process is now due to begin, continuing with the expert consultation of CELCIS in developing Glasgow's model of 'trauma informed care'. The process will explore the theoretical evidence in relation to trauma, attachment and child development to ensure staff and the wider service operate at an excellent standard to support a highly complex service user group. This stage of the review will explore what will need to change within the residential system, how staff can perform at the highest standard and what we need from all connections to the system.
- 6.10 Implementation science tells us that wider organisational understanding and support are essential to enable implementation of the model on such a large scale. Our model will be developed using current excellent practice already in Glasgow and other models of care where an evidence base supports the approach. Our

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model will be developed from within and take into account the profile of the current service and meet the demands in providing residential care in Glasgow now and for the foreseeable future.

- 6.11 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 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.
- 6.12 Over the last 6 months the residential service has commenced a peripatetic team. The purpose of the team is to provide skilled experienced staff support to the wider system to cover absence, maternity leave, sickness and crisis support.
- 6.13 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 the volume of older young people being admitted into care. Working closely with residential services we will seek to return young people to families as swiftly as possible, wherever possible.

7. Future Developments

- 7.1 St Vincent Crescent is currently being refurbished by Glasgow West Housing Association as a 4 bed Continuing Care Resource for young people moving on from provided residential. The resource is due to open in September 2019 and support for young people will be provided by a voluntary sector provider.
- 7.2 Our 5 bedded Home at Airth Drive will be replaced by a new build 8 bedded home. A vacant site in Mossbank has been identified as suitable for a new build. Discussions are ongoing with City Property LLP regarding the acquisition of this land. Design of the new build is in development by DRS Project Management and Design Team and City Building has been identified as the contractor. Site start estimated April 2020/completion estimated April 2021.
- 7.3 Airth Drive will be retained and fully refurbished delivering two semi-detached properties offering 4 beds for Continuing Care Resource to be supported by a voluntary sector provider. A site start is estimated Autumn 2019 with completion estimated late spring 2020.
- 7.4 The final stage of the current programme will involve the 6 bedded Home at Seamill Street, which is not fit for purpose, being replaced by a new 8 bedded Home at Butterbiggens Road. This new build will be part of a new housing development being delivered by LINK Housing Association. Site start currently estimated February 2020 with a completion estimated February 2021.

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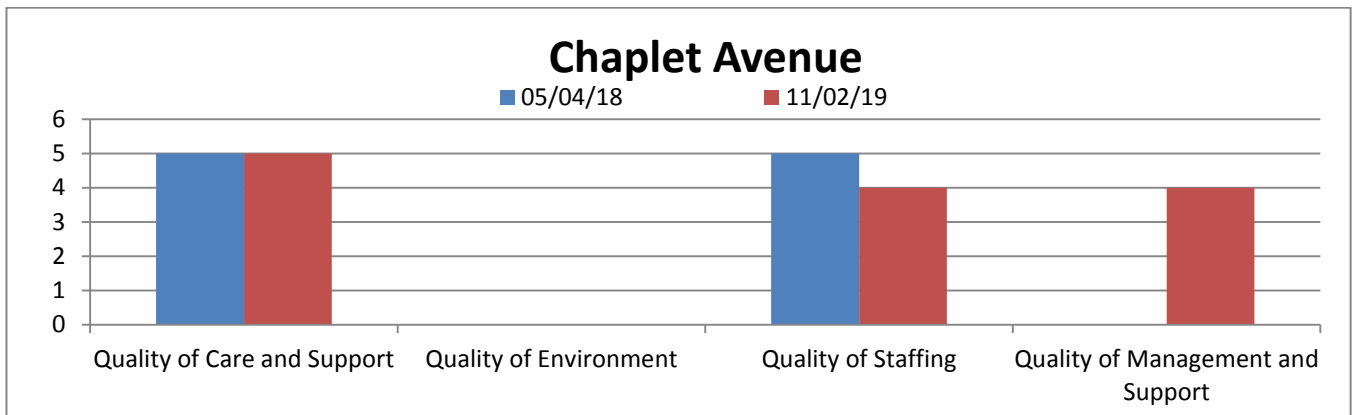
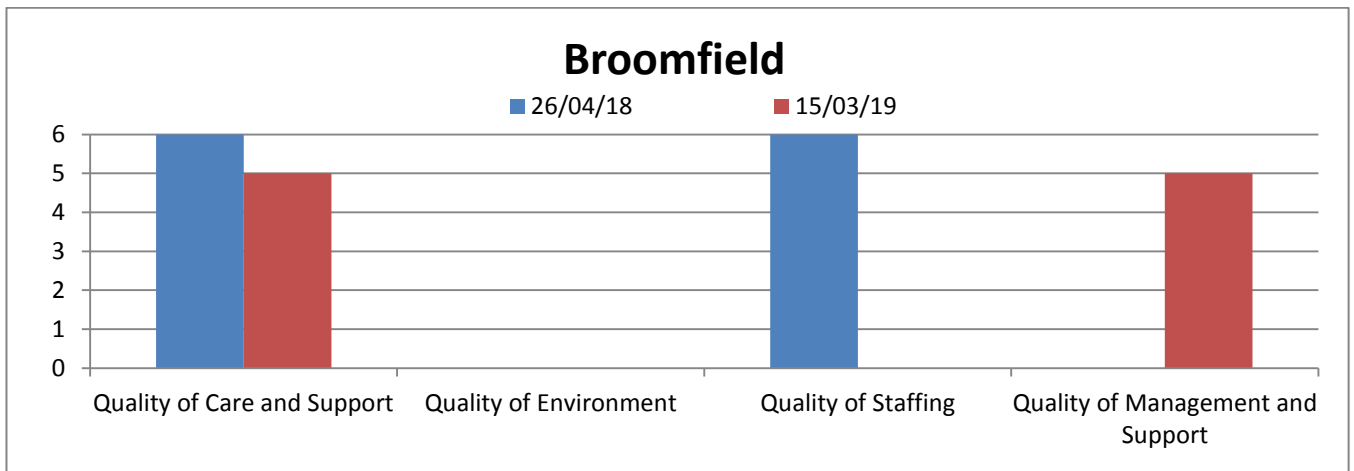
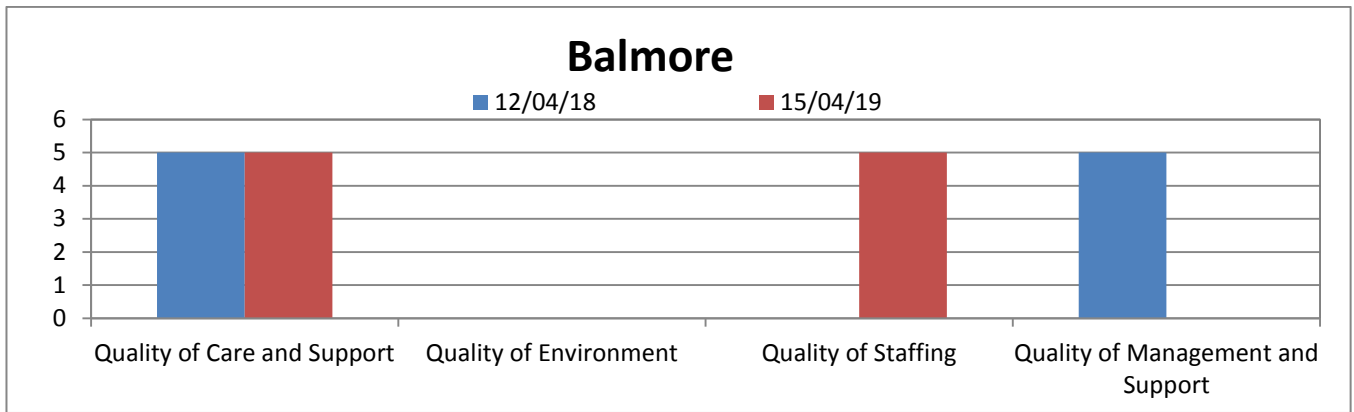
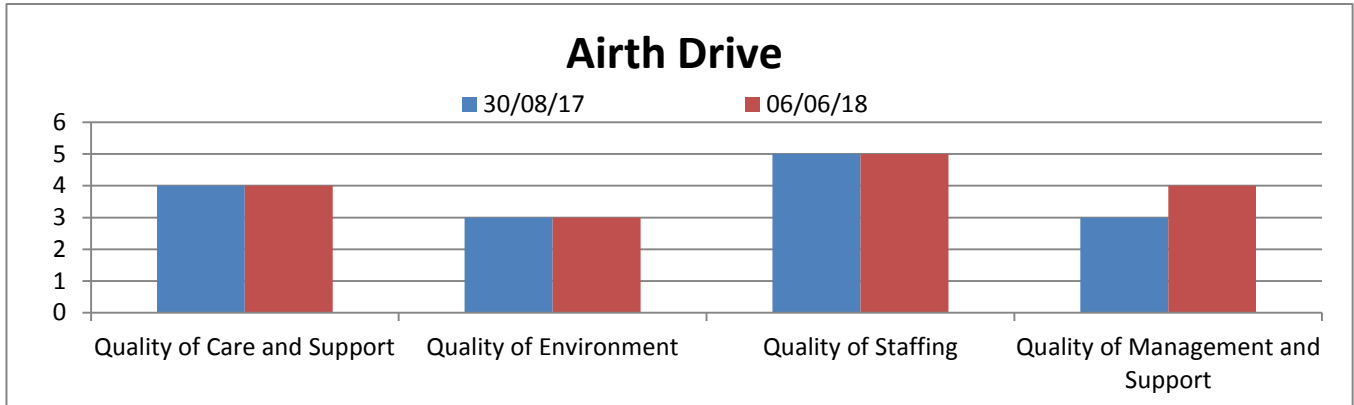
8. Recommendations

8.1 The IJB Finance, Audit and Scrutiny Committee is asked to:

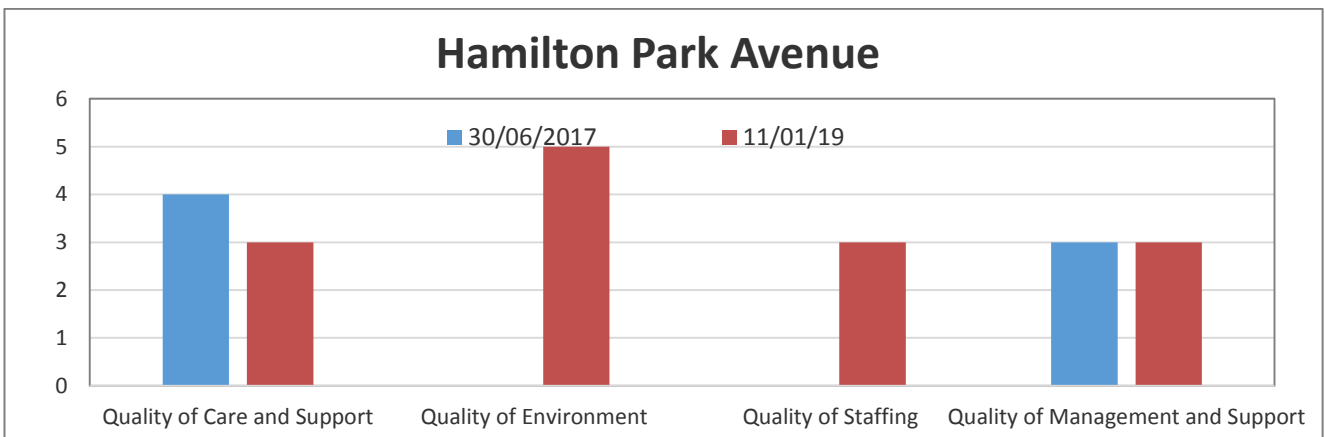
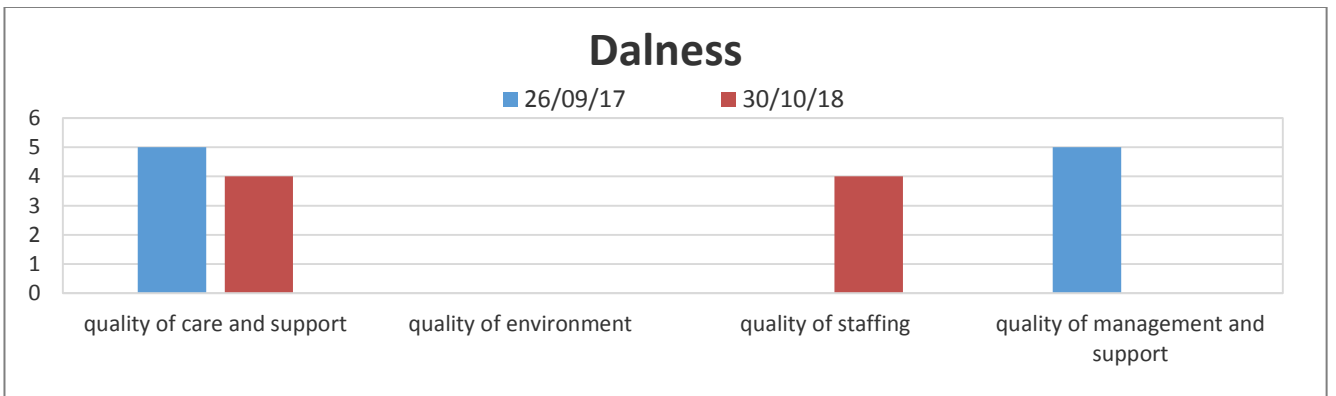
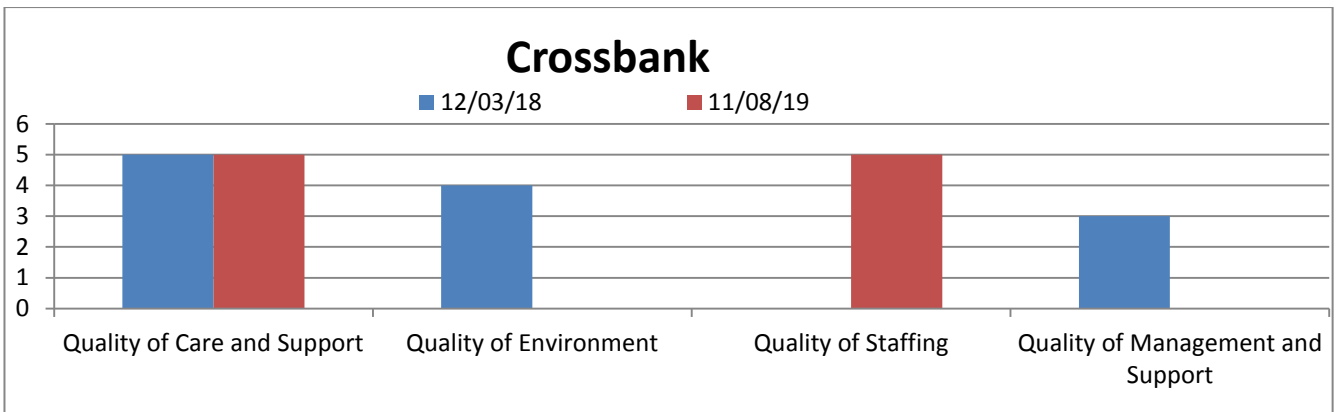
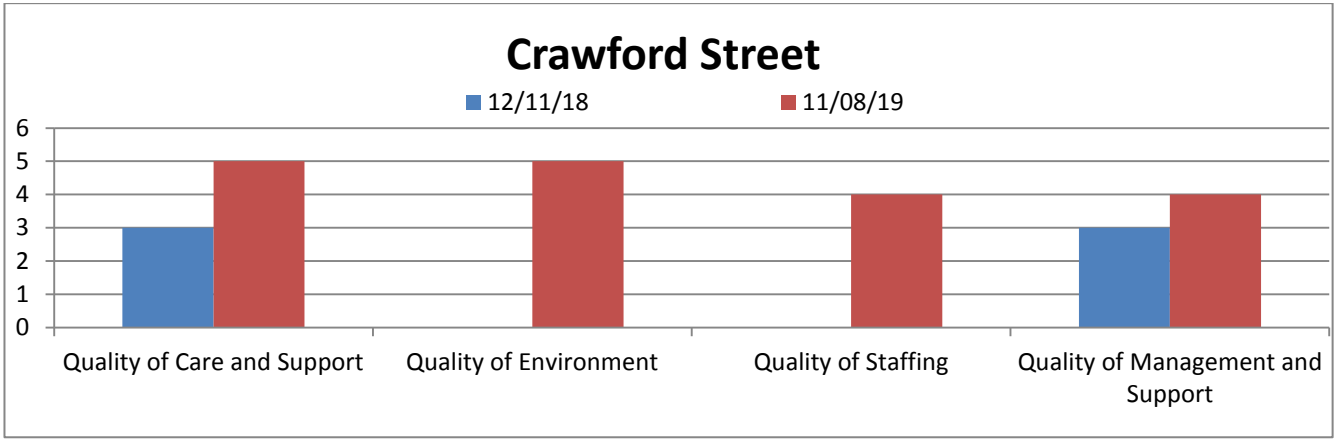
- a) note the findings of this report in respect of the range of directly provided services inspected, themes arising and trends in relation to grades awarded;
and
- b) note the positive progress in relation to service developments.

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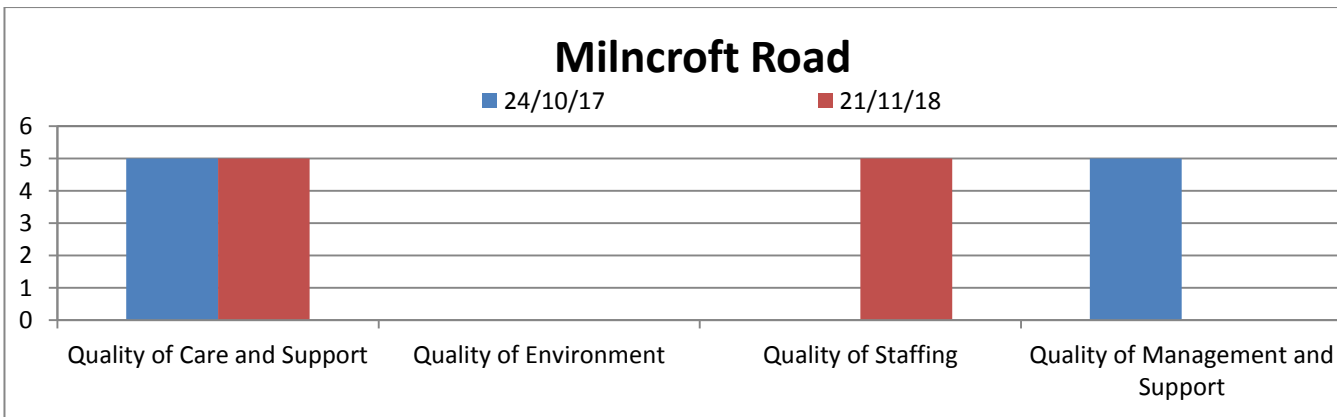
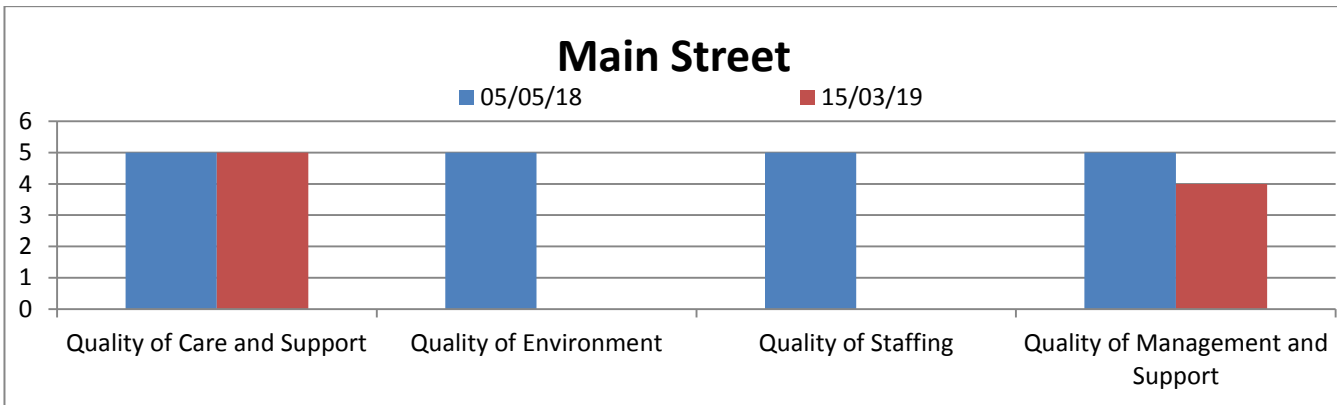
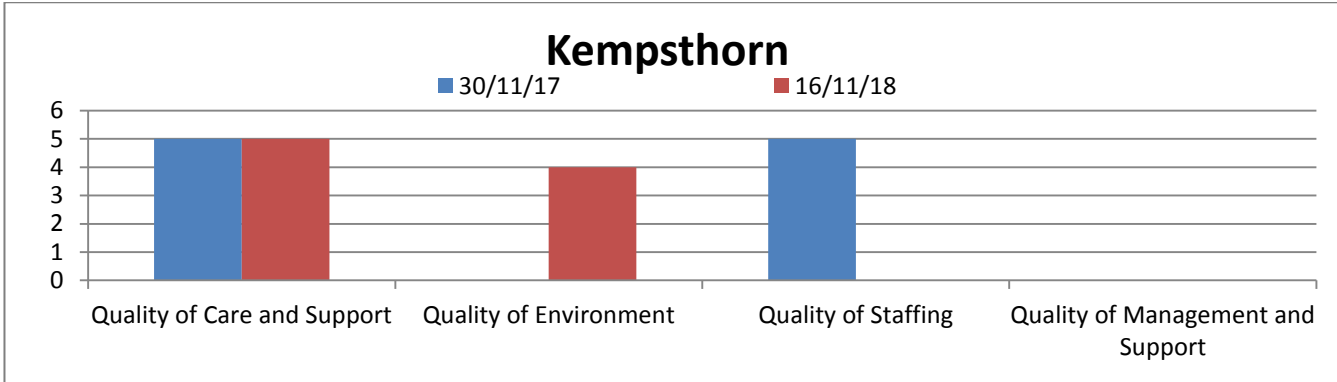
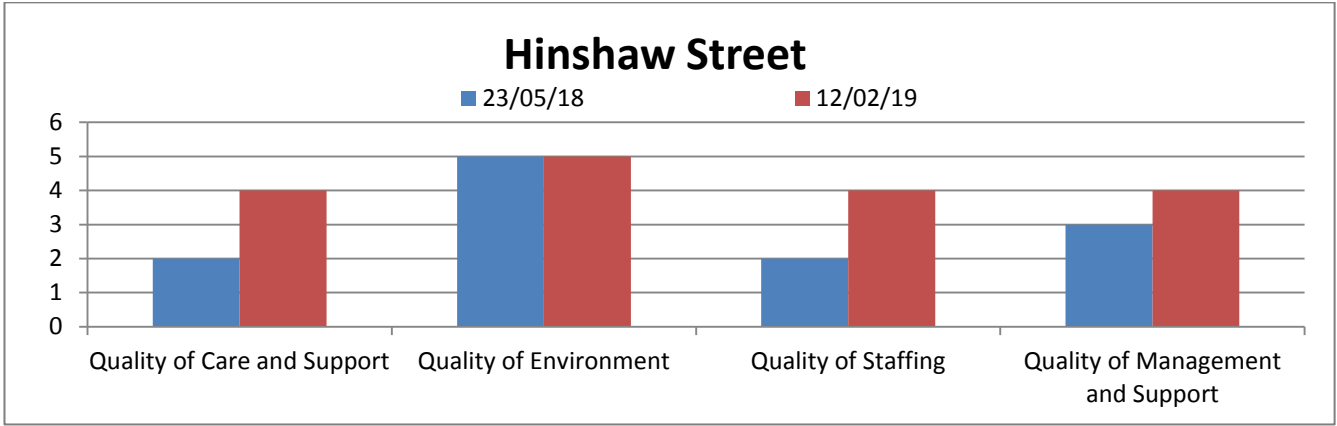
Appendix 1 - Individual Home Scores



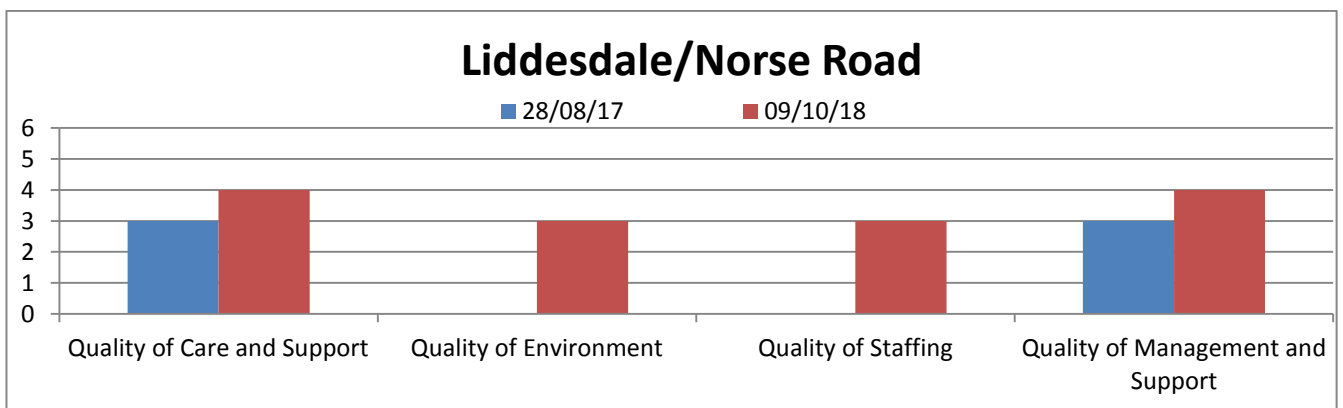
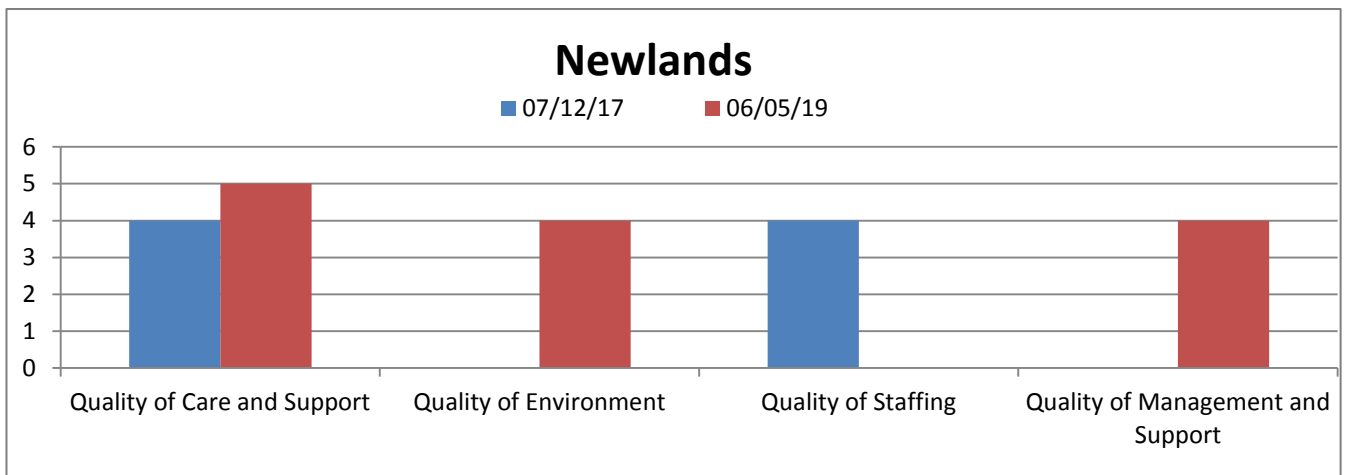
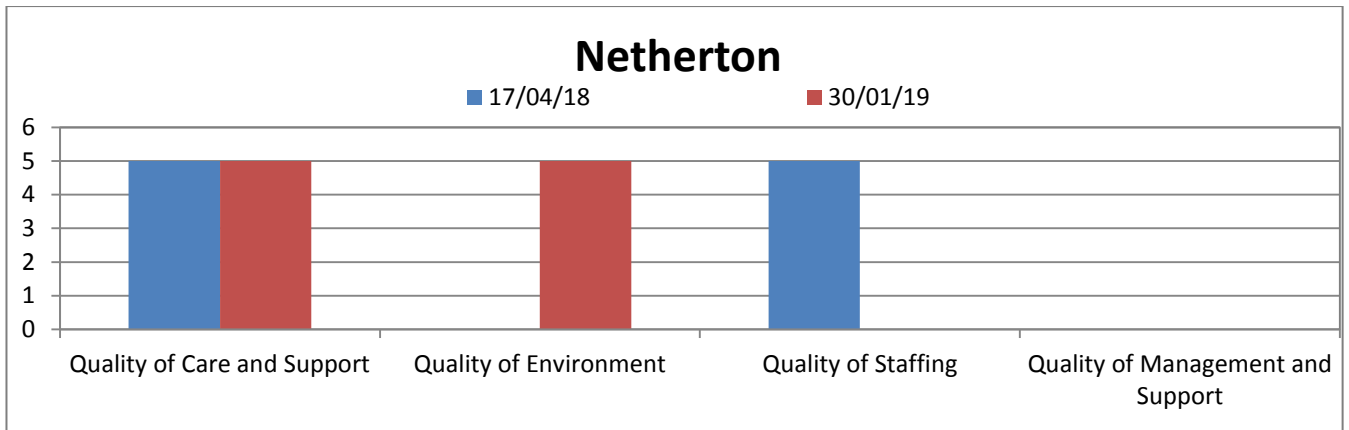
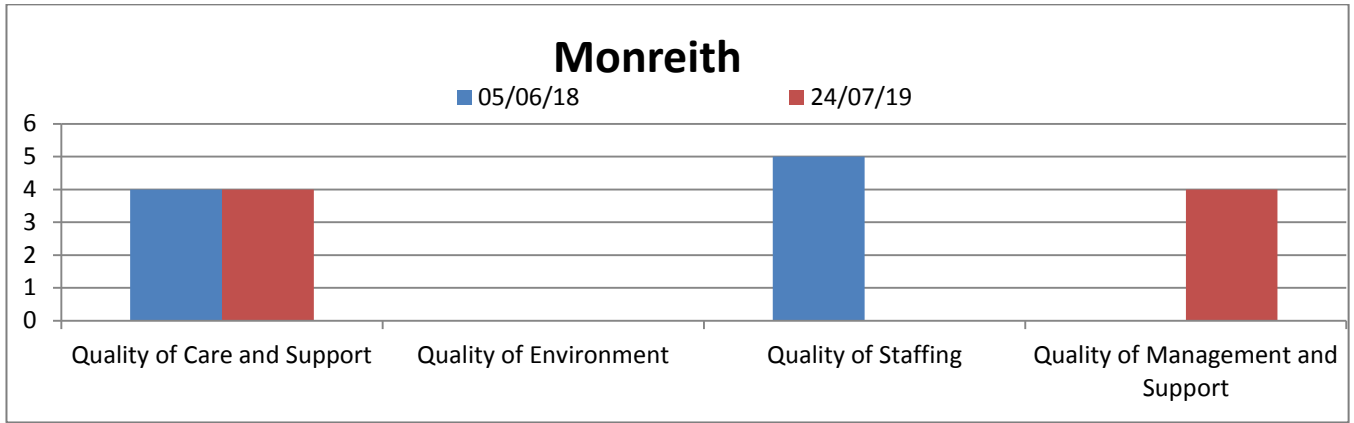
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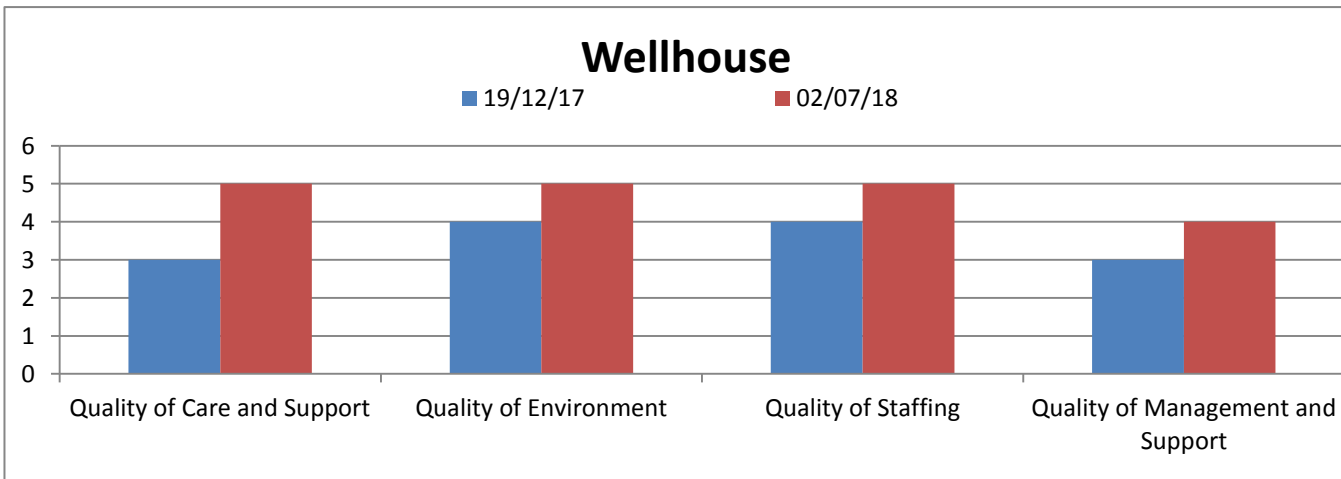
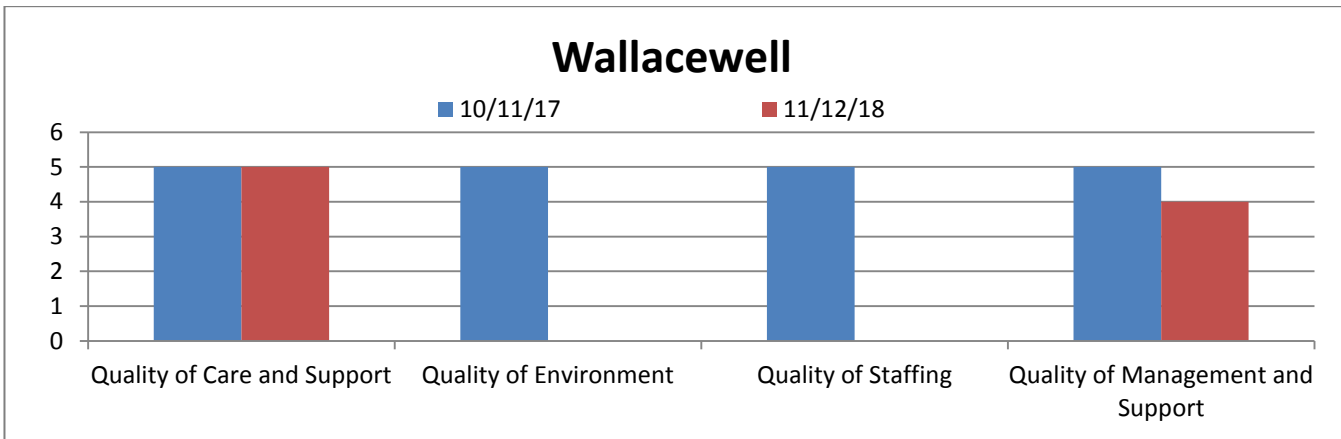
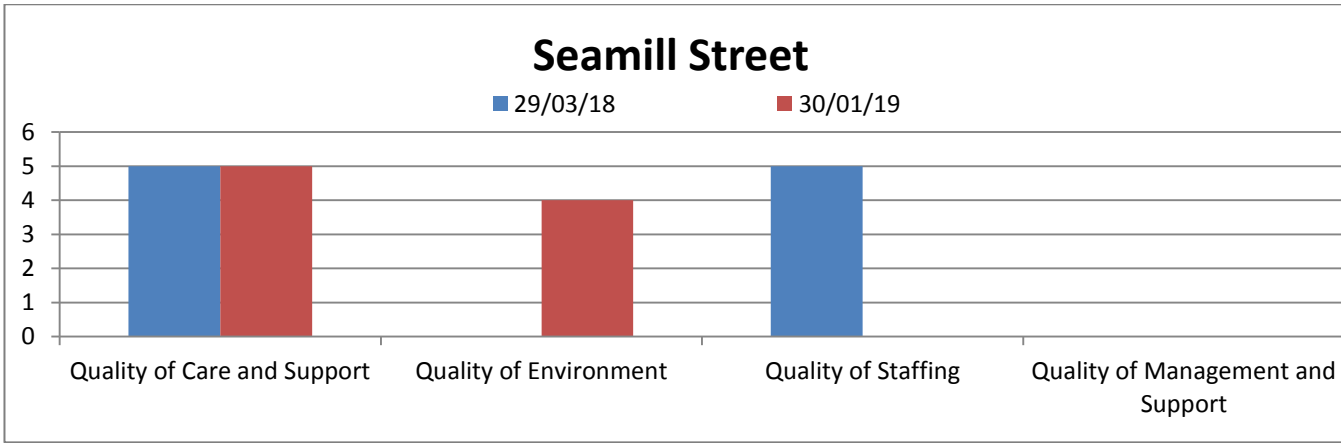
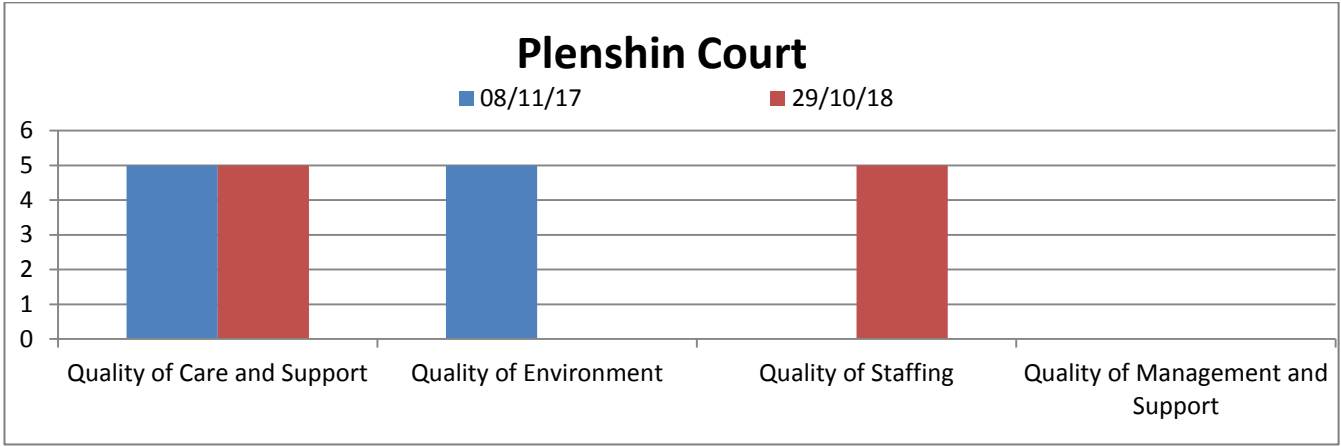


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Appendix 2 – Most recent and Previous Individual Home Scores in Table Format

Prior Grades

Unit Name	date of final report	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
Balmore	12/04/2018	5			5
Broomfield	26/04/2018	6		6	
Chaplet Avenue	05/04/2018	5		5	
Crawford Street	12/11/2018	3			3
Crossbank	12/03/2018	5	4		
Dalness	26/09/2017	5			5
Hamilton Park Avenue	09/07/2018 (follow up inspection no grades awarded)				
Hamilton Park Avenue	30/06/2017	4			3
Hinshaw Street	17/08/2018 (follow up inspection no grades awarded)				
Hinshaw Street	23/05/2018	2	5	2	3
Kempsthorpe	30/11/2017	5		5	
Main Street	05/05/2018	5			5
Milncroft	24/10/2017	5			5
newlands	07/12/2017	4		4	
Monreith	05/06/2018	4		5	
Netherton	17/04/2018	5		5	
Norse Road (liddesdale)	11/04/2018 (follow up inspection no grades awarded)				
Norse Road (liddesdale)	28/08/2017	3			3
Plenshin court	08/11/2017	5	5		
Seamill Street	29/03/2018	5		5	
Wallacewell	10/11/2017	5	5	5	5
Wellhouse	19/12/2017	3	4	4	3

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Most Recent

Unit Name	date of final report	Quality of Care and Support	Quality of Environment	Quality of Staffing	Quality of Management and Leadership
Airth Drive	06/06/2018	4	3	5	4
Balmore	15/04/2019	5		5	
Broomfield	15/03/2019	5			5
Chaplet Avenue	11/02/2019	5		4	4
Crawford Street	01/08/2019	5	5	4	4
Crossbank	30/01/2019	5		5	
Dalness	30/10/2018	4		4	
Hamilton Park Avenue	11/01/2019	3	5	3	3
Hinshaw Street	12/02/2019	4	5	4	4
Kempsthor	16/11/2018	5	4		
Main Street	15/03/2019	5			4
Milncroft	21/11/2018	5		5	
Monreith	24/07/2019	4			4
Netherton	30/01/2019	5	5		
newlands	06/05/2019	5	4		4
Norse Road (Ildesdale)	09/10/2018	4	3	3	4
Plenshin court	29/10/2018	5		5	
Seamill Street	30/01/2019	5	4		
Wallacewell	11/12/2018	5			4
Wellhouse	02/07/2018	5	5	5	4

Requirements and recommendations 6.8.19**Requirements**Dalness

In order to ensure that young people's care plans are appropriate to their needs, the provider must work closely with all partner agencies to ensure the wellbeing of all young people is met without any undue delay. This should include ensuring young people are safe at all times, and appropriate action should be taken if there are any welfare concerns. Children and young people should be supported to be fully involved in developing and reviewing their care plan.

Norse road

The provider must ensure that suitable staffing arrangements are in place to meet the needs of young people living at the service. Staffing arrangements should also take account of the skill mix of staff on duty in order to reflect how young people are being supported in key aspects of their lives.

RecommendationsChaplet Avenue

The provider should ensure that all relevant staff receive regular supervision

Dalness

The provider should improve communication between staff in order to promote consistency of care for young people through having more regular team meetings and team development sessions.

Hamilton Park Avenue

The provider should conduct a review of current working practices relating to the use of sanctions. This will highlight existing approaches to the care and support of young people and will allow for adaptations as required. This will also support more consistent team work and promote improved relationships.

The provider should develop a clear statement of purpose for the service, taking account of support for young people who are reaching adulthood and who require assistance to lead a more independent lifestyle. This will support more consistent practice, while assessing individual needs of young people.

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Hinshaw Street

The provider should ensure that opportunities for focused interventions are made available to young people at risk of harm and that assessment of need takes account of strategies which actively reduce known and potential risk situations

The provider must ensure that staffing arrangements are in place to allow all aspects of the service to function appropriately

The provider must ensure that relevant staff receive further training in specific conditions affecting young people

The provider should secure the appointment of a permanent manager for the service as soon as possible in order to lessen the anxieties regarding future change

Kempsthorpe

The service provider should carry out planned developments to ensure safety and add to the play options for the young people. This should be promptly completed and ways of making the interior environment more welcoming and appropriate for the younger residents should be considered.

Main Street

The provider should ensure that young people are supported to be as fully involved as possible in developing their own care plan and reviewing their progress. The provider should seek feedback from stakeholders and, following this, develop a plan to outline how the service will continue to develop

Netherton

Staff deployment should be kept under review to ensure that there is a team in place which has a suitable gender balance to meet the needs of the resident group and that sufficient staff are in place to provide individual attention for vulnerable young people when they need it.

The service provider should ensure that resident young people have access to educational resources which effectively meet their needs

Newlands

The provider should ensure that there is stability in the staff team. Individual staff should not be moved between services without notice as this affected the relationships which were a core part of the care of the resident young people.

A process for considering new admissions to residential house should be put in place which takes into account the needs and safety of young people already living there. The needs of resident young people and the stability of their lives should be taken into account when planning to move services.

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Seamill Street

There should always be sufficient staff available who are able to fully use the service provider's behavior management system as a means of ensuring the safety of all concerned.

The physical environment should be developed to have more of a homely ethos through a choice of décor and furnishings

Wallacewell

The provider should ensure that care plans and risk assessments are completed within appropriate timescales, young people are given the opportunity to be fully involved in their development and regular reviews occur to ensure the objectives of the placement are being met and positive outcomes for young people are promoted.

Wellhouse

The provider should ensure that night shift staff receive support from a senior and have regular supervision in line with the providers own supervision policy.

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