

Inspection of Midlothian Residential Service for Young People Report**Report by Joan Tranent, Head of Children's Services****1 Purpose of Report**

This report outlines the outcome of the above unannounced inspection as carried out by the Care Inspectorate in July 2018.

2 Background

2.1 Midlothian Residential Services consists of two purpose built houses in Penicuik and Dalkeith with a third traditional house in Gorebridge. The houses in Penicuik and Dalkeith have five en-suite bedrooms and are registered to provide care to a maximum of ten young people both male and female aged 10 years to 21 years. At the time of the Inspection there was a time limited variation in place to provide care to one additional young person with severe and complex needs within the house at Gorebridge.

2.2 The Care Inspectorate is the independent scrutiny and improvement body for care services in Scotland. They inspect all registered care services and local authority social work departments on a regular basis to ensure that providers are meeting standards required and are working to improve the quality of care for everyone. Every time they inspect these services they produce an inspection report.

2.3 Based on the findings of this Inspection the Care Inspectorate awarded the following grades:

Quality of care and support	Grade 4	Good
Quality of Management and Leadership	Grade 4	Good
Quality of Environment	Not Assessed	
Quality of Staffing	Not Assessed	

The Inspectors reported that the service's performance across both themes (care and support and management and leadership) was good and demonstrated important strengths.

2.4 The Inspection Team noted the following strengths:

- The service has continued to develop and improve since the last inspection. The Inspectors felt that the team was working more cohesively and that good leadership was supporting the improvement journey.
- Care plans showed good understanding of the current needs of young people and the measures required to promote progress. Plans were written sensitively and conveyed positive regard for the young people. Young people's interests and choices were evident within plans and were used to motivate and encourage. Outcome focused assessment planning was used positively to encourage progression.
- Risk assessments were in place and reviewed regularly. Staff supervision was occurring regularly and records showed positive access to training opportunities.

- There was a clear service development plan in place. The plan was actively reviewed during team meetings, enabling staff to have a good understanding of progress achieved to date and further actions required to support improvement.
- Placing social workers commented favourably about the close working relationships they had with the service and described some of the positive outcomes that had been achieved by and for the young people.

2.5 The Inspection Team reported that the authority could do better in the following areas:

- The service has experienced some staffing fluctuation over the past year especially at senior level, and whilst necessary, the Inspector felt that there could have been more planning and support to young people to prepare for and understand transitions to promote their sense of safety and security.
- The number of locum staff used since the last inspection had increased which has placed additional pressure on core staff in managing the needs of complex young people.
- There is a need to further promote an anti-bullying ethos as there were some incidences of young people being bullied by their peers. Whilst staff are aware of these issues and have tried to support young people, there was a recommendation that more could be done.
- Practice arrangements for medication storage, administration and recording needs to improve and follow procedures and current guidance.
- Notification of incidents to the Care Inspectorate was another area that requires further training and development. Progress in this area shall be considered at our next inspection.

3 Report Implications

The Care inspectorate identified one requirement and two recommendations:

- Requirement:

In order to ensure that medication storage, administration and recording systems are well-managed, the provider must review medication practice to ensure it is compliant with the service's own medication procedure by 30th September 2018.

- Recommendations:

Ensure locum staff have access to relevant information regarding young people's care and safety needs and that we provide regular supervision arrangements.

Enhance safety, security and wellbeing of all young people, an anti-bullying ethos should be further promoted.

3.1 Resource

There are no resource issues arising from this report.

3.2 Risk

The Care Inspectorate regulate all care services in Scotland using the [National Care Standards](#), set out by the Scottish Government, as a benchmark for how each type of service should perform. These standards are the minimum that children and young people should expect when using care services.

If the standards are not being fully met, the Care Inspectorate would note this in the inspection report and require the service manager to address these. The Care Inspectorate could impose an additional condition on the service's registration if the provider persistently, substantially or seriously fails to meet the standards or breaches a regulation. They also have the power to issue an improvement notice detailing the required improvement to be made and the timescale for this.

Monitoring, review and evaluation of progress by officers in Children's Services is the control measure in place to reduce the risk of failure of the care services and to demonstrate their capacity to improve.

3.3 Single Midlothian Plan and Business Transformation

Themes addressed in this report:

- ☐ Community safety
- ☐ Adult health, care and housing
- ☒ Getting it right for every Midlothian child
- ☐ Improving opportunities in Midlothian
- ☐ Sustainable growth
- ☐ Business transformation and Best Value
- ☐ None of the above

3.4 Impact on Performance and Outcomes

Performance and outcomes will continue to be measured through the quarterly reporting, review and evaluation process.

3.5 Adopting a Preventative Approach

The Service will continue to improve its work in line with its improvement plan. The Education, Communities and Economy Directorate will continue to challenge and support the Service in relation to developing and implementing a range of quality improvement strategies.

3.6 Involving Communities and Other Stakeholders

As part of their inspection process the Care Inspectorate spoke with 4 young people during the inspection and informally chatted with other young people during meal times and whilst receiving a tour of each house.

Prior to the inspection taking place, Inspectors received 3 completed Care Standard questionnaires. Two young people reported they were happy with the quality of care received, whilst one young person strongly disagreed.

Copies of the report have been made available to Elected Members, staff and other interested parties.

3.7 Ensuring Equalities

An action Plan has been prepared to address the areas for improvement recommended in the report. The action plan will be screened for equalities implications.

3.8 Supporting Sustainable Development

The Service Improvement Plan allows for sustainable development and improvement.

3.9 IT Issues

There are no IT issues.

4. Summary

Midlothian Residential Services continues to develop new and creative ways to ensure that our young people have a safe and positive experience whilst living in our houses. Whilst overall the Inspection was positive there remains areas for improvement which we shall address via an action plan. The plan shall be shared with all workers and reviewed regularly by senior managers to ensure we are meeting the identified outcomes.

5 Recommendations

Cabinet are requested to:

- Note the content of the Inspection report.
- Pass the report to the Performance, Review and Scrutiny Committee for consideration.
- Pass the report to November Council for noting purposes.
- Acknowledge the continued improvement since the last Inspection and the positive and ongoing work by management and staff connected with the Midlothian Residential Services for Young People.

Date: 2nd October 2018

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Background Papers:

Appendix 1 Care Service Inspection Report, dated 19th July 2018

Appendix 2 Actions undertaken