

To: Education and Children's Services Policy Board

On: 23 August 2018

Report by: Director of Children's Services

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Heading: Inspection of a Registered Service - Throughcare

#### 1. Summary

- 1.1 The Throughcare Housing Support Service was inspected May 2018 by the Care Inspectorate as part of inspection regime of the national regulator for care services. The report was published by the Care Inspectorate on 21 May 2018 and is attached as an appendix to this report. The report is also available from the director of children's services or from the care inspectorate website: <a href="http://www.careinspectorate.com/">http://www.careinspectorate.com/</a>
- 1.2 The purpose of the inspection was to evaluate the quality of care. The inspector assessed the service with a focus on three quality indicators which were: care and support; staffing; and management and leadership.
- 1.3 The report identified a number of areas for improvement in relation to staffing levels, training and development; the recording of care planning and risk management for the young people; notification processes to the Care Inspectorate of reportable incidents; and quality assurance arrangements. As a result of the findings the service was judged as weak and a number of recommendations and requirements have been made in the report.
- 1.4 The report did also highlight some strengths in particular staff relationships with young people and the partnership with health colleagues.
- 1.5 Children's Services have taken immediate action to address the issues highlighted in the report. An action plan has been developed and this will be kept under close review.

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#### 2. Recommendations

2.1 Members of the Education and Children's Services Policy Board are asked to note:

- (a) the outcome of the inspection of the Throughcare Housing Support Service, attached as appendix 1;
- (b) immediate action has been taken to address the requirements and recommendations within the report; and
- (c) a report will be brought back to members on the progress of the service in addressing the findings of the inspection report.

#### 3. Background

- 3.1 Social care services are subject to a range of audit and scrutiny activities to ensure that they are undertaking all statutory duties and providing appropriate care and support to vulnerable individuals and groups. In addition to service-wide inspection, individual registered services are subject to regular inspection by the Care Inspectorate. Typically, residential facilities will be subject to two inspections per year, including at least one unannounced inspection. Other services are likely to be inspected annually or bi-annually.
- 3.2 The Care Inspectorate may impose requirements and/or recommendations in its inspection reports. Requirements are legally enforceable and set out what is required by a care service to comply with the Regulation of Care (Scotland) Act 2001 or with the conditions of registration. A recommendation will set out an action that would improve or develop the quality of the service, but failure to meet a recommendation would not result in enforcement.
- 3.3 In Renfrewshire, Children's Services have 9 registered care services including residential care services, Fostering and Adoption services and the Throughcare Service which provides support to previously accommodated young people.
- 3.4 Previously the Social Work Service would take six monthly reports to the Community and Family Care Policy Board to provide an overview on the outcome of the inspection of registered services. A decision was then made that reports would be brought to Education and Children's Services Board by exception, in the event that the outcome from an inspection was not at a level that we would want or expect to deliver on an ongoing basis.

- 3.5 Renfrewshire Council's Through Care Team provides housing support to previously accommodated young people in the Renfrewshire area. Accommodation and support is provided in two ways. Charleston Square is a purpose-built supported housing development in Paisley offering 10 self-contained flats. The service is staffed 24 hours per day. The service also has independent satellite flats in the community situated in a range of locations across Renfrewshire. Young people living in the satellite flats are supported on an outreach basis where staff support young people in the community.
- 3.6 The recent inspection report made a number of requirements and recommendations. These related to staffing levels, training and development; the recording of care planning and risk management for the young people; notification processes to the Care Inspectorate of reportable incidents; and quality assurance arrangements.
- 3.7 The inspection report highlighted that the supported accommodation at Charleston Square was experiencing staffing shortages and in the Care Inspectorate's view the resource was not always appropriately staffed. Furthermore, the inspector also found that staff were not getting appropriate opportunities to attend training events. While the service has experienced sickness and vacancies, appropriate staffing levels were maintained in line with our registered requirements. Vacancies have been permanently filled since the inspection and the service is fully staffed. The training needs of individual staff are being reviewed and will inform the development plan for the service. The Service will keep staffing levels under review to ensure these are appropriate to the needs of the young people in the service.
- 3.8 The Inspector also found that the care planning processes for the young people were not robust enough and that more emphasis was required on the assessment of risk in relation to the support for the most vulnerable young people living in Charleston Square. Since the conclusion of the Inspection care plans and risk assessments have been completed for each resident in Charleston Square and they will be kept under regular review.
- 3.9 A related matter was the consistent reporting of notifiable incidents to the Care Inspectorate in accordance with regulatory requirements such as the hospital admission of a young person and the absence of the registered manager due to sickness. Staff have been reminded of the requirement and oversight by the external manager established.
- 3.10 The Inspection found that the management and leadership of the service needed to be improved and that quality assurances processes required to be more robust. The quality assurance arrangements for the service have been reviewed and steps taken to ensure close oversight of the improvement action plan which addresses all of the requirements and recommendations of the inspection report.

- 3.11 While fully recognising the issues highlighted in the report it is noted that strengths were also identified including working with partners in health, staff's knowledge of the young people and their ability to engage effectively with the young people. The report noted the feedback from the service users who spoke to the Inspector which was largely positive with young people advising that they felt supported.
- 3.12 Renfrewshire Council is highly aspirational for our most vulnerable children and young people. Children's Services acknowledge the particular issues raised in this report and have taken immediate action to address these. The measures we have put in place are being closely monitored and kept under review and include a detailed action plan to address each of the issues raised.
- 3.13 Children's Services are confident the measures we have taken will ensure that the service improves to the previous high standards identified in earlier inspections. We are confident that future inspections will reflect progress has been made.

#### Implications of this report

1. Financial: None.

2. HR and Organisational Development: None.

3. Community/Council Planning:

Our Renfrewshire is thriving: we strive for high standards of

care across our services to offer our children and young people the opportunity to develop their full potential enabling them to contribute to a fairer society.

Our Renfrewshire is well: by providing an environment

which encourages care, welfare and development the service play a crucial role in developing young people to participate in their

community and become responsible citizens.

4. Legal: None.

**5. Property/Assets:** None.

**6. Information Technology:** None.

#### 7. Equality and Human Rights

The Recommendations contained within this report have been assessed in relation to their impact on equalities and human rights. No negative impacts on equality groups or potential for infringement of individuals' human rights have been identified arising from the recommendations contained in the report because for example it is for noting only. If required following implementation, the actual impact of the recommendations and the mitigating actions will be reviewed and monitored, and the results of the assessment will be published on the Council's website.

- 8. Health and Safety: None.
- **9. Procurement:** None.
- **10.** Risk: None.
- **11. Privacy Impact:** None.
- **12. Cosla Policy Position:** not applicable

List of Background Papers none

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# Renfrewshire Council Through Care Team Housing Support Service

10 St. James Street Paisley PA3 2HT

Telephone: 0141 618 4531

Type of inspection: Unannounced Inspection completed on: 21 May 2018

Service provided by: Service provider number: Renfrewshire Council SP2003003388

Care service number: CS2005101044



#### About the service

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at www.careinspectorate.com

The service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate in April 2011.

Renfrewshire Council Through Care Team provides housing support to vulnerable young people in the Renfrewshire area. Accommodation and support is provided in two locations.

Charleston Square is a purpose-built supported housing development in Paisley offering 10 self-contained flats. One flat offers short-term respite accommodation for young people living with supported carers. The service is staffed 24 hours per day.

The service also has seven young people being supported in satellite flats situated in a range of locations in Renfrewshire. Young people living in the satellite flats are supported on an outreach basis where staff meet young people in the community.

The service had recently gone through a restructuring process where the outreach team was operating from 10 St James Street, Paisley.

At the time of our inspection there were 17 young people being supported across both services.

#### What people told us

We spoke with five young people as part of our inspection. Most were satisfied with the quality of support with all young people advising staff were approachable and easy to talk to. We received some less positive feedback with one young person stating there was a significant drop in support when first moving into his own tenancy. Another young person said they would like more activities and another young person told us there was no care planning.

Below are some of the comments we received:

"I like the flat and staff are alright".

"There's no care planning here".

"They (staff) always take an interest in you".

"I've been happy with the support".

"It would be good to have more support at the beginning".

#### Self assessment

Not requested at this inspection.

## From this inspection we graded this service as:

Quality of care and support 2 - Weak
Quality of staffing 2 - Weak
Quality of management and leadership 2 - Weak

## Quality of care and support

#### Findings from the inspection

We graded the quality of care and support weak at this inspection. Although we identified some strengths, these were compromised by significant weaknesses which were impacting on people's experiences and outcomes.

We thought a key strength was how the service worked in partnership with health professionals to ensure staff and young people were knowledgeable around health issues. This included health professionals visiting the service and staff proactive in seeking specialist advice when required.

Through Renfrewshire Council's Champion's Board young people had opportunities to participate in strategic planning and it was pleasing to see an example of this. At a service level, however, we found insufficient levels of participation particularly in relation to service development and individual care planning.

(See recommendation 1)

A significant weakness was the absence of care planning which had limited outcome focussed work with young people. It was disappointing to find young people not progressing in key areas of their life. One staff member told us "young people just seem to down tools when they come here".

For some of the young people tracked, we saw disengagement from protective factors such as employment or college. Staff told us this was a trend and we concluded that insufficient staffing levels and the absence of care planning was significantly impacting on outcomes for young people.

(See requirement 1)

Staff and management told us reduced staffing levels were impacting on outcomes for young people. We saw that Charleston Square was often staffed by one support worker. One staff member told us "you're stuck in the office, so can't work in flats or community". Another said "At times we struggle to offer any support, it's like being glorified door keeper".

Previously looked after and accommodated, many of the young people at Charleston Square presented with a range of complex needs. At our inspection we found ambiguity in the aims and objectives of the service and disparity in terms of the needs of young people and the resources available. Support and staffing levels must be informed by an ongoing assessment of the needs of residents.

#### (See requirement 2)

There was no evidence of risk planning or assessment being undertaken at the service. For one young person we requested immediate action to ensure plans were in place to reduce risk and promote their safety. The limitations in risk assessment at the service were extremely concerning representing a significant weakness.

(See requirement 3)

We concluded the service could improve how it supported and engaged young people in activities. It was pleasing to see efforts made to have residents meetings, group meals and activities such as yoga and summer barbeques. However, we thought more could be done to establish these as frequent events and engage young people more generally in positive activities.

#### Requirements

Number of requirements: 3

1. Renfrewshire Council must, after consultation with each service user and within 28 days of the date which the service user first received the service, prepare a written plan which sets out how the service user's health, welfare and safety needs are to be met.

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 5.-(1)

This is to ensure care and support is consistent with the Health and Social Care Standards which state 'My future care and support needs are anticipated as part of my assessment' (HSCS 1.14) and '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)

2. Renfrewshire Council must ensure that Charleston Square is staffed sufficiently to meet the needs of young people. Staffing levels must be informed by an ongoing assessment of need and the levels of support required for young people.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that 'my needs are met by the right number of people' (HSCS 3.14)

3. Where necessary to ensure the safety of young people, Renfrewshire Council must ensure risks assessments are completed in partnership with all stakeholders. These plans must show an analysis of risk and clear plans to promote the safety of young people.

This is to ensure care and support is consistent with the Health and Social Care Standards which state 'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event. (HSCS4.14)

#### Recommendations

Number of recommendations: 1

1. In partnership with young people, methods to involve young people in assessing and planning their care should be reviewed. This should include how feedback is used to improve the standard of care at the service.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that 'I am fully involved in assessing my emotional, psychological, social and physical needs at an early stage, regularly and when my needs change'. (HSCS 1.12) and 'I am supported to give regular feedback on how I experience my care and support and the organisation uses learning from this to improve'. (HSCS 4.8)

Grade: 2 - weak

## Quality of staffing

#### Findings from the inspection

We graded the quality of staffing weak at this inspection. We did identify some strengths, particularly in support workers ability to engage with young people effectively. Based on our observations and feedback we thought relationships with young people were sufficiently stable and positive.

We were also impressed with staff's knowledge of young people particularly at the outreach service. We found staff confidently offering support and using external supports when required to meet the needs of young people. It was pleasing to see one young person involved in the recruitment process for staff.

It was disappointing to find low morale at the service with staff feeling unable to support young people appropriately at times. One staff member told us "we used to do care plans but this fell away with no staff ". One external professional told us it was difficult working in partnership with support staff at Charleston Square due to their limited availability.

We saw inadequate levels of case recording for young people residing at Charleston Square and concluded this should be reviewed. Daily recording of young people's wellbeing and recording of key work sessions should be implemented.

(See recommendation 1)

Staff told us they had not had training for a significant period of time citing the impact of staff shortages on their development. One staff member told us "I've not had any training since I started" whilst another told us "training, we don't really get any just now".

We concluded not all staff felt confident in mental health first aid some of whom were lone working in Charleston Square. We concluded a review of staff training needs is required to ensure young people always get the emotional and practical support they need.

(See recommendation 2)

It was pleasing to see staff at the outreach service benefitting from sufficient levels of supervision. Recorded supervision was limited across all levels of staff at Charleston Square and not in accordance with Renfrewshire Council's policy.

(See recommendation 3)

#### Requirements

Number of requirements: 0

#### Recommendations

Number of recommendations: 3

1. Staff must keep clear, accurate and up-to-date records in relation to their ongoing work with young people. The registered manager must ensure effective recording systems are in place and that staff are confident in using these.

This is to ensure care and support is consistent with the Health and Social Care Standards which state 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes. (NHCS 3.14)

2. Renfrewshire Council should review staff training needs across the service. Staff must have time to develop knowledge, learn new skills and reflect on their practice.

This is to ensure care and support is consistent with the Health and Social Care Standards which state 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes. (NHCS 3.14)

3. All staff and management at Charleston Square should adhere to Renfrewshire Council's policy on supervision.

This is to ensure care and support is consistent with the Health and Social Care Standards which state 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes. (NHCS 3.14)

Grade: 2 - weak

## Quality of management and leadership

#### Findings from the inspection

We graded management and leadership weak. At the time of our inspection the registered manager was absent although the concerns highlighted in this report were a direct result of poor leadership over a significant period of time.

We were concerned to find insufficient quality assurance processes to support improvement at the service. This was particularly disappointing when viewed in the context of some poor outcomes and practice highlighted throughout this report.

(See requirement 1)

We were concerned about the service's response following some serious incidents. We saw no reports, records of staff de-briefs, risk planning or reflective learning for staff. A review of how the service responds to incidents must take place to ensure a safe environment for young people.

(See requirement 2)

Incidents had not been notified to the Care Inspectorate in accordance with regulatory requirements. Guidance on the details of notifiable incidents can be found in 'Records that all registered services (except childminding) must keep and guidance on notification reporting.' on <a href="https://www.careinspectorate.com">www.careinspectorate.com</a>.

(See requirement 3)

We found confusion from managers and staff in relation to roles and responsibilities particularly in relation to care planning. We thought a clear set of aims and objectives for the service was required to bring clarity to staff and external professionals.

(See recommendation 1)

In consultation with young people, information provided to new residents should be updated and the format improved. This should be accessible to young people and include information on care planning, reviews and participation.

(See recommendation 2)

Staff and external professionals told us leadership was lacking across the service. Several external professionals told us about the difficulties working with the service in terms of agreeing the levels of support required for vulnerable young people. We concluded that a culture change is required to offer needs-led and nurturing support to young people.

Although a service improvement plan had been developed for the service, we spoke to several staff, including a manager who was not aware of it. To support the improvements identified in this report, a robust action plan, including timescales and persons responsible must be implemented.

(See requirement 4)

#### Requirements

Number of requirements: 4

1. The provider must implement robust quality assurance practice and systems that result in improved outcomes for young people.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes'. (HSCS 4.19)

2. The provider should ensure that all required notifications are made to the Care Inspectorate.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that 'I benefit from different organisations working together and sharing information about me promptly'. (HSCS 4.18)

and

Records that all registered care services (except childminding) must keep and guidance on notification reporting. Care Inspectorate Publication code: OPS-0212-119. Amended version 1 April 2015.

3. Following incidents at the service, Renfrewshire Council must ensure systems to support learning and safe care are in place and being used by all staff.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that 'My care and support is provided in a planned and safe way, including if there is an emergency or unplanned event'. (HSCS 4.14)

4. Renfrewshire Council must produce an action plan to address the recommendations and requirements in this report. All staff should be aware of the plan and working towards the agreed outcomes.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes'. (HSCS 4.19)

#### Recommendations

Number of recommendations: 2

1. Renfrewshire Council should develop and update their service aims and objectives. This should include how young people are supported through a clear care planning framework.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that 'If I am supported and cared for by a team or more than one organisation, this is well co-ordinated so that I experience consistency and continuity' (HSCS 4.17)

2. In consultation with young people, the service should improve and develop a new information booklet for residents. Young people's rights in relation to care planning and participation must be included.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that 'I am actively encouraged to be involved in improving the service I use, in a spirit of genuine partnership'. (HSCS 4.7)

Grade: 2 - weak

What the service has done to meet any requirements we made at or since the last inspection

## Previous requirements

There are no outstanding requirements.

## What the service has done to meet any recommendations we made at or since the last inspection

#### Previous recommendations

There are no outstanding recommendations.

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

## Enforcement

No enforcement action has been taken against this care service since the last inspection.

## Inspection and grading history

Date	Type	Gradings	
20 Jan 2016	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 5 - Very good
4 Jun 2013	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 5 - Very good
31 Oct 2011	Unannounced	Care and support Environment Staffing Management and leadership	6 - Excellent Not assessed Not assessed 5 - Very good

Date	Туре	Gradings	
10 Mar 2010	Announced	Care and support Environment Staffing Management and leadership	6 - Excellent Not assessed 5 - Very good Not assessed
25 Feb 2009	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 4 - Good

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