

Meeting of South Ayrshire Health and Social Care Partnership	Performance & Audit Committee
Held on:	6 <sup>th</sup> August 2024
Agenda Item:	7
Title:	Unannounced Inspection of Sundrum View Children's House
Summary:	
This report is to inform South Ayrshire Performance and Audit Committee that there was an unannounced inspection by the Care Inspectorate on Sundrum View, one of South Ayrshire's Children's Houses. This inspection was carried out by one inspector from the Care Inspectorate with in-person visits taking place with feedback provided on 6 March 2024. Full report detailed in Appendix 1.	
Author:	Mark Inglis, Head of Children's Health, Care and Justice
Recommendations:	
It is recommended that the Performance & Audit Committee	
<ul> <li>reflect upon the key messages from the Inspection Report</li> <li>acknowledge the Health and Social Care Partnership Improvement plan and be assured of the ongoing improvement work being undertaken.</li> </ul>	
Route to meeting:	
Implications:	
Financial	
HR	
Legal	
Equalities	
Sustainability	
Policy	
ICT	



# UNANNOUNCED INSPECTION OF SUNDRUM VIEW CHILDRENS HOUSE FEBRUARY/MARCH 2024

## 1. PURPOSE OF REPORT

1.1 This report is to inform South Ayrshire Performance and Audit Committee that there was an unannounced inspection by the Care Inspectorate on Sundrum View, one of South Ayrshire's Children's Houses. This inspection was carried out by one inspector from the Care Inspectorate with in-person visits taking place with feedback provided on 6 March 2024.

Full report detailed in Appendix 1.

#### 2. RECOMMENDATION

#### 2.1 It is recommended that the Performance and Audit Committee

- i. reflect upon the key messages from the Inspection Report
- ii. acknowledge the Health and Social Care Partnership Improvement plan and be assured of the ongoing improvement work being undertaken.

#### 3. BACKGROUND INFORMATION

- 3.1 The Care Inspectorate carried out an unannounced inspection, in person, on 28<sup>th</sup> February 2024 between 11:15 and 19:30 and 29 February between 12:00 and19:00. Feedback was provided on 6 March 2024.
- 3.2 To prepare for the inspection they reviewed information about the service. This included previous inspection findings and registration information. They also reviewed information submitted by the service and information gathered over the course of the inspection year.
- 3.3 To inform their evaluations they:
  - spoke with young people using the service
  - spoke with staff and management
  - spoke to representatives from social services, education, and advocacy services
  - reviewed survey responses received from staff and external professionals
  - observed practice and daily life in the house
  - reviewed key documents.

#### 4. REPORT

- 4.1 The Care Inspectorate noted key messages;
  - Young people were supported to access their individual hobbies and interests.



- The environment was welcoming and homely.
- Staff supported young people to keep in contact with those that were important to them.
- Staff kept in touch with young people who had moved on from the service.
- Assessments and risk assessments could be SMART-er (specific, measurable, achievable, relevant, timebound).
- Training plans were being developed to include refresher safeguarding training and trauma training for the staff.

### 4.2 Overall the Inspector said;

- Staff had a good understanding of child protection procedures. They knew young people well and demonstrated their knowledge of keeping children physically safe. However, we found staff's understanding of trauma could be developed to support young people to be emotionally safe (see area for improvement 1).
- Risk assessments and care plans were in place for all young people, and these were regularly reviewed at Caring 4 U meetings.
- The service was undertaking work in ensuring language used and recording practices were in line with The Promise and this included monthly personalised letters to young people.
- Quality assurance processes were in place, which the service plans to develop further, and we look forward to seeing the impact of this at future inspections.
- Support and strategies used to support young people were at times unclear or were not trauma informed.
- Care planning documents could be SMART-er (specific, measurable, achievable, relevant and timebound) to reflect young people's needs and how staff will support these needs, by using up to date knowledge, theory and research (see area for improvement 2).
- The house was well-furnished, and the atmosphere was homely. We found that children and young people experienced warm and fun relationships with those caring for them. Staff spoke about their commitment, the importance of relationships, as well as keeping in touch with young people once they had moved on from the service.
- Some stakeholders commented that communication and consistency within the team could be improved.



- It was pleasing to see that the service had reviewed staffing arrangements and handovers to improve communication and consistency.
- The service plans to use stakeholder feedback to develop improvement and training plans, to inform future service development.
- Young people were supported with their rights and had access to advocacy support, who was a regular visitor in the service.
- Young people's identity, cultural and dietary needs were supported.
- Staff spoke about the importance of supporting young people to maintain connections with people important to them.
- It was unclear how staff were supporting young people with their learning, however some staff commented that they tried to incorporate education in weekly activity planning. Activities included cooking, baking and exercise. Staff commented that they would like to develop this further to include visits to historical sites. We look forward to seeing the impact of this at future inspections.
- Community activities were supported, including badminton, football, rugby, and trampolining.
- There were admission and matching processes in place, and prior to young people moving to Sundrum View, consideration meetings were held.
- It was pleasing to see that impact assessments had been introduced to support young people with their transitions to Sundrum View.
- We saw that the service was also planning to develop their support to young people when they were moving on from Sundrum View, including supporting independent living.
- Staff kept in contact with young people who had moved on, who were regular visitors to the service.
- 4.3 Areas for Improvement;
- 1. In order that young people's wellbeing is supported, the provider should ensure that staff have learning and development opportunities and apply this in practice. This should include but is not limited to, trauma training.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "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." (HSCS 3.14).



In response to this Area for Improvement, a full staff training audit was undertaken which was completed in June 2024. This resulted in appropriate training dates being agreed and shared via Seniors to ensure relevant staff can attend. In addition, new training evaluation forms have been developed to understand impact and appropriateness of the training provided. These forms are to be collected within 10 days of the training being completed and will be overseen by Seniors and filed by Business Support. An additional CPI trainer has been trained and all staff will receive training or refresher training, dates are through July and September and staff have been allocated dates. Attendance will be monitored by Seniors through registers, collection of evaluation and Supervision. Nurture training refreshers will be delivered to all staff and dates have been set in September and October with mop up sessions also set. Domestic staff have also completed appropriate Child Protection training.

2. In order that young people have the best possible outcomes and experiences, the provider should ensure that the service implements effective plans and risk assessments.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I am protected from harm because people are alert and respond to signs of significant deterioration in my health and wellbeing, that I may be unhappy or may be at risk of harm" (HSCS 3.21).

In response to this Area for Improvement, Caring 4 U meeting minutes have been aligned with Signs of Safety language to ensure clarity and consistency and the revised format is now in use and is being monitored. An exercise to connect all the documentation with a common thread of language and approach has begun and will continue over the coming months with oversight from Seniors and Managers. Relevant training will be offered and evaluated as staff needs are identified. Additional Trauma and CPI training has been delivered and a programme of dates has been established to ensure all staff receive what is required. New feedback forms have been developed and will help to guide future training and grow understanding of impact.

Effective tracking and debriefing of all significant events will be improved by a new tracking spreadsheet and regular Management oversight. Research into an effective approach to consistent and proportionate debrief has begun and will be monitored as part of Improvement Actions meetings.

The Champions Board will have regular visits to the House to improve the quality of feedback from our young people and inform planning and development of practice, planning and training.



# 5. <u>IMPLICATIONS</u>

## 5.1 Financial Implications

5.1.1 There are no financial implications from this report.

## 5.2 Human Resource Implications

5.2.1 There are no Human Resource implications from this report.

## 5.3 Legal Implications

5.3.1 There are no legal implications arising from this report.

## 5.4 Equalities Implications

5.4.1 The proposals in this report allow scrutiny of performance. The report does not involve proposals for policies, strategies, procedures, processes, financial decisions, and activities (including service delivery), both new and at review, that affect the Council's communities and employees, therefore an equality impact assessment is not required.

### 5.5 Sustainability Implications

5.5.1 Considering Strategic Environmental Assessment (SEA) - This report does not propose or seek approval for a plan, policy, programme or strategy or document otherwise described which could be considered to constitute a plan, programme, policy or strategy.

## 5.6 Strategic Link

5.6.1 The matters referred to in this report contribute to Priority 2 & 3 of the Childrens Services Plan 2020-23 "Tackling inequalities" and "Love and support for our Care Experienced Young People and Young Carers". As well as "Health and care systems that meet people's needs" and "Improving outcomes for care experienced children and care leavers".

## 6. CONSULTATION AND PARTNERSHIP WORKING

6.1 There has been no public consultation on the contents of this report.

#### 7. RISK ASSESSMENT

- 7.1 Rejecting the recommendations will have a negative impact on the achievement of the following strategic outcomes within the Service and Improvement Plan for the Health and Social Care Partnership, namely "Improving outcomes for care experienced children and care leavers" and "building communities in which people feel safe and are safe" and "being evidence-informed and driven by continuous performance improvement".
- 7.2 In terms of the IJB Risk Management Strategy, this would be high if not accepted. If the recommendations above are approved, the Head of Service for Children's Health Care and Justice will ensure that all necessary steps are taken to ensure full implementation of the decision within the timescales.



## **BACKGROUND PAPERS**

Appendix 1 -

## **APPENDICES**

Appendix 2 - Action Plan - Sundrum View 2024 Inspection

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22 July 2024