

NEATH PORT TALBOT COUNTY BOROUGH COUNCIL
CHILDREN, YOUNG PEOPLE AND EDUCATION CABINET
BOARD

**REPORT OF THE DIRECTOR OF SOCIAL SERVICES, HEALTH
AND HOUSING – N. JARMAN**

14th January 2016

SECTION B – MATTER FOR INFORMATION

WARD(S) AFFECTED: ALL

HILLSIDE SECURE CHILDREN’S HOME – CSSIW INSPECTION

Purpose of the Report:

To report to members the CSSIW Inspection Report (2015) for Hillside Secure Children’s Home.

Background:

The Care and Social Services Inspectorate Wales are required to undertake an Annual Inspection of Hillside under the provisions of the Care Standards Act 2000 and associated regulations.

The primary focus of the report is to comment on the quality of life and quality of care provided to children and young people.

The report reflects against the broad areas identified within the National Minimum Standards for Children’s Homes (2002) and the Children’s Homes Regulations (2002).

Tri-annually Estyn Inspectors are engaged by the C.S.S.I.W to inspect and report on the education provision, which is inclusive in this year’s report.

The Inspection took place on Monday 21st September –Thursday, 24th September 2015 was published on 28th December 2015.

The format and length of the Inspection report has been changed and reports under four quality themes. These are: Quality of Life, Quality of Staffing, Quality of Leadership and Management and Quality of Environment. The full report is attached. (*Appendix 1*)

Estyn have provided separate feedback specifically on the education provision.

What type of inspection was carried out:

- Three days inspection by CSSIW
- Observation of the interaction between staff and young people
- Observation of staff handover meetings
- Discussion with some staff and two Assistant Managers
- Scrutiny of 6 young people's questionnaires returned
- Scrutiny of 21 staff questionnaires returned on 23 October 2015
- Scrutiny of a random selection of files and documentation held at the centre
- Scrutiny of the physical intervention records
- Examination of the Self-Assessment of Service completed by the service and returned prior to inspection
- We did not use the Short Observational Framework for Inspection (SOFI) tool on this occasion because it was not possible to observe interactions without influencing the activity.

What has improved since the last inspection

- There had been an improvement to the multi-disciplinary approach to the outcomes for young people
- Procedures following physical intervention had been reviewed and training reviewed

Summary.

1. Quality of Life:

- Young People had a voice with supportive advocacy.

- Care Staff very supportive and engaging with Young People to provide good quality overall care.
- Good assessment, input and support to Young People and staff from specialist services.
- Good quality care plans focussed on individual needs of Young People and the young person's voice had a voice in their future plans.
- The Centre is constantly looking to improve and develop additional Support Services for the benefit of Young People.
- Psychology Support has continued to improve with greater links with developed through the Multi-Disciplinary Team approach which the Centre has adopted.
- Developed of the Comprehensive Health Assessment Tool into enhanced Health Services.
- The Centre had reviewed procedures to ensure that Placing Authorities were informed immediately as there had previously been a delay in a few instances. The Centre had also introduced a post incident weekly review meeting chaired by a Senior Manager to scrutinise incidents, identify learning, safeguarding and training outcomes in line with their aim to minimise restraints.
- Exit interview process has been reviewed and re-established to capture young people's thoughts and feelings on service quality and delivery.
- Examination of the complaints' recordings confirmed that the Centre was open to complaints and acted appropriately in response to any made.
- There were more opportunities for these young people to have 'mobility', a term used for access to the community. This was a very positive step for young people especially in preparation for their moves on away from the Centre. One Young Person was observed to go on mobility with a parent during the Inspection

- On the whole Young People are active, positively occupied and stimulated in the centre

Recommendations:

- None.

2. Quality of Staffing:

- 80% of the staff team are qualified
- Staff are registered with the Care Council for Wales
- Staff have traditionally received good quality training, although some staff considered that they would benefit from further training in mental health issues to reflect the changing needs of the young people
- Hillside has had a robust recruitment policy and procedure which had been further strengthened in the last year with permission to recruit outside of the local authority internal vacancy list
- The staff team fed back that they received good support from their individual line managers and their shift teams
- Management had responded to the staff request for a review of the rota and this had resulted in a change that was due to be implemented shortly after the inspection
- A weekly clinic with the psychologist provides clinical support time for all staff
- From 1 October 2015 one unit leader was to become a duty manager daily from 9 – 5 to relieve other unit leaders from this responsibility
- A resettlement officer had been appointed

Observations:

- Staff requested improved secure facilities to store their personal property
- There was a mixed response in questionnaires about the opportunity to contribute ideas and make suggestions about the operation of the centre, however no specific examples were given
- Many suggested that the return of sessional workers in the evenings to support further activities would be beneficial

- There could be an improvement in communication and dissemination of information
- There was feedback that on some occasions the staffing levels were low due to sickness or holidays
- It was recommended that all staff receive medication training as PRN is managed

3. Quality of Leadership Management:

- A new manager with experience of working in Hillside for many years as an assistant manager had been appointed and each of the assistant manager posts had been filled
- Hillside is well run and compliant with all Minimum Standards and Regulations.
- There is an effective Complaints System in place with evidence of effective use and practice.
- A consistent quality of service is provided through Quality Improvement Planning, a well-planned programme of care and a sound financial platform.
- Internal Data Collection and Internal and External Reporting, Monitoring and Scrutiny informs practice standards.
- Children within the Looked After system have their respective regular Looked After meetings, which again further evidences the quality of the service being provided
- A weekly post incident review meeting is convened to monitor safeguarding, learning, training outcomes
- Child Protection holds high status across the Centre.
- A separate Education Report has been sent to Hillside by Estyn.

4. Quality of Environment:

- The areas of the centre viewed were found to be clean, tidy and well furnished
- Communal areas had been re-decorated
- They had introduced a fully integrated staff personal alarm system
- The CCTV system has been fully modernised
- Improvements have been made to the response to maintenance and decoration.
- Effective building and equipment maintenance contracts are in place.

What needs to be done to improve the service.

- It was recommended that the daily recording of activities and use of outdoor space was improved
- It was recommended that some key-workers receive mentoring to enable them to be more dynamic in their approach
- There was feedback that on some occasions the staffing levels were low due to sickness or holidays
- It was recommended that all staff receive medication training as PRN is managed by the staff on the Units to support the Duty Manager administering prescribed

Appendices

CSSIW Inspection Report (2015) for Hillside Secure Children's Home.

The format and length of the Inspection focussed on the previous report's recommendations and used these as a benchmark to evidence progress within the department.

Background Papers

None

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