

Orkney Adult Placement Service Adult Placement Service

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Type of inspection:

Announced

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Service provided by:

Orkney Islands Council

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About the service

Orkney Adult Placement Service has been registered with the Care Inspectorate since 10 September 2020.

Orkney Adult Placement Service provides a continuing care service to young people who are living in foster care. This allows young people to remain with their foster carers until the age of 21. Families are approved as both foster carers and adult placement carers through the fostering and adult placement panel to make the transition from foster care to adult placement as seamless as possible.

At the time of the inspection, one young person was in continuing care.

The aims of the service are:

- "• To provide quality, loving, safe, warm and nurturing family-based care for care-experienced young people in Orkney from the age of 18 years up to the age of 21 to live in and move on from.
- To identify a foster home for a young person beyond the age of 18 where this is considered necessary, appropriate and sustainable.
- To provide a structured and stimulating family-based care for young people, that is free from prejudices.
- To treat all young people with dignity and respect.
- To support the findings of The Promise."

We undertook this inspection using virtual methodology which included the use of technology. As part of this process, we undertook the following:

- Obtaining the views of visiting professionals using an e-mail questionnaires and video technology discussions.
- Discussions with external managers, and staff using video technology.
- Discussions with adult placement carers using video technology.
- Evaluation of a wide range of electronic documents, including policies and procedures, personal plans, risk assessments and staff records.

What people told us

Carers told us that they were aware of changes within the staff group and provision of support within the service, but that they had felt that this had not impacted upon them or the care they were able to provide. Staff were viewed as competent. The young person using the service choose not to engage in the inspection process.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	3 - Adequate
How good is our leadership?	2 - Weak
How good is our staff team?	3 - Adequate
How well is our care and support planned?	3 - Adequate

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

3 - Adequate

We made an evaluation of adequate for this key question. Whilst we assessed that there were a number of strengths, key areas needed to improve to ensure positive experiences and outcomes for young people.

Young people living with caregiver families experienced affectionate and meaningful care. Caregivers described examples of advocating on behalf of young people. This active engagement on behalf of young people by carers, ensured that they were able to engage in activities and lead independent lives.

There were examples of care being personalised, with young people experiencing support which took into account their individual strengths and preferences. We found that efforts were made to support ongoing relationships and contact with others, including parents where appropriate. Young people experienced care with caregivers who were committed to supporting their emotional wellbeing and development. The support that they provided was, however, let down by the services failures to effectively communicate with the caregiving group, and complete regular visits and reviews.

Caregivers were not supported to develop or learn with no training provided in the last year. We did hear about individual staff members providing quality one to one support to carers to support behavioural management or crisis situations. Since the last inspection there had been no training offered to carers, with gaps in carer core training identified as a concern. This concern was identified in the last two inspections. The full range of service supports were however unavailable due to the redeployment of staff. For carers this meant that opportunities to train, receive additional support or upskill were lost.

Caregivers feedback was positive about the relational approach of the staff team with caregivers universally viewing staff as skilled and supportive. However, it was reported that in the last year all staff had duties in other parts of the wider provider provision. This impacted on the support and contact they were able to offer carers and young people. This was evidenced further in our tracking of home visits, supervision of carers and reviews with notable gaps in these areas. The overall sense was one where there was no continuous review of needs for young people, and their carers but rather a reactive system.

Where the service was responsible for assessing caregiver families, we found this to be comprehensive. However, panels and caregiver reviews were not occurring regularly and no additional recruitment or assessment of carers for the adult placement service had taken place since the last inspection.

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Young people's access to mental health services and multi-disciplinary connections across services were found to have improved. This meant that young people had been able to access assessments from specialist services, although this could have occurred in a timelier manner and that staff felt confident that these same services could be accessed for other young people. A key element identified by the staff group in this improvement was around ensuring that professional connections between social work, education and health were maintained and supported by senior colleagues.

The caregivers' creative care and support meant that the young persons transitions and challenges were navigated effectively. The service supported the caregivers in crisis situations and it was clear that the young person would be able to be supported by the service to remain in their care setting for as long as possible and until they felt able to move on. However, practice in this area could be improved through further support to independence for the young person from the service. The creation of a pathway for the completion of welfare assessments and the finalisation of the adult placement policy would also be beneficial.

How good is our leadership?

2 - Weak

We made an evaluation of weak for this key question. Whilst we assessed that there were a number of strengths, these were compromised by significant weaknesses. As these weaknesses had the potential to have a negative impact on outcomes and the welfare of young people, we have made requirements for improvement (see requirement 1).

The service has developed a system for tracking and evaluating the outcomes of children and young people using all registered services. The tracker system is in the early stages of implementation however, we found gaps in the tracking of data which had the potential for children and young people to be missed. We were unable to see any positive impacts at the time of inspection from the use of the tracker on young people's outcomes. Additionally, service tracking of complaints and child/adult protection concerns were of concern with information being held in different locations. This meant that when reviewing separate documents, we were able to see separate concerns that were not tied to each other. We assessed this as having the potential to lead to poor decision making and negative outcomes for young people.

The effectiveness of the new processes for tracking, and managerial action to evaluate young people's care planning and outcomes have not been evidenced. The concerns which were raised at the last inspection remain unaddressed. The quality assurance process and direct provision of services is limited by the chronic lack of staff. This currently includes the lack of a registered manager for the adult placement service and until recently gaps in positions of external oversight, although positively this later issue is temporarily resolved. Since the last inspection there has been a nine-month period where no fostering or adoption panels took place, which has directly impacted on carer reviews, decision making and progression of planning and on the provision of additional external safeguards and assurances. There has been an acknowledged staff shortage which has led to insufficient capacity to provide core aspects of service and therefore improvement activities have been side-lined. The process of making or embedding change has been since the last inspection and is still currently hindered by a lack of staff. It is likely that the effectiveness of any improvement actions will be directly linked to staffing numbers across the wider provision.

Requirements

- 1. By 30 December 2022, to provide stability in leadership and evidence the effectiveness of the service in meeting the needs of young people, the provider should develop a culture of continuous improvement by implementing robust quality assurance of practice. To do this, the provider must as a minimum:
- a. ensure a robust audit system is in place and promote a shared responsibility in quality assurance processes.
- b. ensure a direct line management responsibility.
- c. ensure that effective communication takes place with young people, carers and stakeholders.

This is to comply with Regulation 4(1)(a) (Welfare of Users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) and to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (4.19) and 'I use a service and organisation that are well led and managed' (4.23).

How good is our staff team?

3 - Adequate

We made an evaluation of adequate for this key question. Whilst we assessed that there were a number of strengths, key areas needed to improve to ensure positive experiences and outcomes for young people. Staff formed genuine relationships with carers. They were skilled in helping to resolve challenging situations and in the provision of specialist advice. There was redeployment of staff away from the core task of the adult placement service which had the potential to impact on the quality of service provision. However, due to a number of unique factors the staff remained involved with the carers and young person throughout the last year. There were however delays in the completion of reviews, impacting negatively on young people's journey through care.

Continuous learning has been a previous strength of the staff of the service. Since the last inspection access for staff to learning opportunities has lacked breadth and scope. Individual and group training analyses were not found. This meant that access to training occurred on an ad hoc rather than planned basis and may not reflect the needs of young people, carers, or the service (see requirement 1). Additionally, there was no system in place that allowed for the incorporation of carers, or young people's views into training, supervision, appraisal or wider service planning. Meaning that during this recent period of redeployment of core staff no meaningful consultation took place with key stakeholders.

We found supervision for staff to have occurred infrequently for the work of the adult placement service with varying quality of recording. The structure of some recordings was confusing with unclear direction to action from the discussion. It was unclear how staff were supported through the changing expectations of their roles and the handing over of responsibilities in relation to specific cases (see requirement 2).

1. By 30 December 2022, the provider must ensure that all staff receive sufficient and regular training including child and adult protection training and that an appropriate record is maintained.

This is to comply with the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 - Regulation 4(1)(a) "A provider must make proper provision for the health,

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welfare and safety of service users" and 15(b)(i) "ensure that person's employed in the provision of the care service receive training appropriate to the work they perform".

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 and are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.24).

2. By 30 December 2022, the provider must ensure that all staff receive regular, and good quality formal supervision and that an appropriate record is maintained.

This is necessary in order to comply with the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 - Regulation 3 "A provider shall provide a service in a manner which promotes quality and safety" and 15(b)(i) "ensure that person's employed in the provision of the care service receive training appropriate to the work they perform".

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 and are able to reflect on their practice and follow their professional and organizational codes' (HSCS 3.24).

How well is our care and support planned?

3 - Adequate

We made an evaluation of adequate for this key question. Whilst we assessed that there were a number of strengths, key areas needed to improve to ensure positive experiences and outcomes for young people.

We found that since the last inspection regular reviews were not completed. There was however evidence of the service responding appropriately to support young people and caregivers. This could be further developed to create more robust planning towards independence that is not as reliant on the caregivers to lead. Care planning would benefit from adopting a SMART process with particular emphasis on the setting of timescales for completion (see requirement 1).

Requirements

- 1. By 31 December 2022, to ensure that children, young people and their families care and support needs are accurately reflected in support plans and anticipate future needs. These plans should be responsive, personcentred with goals which are SMART (specific, measurable, achievable, realistic and time-bound). To do this the provider must as a minimum:
- a. ensure that support plans identify future needs
- b. are informed by a young persons care plan and risk assessment
- c. reviewed regularly to ensure that young person and carers support needs are met.

This is to comply with Regulation 4(1)(a) (Welfare of Users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) and to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I am fully involved in assessing my emotional, psychological, social and physical need at an early stage, regularly and when my needs change' (HSCS 1.12) and 'my future care and support neds are anticipated as part of my assessment' (HSCS 1.14).

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

Requirements

Requirement 1

The provider must ensure that information appropriately retained and is available for young people into adulthood to support understanding of their past.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state that:

'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11); and in order to comply with SSI 2011/210 Regulation 4 (1)(a).

This requirement was made on 19 April 2021.

Action taken on previous requirement

This requirement is not met, however update to IT system is planned which will assit the provider in addressing this.

Not met

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

The service must undertake welfare assessments on all young people who may be in need of continuing care.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state that:

'My care and support meets my needs and is right for me' (HSCS 1.19).

This area for improvement was made on 19 April 2021.

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Action taken since then

The age range of young people using the service meant that no welfare assessments were due to occur since the last inspection.

Previous area for improvement 2

The service should continue to work with corporate parenting partners to ensure that mental health services are available to children at the point of need.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards, which state that:

'I am supported to be emotionally resilient, have a strong sense of my own identity and wellbeing, and address any experiences of trauma and neglect' (HSCS 1.29).

This area for improvement was made on 19 April 2021.

Action taken since then

This area for improvement has been met.

Previous area for improvement 3

The management vision for the service should be better explained and planning around how to achieve desired outcomes needs to be more specific.

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

'I use a service and organisation that are well led and managed' (HSCS 4.23).

This area for improvement was made on 19 April 2021.

Action taken since then

This area for improvement has not been met. This area for improvement has been incorporated into the requirements under Key Question 2.

Complaints

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

Detailed evaluations

How well do we support people's wellbeing?	3 - Adequate
1.1 Children, young people. adults and their caregiver families experience compassion, dignity and respect	3 - Adequate
1.2 Children, young people and adults get the most out of life	3 - Adequate
1.3 Children, young people and adults' health and wellbeing benefits from the care and support they experience	3 - Adequate
1.4 Children, young people, adults and their caregiver families get the service that is right for them	3 - Adequate

How good is our leadership?	2 - Weak
2.2 Quality assurance and improvement are led well	2 - Weak

How good is our staff team?	3 - Adequate
3.2 Staff have the right knowledge, competence and development to support children, young people, adults and their caregiver families	3 - Adequate

How well is our care and support planned?	3 - Adequate
5.1 Assessment and care planning reflects the outcomes and wishes of children, young people and adults	3 - Adequate

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