



care
inspectorate

A REVIEW OF CARE SERVICES FOR CHILDREN AND YOUNG PEOPLE 2014-2017

Findings from the Care Inspectorate

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FOREWORD



Peter Macleod Chief Executive Care Inspectorate

I am pleased to introduce the findings from our review of care services for children, and young people between April 2014 and March 2017. At the Care Inspectorate, we work with a wide range of registered care services, including those designed to care for children and young people, care leavers and some young adults who are looked after or supported away from their own families and homes for a variety of reasons.

Through consultation, we continue to develop and change the way we work with services, advocacy and scrutiny partners to enable us to listen even more to people experiencing care. We have collaborated with services to encourage and support improvement and innovation so that children and young people experience services that protect and promote their rights and increase opportunity and choice in their futures, in line with the new Health and Social Care Standards.

This review shines a spotlight on the success of services that have been creative in promoting better outcomes for children and young people. Across services, we found that trusting relationships between staff and children and young people led to more person-centred planning, support and improved experiences and outcomes.

This review also highlights the challenges that lie ahead in reducing the inequalities that looked after children and young people continue to experience in accessing their rights to family life or full-time education. The way that services are commissioned and delivered across Scotland has been changing. For example, this review shows that fewer children and young people are being placed in foster care, independent residential school care and secure care services but at the same time, there has been an overall increase in children placed in care home services.

We will use the findings in this review to inform how we continue to support and scrutinise services. This will continue to include the involvement of children and young people in our work, and the embedding of Scotland's new Health and Social Care Standards in all that we do. We expect services to do the same, to ensure that all of Scotland's children and young people experience excellence in care.

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1. WHO WE ARE AND WHAT WE DO

The Care Inspectorate is the independent scrutiny and improvement body for all social care and social work services in Scotland. Our scrutiny activities include inspecting and supporting improvement and innovation in local authorities, community planning partnerships, and individual care services. We aim to ensure that people experience safe, high-quality, compassionate care that meets their needs and promotes their rights and choices. We can provide a unique overview of the quality of care services across Scotland.

In all our decisions we are informed by the Scottish Government's [Health and Social Care Standards](#) (the Standards) which set out what people should experience from quality care and support. We also use [Getting It Right for Every Child \(GIRFEC\)](#) the national approach in Scotland to improving outcomes and supporting the wellbeing of our children and young people by offering the right help at the right time from the right people.

GIRFEC guides our scrutiny activity and what we write in our inspection reports about experiences of care and outcomes for people. Underpinned by the United Nations Convention on the Rights of the Child (UNCRC), GIRFEC sets out eight wellbeing indicators known as SHANARRI:

- Safe
- Active
- Healthy
- Respected
- Achieving
- Responsible
- Nurtured
- Included

We use a six-point scale to evaluate quality of care and wellbeing outcomes for children and young people within the themes of care and support, environment, staffing and management, and leadership of services.

Evaluation scale and grading criteria

Excellent	OUTSTANDING OR SECTOR LEADING
An evaluation of excellent describes performance which is sector leading and supports experiences and outcomes for people which are outstandingly high quality. There is a demonstrable track record of innovative, effective practice and/or very high quality performance across a wide range of its activities and from which others could learn. We can be confident that excellent performance is sustainable and that it will be maintained.	
Very good	MAJOR STRENGTHS
An evaluation of very good will apply to performance that demonstrates major strengths in supporting positive outcomes for people. There are very few areas for improvement. Those that do exist will have minimal adverse impact on people's experiences and outcomes. While opportunities are taken to strive for excellence within a culture of continuous improvement, performance evaluated as very good does not require significant adjustment.	
Good	MAJOR STRENGTHS, WITH SOME AREAS OF IMPROVEMENT
An evaluation of good applies to performance where there is a number of important strengths which, taken together, clearly outweigh areas for improvement. The strengths will have a significant positive impact on people's experiences and outcomes. However, improvements are required to maximise wellbeing and ensure that people consistently have experiences and outcomes which are positive as possible.	

Adequate	STRENGTHS JUST OUTWEIGH WEAKNESSES
<p>An evaluation of adequate applies where there are some strengths but these just outweigh weaknesses. Strengths may still have a positive impact but the likelihood of achieving positive experiences and outcomes for people is reduced significantly because key areas need to improve. Performance that is evaluated as adequate may be tolerable in particular circumstances, such as where a service or partnership is not yet fully established or in the midst of major transition. However, continued performance at adequate level is not acceptable. Improvements must be made by building on strengths while addressing those elements that are not contributing to positive experiences and outcomes for people.</p>	
Weak	IMPORTANT WEAKNESSES – PRIORITY ACTION REQUIRED
<p>An evaluation of weak will apply to performance in which strengths can be identified but these are outweighed or compromised by significant weaknesses. The weaknesses, either individually or when added together, substantially affect people’s experiences or outcomes. Without improvement as a matter of priority, the welfare or safety of people may be compromised, or their critical needs not met. Weak performance requires action in the form of structured and planned improvement by the provider or partnership with a mechanism to demonstrate clearly that sustainable improvements have been made.</p>	
Unsatisfactory	MAJOR WEAKNESSES URGENT REMEDIAL ACTION REQUIRED
<p>An evaluation of unsatisfactory will apply when there are many weaknesses in critical aspects of performance that require immediate remedial action to improve experiences and outcomes for people. It is likely that people’s welfare or safety will be compromised by risks which cannot be tolerated. Those that are accountable for carrying out these necessary actions for improvement must do so as a matter of urgency to ensure that people are protected and their wellbeing improves without delay.</p>	

FIGURE 2: Children and young people team and partners



FIGURE 3: Services we work with for children, young people, families and some adults



2. INTRODUCTION

Our [Triennial Review 2014](#) highlighted that when vulnerable children and young people were unable to remain living in their own home, many services designed to support their needs were performing well.

We found that fostering and adoption services maintained a consistent and very high level of quality and in residential services we saw there had been some changes from larger campus-based residential special schools and secure placements to smaller services. We acknowledged how this change was bringing both benefits through a more person centred approach and also challenges in accessibility to a range of amenities for those living in rural or remotely located care homes.

We also identified in our last triennial review report, the need for earlier and more effective investment in arrangements for supporting children, young people and carers where permanent alternative care was needed. The report acknowledged continuing inequalities in outcomes for looked after children and young people, consistent with the national priority of closing the outcome gap for the most vulnerable young people and care leavers. We said that providers and commissioners of services needed to ensure that resources were put in place to optimise all aspects of the wellbeing of children and young people, particularly when placed away from their home communities.

Since 2015, we have been changing the way we work with services. As well as continuing to ensure that services act in accordance with legislation and standards, we are collaborating more with services and partners to improve experiences and outcomes for individuals, families and carers. Moving forward we will use the standards in our work with providers and commissioners to ensure an even greater focus on the needs, rights and choices of people who experience care. The standards are relevant to all health and social care services including social work, registered and non-registered social care services. They provide a shared way of talking about and understanding people's rights and what we can expect from quality health and care services. This is especially important when people are using more than one service or moving between services for example, between children's services and adult services. Together with CELCIS, Who Cares? (Scotland), and the Children's Commissioner for Scotland, we co-led the development of the Standards on behalf of the Scottish Government, to make sure children and young people's needs, rights and choices were well stated within them.

We have highlighted some of the standards in this report to encourage people to understand and use them.
For example: As a child or young person I feel valued, loved and secure.

Health and Social Care Standards: standard 3.10

In this review we:

- examine findings from our inspection, registration and complaints work with registered care services for children, young people and some young adults between April 2014 and March 2017¹
- celebrate achievements in supporting improvement, and shine a spotlight on the success of services that have worked creatively to provide quality experiences within a context of continuous change
- consider what more we can do to increase choices and create better experiences and outcomes for children, young people, families and some young adults experiencing care services in Scotland.

¹Most data in this report is from information held on the Care Inspectorate data store as a result of our registration, inspection, and complaints activities over the period from April 2014-March 2017. Data drawn from other sources is referenced.

3. KEY FINDINGS

We identified the following key findings from our scrutiny activity during 2014-2017 in relation to services for children, young people and some adults, based on the evidence within this report.

1. Scottish Government figures show around 7,000 children and young people are experiencing care services with the majority of those experiencing foster care or care home services. Data we gathered shows that over the review period figures were consistent with Scottish Government data which showed there was a slight decrease in children experiencing foster care services and a slight increase in children experiencing care home services.
2. Within some care homes, school care accommodation services, and fostering services, we found that a small number of children and young people had been inappropriately placed. This was either because of their young age, the emergency nature of the placement, or because the location of the service was a restricting factor in terms of achieving the aims of children's plans. This was limiting the quality of their experience, choices and future potential.
3. Most services were assessing and managing risk well through effective inter-agency working, highly detailed personal plans and effectively implemented strategies. This was supporting children and young people to develop and grow through active lifestyles.
4. Most services ensured that necessary information was shared with other relevant agencies. Collaborative arrangements across a wide range of key partners meant that children's safety and wellbeing was being considered as paramount importance.
5. We found that trusting relationships between staff and the children and young people they cared for led to more person-centred planning, support and improved experiences and outcomes.
6. Consistent staff teams enabled positive experiences for children and young people through the development of secure relationships based on empathy, compassion, love and fun.
7. Deficits in staff numbers, skills or capacity had the potential to impact on quality of care and positive outcomes for people over the longer-term. We anticipate the need to continue in our work with services to ensure appropriate and safe staffing levels to drive positive outcomes for the people experiencing them.
8. Looked after children and young people and some young adults continue to experience inequalities in accessing their right to family life or to full-time education.
9. The Care Inspectorate collects data on how care services are used and the impact of our improvement work. However, during this review we identified some important gaps in our information gathering in relation to usage and the way we gather the views of children and families, including through complaint investigations.





4. FINDINGS OF REVIEW BY SERVICE TYPE

Over the review period we collaborated with partners to carry out intelligence-led and risk-based scrutiny and assurance activities within almost 700 services for children, young people and some adults across Scotland².

The majority of those services provided care and support for almost 7,000 looked after and accommodated children and young people experiencing care away from their own families. Our fostering and adoption statistical bulletin showed a decrease in children and young people experiencing foster care over the review period and we also saw in Scottish Government's data a decrease in children being placed with prospective adopters.³ Scottish Government figures also showed a decrease in children and young people being placed by Scottish authorities in secure care services. We found that over all these services continued to perform well and were demonstrating continuous improvement.

By listening to what matters most to people, we have been promoting a strong improvement culture across the social care sector in Scotland. One of the ways we have been listening to people even more is through increased involvement of inspection volunteers.⁴ During 2017-18, inspectors in the children and young people team made 32 requests for young inspection volunteers' involvement, which led to volunteers speaking with an additional 90 children, young people and some young adults experiencing services. While most children and young people told us they were happy with their care, many were not happy about being separated from their families and home life. They told us that their care could be better through being listened to more and through more consistent, genuinely caring and respectful relationships with the adults caring for them.

"I enjoy working with inspectors, they listen to me and make me feel like part of the team, the best bit is speaking to young people and sharing what they say so that things can be better for them."
Young inspection volunteer

In addition, views and comments about the quality of care services have been sought from an increasing range of professionals including social work, education, health, and children's rights workers. This has all led to us having deeper insights into the quality of care experienced by children and young people and a greater and targeted improvement focus with services in the areas of risk assessment and risk management and in multiagency care and protection planning and review work.

"Inspection is a helpful process. It no longer feels like it is being done to us but being done with us."

Care service manager

² At 31 March 2017, 99% of all planned inspections had been completed by the children and young people team including between 99.3 and 100% for statutory inspections. Scrutiny and Assurance Summary, March 2017.

³ Children's Social Work Statistics 2016/17.

⁴ Inspection volunteers are care experienced. We recruit and train them to support our inspection work.

Over the period of this review, the Scottish Government has introduced laws and policies to improve our public services and these, along with the period of austerity and cuts in public spending, have led to significant changes for commissioning arrangements and funding for care services.

[The Children and Young People \(Scotland\) Act 2014](#) furthers the Scottish Government's ambition for "Scotland to be the best place to grow up by putting children and young people at the heart of planning for services and ensuring their rights are respected across the public sector". The Act creates a definition of wellbeing through SHANARRI and a structure for planning and delivery of all children's services in local authorities.

The Act also:

- creates a list of public bodies to become corporate parents (including the Care Inspectorate).
- establishes continuing care so young people can choose to live in the same placement up to age 21.
- extends the age that care leavers can request support from local authorities up to age 26.
- places a duty on local authorities to provide services including advice and counselling for families of children at risk of becoming looked after.
- gives Scotland's National Adoption Register legal basis.

Care homes for children and young people

As a child or young person, I am helped to develop a positive view of myself and to form and sustain trusting and secure relationships.

Health and Social Care Standards: standard 3.5

Care homes for children and young people are designed to offer a safe, enjoyable and nurturing home life for children and young people to grow and develop. Children and young people may live in care homes for a short time (a few weeks) or for a longer period (a number of years) depending on each individual child's plan.

In 2014/15 there were 258 registered care homes for children and young people. Most of these were smaller care homes. Twenty were larger care homes which looked after 10 or more children and young people at a time. During the review period there were 37 new registrations and eight cancellations of care homes bringing the total to 287. By far the biggest increase was in smaller private care homes located in rural parts of Scotland. There was an initial decrease then increase in overall capacity within care homes in 2016/17.

We gather information in annual returns about children and young people experiencing services and from this we can approximate that within each year of the review period there were between 1,100 and 1,300 children and young people experiencing care home services. Our figures include those experiencing local authority, voluntary and privately provided services. Scottish Government information suggests that numbers of children and young people experiencing local authority and voluntary care homes have increased slightly over the review period from 697 in 2015 to 746 in 2017.

We inspect these services once every 12 months and more often if we assess this as necessary.

'We will continue to transform the way we work with services to enable creative and innovative care services to develop and flourish. We will also continue to improve the way we inspect and evaluate quality to support improvement and innovation, and to add increasing value for people experiencing care.'

Care Inspectorate Improvement Strategy 2017 – 2019

FIGURE 1: Number of care homes for children and young people by provider group and registered capacity

	Capacity**	Number of services			
		Voluntary	Private	Local authority*	Total number
2014/15	1,645	53	86	119	258
2015/16	1,625	54	96	120	270
2016/17	1,674	60	107	120	287

*Figures include one service (Glenlaw House) provided by NHS Tayside offering short breaks for children with complex needs.

**Figures from conditions of registration detailed on certificates.

FIGURE 2: Quality evaluations – distribution of grades by number of services

**Grading profile of care homes for children and young people:
Distribution of grades across three inspection years, split by quality theme
(numbers in the bars represent number of services)**



Overall, the quality of care homes was high with most services having evaluations of good or better for all quality themes. We evaluated good when we saw positive outcomes for children and young people in all areas of their development and wellbeing. Few services were evaluated as weak. In 2014/15 one service⁵ was graded unsatisfactory for management and leadership which improved to adequate in the following year.

When services were evaluated unsatisfactory, weak or adequate, it was mostly because staffing arrangements and poor planning were impacting negatively on the safety and wellbeing of children and young people. We spent time supporting services to improve by promoting GIRFEC and the wellbeing indicators within care planning and reviews. This mostly led to improved experiences and outcomes by our next visit.

We found a number of well-performing care homes maintained lower numbers of children and young people than they were registered to care for. They did this in consideration of the needs of the existing children placed, and in doing so minimised change and disruption within the home. On a few occasions, we found young people who were accommodated on an emergency basis had been sleeping on sofas within care homes which we considered to be wholly inappropriate. We produced guidance for our staff about emergency relaxation of conditions⁶ on numbers and offered consistent advice to providers about making decisions on an emergency basis. We have been clear about what arrangements we expect to be in place to maintain dignity for all children and young people.

Twenty larger care homes (seven local authority, seven voluntary and six private sector care homes) remained registered throughout the review period and although some had reduced numbers of children placed at any one time, more recently we found larger groups of children being placed together again. We also saw increased numbers of primary school aged children being placed in care homes in some local authority areas. We were concerned about the needs and rights of children to experience family life and when we found this we engaged in conversations with providers about suitability and longer-term plans for children⁷.

To promote improved long-term health and social outcomes for children and young people we encouraged services to increase social and physical activity. We also published [Tobacco Prevention guidance, 2017](#) jointly with ASH (Scotland) and signposted services to information published by the Scottish Government on understanding [psychoactive substances](#). Inspectors have told us of early indications of a reduction in the use of psychoactive substances in residential services, and that services using the tobacco prevention guidance are beginning to successfully reduce tobacco use for children, young people and staff. We will continue to consider the impact of our work in this area.

We raised awareness of our [notifications procedure](#) which advises providers what information they need to tell us and when. Through analysis of notifications and our inspection activity, we identified a need to support services to reduce restraint and to improve responses when children and young people go missing. In our inspections, children and young people told us how traumatising being involved in, or witnessing a restraint could be for them. They also told us how a negative response when they returned home from being missing could be really damaging to their relationships with staff, and how this made them more likely to want to run away again. We supported greater staff understanding in these areas through highlighting the report published by SIRCC [Holding Safely, 2013](#) which defines physical restraint and gives clarity on the exceptional use of such interventions. This has reduced the use of physical intervention and restraint in some services. We also collaborated with the Scottish Government, Police Scotland and partners to produce the [National Missing Persons Framework for Scotland, 2017](#) which sets out a range of actions for local authorities, health boards and Police Scotland to deliver a consistent and appropriate response for missing persons. We are now beginning to see quicker responses and children and young people being more sensitively supported when they return, leading to increased safety for those children and young people.

To ensure people receive high-quality care and support, we will continue to raise awareness of effective practice in reducing significant risk for children and young people, and will monitor how well services and agencies work together to achieve this.

⁵ 57 Long Walk Road.

⁶ We issue a certificate of registration to each registered service. This includes the conditions under which the service must operate.

⁷ City of Edinburgh, East Lothian, Fife, East Dunbartonshire, Dumfries and Galloway and more recently in North Ayrshire.

When we found that work was needed to improve the way services support children and young people who take medication, we shared information from our joint work with the Royal Pharmaceutical Society and Social Work Scotland. Together we published [Prompting, assisting and Administration of medication in a care setting: guidance for professionals, 2015](#). Promoting this information to managers and staff has led to more effective practice and greater health and wellbeing for children and young people.

Through our inspection activity we found some examples of children and young people not having statutory reviews carried out within set time frames; in particular the three day review for children placed on an emergency basis, where important care planning and contact arrangements with families should be discussed and recorded. We highlighted this to managers and to social workers when possible. Services must keep appropriate records in relation to children and young people in their care including care or support plans which must be reviewed at regular intervals, as set out in statutory timeframes. We also noted a concerning number of children who were not accessing full time education or whose education was disrupted following a period of crisis or a move in care. As well as encouraging services to advocate on behalf of children more for increased access to education, we encouraged them to use our shared publication with Education Scotland [Learning In Care 2015](#), to promote more opportunities for children and young people to continuously learn and achieve throughout their childhood.

We observed the benefits for children and young people when cared for by a small, stable group of staff. For example, many smaller services provided consistently positive experiences for young people based on secure relationships, empathy, compassion, love and fun. For more rurally based services we acknowledged continued challenges for some providers in supporting children and young people to develop individual interests and to access a wide range of community activities and services.

To ensure people are fully involved in all decisions about their care and support we will work more with scrutiny partners to support targeted and effective improvement work in care services. This will support services to contribute to reducing inequalities for Scotland's most vulnerable children, young people and young adults.

SPOTLIGHT ON SUCCESS – ARRAN VILLA

Arran Villa is a care home run by Kibble Education and Care for children aged between five and twelve years old.

During an inspection we found the service was highly focused on young people's individual needs and outcomes. An ethos of inclusion supported very positive school attendance at mainstream school and also with the organisation's specialist provision. The service had exceptional partnerships with education services and also specialist therapeutic services with many young people taking part in art therapy or other support programmes. Dedicated advocacy workers ensured that young people were listened to and were involved in service development. Arran Villa works closely with their intensive fostering services and the organisation was recruiting more foster carers to ensure that young people could experience family life.

Children said:

"We all have a range of clubs we attend."

"Of course I'm safe."

Fostering services

As a child or young person needing permanent alternative care, I experience this without unnecessary delay.
Health and Social Care Standards: standard 1.16

Fostering services recruit, train, support and approve foster carers to care for children and young people within the carers' family home. Local authorities provide and commission foster care services to match children with families for a short break, for an interim period, or permanently; depending on each individual child's assessed needs and agreed plan.

As of 31 March 2017 there were 60 fostering services. Over the review period there were no new registrations (Room4U) and three cancellations of services providing a fostering service⁸. Increasingly, children are being looked after at home, or with kinship carers, which may account for the decrease in children placed with foster carers over the review period. We began collecting more detailed information about these services including when children were placed together with siblings and about the planned or unplanned nature of placement endings through our annual returns submitted in 2016. We will use this information to plan our future scrutiny and improvement activity with services and to provide statistical information which we hope will be helpful to providers and commissioners. We inspect these services once every 24 months and more often if we assess this as necessary. Our scrutiny activity focuses on the work of the agency or service as a whole, and takes into account selected individual placements.

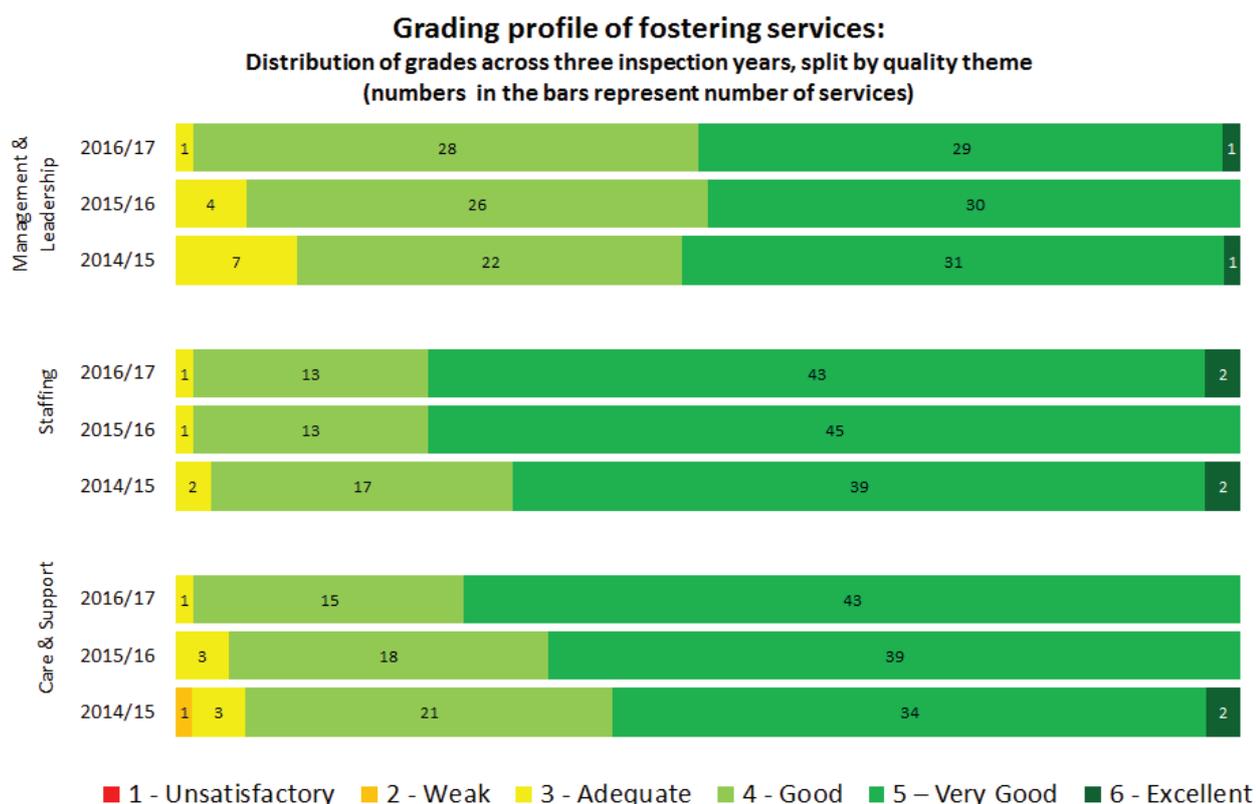
FIGURE 3: Number of fostering services by provider groups and children placed

	Number of services			Number of children placed*
	Independent/ not for profit	Local authority	Total number	
2014/15	30	32	62	–
2015/16	28	32	60	5,865
2016/17	28	32	60	5,435

*Data from Care Inspectorate Fostering and Adoption Statistical Bulletin 2017 (no comparable data available for 2014/15)

⁸The Foster Care Cooperative, Enable Scotland and British Association of Adoption and Fostering

FIGURE 4: Quality evaluations – distribution of grades by number of services



Key messages

Overall, the quality of fostering services was high with almost all services having evaluations of good or better for all quality themes. This was due to them providing child-centred approaches and high quality family based care, offering children a sense of belonging with families and an experience of all aspects of family life. One service was graded weak for care and support in 2014/15 and in 2016/17 graded good⁹. No services were evaluated as unsatisfactory for any theme.

As part of the [National Review of Foster Care, 2013](#), we led on work to establish new placement descriptors which are ‘permanent’, ‘long-term’, ‘interim’, ‘short break’ and ‘emergency’. Through our scrutiny activity, we have found that most services are at an early stage in implementing the descriptors. The review, which was designed to improve the quality of experiences of children and young people living with foster carers, also reduced the maximum numbers of children and young people who could be placed in each carer household to three. We have provided advice to a number of services who have enquired about managing this restriction to numbers alongside emergency and ongoing short break arrangements.

[Our Fostering and Adoption Statistical bulletin, 2017](#) provides a detailed analysis of information gathered within annual returns. It highlights findings in relation to foster carer and adopter households and the needs of children placed with them. It highlights the challenges of recruiting carers for most services and of placing siblings together. Information within annual returns about children placed over the approval range of carers and prevalence of unplanned endings also meant us having more conversations with providers about better matching for children and improved assessment and management of risk within carer households.

We raised awareness with services about important training for staff and foster carers; about full information sharing on the needs of children; and about consideration of carers’ abilities rather than preferences in determining appropriate age ranges and in 2017 we published a [Practice Guide to Chronologies](#) to support effective practice in this area.

⁹ Clackmannanshire

We will continue to encourage services to use the defined placement descriptors to promote consistency and effective monitoring of children's plans.

To ensure children and young people can have confidence in the organisation providing their care and support we will continue to develop and share our learning from the intelligence we collect with providers.

During inspections we will follow children's journeys and experiences critically, to learn more about unplanned placement endings in residential and foster care, to better promote consistent and secure placements.

SPOTLIGHT ON SUCCESS – FOSTER CARE ASSOCIATES SCOTLAND

Foster Care Associates is an independent fostering service.

Following an inspection we asked the agency to review their learning and development arrangements for foster carers and since then it has transformed. Carer development plans now include a broader range of learning supported by reflective discussion and foster carers feel the quality of discussion during supervision has improved.

In addition, the agency had worked hard to produce an imaginative, flexible and systematic learning and development programme for staff linked to the overall priorities of the provider and the professional interests of staff, ultimately to support better outcomes for children and young people. As a result there was a feeling of positive energy around ongoing development within the agency and this was leading to increased stability for children and young people.

Adoption agencies

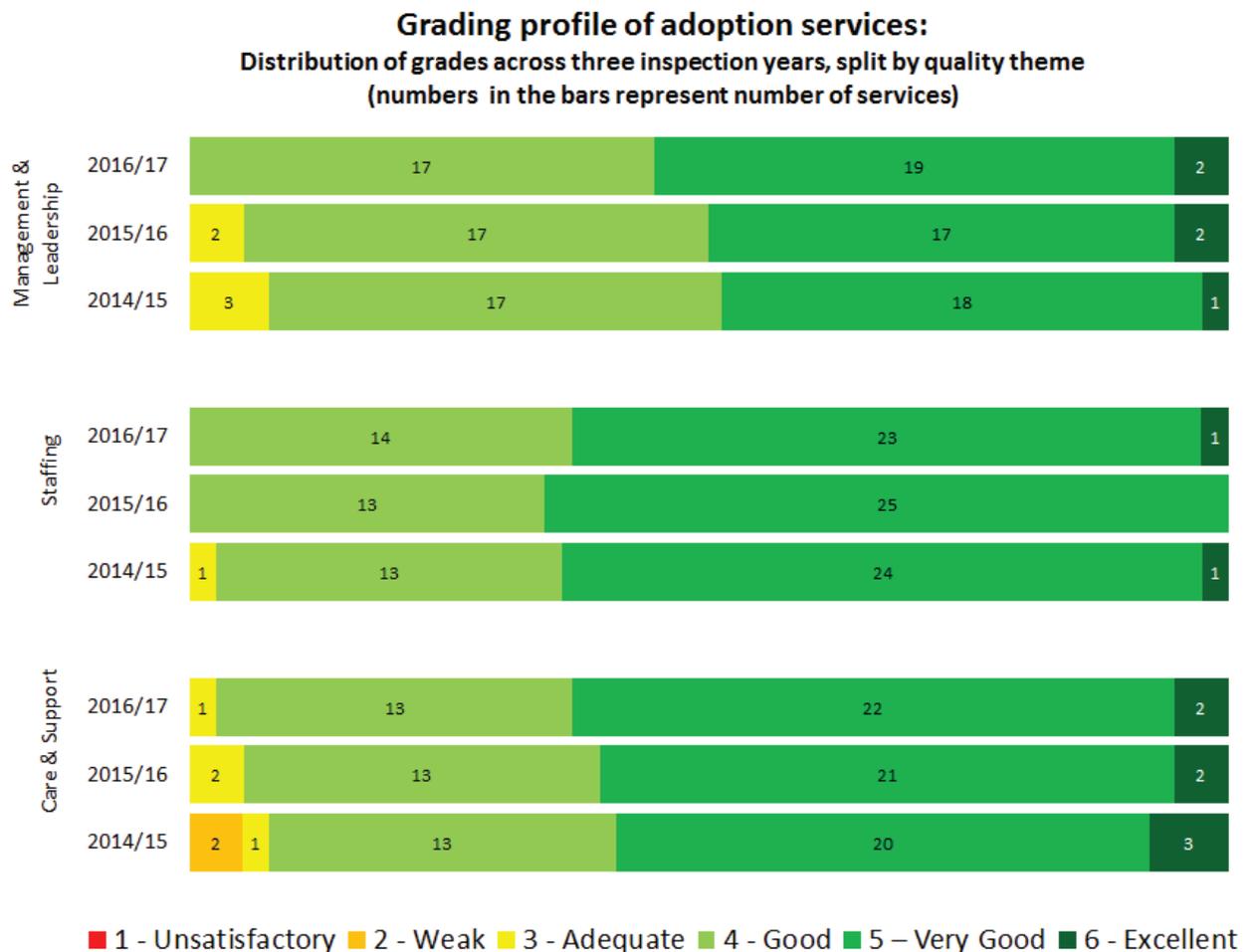
Adoption agencies recruit, train, support and approve adopters to care and take on parenting rights and responsibilities for children and young people. Local authorities provide and commission adoption agencies to match children with families permanently through adoption. As of 31 March 2017 there were 38 registered adoption agencies. Over the review period there were no new registrations and one cancellation of agencies providing an adoption service¹⁰.

FIGURE 5: Number of adoption agencies by provider group and children placed with prospective adopters

	Number of services			Number of children placed*
	Independent/ not for profit	Local authority	Total number	
2014/15	7	32	39	264
2015/16	6	32	38	251
2016/17	6	32	38	197

*Data from [Children’s Social work Statistics 2016/17](#)

FIGURE 6: Quality evaluations – distribution of grades by number of services



¹⁰ BAAF

Key messages

Overall, the quality of adoption agencies was high with almost all services evaluated as good or better for all quality themes. Two services were graded weak for care and support in 2014/15 and have since achieved a grade of good¹¹. No services were evaluated as unsatisfactory. We continued to work with services to learn from the experiences of people who had been adopted to support implementation of the Adoption and Children (Scotland) Act 2007 and the Adoption Agencies (Scotland) Regulations 2009. These detail the functions and responsibilities of adoption agencies and led to us taking greater interest in our scrutiny work, in the role of children's social workers and panels (which are informed by multiagency assessment of needs and risks) in reducing drift and delay in permanence planning.

Our scrutiny findings in fostering and adoption services led us to promote unannounced visits to carers by agency supervising social workers, highlight the need for regular independent carer reviews, and ensure that independent panel members were recruited. We also encouraged some local authorities to engage with Scottish Government and CELCIS on the [Permanence and Care Excellence programme \(PACE\)](#). PACE began in 2014 with the aim of reducing delays in children achieving a permanence placement. This means providing them with stable, secure and nurturing relationships, normally within a family setting that continues into adulthood. The programme has successfully supported local authorities and their partners in health; Children's Hearings; the Scottish Children's Reporter Administration; and the Courts to develop systems that challenge delays, barriers and difficulties to securing permanence for looked after children.

Funded by the Scottish Government, Scotland's Adoption Register is delivered by St Andrew's Children's Society to support family finding for children approved for adoption. The register uses 'Link Maker' to assist authorities with linking and matching children with approved adopters in Scotland. The Register is instrumental in the organisation of exchange days and activity days, where children can play, and adopters can learn more from people who know children well about their personalities, needs and wishes. Since the introduction of further legislation which tells local authorities and adoption agencies to use the Register within three months of approval for adopters and for children, we have been asking services to demonstrate they are meeting this timescale, and this has increased the use of the Register over the review period. Importantly, we have continued to promote and encourage more specific and effectively monitored post adoption support plans and life story work so that children are enabled to make sense of their own journey and experiences in a well-supported and positive way.

We will continue to support services to meet expectations for using the Adoption Register.

We intend to work with adoption agency partners more so we can listen to the views of older young people and adults who have been adopted and learn about the gaps in services from them.

SPOTLIGHT ON SUCCESS – ARGYLL AND BUTE ADOPTION AGENCY

Argyll and Bute Adoption Agency took forward a recommendation from the Care Inspectorate to build upon services to adoptive families.

This involved consulting adopters and setting an improvement plan based on findings. The improvement plan incorporated training, including focusing on life story work; the impact of childhood trauma; and helping children learn about their journey to adoption. It also led to the development of an annual social event which is well attended and has provided a positive fun occasion for adoptive families to meet in a relaxed setting. An important additional benefit has been developing the support network between families who understand the huge rewards as well as the complexity of being part of an adoptive family and 'just get it'.

¹¹Clackmannanshire Council Adoption Agency and Stirling Adoption Service



Schoolcare accommodation services

I am fully involved in developing and reviewing my personal plan, which is always available to me.
Health and Social Care Standards: standard 2.17

Schoolcare accommodation services offer residential care and support to enable children to attend school. We regulate and carry out scrutiny activity with three types of school care accommodation services including 37 independent residential schools, 21 independent mainstream boarding schools, and seven local authority provided school hostels for children who live on the islands and attend school on the Scottish mainland.

Over the review period, two services for independent boarding schools were registered and one residential school service cancelled and re-registered as a care home service. Within mainstream boarding schools there were a small number of looked after children and young people being provided with a service. We inspect independent residential schools once within every 12 months, and independent mainstream boarding schools and school hostels once within every 36 months or more often if we assess this as necessary.

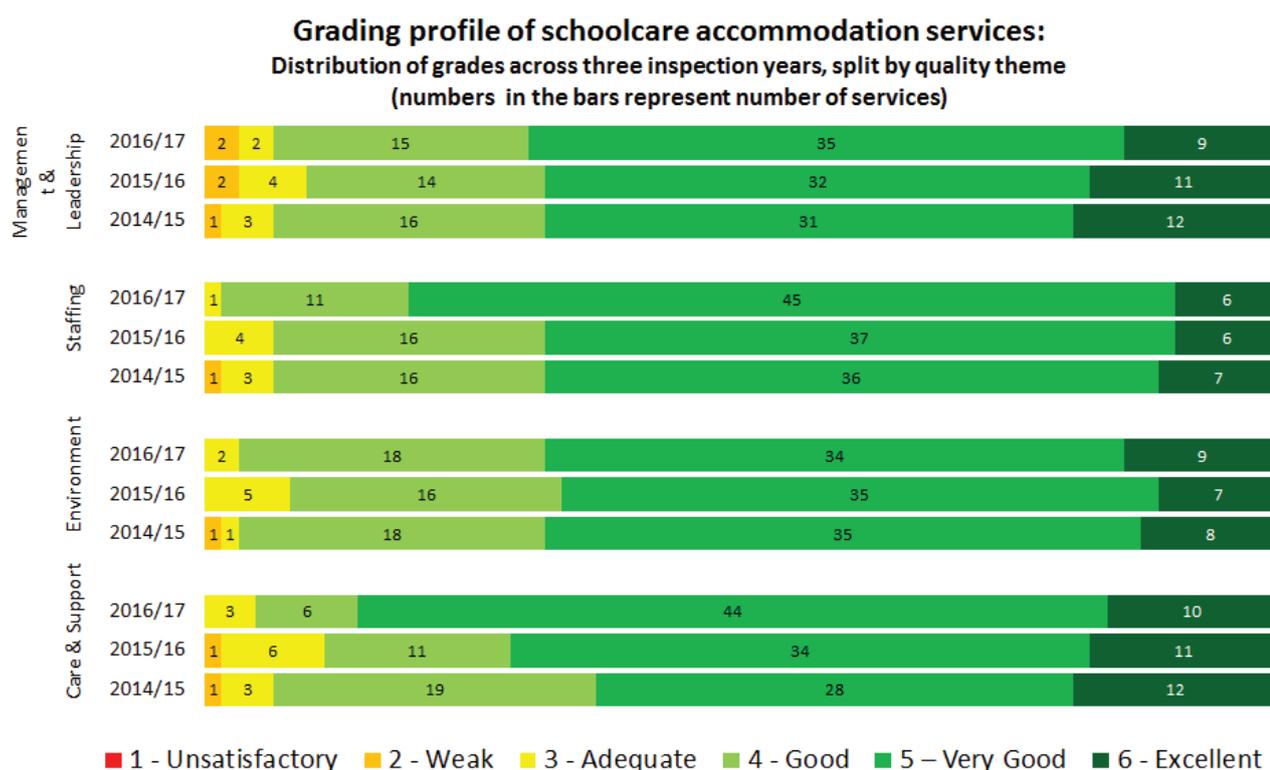
We gather information in annual returns about children and young people experiencing services and from this we can approximate that within each year of the review period there were around 3,500 children and young people experiencing mainstream boarding schoolcare accommodation and school hostel services and 500 children and young people experiencing independent residential school care accommodation.

FIGURE 7: Number of schoolcare accommodation services by provider group and registered capacity

	Capacity	Number of services			
		Voluntary	Private	Local authority	Total number
2014/15	5,278	38	18	7	63
2015/16	5,283	38	19	7	64
2016/17	5,283	37	21	7	65

*Figures from conditions of registration detailed on certificates.

FIGURE 8: Quality evaluations – distribution of grades by number of services



Key messages

Overall, the quality of school care accommodation services was high with almost all services having grades of good or better for quality of care and support, environment and staffing. We awarded higher grades when we saw school care accommodation services supporting children to develop in all of the wellbeing indicators. One service was graded weak for care and support, staffing and management and leadership in 2014/15 and has since achieved grades of adequate or higher¹². Another service was graded weak for environment at the beginning of the review period and has since achieved a grade of very good¹³. No services were evaluated as unsatisfactory over the review period.

We worked with services to ensure all young people have a support plan which is comprehensive and meaningful and based on SHANARRI. We encouraged services to regularly and carefully review them. This led to greater involvement of young people and their families in care and support planning, and better overall care experiences.

Across all registered services we had improvement focused conversations about safe and effective staffing, and we signposted to our practice guidance published in partnership with the Scottish Social Services Council (SSSC) [Safer Recruitment through Better Recruitment, 2016](#).

Across all registered services we received notifications about incidents; some of these related to allegations made against staff. Where necessary, we ensured that services liaised appropriately with Police Scotland. We provided advice to services about good investigation processes and keeping children safe and we highlighted the Scottish Institute for Residential Childcare (SIRCC) publication [Allegations against residential workers: Guidance on How Agencies Should Respond, 2011](#). Providers are developing in their ability to listen to children, and to take appropriate action on what they are hearing. To promote the protection of all children we checked that referrals had been made to child protection agencies and that SSSC had been informed about the practice of individual workers where this was a concern.

¹² New Struan School
¹³ Dalrymple Hall

We promoted the importance of regular and structured staff supervision, taking account of SSSC registration, or registration with other professional regulatory bodies and continued learning and development needs. We challenged providers to support staff to gain qualifications and to undertake high quality training. While we acknowledged that, at times this took staff away from the direct care of children and young people, we saw the benefit of increased knowledge and skills for a healthy learning and improvement culture within services. To further support improved quality assurance and accountability in services we continued to signpost to the Scottish Government publication [Guidance for the External Management of Residential Childcare Establishments in Scotland, 2013](#) and also to the SSSC publication on Supervision Learning Resource, 2016.

In 2016, we worked in partnership with Education Scotland to develop a shared inspection methodology for mainstream school and residential special school care services. We successfully tested this new way of inspecting in March and April 2017 and to date positive feedback has been received from providers who have experienced more effective and proportionate scrutiny. Clear processes for sharing information including observing feedback provided at the end of each organisations inspection, has developed relationships and increased knowledge about expectations. This has added value to our scrutiny, assurance and improvement work.

Within some service types (including care homes, school care accommodation services, and fostering services), we found a concerning number of young people being inappropriately placed either because of their age or because this was not in keeping with their Childs Plan. This was limiting the quality of their experience, choices and future potential. For example, in the Scottish Borders and in Dumfries and Galloway, a number of young people had been placed in care homes and school care accommodation services by English authorities. Some of those services were experiencing challenges in supporting the placing authorities to maintain young peoples close links with social workers and families in the parts of England they lived in previously. In those services we asked providers to take prompt action to improve services for individuals. We will soon publish guidance on matching and careful consideration in placement planning, to support services with this aspect of their work and to promote high quality services for children and young people from the start of their placement.

We have been enthusiastic about supporting the development of more creative service provision. For example, we supported a provider of a registered school care service to also register a foster care service. Foster carers and the children (who had previously lived within the school care service) were supported by residential workers within the foster carer's home in a planned way. This added significant support over what could have been a potentially traumatic move for the child while they developed relationships and began to adjust to a different way of life.

As school care services are provided for a large number of children and young people, we have highlighted a need for us to find more creative ways of listening directly to the views of children and families and to allow us more time to observe quality of experiences for more children and young people. The use of an online questionnaire was recently and successfully tested with children and young people. This led to increased constructive discussion with providers about children's needs and wishes, and a significant increase in the number of children and young people sharing their views with us.

Moving forward we will explore how surveys and other types of social media could also be useful for gathering the views of families within a greater range of services.

SPOTLIGHT ON SUCCESS – FALKLAND HOUSE SCHOOL

Falkland House School is an Autism Accredited independent residential school.

During an inspection we found that staff had developed very positive relationships with young people which helped them to achieve their potential and enjoy their time spent living there. Young people particularly enjoyed work experiences which supported learning about earning wages and travelling by themselves. Young people also developed important skills for living independently and for budgeting and this was seen as crucial for enabling better longer-term potential and outcomes.

Young people said:

"It's better than a normal school, I'm learning more and I'm not as angry any more."

"We get a lot of things to do here, like swimming, golf and football."

"Staff are helpful and nice natured."

Secure care services

If my independence, control and choice are restricted, this complies with relevant legislation and any restrictions are justified, kept to a minimum and carried out sensitively.

Health and Social Care Standards: standard 1.3

Secure care services are a type of residential care authorised by Scottish Ministers for the purpose of securing children and young people who pose a very high risk to themselves or others. It is the most restrictive form of care in terms of young people being able to exercise freedom and choice. Most young people experiencing secure care are placed there for their own protection rather than because of offences they have committed. Almost all children and young people placed will have experienced multiple adverse childhood experiences and trauma.

Five secure care services are currently listed on the Care Inspectorate register. Over the period of the review there were no new registrations or cancellations. The number of children placed by Scottish local authorities and living in secure care services at any one time has decreased with an average 56 children and young people at any one time in 2017 compared to 72 on average in 2016. Numbers of cross border placement, particularly by English local authorities has increased. We inspect these services at least once every 12 months and more often if we assess this as necessary. This is consistent with information we gathered in annual returns over the review period.

FIGURE 9: Number of secure care services by provider group and registered capacity

	Capacity	Number of services	
		Voluntary	Local authority
2014/15	85	4	1
2015/16	85	4	1
2016/17	85	4	1

*Figures from conditions of registration detailed on certificates.

FIGURE 10: Quality evaluations

Number of secure care services by quality theme evaluation, across three inspection years.

		1 - Unsatisfactory	2 - Weak	3 - Adequate	4 - Good	5 - Very Good	6 - Excellent
Care and support	2014/15	0	0	0	3	0	2
	2015/16	0	0	0	2	2	1
	2016/17	0	0	0	2	1	2
Environment	2014/15	0	0	0	3	1	1
	2015/16	0	0	0	3	1	1
	2016/17	0	0	1	2	0	2
Staffing	2014/15	0	0	0	2	2	1
	2015/16	0	0	0	1	3	1
	2016/17	0	0	0	1	3	1
Management and leadership	2014/15	0	0	0	2	1	2
	2015/16	0	0	0	2	2	1
	2016/17	0	0	1	1	2	1

Key messages

Overall, the quality of secure care services was good or better for quality of care and support and staffing. In 2016/17 one service was graded adequate for environment and for management and leadership and we continue to work with this service to improve in these areas. No services were evaluated as weak or unsatisfactory.

Led by Scottish Government, the Secure Care Strategic Board has been established to improve experiences and outcomes for children and young people where the level of risk to themselves or others means that secure care may be needed for a period of time. Together with partners from across the secure care estate and independent experts, we are working to improve futures for young people in crisis and to ensure that for the small number of young people who are deprived of their liberty that sound professional, ethical and legal assessments and judgements are made. Moving forward, we will focus more on improving degrading searching practices, and violence between children placed. To support prevention in these areas we will place increasing emphasis on hearing the views of young people, in confidence, about the service they experience.

More recently we have collaborated to develop an **Emergency Evacuation Policy, 2018** to ensure plans are in place for safe moving and accommodating children temporarily in the event of an emergency. To ensure we are doing all we can to prevent young people being secured when possible, we are currently leading a subgroup of the Strategic Board to develop standards for young people on the fringes of secure care.

In collaboration with the Mental Welfare Commission and together with partners including Police Scotland and Her Majesty's Inspectorate of Prisons, the Care Inspectorate is a member of the [National Preventative Mechanism \(NPM\)](#), designated to monitor the treatment and conditions of those people who have been deprived of their liberty, including children and young people. The NPM's Eighth Annual Report, 2018 gives an overview of members' work in monitoring detention across the UK from 1 April 2016 to 31 March 2017, and on the NPM's joint, thematic work on transitions and pathways between different detention settings.

In partnership with the Mental Welfare Commission for Scotland we carried out joint inspections of secure care services during 2013/14 and reported on this in our joint publication [Visits to Young People in Secure Care Settings \(2014\)](#). Our findings led to more conversations with providers about the practice of single separation and isolation, the need to promote better access to mental health and therapeutic services and for better planning for transitions at the end of secure placements and between services.

SPOTLIGHT ON SUCCESS – GOOD SHEPHERD CENTRE BISHOPTON

The Good Shepherd Centre is a secure care service.

During one inspection we learned of innovative developments within the service's education department including a 'citizenship and tenancy' award that some young people were achieving in preparation for transition to their home community. The service's education department had worked diligently to have this award recognised by the SQA; and were working on having a further course (on mental health) recognised in the same way.

Housing support services

I get the most out of life because the people and organisation who support and care for me have an enabling attitude and believe in my potential.
Health and Social Care Standards: standard 1.6

Housing support services can help individuals and families to live as independently as possible in temporary accommodation and provide support for people to gain their own tenancy or move on to longer-term homes.

We work with housing support services providing homeless accommodation for young adults and with Women’s Aid Refuges which provide accommodation for women and children who have experienced domestic abuse. Over the period of this review, housing support services, as well as other types of service have also offered accommodation and support to a number of unaccompanied asylum seeking young people in Scotland.

Between April 2014 and March 2017 there were seven new registrations and 12 cancellations of housing support services, within the range described above. We have not been able to determine the impact that this has had on numbers of places available within these services. We will consider how we can collect more information about people experiencing housing support services (which the children and young people team work with) so we can better support them to develop to meet needs.

We currently inspect these services at least once every 36 months and more often if we assess this as necessary.

FIGURE 11: Number of housing support services by provider group

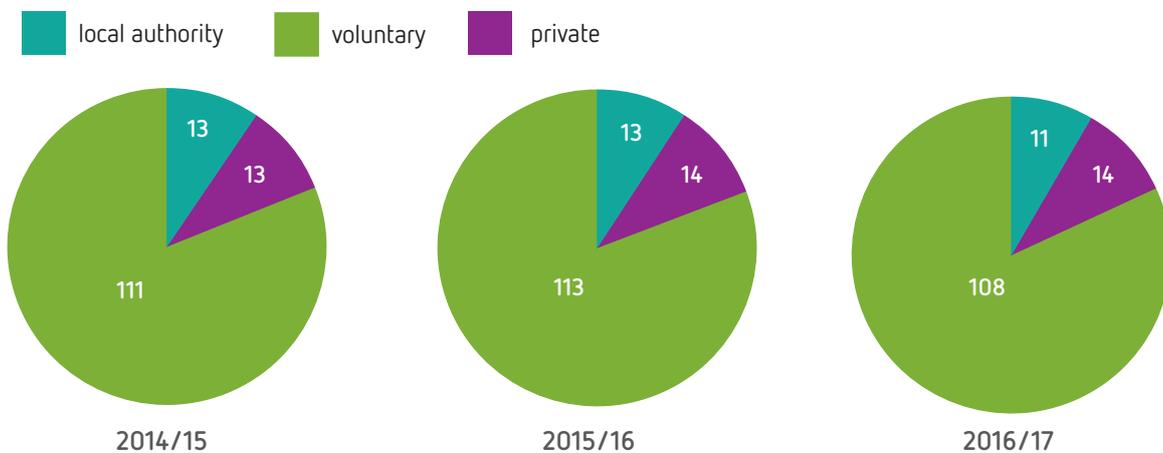


FIGURE 12: Quality evaluations – distribution of grades by number of services



Key messages

Almost all housing support services were evaluated good or better for quality of care and support, staffing, and management and leadership. Within good housing support services we saw that trusting relationships were being established between staff members and the people experiencing the service; leading to more person centred support planning. In the first year of the review period, three services were evaluated weak for care and support and one was evaluated weak for management and leadership in the second year¹⁴. Two of these services have since evaluated adequate and good for care and support, and the third service has cancelled registration. No services were evaluated as unsatisfactory.

We noted that changes in commissioning arrangements for housing support services had led to greater partnership working between services, and to a decrease in funding for some. Some services for young people had responded to decreased funding by decreasing support staff hours and some had shared managers between two or more services.

We raised awareness of SHANARRI and some services responded by developing assessment, planning and outcomes for people experiencing the service, in line with wellbeing indicators. This offered young people a familiar framework for assessment and planning and has supported involvement in planning their care and support. Across all services we also promoted awareness of sexual exploitation, particularly for those working with young people with learning disabilities or who had been sexually abused and were identified as being even more vulnerable.

We have worked with the Scottish Government, COSLA and local authorities to ensure appropriate accommodation for young people seeking asylum and who have been granted looked after status. Up until now, Scotland has offered asylum mainly to young people who have travelled (some for years and enduring extreme hardship and exploitation) from Vietnam and Eritrea. Some local authorities including Glasgow City, City of Edinburgh, North Ayrshire, Renfrewshire and Midlothian have been offering care and support for those young people within existing

Moving forward we will gather more information within annual returns about the care and support services experienced by previously looked after young people. We will use this intelligence to promote more effective planning and transitions to contribute to prevention of homelessness and poverty for young people and young adults.

care services or in newly registered services. Through our scrutiny activity, we have found that most asylum seeking young people are engaging well with services and are taking up counselling, education and social activities offered to them.

We have worked with Women's Aid services to encourage greater collaboration with organisations such as Police Scotland, and we have also listened to the views of police officers about the quality of services. This has led to greater opportunities to address the behaviour of abusers and to promote increased public protection. We have also encouraged effective relationships with local authority children's services workers to support service improvements. More recently we have been signposting services to the Scottish Government publication [Equally Safe, 2017](#) a strategy to prevent and eradicate violence against women and girls, and moving forward we will look at how services are using this information in our future work with them. We will also examine the Domestic Abuse (Scotland) Act 2018 and consider what implications it may have for our work with services to further promote public protection.

Child protection procedures have been highlighted as an area for improvement in some services due to some information not being shared appropriately. Inspectors have ensured that information has been shared with the relevant agencies so that children's safety and wellbeing is considered as paramount importance.

We have welcomed the recent emergence of some services specifically for men who have experienced domestic abuse, and services for women who have been trafficked. We look forward to learning about these specialist areas together with those services and to supporting future developments, so that support can be targeted to meet people's specific needs.

Our inspection reports highlighted the need for improved risk assessment and personal planning for individuals so that a more holistic service could be offered and to take account of challenges for people relating to addictions, mental health and offending and the impact that has on children and young people in the family. We also raised awareness of Naloxone and many services now have trained staff to administer this if necessary¹⁵.

¹⁴ Blue Triangle, NAS Scotland and Stirling Council – Children's Services

SPOTLIGHT ON SUCCESS – PERTH AND KINROSS COUNCIL, YOUNG PEOPLE'S HOUSING SUPPORT SERVICE

Perth and Kinross Council provide a housing support service for homeless young people.

During an inspection visit we found young people were well supported to engage with healthcare services and that staff were particularly good at picking up on mental health issues and supporting young people to access appropriate help.

There was excellent support for young people to develop healthier lifestyles, through promoting healthy eating, providing activities including kayaking and hill walking, and enabling access to community-based sports. This had a positive effect on young people's physical health and mental wellbeing as well as experiencing positive leisure activities in preparation for living independently. Young people said:

"The first time I came here I felt very scared but now I feel very safe and happy. I have enough of everything here. I have a free life here."

"I really appreciate that I have been thought of and cared for. I am very pleased with the service and everyone who provided the service was really considerate. I am very much indebted."

"I am doing well here. I have had a lot of help with budgeting, saving and being more independent."

Moving forward we will empower young people, their families and advocacy workers to tell us more about their concerns and when care and support are not right for them.

We will also examine the Domestic Abuse (Scotland) Act 2018 and consider what implications it may have for our work with services to further promote public protection.

¹⁵ Naloxone is a medication used to block the effects of opioids, especially in overdose

Support and care at home services

If I am unable to make my own decisions at any time, the views of those who know my wishes, such as my carer, independent advocate, formal or informal representative, are sought and taken into account.

Health and Social Care Standards: standard 2.12

Support services and care at home services are designed around the needs of the communities and individuals who experience them. Some providers offer both types of service, which although separately registered, may be combined to allow children and families to be supported either at home or in the community, by the same staff group and overseen by the same manager. We currently inspect care at home services once within every 12 months and we inspect support services once within every 36 months. When services are combined we inspect once within every 12 months or more often if we assess this as necessary.

Between April 2015 and March 2017, there were 20 new registrations and 15 services cancelled leaving a total of 63 services for children and families. We have not been able to determine the impact that this has had on numbers of places available within these services however, we will consider how we can collect more information about people experiencing support services (which the children and young people team work with) so we can better support them to develop and meet future needs.

FIGURE 13: Number and capacity of support services including care at home by provider group

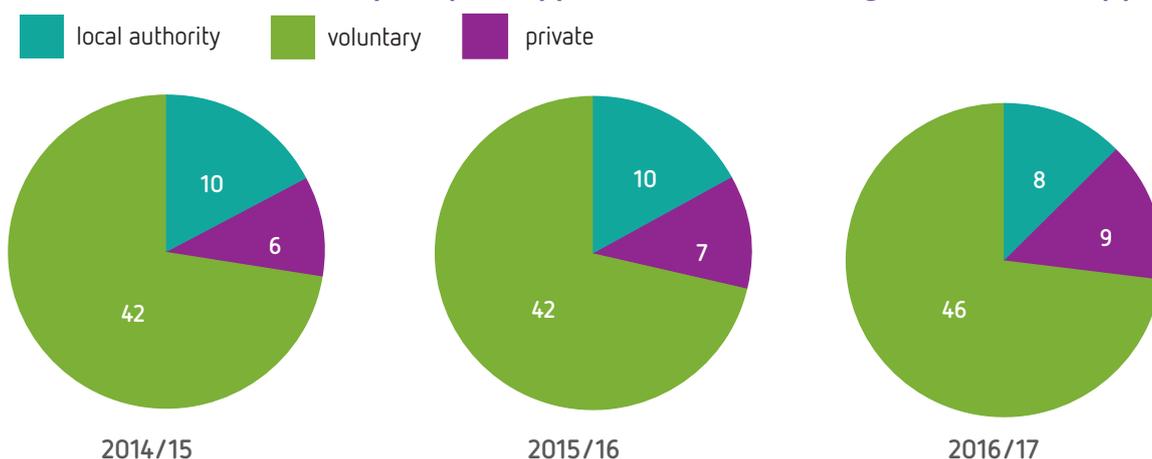
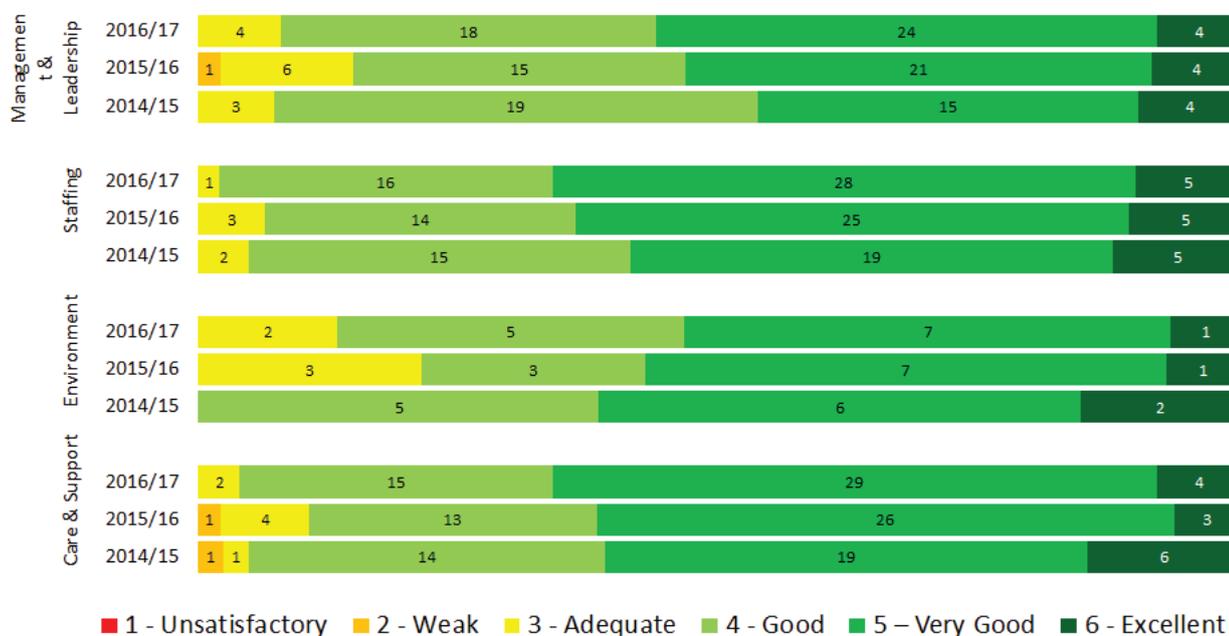


FIGURE 14: Quality evaluations – distribution of grades by number of services

**Grading profile of support and care at home services:
Distribution of grades across three inspection years, split by quality theme
(numbers in the bars represent number of services)**



Key messages

For almost all support services quality was good or better for care and support, environment, staffing, and management and leadership. Two services were graded weak for care and support, one in the first year and one in the second and have since achieved grades of adequate and good.¹⁶ One of those services also graded weak for management and leadership and we took enforcement action by serving an improvement notice and a conditions notice to ensure improvements were made and to protect people's safety and wellbeing. No services were evaluated as unsatisfactory.

Over the review period the Social Care (Self –directed Support) (Scotland) Act 2013 has been implemented. This Act requires local authorities in Scotland to offer people choices for how they receive social care and support.

The Act promotes four options:

Option 1: The local authority makes a direct payment to the supported person for the provision of support.

Option 2: The supported person chooses their support provider and the local authority arranges provision and payment for the support.

Option 3: The local authority chooses the services and arranges provision and payment.

Option 4: A mixture of the above.

Throughout our work with support services, we have been aware of how very much appreciated these services are by families and that due to changes in funding, many families have experienced reduced hours of care even though in some cases there was increased need for support. Families told us about the big difference these services make to family life and the health and wellbeing of all family members. They also told us how difficult it can be to raise concerns or make a complaint when the care or support is not right.

Some services support families caring for a disabled child while others offer support to young carers or are commissioned as part of a plan of early intervention to support children to remain at home with their families. The Carers (Scotland) Act 2016 came into force this year and introduces a range of provisions aimed at improving support for carers and young carers.

As services have adapted their provision to meet the needs of children and families, we have worked with providers to ensure accurate registration with the Care Inspectorate, and appropriate registration with SSSC or other professional regulatory bodies for managers and staff. Services have also told us about the huge challenges faced by some, particularly those on the Scottish Islands, in recruiting, training and retaining staff. Staff working on a sessional basis or on zero hours contracts have found it difficult to access quality training, and this has impacted on morale and on the quality of care being provided in some services.

¹⁶NAS SW Scotland Supported Living and Banchory Respite



SPOTLIGHT ON SUCCESS – CLASP Cornerstone

CLASP Cornerstone is a support service. During an inspection we found the service had worked extremely hard to ensure that young people, who may otherwise be isolated due to their disability, were active within their communities.

Young people were encouraged to improve their communication and social skills and by being sensitively supported to access local provision, they were encouraged to lead a more active lifestyle, promoting positive health and wellbeing.

Through creative fundraising approaches and positive links with local businesses, events including a fashion show were organised. Young people were involved in organising the event, modelling clothes and performing dance routines to a large audience. This event secured enough money to support a summer trip for young people to celebrate their achievement. Families said:

"The whole family benefits."

"The service has allowed me to spend time with my other son which I would normally be unable to do."

"Very happy with all aspects of care and support offered by all staff. Very friendly, caring and approachable."

Adult placement services

I am supported and cared for by people I know so that I experience consistency and continuity.

Health and Social Care Standards: standard 4.16

Adult placement services recruit, approve and support carers to offer family based services to both adults and young people within our communities; within this report we provide details in relation to services for young people who are becoming young adults. Adult placement may be used for young people leaving care; those who may be experiencing homelessness; and more recently for those choosing Continuing Care. This will include adults and young people from age 16 and can be long-term placements, short breaks, emergency placements and day care. Care is usually provided within the adult placement carers' home and the young person or young adult in placement is involved in all aspects of family life.

People who use these services tell us that they experience support, which protects and promotes their rights and choices and enables a feeling of belonging and family life. This gives them the confidence to achieve their goals.

We will work with partners to raise awareness of our complaints policy so that we can listen more to the experiences and wishes of children and families using all services.

By the end of March 2017, there were 28 registered adult placement services. There were no new registrations and no services cancelled over the review period. We inspect these services once within every 12 months, or for adult placement – continuing care, at the same time as the linked fostering service inspection, or more often when we assess this is necessary.

FIGURE 15: Number of adult placement services by provider group

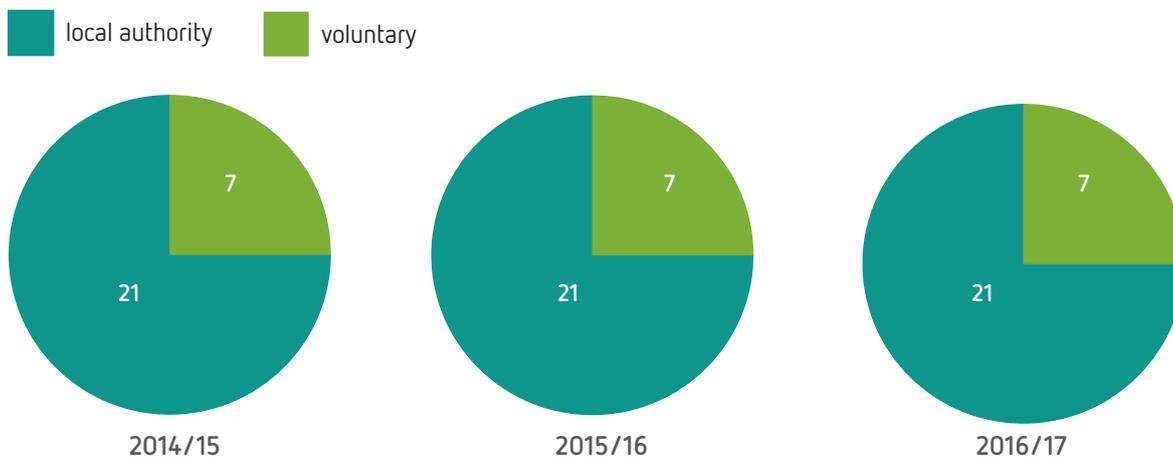
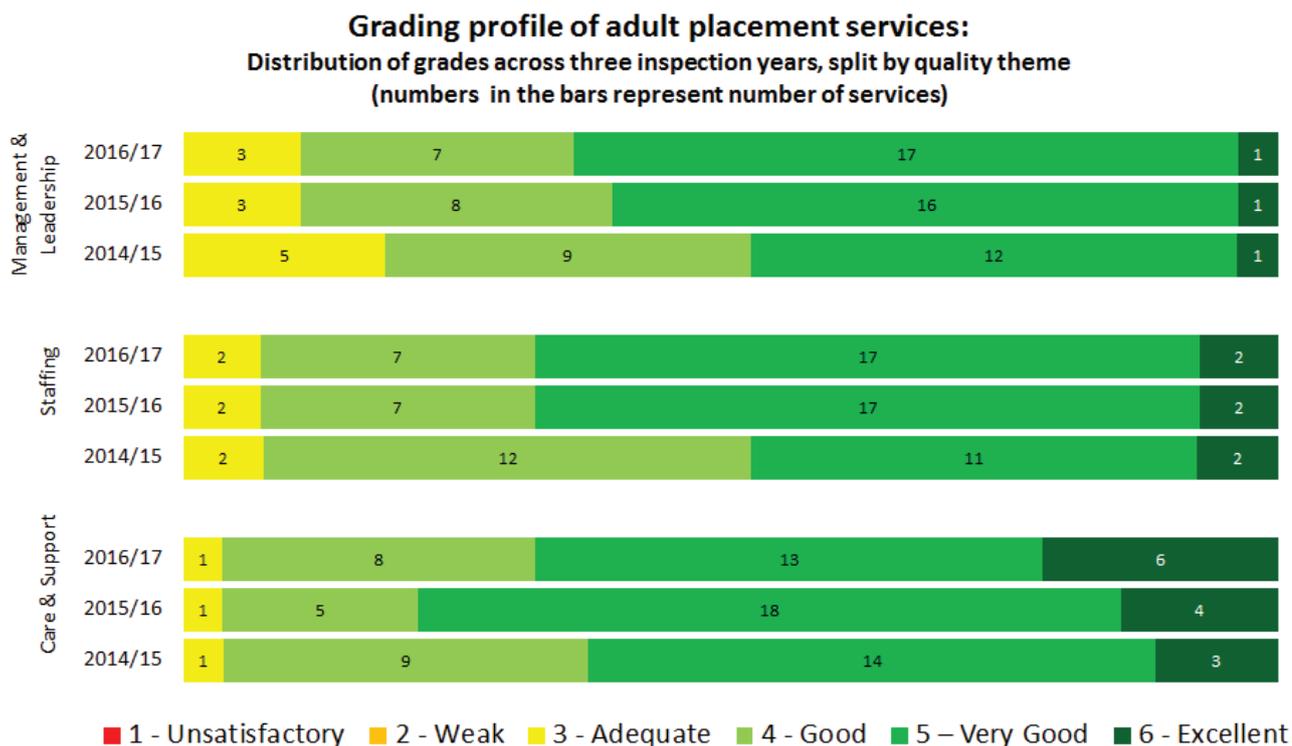


FIGURE 16: Quality evaluations – distribution of grades by number of services



Key messages

Overall, in almost all adult placement services quality was good or better for care and support, staffing, and management and leadership. No services were evaluated as weak or unsatisfactory.

Services designed to support young people who had previously been looked after and were engaging with through care and after care services, or young people at risk of homelessness, were encouraged to develop improved assessment and assurance processes. By supporting services to develop panel and review processes, better decisions were made about the competence of carers and this led to better experiences and outcomes for some young people.

During the review period we worked with adult placement service partners to provide a flexible and responsive regulatory framework in the best interests of young people. We developed [Adult Placement Service Policy and Guidance](#) for the purposes of promoting Continuing Care to support the growing practice within fostering services of enabling young people to remain living with their carer families beyond their 18th birthday when they ceased to be fostered or looked after.

More recently, we have been raising awareness of the policy with providers of foster care services and have been encouraging services to promote young people's rights in respect of Continuing Care with both young people and with carers.

As many adult placement services are provided to meet the needs of older adults we were unable to determine the capacity in terms of adult placement services subject to scrutiny activities by the children and young people's team only.

We will develop our systems to gather more information about adult placement services so that we can monitor uptake of continuing care placements and use this intelligence to target our support where needed.

SPOTLIGHT ON SUCCESS – EAST KILBRIDE SUPPORTED CARERS

East Kilbride Supported Carers is an adult placement service.

During an inspection visit we spoke with a young woman who told us how successful her placement had been for her. With the support of her carers she had achieved the Queens Award for Scouting, The Duke of Edinburgh Award, and was studying to become a nurse. She described how her carers support had helped her to achieve her dreams and how important they are in her life.

5. POLICY INFORMATION

In the last three years there have been some important policy changes. These are designed to make life better for children and young people and will guide us in our future scrutiny and improvement work with services.

CHILD SEXUAL EXPLOITATION

Scottish Governments National Action Plan to tackle Child Sexual Exploitation, 2014 takes account of the CELCIS publication, The Sexual Exploitation of Looked After Children in Scotland: A Scoping Study to Inform Methodology in Scotland 2013. It was developed with a focus on tackling child sexual exploitation; prevention of abuse; disruption and prosecution of offenders through legislation; and supporting children and young people affected.

During the period 2014-2016 we focused on child sexual exploitation in our inspection work. In our report **Preventing and Responding to Child Sexual Exploitation: evidence from inspections of care services for children and young people, 2018** we highlighted overall findings from our work with registered care services. Where children were at risk of, or had been subject to exploitation in the past, inspectors found that the majority of care plans contained effectively-implemented strategies to help young people to be safe. High quality care and support was often associated with effective inter-agency working, collaborative arrangements across a wide range of partners, and confident staff who could exercise their responsibilities at the right time.

Staff awareness was supported by well-considered policies, coupled with effective training and development which helped staff to be confident. The majority of services were found to have policies in place or were well on the way to developing this. Even where policies were not quite finalised, providers had been proactive in providing learning and development opportunities for staff to raise their awareness of this type of abuse. In some care services, we identified the need for a wider range of staff to be confident in understanding the risks and we will follow up on this in future work with services and taking account of the National Action Plan to Prevent and tackle Child Sexual Exploitation Progress Report 2017.

THE SCOTTISH CHILD ABUSE INQUIRY

The Scottish Child Abuse Inquiry was established by Scottish Ministers under the Inquiries Act 2005 to investigate the abuse of children in care in Scotland within living memory up to 17 December 2014.

The Inquiry will consider if and how much institutions with responsibility for children in care failed to protect them and will create a national public record and commentary on abuse of children in care. The inquiry will examine the effects of abuse, will consider how well changes to practice, policy or legislation is protecting children now, and consider whether further changes are necessary to protect children in future. The Care Inspectorate is supporting the Inquiry and may have significant information to offer about the history and development of regulation and inspection of residential care services for children and child protection across Scotland.

We will do all we can to protect vulnerable children from all forms of abuse and will consider the Inquiry's conclusions and recommendations with great care, to ensure we take action to continuously improve our own practice and support and encourage services to improve practice as necessary.

INDEPENDENT CARE REVIEW

An independent review of care for children and young people in Scotland was launched in 2017.

Our Chief Inspector for strategic scrutiny was invited to participate in the second "Discovery" phase which has taken a closer look at the issues which young people have identified as being of the greatest importance. As a result of this work, the next phase "Journey" will propose, promote and support a number of local initiatives and tests of change aimed at changing practice to improve experiences for children and young people. Successful tests may support practice change nationally.

In 2017 we highlighted to the review a mixed picture of improvements and continued inequalities for children and young people experiencing care. This included the need for better assessments, better health services and better access to full time education. We commented on the need to reduce moves in care to reduce trauma and to enable trusting relationships to develop over time between adults and children.

Moving forward the review will be shaped by the evidence of care experienced young people. We will work with services to support implementation of any proposed changes to the care system that will improve outcomes and quality of life for children and young people.

CHILD PROTECTION

In 2014, [National Guidance for Child Protection in Scotland](#) was published followed by a programme of action being announced by the Scottish Government with recommendations for sustainable improvements in the child protection system and the [Child Protection Improvement Programme Report, 2017](#).

This set out nine areas of work to deliver the vision for the new system: the Child Protection Systems Review; Neglect; Child Sexual Exploitation; Child Trafficking; Child Internet Safety; Children's Hearings; Inspections; Leadership; and Data and Evidence. In a section on Inspection the Care Inspectorate was asked to take action in a number of ways including to establish a working group to consider how scrutiny and improvement can best be provided for services for all children and families, including collaborating with partners to develop and improve the use of self-evaluation.

CORPORATE PARENTING AND COMPLAINTS

As a corporate parent the Care Inspectorate must be alert to matters which could adversely affect wellbeing of children and young people and we must promote their best interests.

We have prepared a plan about how we will carry out our corporate parenting responsibilities. We will regularly review our plan and report what more we can do. Corporate parents must also collaborate with each other to safeguard and promote the wellbeing of children or young people and this will further uphold our core commitment and values in protecting and promoting the rights and safety of all people who use care services.

Care Inspectorate Corporate Parenting Plan 2017–2020.

An action point within our corporate plan is to further develop our intelligence processes including how we collate and analyse complaints made by young people.

On average we receive less than 50 complaints a year about the care of young people, mainly from families and staff members when they have not been able to raise their concerns within the services. No concerns were raised with us by advocacy groups and few were raised by children or young people themselves.

CONTINUING CARE

Building on the Staying Put (Scotland) Guidance published in 2013, Continuing Care is a new status established by the 2014 Act and places a new duty on local authorities to provide Continuing Care in certain circumstances.

It offers eligible young people the entitlement to remain in their care setting up to their 21st birthday where they cease to be looked after by a local authority. Guidance on Part 11 (Continuing Care) of the Children and Young People (Scotland) Act, Scottish Government (2016).

Over the period of this review we collaborated with providers to develop care inspectorate policy specifically to enable continuing care arrangements. For example, we have encouraged care home providers to extend the age range within their conditions of registration from age 18 up to age 20. We will continue to promote and monitor the uptake of variations for continuing care.

SAFE AND EFFECTIVE STAFFING

Over the review period, the SSSC has opened registration to supervisors and support workers in housing support, care at home and support services.

We have continued to promote staff and manager registration with the SSSC and to support services to follow [Codes of Practice](#). We know that knowledge, skills and values of staff are crucial to people's experience of a positive service and to better longer-term outcomes.

During the review period referrals were made by providers to SSSC in relation to individual fitness to practice in care homes, school care accommodation, housing support and care at home services for children and young people. We followed up with the services where workers were employed to ensure risks were assessed and well managed so that people's safety and wellbeing was being protected and promoted while enquiries were being made by SSSC or other professional regulatory bodies¹⁷.

In our publication [Staff Vacancies in Care Services, 2016](#) we highlighted that across Scotland, care home services and housing support services had significantly higher than average staff vacancy rates. For the year 2016 there were also increased vacancies reported in school care accommodation, secure care and adult placement services. Adoption and fostering services reported a decrease in staff vacancies in the same year. There was an increase in services telling us that they found vacancies hard to fill with some of the reasons for this being due to lack of appropriate skills and experiences for those applying and inability to work the hours and patterns required.

¹⁷ Other professional regulatory bodies include the General Teaching Council; Health and Care Professions Council and Nursing and Midwifery Council

6. CONCLUSIONS AND NEXT STEPS

Overall we found that most registered services were performing well. When we highlighted areas for improvement, services generally responded promptly and in a way which promoted better experiences and outcomes for people.

Some of the areas for improvement we have identified, ideas emerging from the Independent Care Review and lessons learned from the Child Abuse Inquiry will, and should, influence our approach to inspection, regulation and improvement work for care experienced children and young people in the future.

While this review shows that most services continue to perform well and are improving, young people have told us, and we agree, that too many continue to experience moves in care; being placed at some distance from home; frequent changes of key staff; exclusion from school; and dislocation from family (especially losing contact with siblings). We know that these experiences can cause trauma, distress, and potentially lifelong adverse consequences. Based on our key findings, several of the action points identified within this review will support our **prevention** work. Through our inspection activities and together with our scrutiny partners, we will protect vulnerable children and young people and reduce significant risk by monitoring how well services and agencies work together. Raising awareness of our complaints policy will empower young people, their families and advocacy workers to tell us more about their concerns sooner.

As a corporate parent we will be mindful of the themes covered in this review as we roll out a revised methodology for inspection of registered care services; particularly for those services which are concerned specifically with looked after children and young people and care leavers such as care home, foster care, secure care and adult placement services. However, we will also need to think about how this **intelligence** should influence our approach to inspection, regulation and improvement in other services which non looked after children and young people and some adults' experience, such as mainstream boarding schools and many support services given the impact they have on the lives of children and young people. Through our intelligence gathering and scrutiny activity we will collect more information about the care and support experienced by previously looked after young people; explore further how surveys could also be useful for gathering the views of families; and follow children's journeys critically to learn more about unplanned placement endings.

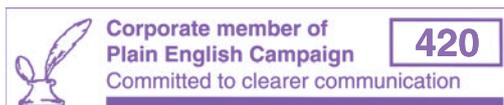
We will focus on how well services organise themselves, self-evaluate and work together to enable children and young people to build and sustain lasting relationships and experience stability, consistency and love in their lives. We will continue to share examples of effective practice in this area, as part of our work to support **improvement**. By enabling creative care services to develop and flourish we will continue to promote improvement and innovation to add increasing value for people experiencing care. Together with providers we will share our learning to drive continuous improvement and showcase improving and sector leading services.

We know that we have a duty to provide assurance about the quality of care that children and young people receive from a registered care service, and where absolutely necessary we will do this through **enforcement**. However, young people know that their lives are also influenced by decisions made by professionals and children's hearings, and that these decisions and the quality of the relationships with those caring for them impact on the extent to which they can get the social, educational and health support they need. To achieve positive outcomes for people using services we will take action to ensure appropriate and safe staffing levels and high quality service are maintained. Furthermore, we will rigorously implement any proposed changes to the care system that will improve outcomes and quality of life for children and young people. A significant challenge then, will be to ensure that together with all our partners, our combined activity gives assurance; supports improvement; and contributes positively to the experiences of people who need additional care and support for all of, or for some periods in their lives.

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