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AGENDA

Committee	CORPORATE PARENTING ADVISORY COMMITTEE
Date and Time of Meeting	TUESDAY, 17 SEPTEMBER 2019, 2.00 PM
Venue	COMMITTEE ROOM 1 - COUNTY HALL
Membership	Councillor Merry (Chair) Councillors Bowden, Driscoll, Hinchey, Jenkins, Lent and Lister

1 Apologies for Absence

To receive apologies for absence.

2 Declarations of Interest

To be made at the start of the agenda item in question, in accordance with the Members' Code of Conduct.

3 Minutes *(Pages 3 - 10)*

To approve as a correct record the minutes of the meeting on 15 July 2019

Presentations

4 Cardiff & Vale UHB Emotional and Mental Health Development Work

Dr Jenny Hunt/Dr Libby Erin presenting

5 Fostering Update *(Pages 11 - 18)*

Kate Hustler presenting

6 Pupil Development Grant for Looked After Children *(Pages 19 - 42)*

Siriol Burford, Regional Lead PDG LAC, Central South Consortium presenting

Reports

- 7 Ty Storrie and Crosslands Annual Reports** *(Pages 43 - 108)*

General Items

- 8 Corporate Parenting Strategy Refresh**

Member Items

- 9 Work Streams**

Discussion Item – Natasha Hilderley, OM – Childrens Services

- 10 Member Visits**

Discussion Item – Natasha Hilderley, OM Childrens Services

- 11 Work Programme 2019/20** *(Pages 109 - 110)*

Discussion Item

Briefing Reports

The next item is exempt from publication as it contains exempt information of the description contained in paragraph 12 of Part 4 and paragraph 21 of Part 5 of Schedule 12A Local Government Act 1972. The public may be excluded from the meeting by resolution of the Committee pursuant to Section 100A (4) of the Local Government Act 1972 during discussion of these items.

- 12 Ty Storrie & Crosslands Registered Individual Reports** *(Pages 111 - 150)*

- 13 Urgent Items (if any)**

- 14 Date of next meeting**

The date of the next scheduled meeting of the Committee is on Tuesday 17 November 2019@ 2.00 pm

Davina Fiore

Director Governance & Legal Services

Date: Wednesday, 11 September 2019

Contact: Mandy Farnham,

02920 872618, Mandy.Farnham@cardiff.gov.uk

CORPORATE PARENTING ADVISORY COMMITTEE

15 JULY 2019

Present: Councillor Merry(Chairperson)
Councillors Bowden, Driscoll, Hinchey, Jenkins, Lent, Lister,
Brown and James

62 : APOLOGIES FOR ABSENCE

Apologies for absence were received from Rose Whittle, Committee Advisor.

63 : APPOINTMENT OF CHAIR AND COMMITTEE MEMBERSHIP

The Committee noted that at Council, at its annual meeting on 23 May 2019, appointed Councillor Sarah Merry as Chair and the following Members to the Committee:

Councillors Bowden, Driscoll, Hinchey, Jenkins, Lent and Lister.

64 : TERMS OF REFERENCE

The Council, at its annual meeting on 23 May 2019, agreed the following Terms of Reference:

- (a) To champion the life chances and rights of Children Looked After; Children in need; Care Leavers and children and young people in the criminal justice system across the Council, with Elected Members and partners.
- (b) To actively promote real and sustained improvements by ensuring that there are mechanisms in place to:
 - ascertain and have regard to the child or young person's view, wishes and feelings, so far as reasonable practicable;
 - have regard to the importance of promoting and respecting the child or young person's dignity;
 - have regard to the characteristics, culture and beliefs of the child or young person;
 - have regard to the importance of providing appropriate support to enable the child or young person to participate in decisions that affect them;
 - have regard to the importance of promoting the upbringing of the child by the child's family, in so far as doing so is consistent with promoting the child's well-being;
 - Where the child is under the age of 16, ascertain and have regard to the views, wishes and feelings of those with parental responsibility for the child, in so far as doing so is consistent with the well-being of the child, and reasonably practicable
 - That there is a follow on provision for young people leaving care that meets the need of young adults

- (c) To develop and undertake a programme of consultation, listening and engagement events with Children Looked After, Children in Need and Care Leavers as well as visits to services providing support and advice to those children and young people.
- (d) To recommend ways in which more integrated services can be developed across all Council directorates, schools and other stakeholders to lead towards
 - Improved education attainment and achievement for Children Looked After, Children in need and Care Leavers;
 - Emotional and Mental Health and Well-being Support for Children Looked After, Children in Need, and Care Leavers;
 - Improvements in services for children with disabilities
 - To encourage Looked After Children, Children in need and Care Leavers to become active citizens.
- (e) To ensure performance monitoring systems are in place, and regularly review performance data to ensure sustained performance improvements in outcomes;
- (f) To benchmark and learn from best practice of other Local Authorities
- (g) To receive all relevant Children's Services inspection and annual reports, including: Children's Homes Quality of Care Report; Child Practice Review Themes, Fostering Annual Quality of Care Report; Adoption Fostering Annual Quality of Care Report; 4C's Commissioning; Out of Area Annual Report; Education Report; Children's Complaints reports; and Advocacy Annual Report;
- (h) To develop, monitor and review a corporate parenting strategy, and ensure its effective implementation through work plans and corporate parenting training programmes;
- (i) To submit an annual progress report to the Cabinet and make recommendations where responsibility for that function rests with the Cabinet;
- (j) To report to the Children and Young People's Scrutiny Committee as necessary;
- (k) To recommend the appointment of co-opted members to the Committee for approval by Council;
- (l) To submit an Annual Report on the work of the Committee to full Council.
- (m) All Members of the Committee will be required to undertake relevant training to enable them to properly discharge their duties.

65 : NOMINATION AND ELECTION OF DEPUTY CHAIR

AGREED: To note that the Committee elected Councillor Lent as Deputy Chair.

66 : DECLARATIONS OF INTEREST

No declarations of interest were received in accordance with the Members' Code of Conduct.

67 : MINUTES

The minutes of the meetings held on 29 January 2019 and 2 April 2019 were agreed as a correct record and signed by the Chairperson.

68 : UNICEF CHILD FRIENDLY CITY STRATEGY - PRESENTATION

The Chairperson welcomed Lee Patterson (Community Education Officer, Achievement & Inclusion, Education and Lifelong Learning) to the meeting.

Members were provided with a presentation outlining the partnership between Unicef and Cardiff in working towards Cardiff becoming a Child Friendly City. The presentation outlined the 5 Goals (the last 3 of which are thematic) and the 17 commitments to action. The delivery plan itself is much more detailed, with a review taking place every 6 months.

The Committee were invited to comment, seek clarification or raise questions on the information received. Those discussions were summarised as follows:

- Members expressed concern at the number of elected members who have still not undertaken the Unicef training and queried whether there is an expectation that all staff will undergo the training. Members were advised that the training provided by Unicef concentrated on police officers, those officers from education and social services as opposed to across the board. However, there is a mandatory eLearning module which staff have to undertake.
- Members discussed the need for a child in care to get their voice heard, the prioritisation of education for the child who is looked after and queried how is more funding and support being identified for these children and not necessarily through a classroom environment. Members were advised that it is a difficult challenge, you can only engage with them when they feel it is appropriate. It is important to have the processes and structure to be able to have meaningful conversations. There is still work to be done on this, the Child Friendly City is an umbrella but Children's Services and Education have the responsibility of doing the work.

Children's Services are commissioning an app called Mind of My Own which will be valuable in terms of giving feedback and asking questions. There has been a commitment to young people that they will be involved in the roll out.

In relation to the Annual Survey, engagement work is being undertaken with family workers, family health and support, and

childcare and flying start colleagues. The Facebook page is also being used to assist engagement and a case study is being undertaken about the work at the Ely & Caerau Children's Centre as an example of good practice.

- Members queried whether any feedback from staff about the training will feature in any new training and were advised that currently Unicef review training every 6 months as part of their quality assurance programme, and training is being evaluated over an 18 month period.

AGREED: To note the presentation.

69 : GOOD PRACTICE IN LEAVING CARE PRESENTATION

The Chairperson welcomed Natasha Hilderley (Interim Operational Manager, Specialist Services) to the meeting.

Members were provided with a detailed presentation and noted that Cardiff has become an example of good practice within the region and are taking the lead in deciding what should be provided.

The Committee were invited to comment, seek clarification or raise questions on the information received. Those discussions were summarised as follows:

- Members referred to the Mind of My Own app and asked whether consideration is being given to those leaving care being allowed access. It was noted that as the app is being purchased by the authority, the view is that access should remain with care leavers certainly until the age of 25.
- Members discussed their concerns that there is no funding provision for Higher Education for those who have been in care and have reached the age of 25. As there is no provision, the In to Work and Bright Starts teams try to help with finding a pathway for those who wish to consider further education at that time. Officers advised that some case studies could be provided to Members at a later meeting.
- Members queried the stability of the Personal Advisor service and noted that it probably one of the most stable within the service and there is a very limited movement of staff.
- Members expressed concern that 57% of care leavers felt unsafe when they first left care and queried whether that is representative of Cardiff but were advised that the authority is trying to build a stronger community. Young people are being provided with information as to where to seek advice about any issues they encounter, knowledge provides a feeling of strength.

- Members queried how we support our young people who are attending at university. The OM advised that the Personal Advisors are very good at providing advice, whether that be finance and budgeting issues, housing, the yellow box scheme which is an equipment exchange. It is largely about creating independence as opposed to dependency. As officers it is also necessary to sign off on financial assistance, for example for a gap in finance for accommodation. As parents we would provide that for our children, and the authority has to offer similar assistance.

AGREED: To note the presentation.

70 : CARE AND SUPPORT PLANS - PRESENTATION

The Chairperson welcomed Natasha Hilderley (Interim Operational Manager, Specialist Services) to the meeting.

Members were provided with a presentation outlining a number of matters:

- The statutory requirements for the plan;
- The review process; and
- The aims

AGREED: To note the presentation.

71 : CORPORATE PARENTING STRATEGY/EDUCATION ITEM

The Chairperson welcomed Deborah Driffield (Interim Assistant Director, Children's Services) to the meeting. Members were provided with a presentation providing information outlining the need for and the development of the new Cardiff Children's Services Strategy 2019 – 2022

The Committee were invited to comment, seek clarification or raise questions on the information received. Those discussions were summarised as follows:

- Members sought clarification in changes in the structure chart and were advised that currently there were a number of interim operational managers in place, which has been necessary during the transition period. However, the quality of the applications has been high. It is necessary to bring on younger less experienced members of staff, and it hoped that the interim operational managers will be able to provide a wealth of experience and assist those less experienced.
- Members discussed potential funding from Welsh Government and queried whether, if money is saved, will there be further investment, for example better residential facilities and housing for our young people. It is important to give them the best possible experience. The reduction expectation, as it relates to the numbers in local authority care, was discussed. Members were advised that there would be no financial penalties, it is about work

being done to develop a plan to reduce numbers. It was noted, in respect of the reduction expectation figure, children who are living at home but are still subject to a care order has a negative impact on that figure.

- Members noted the intention to develop a parent's participation charter with a view to it being co-produced by parents for parents. It is important to develop ways to work with parents and encourage them to become peer educators.
- As there is to be a review and relaunch of the Youth Offending Service (YOS) management board Members asked for consideration to be given to there being elected members on that board.
- Members queried how many children from other authorities were in education in this area and were advised that it was very few. There are more children from Cardiff in education in other authorities.
- Members noted that the development and implementation of the strategy is a huge piece of work, which is no doubt expensive and disruptive and wanted to be reassured that it was transformative and that the service would be better. Members were advised that a lot of consideration has gone into the strategy and it cannot be delivered unless there is a change in the structure. Officers accepted that it was indeed a huge piece of work but did not accept that it was a huge cost. Not all staff are happy with the structure changes, however, there has to be a change to ensure that a difference is made to the lives of our young people and their families.

AGREED: To note the content of the strategy.

72 : FORWARD PLAN/WORK PROGRAMME

AGREED: To note the Forward Plan/Work Programme

73 : BRIEFING REPORTS

Members were provided with the following Briefing Reports:

- Quarter 4 Performance Report
- Quarter 4 Complaints Report

Members discussed the Quarter 4 performance report:

- Members noted the IRO team is nearly at full strength and there has been positive praise of that team and issues are now being escalated in a timely manner.

- Members noted that KS 2 & 4 Children Looked After (CLA) perform better than all children with care and support needs that that performance drops significantly at KS 4. Officers advised that a number of case studies have been done, Year 10 is when a lot of children's lives unravel and there are a lot of stories behind those results. This year there has been an increase in the number of CLA in Year 11, the authority is aware of their targets and are working hard to get the information as soon as possible. A bid has been put in with the Consortium to provide for tutoring and support for Year 10 and 11 pupils.

AGREED: To note the briefing reports

74 : URGENT ITEMS (IF ANY)

No urgent items were tabled at the meeting.

75 : DATES OF FUTURE MEETINGS

The following committee meeting dates were noted:

17 September 2019 at 2.00 pm
 18 November 2019 at 2.00 pm
 28 January 2020 at 2.00 pm
 17 March 2020 at 2.00 pm
 19 May 2020 at 2.00 pm
 21 July 2020 at 2.00 pm

The meeting terminated at 4.15 pm

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Fostering Update September 2019

CREV.GWIR IN THESE STONES
FELGWYDR HORIZONS
OF WRNALS AWENSING

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Recruitment & Retention of Foster Carers

The recruitment and retention of foster carers continues to be a priority area for the service to address the balance between placements with in-house foster carers and independent fostering agencies.

In January 2019, a Fostering Project Team was established to review fees & allowances and recruitment & retention.



Fees & Allowances

- Reviewed the 'Cardiff' Offer
- Increase in standard weekly allowance
- Matched the 5-10 year old rate of payment with the 0-4 year old payment to prevent reduction
- Introduction of 54 weekly payments
- Payments for birthdays, holidays and religious festivals



Recruitment & Retention

- Dedicated Corporate Comms Officer to support Fostering
- Review of website in progress
- Social media campaign with paid adverts on Facebook & Google
- Regular features on Councils Facebook & Twitter pages
- Commitment from PSB to promote via their online platforms
- Promoted through Education online platforms
- Registered Social Landlords promoting via online platforms
- Fostering banners in 8 parks throughout the City
- Steps to increase diversity of Foster Carers via PRIDE & in communities



Recruitment & Retention

- Worked with other directorates - fostering referrals from HUBS & Into Work Services
- Attendance at events throughout the City i.e. Cardiff Castle, IKEA & Community Events
- Adverts in Tenants Times & magazine produced by UHB



Next Steps

- Additional funding 300K recurring
- Review of resources
- Service modernisation
 1. Provide 24 hour informal support
 2. Plans to introduce 'finders fee' for existing foster carers
 3. Digitalisation for Foster Carers
 4. Therapeutic interventions (where appropriate)

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Impact

- Significant increase in enquiries (including enquiries from IFA foster carers wishing to transfer to the in house service)
- 15 in-house fostering 15 assessments ongoing
- No quick fix – approx. 9 months timeframe from application to placement

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Any questions ?



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PUPIL DEVELOPMENT GRANT FOR LOOKED AFTER CHILDREN (PDG LAC)

Siriol Burford Regional Lead PDG LAC
Central South Consortium

The Grant

- Welsh Government - since April 2015
- The funding is held centrally at Central South Consortium
- Directors of Education from each local authority have to agree priorities for each area.
- Schools are able to apply for funding to support looked after children and formerly looked after children



Grant for 2019/20

The grant allocation is as follows

1. **Salary for Regional Lead**
2. **Support for Children placed outside of Wales**

The out of Wales commitment. Funding for children placed outside of Wales will be accessed in the same way as schools access funding within the region

3. **Strategically Delivered Support**

The consortium will strategically support Looked After Children in education and the commitment will be (10%) The region will work to raise attainment of Looked After Children by providing a **regional training programme** for schools and Local Authorities. These courses can be accessed through Cronfa and can be viewed in the Consortium Prospectus in due course



Grant for 2019/20

4. Bursary.

The Consortium has established a bursary fund for Local Authorities to ensure in year needs can be supported across the region which is focussed on school improvement.

5. Targeted Support for schools

The Consortium will support cluster school needs. Schools will be expected to include this funding within SIP with identified outcome measures.



A National Model for 2019/20

- Support through the grant to disproportionately benefit looked after and formerly looked after children contributing to the development of inclusive schools committed to equity and wellbeing benefitting all learners.
- **Funding will go to clusters of schools and settings to build capacity and to provide bespoke interventions, both of which need to be based on evidence and impact.**
- All activity in relation to the grant should consider sustainability beyond the lifetime of the grant.



Outcomes

- Projects must aim to enhance curriculum opportunities to support social and emotional development, which impacts on the following areas:
 - Raising attainment/achievement
 - Improve attendance
 - Reduce exclusions

It is acceptable for clusters to develop and implement interventions which have a beneficial impact on all children, but the expectation is that they will have a greater potential benefit on children who are looked after, or formerly looked after. Evaluations will be based on the outcomes for Looked After or Formerly Looked After pupils only.



Objectives

- Raise attainment of Looked After and Formerly CLA pupils to close the attainment gap
- Enhance the capacity of schools to improve the outcomes for pupils through training and support, through school to school working and the sharing of good practice (hopefully within the cluster).
- Ensure that partnerships across the region continue to develop within CSC, schools, Social Care and other agencies.
- The Quality Mark is a key component in achieving consistent good practice which is shared from school to school and within clusters.



Central South Consortium Vision and Objectives

- We believe that every Looked After and formerly Looked After pupil has the right to provision and support to enable them to fulfil their potential. We should have high expectations for all pupils which then leads to achievement for learners in the academic and personal and social aspects of their lives irrespective of their circumstances.



Reporting arrangements from Summer 2019

Foundation Phase, Key Stage 2 and Key Stage 3

The Education (Amendments Relating to Teacher Assessment Information) (Wales) Regulations 2018

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- Main Changes:
 - Teacher assessment can be used for information purposes e.g. to develop school improvement policies etc. but not for school accountability purposes below national level.
 - There is **no change** to the collection process or, therefore, the information that WG will hold.
 - Teacher assessment data below National level will be removed from all publicly available data sources:
 - My Local School
 - StatsWales website
 - Statistical Releases
 - Comparative data for Local Authorities and Regional Consortia will not be available.

Implications for schools

The following information will no longer be available:

- DEWi Comparative Reports
- All Wales Core Data Sets (AWCDS)
- National Benchmarking Data (FP, KS2 and KS3)
- Family average comparisons (as previously included in AWCDS)

Information for schools from 2018/19

- For 2018/2019 the CSC will provide an interim evaluation of a school – “CSC *School on a page*” which will assist and support, where needed, school self-evaluation activities.

- For 2018/2019 elected members can expect a reduced standard scrutiny report for teacher assessment outcomes. The main changes are:
 - Removal of published LA data, LA comparisons and corresponding rank positions;
 - Removal of the summary positions based on benchmark quarter summaries;
 - Removal of any information published at individual school level for FP, KS2 and KS3 teacher assessment or Welsh National Tests.
- Information will be available for:
 - National Categorisation Support Categories
 - Estyn inspection outcomes of schools
 - Progress of schools in Estyn follow-up categories
 - Progress of schools causing concerns
 - Pupil progress information
 - School engagement in the curriculum reform programmes

Summer 2019 Reporting

Interim Key Stage 4 Performance Measures

Implications for schools


- All Wales Core Data Sets revised in-line with interim performance measures.
- Comparative information available.
- Historical performance measures available for internal use only.

Implications for LAs

- LA, regional and national data will continue to be reported.
- Reporting will be based around the new interim performance measures and not the historical performance measures.


Key Stage 4 Performance Measures

Summer 2017




- Level 1 Threshold
- Level 2 Threshold
- Level 2 Threshold inc EWM
- New Capped 9 Points Score (5 + 4 others)
- Level 2 English/Cymraeg (Best) (Lang only)
- Level 2 English (Lang only)
- Level 2 Cymraeg (Lang only)
- Level 2 Mathematics (Best of Maths or Maths-Num)
- Level 2 Science (Best)

Summer 2018



- Level 1 Threshold
- Level 2 Threshold
- Level 2 Threshold inc EWM
- New Capped 9 Points Score (5 + 4 others) (*)
- Level 2 English/Cymraeg (Best) (Lang only)
- Level 2 English (Lang only)
- Level 2 Cymraeg (Lang only)
- Level 2 Mathematics (Best of Maths or Maths-Num)
- Level 2 Science (Best) (*)
- Skills Challenge Certificate (Foundation and National)
- Welsh Baccalaureate Measures (Foundation and National)

Summer 2019 onwards



- Average Points Literacy (Best of Literature or Language (En or Cy))
- Average Points Numeracy (Best of Maths or Maths-Num)
- Average Points Science (Best) (*)
- Revised Average Capped 9 Points Score (3 + 6 others)
- Average Points Welsh Baccalaureate Skills Challenge Certificate

Only the results of the first awarding of a complete qualification will count towards performance measures.

(*) – 'GCSE only' requirements for science indicators and components of the Capped 9 points score

Interim Key Stage 4 Performance Measures

- *“The interim measures are very much transitional arrangements as we journey towards the new Evaluation and Improvement arrangements.”*
- *“In late spring we will be issuing comprehensive guidance on aspects such as what data will be provided to schools.”*
- *“Attainment against the Level 2 inclusive and the Level 1 measures will no longer be published for 2019... Therefore, in order to assist schools with monitoring progress against targets set for Level 2 inclusive and Level 1 attainment, in autumn 2019 we will provide schools with Level 2 inclusive and Level 1 attainment data in addition to the interim measures.”*
- [Source: WG LA Bulletin 6 and WG Letter to Headteachers](#)

Summer Reporting 2019

- The interim measures will be points based rather than focused on the percentage of pupils attaining a particular threshold grade/level. The measures published will be:
 - The Capped 9 measures (3+6)
 - Literacy measure (best of Language / Literature)
 - Numeracy measure (best of mathematics / numeracy)
 - Science measure (best of science)
 - Welsh Baccalaureate Skills Challenge Certificate measure
 - Points Score equivalents are:
A*=58, A=52, B=46, C=40, D=34, E=28, F=22, G=16

Capped 9 Points Score (3+6)

- The 'Capped 9' will now include only 3 core measures plus any other best 6 qualifications (other than those already contributing to the 3 core slots).
- The three core measures are given below:

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Subject Areas	Learning Measure
Literacy	Best of English Language, Welsh First Language, English Literature or Welsh Literature
Numeracy	Best of mathematics or mathematics-numeracy
Science	Best of science

The future of performance measures

“How performance measures, or any type of informative indicators, will be used and what they will look like is being fully reviewed and will be developed in the same vein. This is necessary to bring about the cultural change needed to support the implementation and realisation of the new curriculum. Measures may be quantitative and based on attainment data, or qualitative, but regardless of type they will be designed to help us secure our aim of enabling all learners to achieve their potential. We will review and consider key aspects as we move forward, including:

- how to split accountability measures from data for self-evaluation*
- how to manage teacher workload as we develop the work*
- determining any progress measures with dependable baselines*
- giving consideration to the value of intermittent rather than end of career measures”*

[Source: WG LA Bulletin 6](#)

Future National Developments

- Outcomes of the WG Target Setting Consultation has been published and changes to Key Stage 4 requirements should be effective from September 2019.
- The main changes are:
 - Remove measure-specific targets from the requirements for Year 11 pupils.
 - Increase the number of local targets from three to six for Year 11 pupils at Key Stage 4
 - Make transitional provision to all governing bodies to set provisional and final targets for 2019/20 which are not based on targets set in previous years.
- Intention for amended regulations to come into force on 1 September 2019.

Future National Developments

- GCSE – Qualifications Wales (*) “As the draft curriculum has taken shape, we have been considering how we can make sure that qualifications continue to meet the needs of 16-year-olds once the new curriculum is introduced. Meeting the aims of the National Mission will require new qualifications to be available for first teaching from September 2025.”

[\(*\) Letter from QW to WG 12 2 2019](#)

Future National Developments

- Estyn's role in the new evaluation and improvement arrangements in schools. Possible partial suspension of inspection for maintained schools from September 2020 to August 2021.
- National Resource for School Improvement: Being developed with Estyn, OECD and the profession. Draft guidance Autumn 2019. Final improvement process in 2020.

Annual Quality Assurance Report for Children's Homes

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Context

- Presentation covers Crosslands and Ty Storrie reports
- Both annual reviews were undertaken within the Care Standards Act 2000 and it's associated regulations as neither of the establishments were registered under the Regulation and Inspection f Social care (Wales) Act 2016 (RISCA) when the reviews were carried out.
- Future reports will follow the RISCA Guidance on completing the quality of care review in order to satisfy Regulation 80 so will be in a consistent format.
- Under Regulation 80 it is the responsibility of the Responsible Individual (RI) to ensure suitable arrangements are in place to assess, monitor and improve the quality and safety of the service.
- Under Regulations 73 & 74 the RI must undertake 3 monthly visits and produce a report on the adequacy of resources available to provide the service in accordance with the requirements o service providers set out in Parts 3 to 15 of the Regulations.



Ty Storrie Report

- The home transferred into Cardiff Council on 1 June 2019.
- The report covers April 2018-April 2019 and is an Action for Children Report that was completed by their RI.



Ty Storrie Report

- The report highlights significant staffing challenges during the period with two changes of interim managers.
- 6 new children were offered overnight respite during the period and 2 children received tea visits prior to overnight stays being introduced.
- Contracted to deliver 863 bed spaces per year and 881 nights were delivered and 22 tea visits.
- Reference to a positive inspection report which was received in March 2019.
- The report stated that children were looked after by a committed and caring staff team, individual needs were understood and good relationships exist with parents and partner agencies. Overall it determined that children received a good standard of care and support during their stays with evidence of positive outcomes being achieved.



Ty Storrie Report

Things that have gone well:

- Adapting to meet individual needs
- Development of meaningful & realistic outcomes
- Reduction in number of cancelled stays
- Positive inspection report
- Christmas Party

Things that they were still working on:

- Integration with Health
- Strengthening the involvement of children and young people in service delivery
- Response to maintenance requests (improving)



Ty Storrie Report

Complaints & Allegations

- No complaints were received during the period
- A child Protection matter was investigated in August 2018 and a Police investigation in respect of a staff member was undertaken.
- This was the subject of the one formal notification (of a significant event) that was notified to CIW during the period.

Staffing

- 5 new staff members were recruited during the year
- Training was delivered in relation to Team TEACH, Safeguarding, Medication Administration, Manual Handling, Epilepsy Awareness and Food Hygiene.
- High levels of sickness was noted and over-reliance on agency staff to provide cover.



Ty Storrie Report

Feedback from parents

- *It 100% benefits us as a family*
- *I am very happy with the serviced and trust staff*
- *It allows me time with my daughter. I am really pleased with “A” starting to integrate and interact with others.*
- *It allows us to catch up on sleep and spend time together.*



Ty Storrie Report

Areas of Development

- Integration with Health
- Development of clear systems for monitoring outcomes
- Proactively develop processes for gathering children and young people's views
- Gathering objective feedback from stakeholders
- Strengthening feedback to parents ("What I did at Ty Storrie").



Ty Storrie Report

Conclusion

- Focus on ensuring a more consistent and settled period for staff team – with positive impact on the quality of care.
- Families have rebuilt their trust in the service (following a negative CIW report the previous year).
- Staff reported that they feel supported.



Crosslands Report

Overview

- 15 young people in placement during period
- 2 emergency admissions
- 9 discharged on a planned basis
- 1 returned after 7 months following 2 foster care breakdowns
- A planned managed move was arranged for 2 young people.
- Close working relationships with 14+ team
- Examples of how Signs of Safety have become embedded in practice alongside use of Restorative Approaches.



Crosslands Report

Feedback from young people

- Young people want to maintain and improve relationships with their family
- *Staff do their best to make sure I'm happy*
- *Showing me what's right and wrong*
- *Making sure I wash and go to school*

Feedback from Parents

- *Staff are always very helpful and always on the ball.*
- *X has been cared for really well – we are all like one big family*
- *More than happy with the right level of support can right boundaries*



Crosslands Report

- **Feedback from Regulation 32 Visits undertaken by OM** - Consistently scored as exceeding minimum standards
- **Accidents & Injuries** -6 during period. These numbers are low indicating safe practice and robust risk assessments.
- Good examples of staff working in partnership with family members and health professionals to keep young people safe and to support young people who have required medical interventions.
- **Complaints** – 11 made during period – 9 by one young person –all considered within each child's context / experiences.



Crosslands Report

- **Safeguarding Referrals** -7 referrals regarding 5 young people | historical abuse disclose, concerns re CSE
- **Allegations against staff members** – 2 in the period both withdrawn with no further action.
- **Unauthorised Absences** – 33 reports involving 4 young people and 15 attributed to one young person. Positive relationships are in place with Missing Person Liaison Team, Think Safe Team and Safeguarding to appropriately manage this.
- **Use of measures of control** – number of incidents are reducing year on year – RA, SoS and SCIP used to provide positive behaviour support – regular audits undertaken by SCIP instructor.
- **Staffing** – All registered with Social Care Wales or working towards registration. The staff group are experienced and stable with only one resignation in the period.



Crosslands Report

Summary

- An inspection took place in October 2018 – which found that young people were well cared for by consistent staff and management team. Staff were well trained using SoS as the underpinning model alongside RA, individual plans and risk assessments.
- Care is taken to involve young people in education, health social and leisure activities and to maintain positive family links in line with individual care plans. Young people were making progress.
- There were no areas of non-compliance.

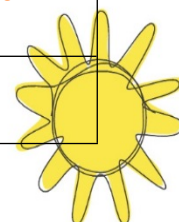


Ty Storrie (Cardiff Short Breaks)

Vincent Road, Ely, Cardiff
CF5 5AQ
Annual Review of Quality of Care

(Regulation 33)

Registered Manager	Jan Pardoe/Laura Mason
Registered Provider	Action for Children
Report Written by	Jane Weeks
Role of Person writing report	Responsible Individual
Date Written	May 2019
Period Covered	April 2018 – April 2019
Review Date	



Foreword

The Care Standards Act 2000 and its associated regulations require that any organisation which runs Children's Homes or other Registered Services should nominate a Senior Manager to act as the Responsible Individual.

One of the responsibilities of that Individual is to report to the National Assembly in respect of each Children's Home; and to make that Report available to children, their parents and placing Authorities. This Report is prepared annually.

The contents of this Report are identified in the Regulations and must include:

- A review of the monitoring of matters set out in Schedule 6 (these relate to all aspects of running the home and caring for children).
- A review of the quality of care provided and improvements made.

These reviews should take account of consultations with children, their parents and placing Authorities.

This report covers the year 2018 - 2019

Brief description of home and purpose

Ty Storrie is based at Vincent Road in Ely, Cardiff. The Project is a purpose built two storey home situated on a learning campus set in a residential area. Ty Storrie provides planned short overnight stays for children and young people with a learning/physical disability. Children and young people are accommodated in age and need related groups. However, for children and young people that may not fit into their chronological age groupings, consideration will be given that reflect the child's needs as identified in the care plan, as well as the staff team's needs to ensure safe care.

Ty Storrie is open for up to 50 weeks per year. The project and staff provide a suitable and safe environment for children and young people, whilst supporting them to participate in stimulating activities both within the home and local community. Activities are planned as appropriate to the individual needs of the children and young people.

All of the children and young people who stay at Ty Storrie are known to the Local Authority's Child Health and Disability Team and a number of children and young people have a named Social Worker from within this team. In Ty Storrie, they have an identified Link Worker to co-ordinate and plan their individual stays, in consultation with the parents and the child if appropriate.

Ty Storrie provides children and young people with new experiences and an opportunity to learn new skills during their stays. There is a commitment to providing a high quality service and to ensure that this happens, Action for Children is committed to:

- staff development and training;
- supervision and support;
- the involvement of children/young people and families in the provision and evaluation of care;
- providing services which are sensitive to ethnicity and culture; and
- promoting advocacy for, and on behalf of children and young people.

Ty Storrie is purpose built and offers a safe, secure and supportive place to stay.

The physical environment reflects the fact that it is a children's home while allowing children and young people to make their own mark on the environment by displaying posters, images, toys etc. of their choice. Visual communication aids are prominently displayed around the project and when needed to support the communication needs of children and young people staying at Ty Storrie staff use timelines and PECS.

Ty Storrie looks after children and young people with very diverse needs. These range from children and young people with complex health and physical needs, challenging behaviour, communication and sensory processing needs. In addition to this there is a wide range of cultural needs that are met within Ty Storrie.

The home will accommodate no more than 8 children and young people at any one time for a residential service. The age range of the children and young people staying is 6 – 17 yrs.

Parent's Comment

***The service benefits us immensely - it makes
such a huge difference***

Summary of the service over the 13 months

This year has had some challenges but staff have worked well together as a team and continued to provide a high quality service for the children.

Jan Pardoe moved on from the service in May 2019; and Laura Mason was appointed Acting Manager and new staff were recruited to replace those who had left.

Ty Storrie was award 'most improved service' at Action for Children's Residential Staff Conference in Oct 2018.

We have had minimal building issues this year; which has meant that the number of cancellations compared to last year were reduced.

There have been 6 new children attending Ty Storrie during 2018-19 for overnight stays, aswell as 2 children who were identified as needing the service and completing tea visits but families felt the young people were not quite ready to commence overnight stays. Due to children leaving the service in 2018-19 we will be looking at commencing tea visits and planning for new children to commence receiving overnight stays from May 2019; as well as some YP receiving an increase in the number of nights that they attend. The number of children/young people accessing Ty Storrie as the end of April 2019 was 26.

Work with our colleagues in health to amalgamate the CCNS service and Ty Storrie has been on-going but to date we have not been able to move forward with this aspect of service development, however the contract with Cardiff Council has continued throughout the year. Staff were informed in April 2018 that the service planned to be transferred back in house to the council within the year and consolation took place with staff in Nov 2018 and January

2018; with the proposed move date of April 2019. This date was then needed to be delayed until June 2019.

We received our annual inspection from Care Inspectorate Wales in March 2019 and this report was positive overall; stating that children who stay are looked after by a committed and caring staff team; the individual needs are understood and that there are good relationships with parents and partner agencies and that overall children receive good care and support during their stays.

As a staff team we continually work on evidencing the positive outcomes for the children and young people who stay at Ty Storrie to ensure these are reflected in our monitoring systems.

THINGS THAT HAVE GONE WELL

- ✓ The service adapting to meet the needs of individual children/young people by developing bespoke packages of care
- ✓ The development of meaningful and realistic outcomes for each child and young person that can be measured to evidence their progress
- ✓ Reduction in the number of cancelled stays
- ✓ Positive inspection report
- ✓ Christmas Party

THINGS WE ARE STILL WORKING ON

- ✓ The introduction of the CCNS service into Ty Storrie.
- ✓ To further develop the involvement of children and young people in the service delivery.

RPV's over the last 13 months (Reg 32 Visits): The overall theme and impression that comes from the visits is very positive and the visitors report a child friendly environment, with staff that focus on the needs of the children/young people.

Visits took place throughout the year. The report covers many areas as outlined in the regulations and are summarised under a number of headings. Comments from reports under each heading:

<p>Experience and progress of children</p> <ul style="list-style-type: none"> ○ Children have a good experience when they attend 	<p>Relationships between staff and young people</p> <ul style="list-style-type: none"> ○ Appeared positive 	<p>Culture of home</p> <ul style="list-style-type: none"> ○ Some issues between staff that need to be looked at as could effect on YP
<p>Condition of home</p> <ul style="list-style-type: none"> ○ The home appears in good condition ○ Gate in the garden need attention- Risk assessment in place. 	<p>Good Practice</p> <ul style="list-style-type: none"> ○ Photos of staff who are working that day are put in the foyer 	<p>Areas of concern</p> <ul style="list-style-type: none"> ○ None identified

Outline of quality assurance methods over last 13 months and records/information considered in writing reports

There are a number of procedures in place for staff to follow. In addition to this there is a plethora of risk assessments both on the building which cover all areas of the building, and also individual risk assessments in place for some children/young people where the risk is perceived as being higher than what is acceptable. All equipment used by the children/young people e.g. tracking hoists are inspected on a six monthly basis by an independent company.

In addition to risk assessments on children/young people there are behaviour management plans in place to ensure that the management of behaviour is consistent. This also feeds into the outcomes process where we try and develop the social and practical life skills of the children/young people and to ensure that they have the communication tools that they need to be able to express their views.

There are number of way that we assess the quality of care provided. Some of these are over-arching requirements and are used to inform partner agencies, those that refer to the service

and the child/young person and family of the broader service that we provide, this is done by our: –

- **Statement of Purpose** – details the service we provide and how we do this and is a general statement of our intentions and what individuals can do should we not adhere to their expectations. It is regularly reviewed to ensure that it accurately reflects where we are at any point in time. The quality of care review is written against what we have set out to achieve.
- **Children's Guide** – this is mainly a pictorial guide that gives the child/young person an insight into what they can expect when they receive a service at Ty Storrie. For some children this reduces their anxiety of going to a 'strange' place. It is currently a tool that others can use with the child/young person to inform them of the service being provided.
- **Independent Visitor (Regulation 32)** – is undertaken on a monthly basis and provides an independent view on the service and how it currently functions. These reports are available for any interested party to view and feed into the completion of the Quality of Care Report (Regulation 33)
- **The Quality of Care (Regulation 33)** – is compiled on an annual basis and reflects the quality of the service provided. It details the trends within the service and feedback from stakeholders.
- **Report Cards** – these primarily inform Action for Children and our Local Authority Partners on the service we provide. We use a Results Based Accountability model to evidence: How much we did, How well we did it and the Difference we have made. This process ensures we meet the targets that are set within our contract.
- **Policies and procedures** – these are in place to ensure that staff have the information that they need regarding expectations while carrying out their work

On a more practical level for those children/young people and families who access the service there are a number of ways that we keep them aware of what is happening in the service and any developments and highlight the quality of care that is provided. This is done through:

- **Newsletters** – these are produced throughout the year and sent to all families currently accessing the service. The newsletters reflect what has happened at the project and any new developments. They also support information given to our partner agencies on service provision and bring the focus back to the children/young people using the service.
- **Reviews** – should be undertaken on a six monthly basis and enable everybody to have the opportunity to discuss how the child/young person views the service that they receive. This is being reviewed as part of the ongoing action plan.

Schedule 6 analysis

1. In respect of each child accommodated in the children's home, compliance with the placing authority's plan for the care of the child (where applicable) and the placement plan.

There is a diverse need in relation to both level of needs and cultural needs of the children/young people who attend Ty Storrie. There was **8** new referrals over the past year, and there are **4** currently on a waiting list. **5** children/young people have left the service **3** due to reaching 18, and **2** due to accessing services elsewhere; that better meet the needs of the Young person.

Our current contract states that we offer 863 bed spaces per year and at the end of March 2019 we had delivered **881** nights which was **18** over our allocation. We also offered 22 introductory tea visits. Within the service delivery we are also able to respond flexibly to emergencies that may arise and during the year we have provided **1** emergency stay for 1 young person in the service.

We ensure that the compatibility and the mix of children and young people accessing the service is safe and enables us to meet their individual needs. As with any service the needs of the children/young people are continually changing and staff need to be flexible in their approach to ensure that those needs are met. There are on-going discussions with the staff team around how children/young people are managed within the service we are offering.

The response to maintenance requests made to the LA at Ty Storrie has improved during the year and there has been improved communication and networking enabling this to happen, however there is still a delay in those maintenance issues that do not fall under facilities management but are the remit of Children's Services. Over the next year we will monitor these separately

Issues notified
57

Issues completed
36

Issues outstanding
9

There have been 0 emergency admissions this year.

2. The deposit and issue of money and other valuables handed in for safekeeping

Ty Storrie encourage children/young people to bring the things they need to make their stay comfortable: favourite teddies, pillows, photos, toys etc. There are a number of items that we ask parents/carers to send in with their child/young person such as: -

- Clothes, sufficient for each stay.
- Medication, sufficient only for each stay, labelled correctly
- Personal items - toothbrush, hairbrush etc.

- Personal equipment - wheelchairs, special toiletries, e.g. Sudocrem, bubble bath, bath aids etc.

A small amount of spending money for each child/young person to cover expenses of children/young people whilst out on activities. Spending money will be kept securely in the safe and a record of expenditure and any change will be returned when the child/young person goes home.

We have Insurance Cover however if children do bring in personal possessions, unfortunately our insurance will not cover loss or damage of these items. However, if it is our fault that items have been lost or damaged, then we will try to replace these items.

When children/young people arrive in the project staff log all of their personal belongings, these are then safely stored and returned at the end of their stay. We ask parents/carers to clearly label clothes, however on occasions this is not done.

There have been a few occasions where personal belongings have been left at Ty Storrie, and on these occasions parents are contacted and the belongings are stored safely in the child/young person's individual boxes.

3. Daily Menu's/Food

Weekly menus are developed around the individual children/young people staying. When compiling the menu staff take into account individual needs such as allergies and religious observance.

Where children/young people have special dietary requirements, individual food boxes are set up for them to ensure that they are not given food that is not permitted.

There are a number of children/young people who have a Halal diet so there is an information file in the main kitchen which gives details of which foods are permitted.

When children/young people arrive from school they are offered a snack and drink before food is prepared.

4. All accidents and injuries sustained in the home or by children accommodated there

There is a robust system in place to record and monitor accidents within Ty Storrie. The system also allows reports to be generated to map trends etc.

There have been **12** accidents involving children/young people which were incident related, which is an increase of 6 since last year. There have been **24** accidents related to incidents involving staff –increase of 17.

Accidents that relate to non - incidents i.e primarily slips/trips or falls. When tracking the accidents that have occurred over the year they have been **1** involving children/young people or staff.

5. Any Illness of children accommodated in the home

Over the last 12 months there have been **2** occasions where a child/young person has been taken home due to illness/anxiety and there have been **5** stays cancelled due to illness.

If a child/young person becomes ill and upset as a result whilst staying at Ty Storrie we may ask parents/carers to collect them if staff feel unable to meet the needs of the children/young

people affected. If there is a risk of infection to other children/young people and staff the child/young person will have to go home. We do not accommodate children/young people directly transferred from hospital.

During term-time, we are unable to look after children during the day at the home if they do not attend school unless it can be assessed and agreed by the manager that there is no risk of infection to other children/young people and staff and that staff are able to meet the needs of the child/young person on that stay. The manager may require a health professional to confirm that illness is not posing a risk to others.

6. Complaints in relation to children accommodated in the home and their outcomes

During the last 12 months we have received **0** complaints.

We have a complaints leaflet that is given to families; this is also in a pictorial form.



7. Any allegations or suspicions of abuse in respect of children accommodated in the home and the outcome of any investigation

There was an incident in August which was investigated by the police in line with Child Protection Procedures the outcome was that there was no case to answer.

8. Staff recruitment records and conduct of required checks for new workers in the home

There has been **5** recruitment procedures during the last year and we have recruited, **2** Residential Workers and **2** Assistant Residential Workers alongside **1** new casual workers.

The recruitment process for all staff is:-

- Application form
- Shortlisting process
- Interviews which look at the values and beliefs of applicants alongside practice based questions
- 2 references that are verified by phone
- DBS check – renewed every 3 years
- Medical check

In addition to this any gaps in employment are checked and verified.

Training

There have been a number of training and team building events during the year. Training undertaken by staff have included:-

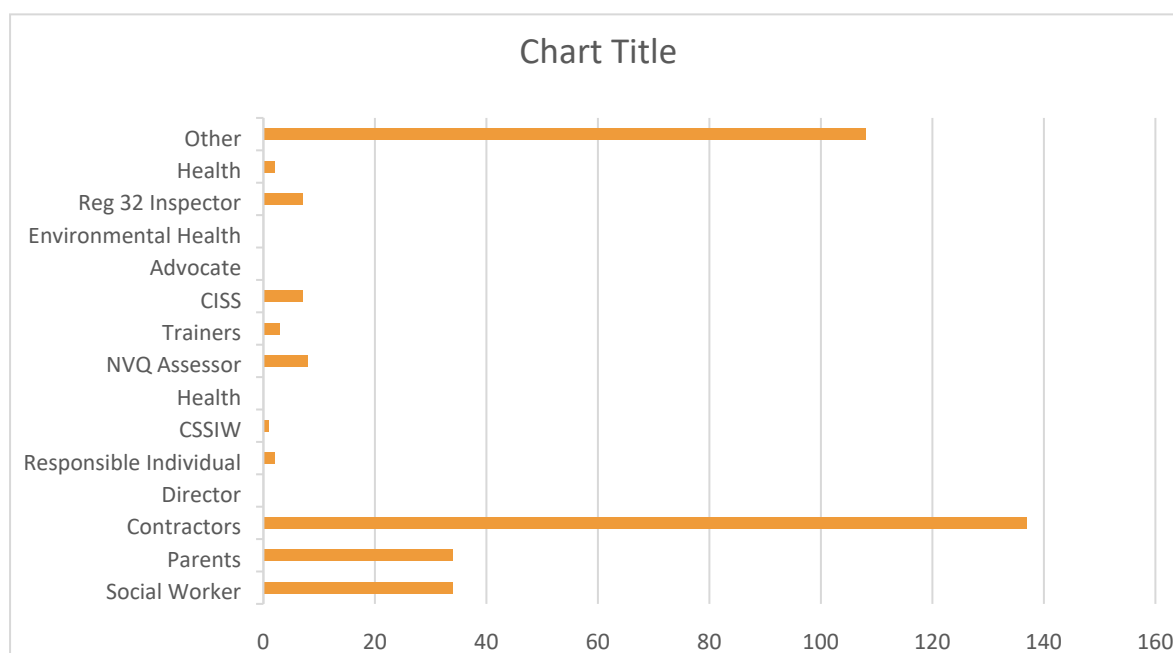
- Team TEACH
- Safeguarding
- Administration of Medication
- Manual Handling
- Epilepsy Awareness and Administration of Buccal Midazolam
- Food Hygiene

There are also a number of staff undertaking their QCF Award.

9. Visitors to the home and children in the home

It is everyone's responsibility to welcome visitors and ensure that they have the right authorisation to be in the building at any one time.

Over the past 13 months there have been **369** visitors, which is a decrease from the previous year. They consist of:



There are still a high level of contractors coming into the building and this has needed to be carefully managed. Wherever possible, we try to ensure that contractors are only at Ty Storrie when the children/young people are not present. The number of visitors attending Ty Storrie is generally high and this is monitored and reviewed to ensure that there is not an impact on service delivery.

The procedure for contractors visiting includes a health and safety checklist, and a permit to work form. We also monitor how many time contractors' visit to remedy the same issues.

This year has also seen Ty Storrie been used during the day by Adult Services during June and July when they were having renovation works to their building and by Ty Gwyn School in Sept and October while they were having building work undertaken.

10. Notifications of the events listed in Schedule 5

There have been **1** event notified during this year:

CSIW were notified of:

The incident in June which was investigated by the police in line with Child Protection Procedures.

1. Any unauthorised absence from the home of child accommodated there

There have been no unauthorised absences of any child/young person who has been accommodated at the home.

2. The use of measures of control, restraint and discipline in respect of children accommodated in the home

Staff who work in Ty Storrie have training in Team TEACH. This enables staff to identify the triggers to behaviour and to be able to step in before behaviour escalates. There are detailed Behaviour Management Plans for each child/young person which inform staff of the behaviours that can be displayed and how these can be reduced and managed. They also detail acceptable reactive techniques. In addition to this there are also risk assessments in place.

The children/young people who use Ty Storrie primarily have challenging behaviour, which can result in high levels of incidents. Over the last year there have been **34** incidents which is an increase from the previous year, this reflects the increase in children and young people's challenging behaviour and evidences staff following the agreed procedures to prevent an escalation in behaviour.

3. Risk assessments for health and safety purposes and subsequent action taken

There are a large number of Risk Assessments in place, these are:-

- Individual Risk Assessment on children/young people
- Risk Assessments for activities within Ty Storrie
- Risk Assessment on venues that children/young people attend
- Risk Assessments of the building and areas within the building
- Core Risk Assessments on items such as Occupational Stress, COSHH etc.

In addition to this when children/young people are going out on an activity a group risk assessment is undertaken.

During the year risk assessments have been reviewed and updated to take into account changes and incidents that have happened which ensures that our staff can continue to meet the needs of the children and young people we support.

Within this year we have had a health and safety audit and a Fire Risk Assessment both of which have highlighted areas where the service needs to develop its practice in relation to Health and Safety and this has been addressed through the project action plan.

4. Medicines, medical treatment and first aid administered to any child accommodated in the home

There is a robust policy in place around the administration of medication which has been reviewed this year. There have been **0** medication errors during this year, following any error practice is reviewed to ensure continuing staff development and promote good practice.

5. Duty rosters of persons working at the home

There is a rolling rota in place at Ty Storrie which identifies the number of staff required for particular shifts. It is staff's responsibility to ensure they know when they are working. Any changes to the rota are made by the Registered Manager or in her absence the Shift Leader.

There has been **1496.25** hours of sickness over the past year which is higher than last year. The majority of these were due to one staff member being on long term sick –this staff member has since retired from her role as support worker. Agency staff were used regularly during the year, and significantly more so during the earlier part of the year totalling **3511.5hrs**. There has also been **718.5** of casual hours used and **538.25 hours of staff overtime**. Sickness rates are being addressed with the staff to ensure that they are below a reasonable level and therefore reducing the impact on the service.

6. The homes daily log of events

There is a daily diary that staff use to record any changes to planned stays and any visitors that are expected. It also highlights if anything needs to be done e.g. contact parents etc.

In addition to this there is a message book for general messages and information sharing, and a shift handover is completed after every stay which focuses on the needs of the children/young people.

7. Fire drills and tests of alarms and of fire equipment

Weekly fire tests are carried out at Ty Storrie.

In addition to the weekly, quarterly and annual checks, staff undertake a daily fire check, checking exits are clear, and extinguishers are in place.

Each child/young person that attends Ty Storrie has an individual PEEP plan detailing the support they would need to evacuate the building in the event of fire, and the evacuation process that would need to be undertaken. There is also a robust Fire Risk Assessment in place for Ty Storrie.

Fire drills are carried out while the children/young people are present although in some cases the alarm sounding is a trigger for incidents of challenging behaviour. This is an area that as a service we need to look at and address, as we need to have a clear understanding of what we need to put in place for each individual and then to use this information to inform the individual PEEP plans.

Staff have had fire training which included the use of fire extinguisher and the evacuation chair.

8. Records of appraisals of employees

All staff working at Ty Storrie have annual appraisals that review past objectives and set objectives for the forthcoming year. All staff appraisals are in the process of being completed by June 2019.

In addition to this all staff have monthly supervisions, which looks at all areas of practice and service development. Again this is an area being addressed through our Action Plan and staff have had regular supervision in the past few months

9. Minutes of staff meetings

There were **10** team meetings held throughout the year. The main areas for discussion for the past year have been:-

- Children/young people
- Safeguarding
- Health and Safety
- Good practice
- Transfer of service to Cardiff

In addition to these main topics there have been several additional agenda items which staff have wanted to discuss.

Outcomes for children/young people

Within Ty Storrie we are working on a number of different outcomes with the children/young people, the main being: -

- The child/young person's communication skills improve
- The child/young person engages safely in a leisure activity of their choice
- A child/young person is able to exercise a choice
- The child/young person improves practical life skills

- Developing independence

There are also a number of specific outcomes for particular children/young people who are not included in this monitoring, for example reduction in episodes of challenging incidents, reduction of anxiety levels etc. These are broken down into achievable goals for each individual and tracked throughout their stays.

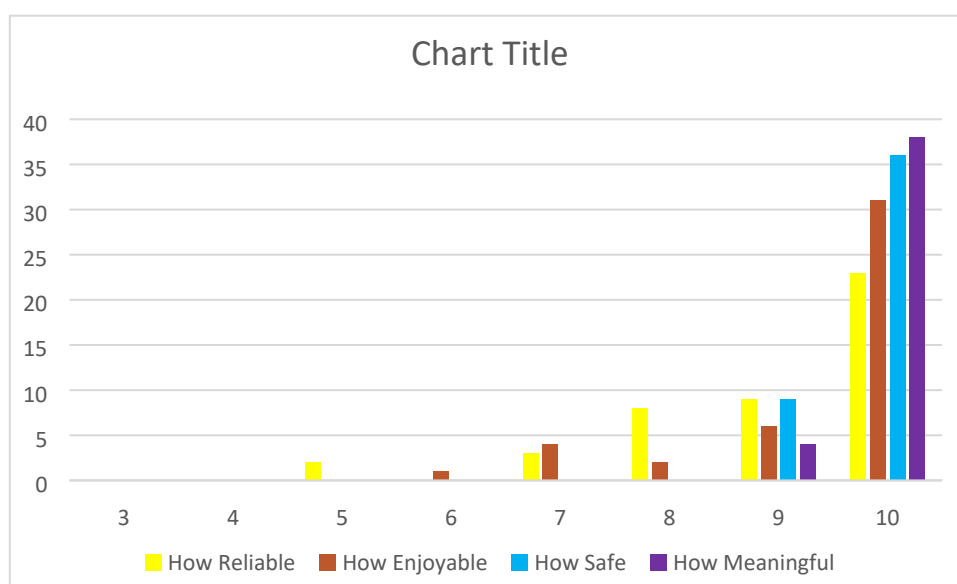
The implementation and monitoring of outcomes is continually being developed to ensure that we are able to accurately reflect the outcomes we achieve and the positive impact we have on the children/young people.

Service Reviews

During the last 12 months there have been **46** service reviews carried out, these look at the outcomes set for individuals and how these are being achieved in addition at the review we ask parents to score how they feel about several aspects, parents are asked:-

- How meaningful is the service?
- How reliable is the service?
- How enjoyable do you feel the service is?
- How safe do you feel the service is?

Parents scored these on a scale of 1-10



Parents Quotes from Service Reviews

‘Everything is still working really well and T loves it’

We have become more confident in being able to plans things as less stays are being cancelled and requested dates are being met’

Staff are brilliant to talk to and brilliant with 'A'. We are able to rest and spend time with our son

It allows me time with my daughter. I am really please with 'A' starting to integrate and interact with others

I am very happy with the service and trust staff.

I am able to have a break

We love everything and are very happy with Ty Storrie

It 100% benefits us as a family

It gives us time to spend supporting our eldest son and time as a family

J' is happy which means we are happy too

It allows us to catch up on sleep and spend time together

Areas for Development over the coming year

Ty Storrie has a clear direction detailed within its Statement of Purpose. The aims and objectives identify the main focus of Ty Storrie which is to provide safe and high quality care which meets the individual needs of the group. Our ethos and philosophy ensures the needs, best interests and welfare of the children/young people are paramount and this will continue to be reflected in the service provision.

- **Community Children's Nursing Service** – discussions are ongoing with the continuing intention that this is developed as an integral part of the current service provision.
- **Outcomes** – to develop clear and robust systems of monitoring outcomes for children/young people and a system to monitor how the children/young people benefit from the service.
- **Children's Voices** – to proactively develop processes that gather children and young people's views of the service. We have developed and started to use a **What I thought of it** form, so that children and young people can let us know their views on their stay this includes:
 - Did you enjoy your stay?
 - What was your favourite part of the stay?

- What was your least favourite part of the stay
- What could have made it better?
- **Gathering objective feedback from stakeholders** – we have started gathering stakeholder feedback to discover what has gone well and where we need to improve, we will use this to plan and improve the service.
- **Feedback to parents/carers** – as a result of parent's feedback we have developed and started to use a ***What I did at Ty Storrie*** form which is completed following children's stays this has improved our communication with parents/carers and informs them of:
 - ***Activities I took part in:***
 - ***What I had to eat.....and any new foods I tasted:***
 - ***How I slept***
 - ***How I behaved***
 - ***What I liked***
 - ***Anything I didn't like***

Conclusion

This year we have continued to focus on ensuring a more consistent and settled period for the staff team, which has positively impacted on the quality of care we have provided for children and young people.

This stability has allowed families to rebuild the trust in the service provision and the reduction of number of cancellations has demonstrated this; as well as a positive inspection in March of this year.

All staff have reported that they now feel supported and they receive regular supervision.

We have continued to work closely with Cardiff County Council to ensure delivery of a quality service that meets the needs of the children, young people and families who use the service.

Jane Weeks

Responsible Individual

**CARDIFF COUNCIL
CHILDREN'S SERVICES**



RESIDENTIAL SERVICES

**Annual Quality Assurance Report
CROSSLANDS CHILDREN'S HOME
1 April 2018 – 31 March 2019**

**CARDIFF COUNCIL
CHILDREN'S SERVICES
RESIDENTIAL SERVICES**

**Annual Quality Assurance Report for Crosslands Children's Home
For Period 1 April 2018 – 31 March 2019**

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ANNUAL REPORT IN REGARD TO QUALITY ASSURANCE CROSSLANDS CHILDREN'S HOME

1st April 2018 – 31st March 2019

INTRODUCTION

The purpose of this report is to provide a review of the quality of care offered by Crosslands Children's Home during the period: **1 April 2018 – 31 March 2019** in accordance with the requirements of Regulation 33 of the Children's Homes (Wales) Regulations 2002.

Regulation 33 (2) states that the registered person shall provide to the appropriate office of the National Assembly a report in respect of each review conducted for the purposes of paragraph (1), and make a copy of the report available on request to children accommodated in the Home, their parents and placing authorities.

Information provided in relation to the monitoring of the matters is detailed in Schedule 6.

To help identify patterns and processes that require changes in order to improve the quality of the care provided at the Home, all matters detailed in schedule 6 are monitored by the Registered Person. Other monitoring practices used by the Manager include:

- Responding to young people's complaints
- Reading young people's logs daily
- Reading all information in the Home's log daily
- Reading, analysing and responding to all incidents
- Observing staff in their daily practice with young people
- Undertaking supervision on a one to one basis with staff
- Registered Manager Supervision with Responsible Individual
- Annual Personal Performance Development Reviews (PPDRs) for all staff
- Completing monthly Placement Plan and Action Record
- Holding monthly Placement Reviews where the young person's parents and social worker's views on the performance of the Home are sought
- Spending one to one time listening to young people's views
- Implementing recommendations from Independent Reviewing Officer (IRO) statutory visits
- Reading and responding to the issues raised by young people in their circle meetings
- Opportunity to meet with the commissioned Independent Advocacy Provider – The National Youth Advocacy Service (NYAS)
- One to One opportunity to meet with allocated Social Workers
- Consultation systems that record young people's, and others opinions, views and comments

Crosslands has a number of mechanisms for consulting with young people and this has been able to help us to improve the way the Home operates. Crosslands encourages young people to engage in consultation and make decisions about their lives as well as influence the operation of the Home.

Questionnaires

Examples of questionnaires are evidenced at **Appendix 1** of this report. The young people have designed the questionnaires and complete them on a regular basis. The young people have completed **26 Questionnaires** during this period.

The form consists of specific questions that have been identified as being the most appropriate at the time of consultation with young people.

This questionnaire will continue to be developed as further young people are accommodated and consulted about the way they are cared for. Generally the comments are very positive and young people have been able to share their likes and dislikes concerning family contact, food, bedtime, activities and relationships with staff and what, if anything, would improve their time at Crosslands.

The main finding is that young people want to maintain and improve their relationships with their families, this is very important to them. A sample of young people's replies to the questionnaire question '*How are the Staff helping you?*' gathered mainly positive responses.

Here's what our young people had to say;

**'Help me to get to school and see my mom, brothers and sister'.
'They're good, always do their best to make sure I'm happy'.
'Make sure I get up for school'.
'They always help you'.
'Showing me what's right and wrong'.
'Make sure I wash and go to school'.
'Trying to get me back home'.**

The questionnaires named "your thoughts" were also sent to parents to gain their feedback but the return rate remains low despite enclosing a pre-paid envelope. To overcome this many parents have acknowledged the contribution and efforts made by staff to restore, maintain and build stronger relationship with their child via telephone consultation. Examples of what they said are as follows;

Here's what our parents had to say;

Mother of young person age 13 - **'Yes very happy and always says loves Crosslands'. 'Staff are always really helpful and always on the ball'. When asked how she believed the care received was; 'it's better than I thought'.**

Father of young person age 15 – **'loves the staff there. They ring me but I don't really come to the home'** (Note; - the father is invited regularly but does not wish to visit in the home).

Mother of young person age 15 – **"has been cared for really well"**. When asked if the staff team are welcoming; **"we are all like one big family"** when asked did the care of her child meet her expectations, her reply, **"yes and a lot more, we're like a team"**

Grandmother of young person age 16 – answered to yes or definitely to the questions asked. These included her feeling like her views were listened to and considered, that she felt welcome in Crosslands and updated with relevant information. Grandmother also stated that she has no recommendations for Crosslands to improve the service and she was, **'more than happy at the right level of support from Crosslands with the right boundaries'**. She also stated that since moving out of Crosslands the young person is **"doing well"**.

Father of young person age 17 – when asked if he felt included in the decision making for the care of his child he replied, **'yes, every part of it. They were very helpful and the friendly staff who, listened and kept me informed'**. **'I knew the key worker was Sue, but she did have a change of social worker'**. **'The staff told me everything and gave me relevant information'**. **'Staff always made me a cup of tea, and would have given me food if I wanted something to eat'**. **'Crosslands staff would regularly phone me and give me updates, I was more than happy'**. When asked about the transition plan for his child leaving Crosslands he replied, **'yes I am happy but I should have done more, helping with the plan'**. **'I have no recommendations for Crosslands, but I am sorry my child left Crosslands'**.

Circle Time

Crosslands staff meet with the young people in circle time. During the last period there were **21 circle time sessions** held. In these meetings, the young people views, wishes and feelings are sought, discussed and fed back to management. The young people are given the opportunity to present ideas of activities and experiences they would like to have while living in Crosslands. In one of the circle time meetings, the young people requested to go on holiday abroad. This was achieved by requesting and securing additional funding from the **St David's Day Fund**, enabling the young people to go to Portugal. This was a successful holiday which we hope to repeat in the next financial period.

Regulation 32 Visits

The Regulation 32 visitors meet with the young people to ascertain their views, comments and any complaints about the Home. Most of the young people spoken with throughout the year have provided very welcoming comments about the care and support they receive. Examples of the observations recorded throughout the reports have been included below.

On another visit a young person had a list of complaints which were known to the Registered Manager and substantiated by the complaints book. The young person complained about the window in his room allowing noise in but then commented the window in his room was being left open.	The visitor commented on how he observed another young person engaging with a staff member in a healthy banter which reflected the ease of their relationship as they planned an evening of snooker together.
Another observation by the visitor was a young person cooking his own meal discussing with a member of staff the herbs and spices required to compliment the meal.	Another observation by the visitor was a young person cooking his own meal discussing with a member of staff the herbs and spices required to compliment the meal.
On another occasion the visitor spoke to a young person who said he didn't want to live in Crosslands as staff had put onions in the main meal which he did not like although the visitor observed him eating two plates full. The young person complained that he did not want staff to know his whereabouts when he went out even if he recognised it was part of the staff role.	The visitor spoke to another young person who was unhappy that staff would not allow her to stay out with her boyfriend until 2.00am and was very vocal towards the staff member about her disappointment. Later the visitor witnessed the young person hugging the member of staff which she described as very moving.
One young person expressed how she enjoyed staff company and liked being with him. The young person spoke about when she leaves she intended to take her furniture and curtains with her which was confirmed by staff who agreed the importance of young people being surrounded by their belongings to ease their transition.	Another visitor recorded examples of good practice after observing a young person leaving party and the genuine affection shown by staff towards her. The visitor witnessed the staff becoming very emotional when the young person welcomed her brother who she had not seen for a long time. The visitor expressed how fortunate for young people to be looked after by a group of staff who show kindness and commitment to them.

A great achievement for Crosslands is the Regulation 32 visits continue to be consistently scored as exceeding the minimum standards on each occasion.

Bright Sparks Award

The staff members have an opportunity to contribute to the monthly report.

This year's Bright Sparks Awards recognised three young people's achievements in education. Crosslands received the best Children's Home award which was a great surprise and delight for all involved. Two young people are part of the steering committee and one young person had the role of presenter. Two young people participated in the Bright Sparks Award steering committee and attended several social events throughout the year from 3 days at Storey Arms outdoor centre to eating out and group activities. The young people and staff enjoyed the theme event and dressed accordingly from the cast of Shrek.

Crosslands gathers statistical data on the operation and practice within the service and measures the performance against them on a quarterly basis. This process assists the management team to identify gaps and areas where improvements are needed and necessary changes implemented. The statistical data will be included in the range of reports set out in the various statutory guidance and regulations.

MATTERS TO BE MONITORED AND REVIEWED BY THE REGISTERED PERSON

- 1. In respect of each child accommodated in the children's home, compliance with the placing authority's plan for the care of the child (where applicable) and the placement plan.**

Childcare and Placement Plan

Placement Plans for all young people living at Crosslands have been written in accordance with their assessed needs, and have highlighted how these can be met, identify who is responsible for meeting those needs with timescales included. The Placement Plan is reviewed on a monthly basis within the Home and a copy provided to the social worker. Individual Placement plans record the views of young people, parents, social workers and significant others. Young people are actively encouraged to contribute to their placement plan and records progress and outcomes.

When a young person is first admitted there is specific statutory information, which is required including a delegation of authority form to empower Crosslands to carry out specific activities and make decisions about the day to day activities of young people.

Childcare and Placement Plans

To ensure compliance with the placing authority's plan for the care of the young person and the placement plan, the following are undertaken at the Home;

- Residential Children's Services access to CareFirst, an electronic social care computer system, which holds individual case records
- Data collated centrally in relation to Looked After Children
- Monthly Specialist Service Managers' Meetings
- Education Link worker attends meetings with the Looked After Children's Education team
- Initial Placement Planning Meeting held on or before admission
- Each young person's placement plan and action record is held on file at the Home and electronically for monitoring purposes
- Placement Plan and Actions record has been updated to reflect the Signs of Safety Model
- We undertake audits of all young people's files on a monthly basis
- Plans are reviewed and monitored during Statutory Reviews by the Independent Reviewing Officer and Monthly Placement Reviews
- Supervision of residential staff to ensure work undertaken with individual young people complies with current childcare plans
- Monthly Regulation 32 Visits are undertaken by a person independent to the Home
- Individual Behaviour support plans for young people
- All young people have individual Health books, where all appointments. Consultations, health assessments, record of health history, record of medication administered to young people are recorded. The health books are monitored on a monthly basis

- All young people have the opportunity to begin Emotional literacy work undertaken by an ELSA qualified staff team. This is not always work guaranteed because the young people's behaviour or emotional need needs to be stable and not in crisis
- Young people visit Crosslands prior to admission and staff will visit the young person in their placement if not possible

Manager's Analysis

There have been **15** young people living in Crosslands in this reporting period of which **2** were placed in an emergency. Out of the **15** young people accommodated, **9** were discharged on a planned basis in line with their Childcare Plan. **1** young person was discharged from Crosslands and within 7 months requested to return after 2 consecutive Foster Care placement breakdowns. On two separate occasions and after all reasonable strategies and interventions had been explored and exhausted a request for a planned managed move for **2** young people was agreed as part of a measured response. **1** young person returned home to live with a parent which was supported by outreach services in the community and the other went to live in a 3 bedded Children's Home identified to meet presenting needs.

Crosslands determination to provide young people with a planned, permanent and stable placement is mirrored in the services good practice model of reviewing all young people placements at a monthly Specialist Service Management meetings and identify young people who may benefit from our care.

In this reporting period Crosslands have been working closely with the 14+ Team and Personal Advisor Team to develop practical work sheets covering topics suitable to young people needs in the planning period and transition to independence. There is now a system in place for Crosslands to purchase practical household items in preparation for young people moving into independent accommodation. This is achieved in collaboration with the young people, so that feel included, informed and supported to understand transitions and how you have to prepare.

Impact of Signs of Safety

Crosslands has adopted Children's Services Signs of Safety principles, tools and assessment as its overarching model of practice for working with young people. It is a strength based orientated approach which puts young people and their families at the heart of our work. The staff team play a key part in working alongside other professionals to understand the worries and concerns that are identified for the young person, (who is worried and why), identifying the things that are going well in the young person's life (strengths/safety), and agreeing what needs to be done (goals), to build on the strengths and safety to reduce the worries and risks. Since introducing the model to Crosslands, 16 staff have attended bespoke training to develop greater attunement in their relationships and response to young people's needs with appropriate language and behaviours based on their emotional state. A further 7 staff members have attended the 2 day Signs of Safety training to enhance their ability to practice

with a range of tools for assessment and planning to aid their decision making with young people and their families. Going forward, Crosslands have identified a Deputy Manager to be a signs of safety champion to work closely with other parts of the service to continue to develop our practice in this area.

The team recognises the importance of working directly with young people families and over this period we have developed these relationships which is evidenced in the following case studies;

Staff promoted and emotionally supported a young person to strengthen family relationships out of area. This involved staff travelling with a young person by train to different areas of England to meet significant family members whom prior to moving to Crosslands the young person had limited contact in place. Staff maintained contact with the sibling of the young person during her pregnancy and birth of first child. This was a significant event for our young person of whom was extremely proud to become an uncle and be given opportunity and support to visit.

Worked with a family to support them to increase from 12 hours supervised contact a year to 20 hours a week unsupervised contact at the family home. The Social Worker has started an assessment as part of the Placement with Parents regulations for the young person to have overnight contact at the family home. Implementing the SOS framework staff worked with the family to focus on the positive strengths which overtime changed the dynamics of the meeting. The Deputy Manager and keyworker met individually with the parents to undertake individual pieces of work to strengthen networks and collaborate on developing different styles of parenting.

Significant meetings with a grandmother of a young person's to work with the team to reduce CSE concern and support to engage in an alternative education provision. After significant disengagement from education the young person agreed to attend tutoring which was a great achievement and removed from the CSE register.

A father of a young person who would not engage with Children's Services visited the Home to participate in developing a genogram and identify other family members to be part of the young person's network. This young person had supervised contact with her father, and following safety planning and reviewing, the contact has now been increased and continues unsupervised.

A young person successfully transitioned into a supported lodging placement following almost 3 years of living in Crosslands. The young person was able to finish education after previously being a non-attender and has since continue to complete a college course. This young person has received aftercare support from Crosslands staff who still remain as an important part of her network, with regular communication with her social worker and independent reviewing officer.

A young person thrived in Crosslands. The relation between the young person and their mother was fragile, however staff have supported and enabled this relationship to strengthen to the point where they now can have unsupervised contact in the community for set time. Staff have supported the mother to understand presenting needs and behaviours and honour her position as the young person's mother by including her in medical appointments and care planning. The Mother recently thanked and showed emotion towards staff for their support and acknowledgment of her parenting.

A recent testimony to the work of the staff team was from a former young person now an adult with a child. The person sent a message to their former Crosslands key worker saying that they were so thankful for all the support received whilst living in Crosslands, and still considers Crosslands as family. The person explained that they were having a particularly difficult time, and gain comfort by looking through their Crosslands memory book and album.

Staff Training & Development

To continue this work the Manager and 2 Deputies attended a training course on Playfulness, acceptance, curiosity and empathy for 6 weeks with the Child Adolescent Mental Health Services to support staff to consider how they communicate and behave towards young people feeling safe and valued. This enhanced understanding on the development of young people who have experienced trauma and how they benefit from nurture, unconditional care and regard and methods of parenting.

As a team we attended bespoke training on Violence against Women and Domestic Abuse and Sexual Violence which highlighted the importance of considering the impact of these behaviours across the whole family.

Recently 21 staff attended bespoke training events on the new legislation for regulation and inspection of the service. The training focused on the importance of developing outcomes that are making a positive contribution to young people's lives by embedding a culture of participation and consultation. The Manager delivered awareness training to the whole staff team about behaviours and attitudes. This was self-reflection exercise for staff to consider how they manage their own feelings, emotions and behaviours and how that impacts of their colleagues within a team setting and onto the young people they care for.

Planning for Young People

All young people have a Care and support Plan in place at the point of admission. The Care Plans produced for an emergency admission have to be reviewed and updated by the allocated Social Worker in a planning meeting. The Home ensures that every young person is involved in producing their care and placement plan and agrees with the arrangements set out to meet their needs. All young people admitted to Crosslands will have a new or revised Placement and Action Plan within 72 hours of admission.

Each young person admitted to the Home has a completed Residential Referral form which has the appropriate information recorded as required by the regulations. The referral process is explicit in identifying the needs of the young person and making a decision based on essential information and risk assessments, asked for within the referral form.

The Registered Manager is fully involved in the decision making of young people entering the Home and where applicable an Initial Placement Planning meeting is held before the young person is accommodated. The Home only provides admission to young people whose assessed needs can be met and during this reporting period the Registered Manager did not decline any referrals.

Over this period the staff team concentrated on improving the admission process for a young people. Prior to placement the Staff team were provided with relevant and current information concerning the young person. Each young person visited the Home and where not possible staff visited their existing placement to motivate and encourage them to be fully involved in preparing their individual placement plan. Before admission a young person was encouraged

to make choices about their current preferences and needs and once admitted a welcome basket was prepared to include pyjamas, toiletries, colouring books and pencils as well as a choice of confectionary. For example 1 young person shared a likeness for Unicorns, another supported Manchester United Football team and staff purchased a range of fan merchandise. On admission 1 young person shared a likeness for a certain type of Pizza which we provided.

The Placement Plan and Action record continues to be reviewed and has been adapted to incorporate the signs of safety model. The method of recording enables key workers to identify strengths, and safety within the plan and is consistent to the social workers method of working. Monthly planning meetings held with the social worker are centred on the signs of safety model, and the paperwork is documented to reflect the same model.

The staff team have access to Carefirst, the case management system for Children's Services. This ensures that the quality of information required by the admission process is relevant, in date and captures all areas of a young person's life.

Manager's Analysis

By actively managing each young person's referral and planned move into Crosslands prevented unnecessary disruption and instability for the young person going forward and for the other young people living in the home. The impact of effective care planning and a strong working relationships between the staff team, the young person, their families and the Social Worker was essential to the success of each placement. As a team we focused on engaging proactively with the young person to shape and contribute fully to their placement plan which meant knowing the young person really well and understanding their particular needs. Another advantage to effective planning had been the implementation of the Signs of Safety model which is strengths based and mainstreamed across Children's Services to deliver a consistent approach. Early adoption of the tools and techniques allowed us a clearer vision of the young people who would benefit from the skills and experience of the team.

2. The deposit and issue of money and other valuables handed in for safekeeping

Compliance is monitored through:

- Personal Property Book
- Provide lockable cabinets
- Pocket Money Book
- Petty Cash and Clothing/Holiday Interest Accounts
- Internal Auditor
- Procedure - Allowances - Personal Appearance: Clothing, Provisions, Pocket money and supporting young people to manage their monies.

Manager's Analysis

A detailed inventory of young person's belongings is completed and placed on their file. The young people are no longer required to provide a signature for personal care items or relevant books and paperwork when issued with monies as this practice was not in keeping with family life.

Crosslands has been issued with a debit card which we use for online shopping and purchasing large items. The management team routinely audit all records.

Crosslands no longer purchase bus tickets in bulk for young people to encourage financial independence and to promote positive risk taking and healthy decision making.

My judgement is that Crosslands is working hard to move away from historical practices of strict policy, by striving towards giving young people as near to family life experience as possible within a residential environment. Staff encourage the young people to become financial responsible by removing structure and practices that do not promote transparency and openness. Examples of this include staff supporting young people to open bank accounts, to save money weekly, and learn about modern banking options. The young people are encouraged to value their personal belongings and often leave Crosslands bearing all personal items collected during their stay.

No notable patterns or issues have come up in the monitoring of the deposit and issue of money and valuables during this reporting period. This indicates that current practice is continually monitored and working well.

3. Daily Menus

Compliance is monitored through:

- Menu Book – monitored by the Deputy Manager
- Involvement with the LAC Specialist Nurse for advice
- Monthly Placement Reviews
- HACCP - Management Safety Officer
- Individual food preferences are recorded on the dislikes/likes sheet of the menu book
- Allergies details within health records and known to all staff
- Specialist, religious or medical dietary need will be documented and adhered to

Description of good practice

The Regulation 32 reports evidenced that young people are asked about their food choices and enjoy the food provided. Menus are prepared in consultation with young people on a weekly basis taking into consideration what food they like and dislike. These have provided wholesome, nutritious and well balanced meals. The young people have their favourite foods and brands ordered every week.

The young people are encouraged to cook with staff or prepare their own meals. It is the intention that young people when leaving Crosslands will be able to cook three evening meals and this target will be monitored through their individual placement plans. The aim is to encourage young people to go food shopping with staff and where relevant purchase, plan and prepare meals of their choice.

All special occasions are celebrated with appropriate food and festivities. The young people and staff visit local restaurants to encourage and make positive memories associated with great food. We have set aside time for young people to bake desserts, cakes and biscuits with staff which has been successful.

The young people and staff eat their lunch and evening meals together at the table is promoted and is extremely important in the development of social skills and building relationships. We recognise this can be difficult for some young people however overtime they migrate to the kitchen table and start to voice their preference and choices of food.

We seek dietary advice from the Specialist LAC Nurse, dietician and other professionals to ensure that meals provided meet the individual nutritional requirements of young people. For example a young person had particular needs which means they can be overly selective in what they will and will not eat which requires careful management of their dietary intake by daily monitoring and recording. Over time the young person has expanded diet to include curry and rice, meatballs, mashed and roast potatoes, stuffing and Yorkshire puddings and homemade burgers. They will now eat a varied assortment of yogurts, fruit and biscuits.

A Hazard Analysis and Critical Control Point (HACCP) Plan has been developed by the Council and is regularly reviewed to identify any new practice and information from the resources at our disposal. The Managers are proactive in seeking advice and training from our network of professionals within the service.

Crosslands management work closely with food standards officer Theo Callender, who provides support and guidance in relation to meeting HACCP standards. An external establishment compliance audit undertaken by Theo Callender for 2018-19 scored the Home as 82.18% compliance which is good.

The staff team attend Food Hygiene training level 2 and a Deputy Manager holds the Level 3 HACCP qualification to ensure compliance with regulations.

Crosslands receives regular information from the Food Standard Agency weekly digest bulletin.

Manager's analysis

I recognise that food and the social element of eating forms a huge part of the young people's daily lives. Experiences vary in regard to quality, quantity and the frequency of meals, which is why food in Crosslands is regularly available, predictable and choice, tastes and preferences are included within the menus and store cupboard stock. During this period we have noticed young people

broaden their choice of food, been supported to experiment with new and different foods and encouraged to learn about the value of nutrition. The celebration of special events, symbolises the love and care that the staff have for the young people, ensuring that occasions are remembered, celebrated and photographed. It has been essential to give young people's life meaning and memories that they take with them. One young person requested an ice cream cake for their birthday and was overjoyed by the unfamiliar experience. Staff will continue to be trained and refreshed in HACCP and level 2 food safety, to continue with the existing good standard of food practice and hygiene conditions.

4. All accidents and injuries sustained in the home or by children accommodated there

Compliance is monitored through:

- Young Person's Individual Health Record – monitored by the Health Link Worker
- Incident reporting
- First Aid Training for all staff
- Reports
- Accident/Injury Reports via Digigov
- Supervision systems
- Notification of Significant Events – Regulation 29 Reports
- COSHH
- Monthly Placement Reviews and Statutory Reviews

Description of good practice

There has been 6 accidents and injuries reported and recorded for young people during this period which only required a first aid response from staff.

Where attendance at Accident and Emergency is required the young people are always accompanied by staff, including overnight stays. Each young person's plans are updated to reflect current concerns and help to reduce their access to further physical and emotional harm. After any accident/injury each young person's risk assessments will be updated to highlight the identified risks with regards to their behaviours on these occasions.

Any incidents and injuries that occur outside working hours are managed by the On Call out of Hours service ensuring young people receive support from the staff team.

The staff team receive Emergency Aid at Work a 1 day course valid for 3 years and the Deputy Manager holds the First Aid at Work a 3 day course valid for 3 years. A record of all staff training is held in Crosslands to ensure compliance.

The Registered Manager continues to make every effort to ensure the safety of young people when in their communities. Every effort is made to identify the people in the young people's lives, families and friends. The young people are given many

opportunities to take part in activities and outings to reduce their exposure to serious at risk behaviour.

Manager Analysis

Young people have been shown sensitivity, nurture and care during instances of accident, injury or medical need. The incident numbers are low, indicating that safe practice is being followed and risk assessments undertaken. Staff are familiar with processes and are assured and supported by the on call service. The impact of good practice, allows for young people to be supported to participate in activities which have risk to injury, in a safe manner.

5. Any illnesses of children accommodated in the home

Compliance is monitored through:

- Young Person's Individual Health Record monitored by the Health Link Worker on a monthly basis
- Statutory medical examinations
- Young person registered with GP, Optician and Dentist
- Notification of Significant Events – Regulation 29 Reports
- Advice from Specialist LAC Nurse
- Advice from out of hours health service
- On admission each young person receive an electric toothbrush and staff encourage young people to brush their teeth and reduce sugar intake by promoting healthy food and drinks

Description of good practice

Each young people's health is monitored very closely and any signs of illness is responded to and actions taken quickly to identify and rectify the causes. The general health of young people living at Crosslands has been good. There have been minor ailments such as coughs and colds in keeping with the general population. A young person had a cold which required prescribed medication and after a week's rest was fit and well.

The Health Link worker at Crosslands monitors the Young People's Health Records regularly, to ensure prescribed medication has been administered or self-administered as instructed by health professionals. Many young people have to overcome significant barriers and traumas to priorities their health needs, requiring daily nurturing conversations and ongoing physical support to attend appointments.

Manager's analysis

In this period there have been many examples of working together with families and health professionals. 1 young person admitted to hospital overnight for stomach pain, the staff remained with the young person on the ward until discharge.

All young people are encouraged to attend their health appointments and are mainly accompanied by staff or family members. During this reporting period 141

health appointments were scheduled and 106 attended. The number of health appointments declined by young people were 29 with 6 cancellations.

Despite staff ongoing support 2 young people declined to attend 13 appointments which included routine doctor, optician and dental appointments. A young person refused to attend emergency medical treatment after an incident of self-injurious behaviour. Eventually staff persuaded the young person to attend but continued to decline any follow up appointments. Staff supported the young person to attend 1 appointment accompanied by a parent to encourage the young person engagement which was successful. The staff made several appointments with 1 young person aged 16 to attend the doctor for anxiety to no avail. On 2 occasions staff arranged appointments with a doctor for a parent to accompany the young person however appointments declined and not attended.

My judgement of these situations is focussed in the underlying need of the young people, which isn't necessarily medical. Both young people were experiencing loss, rejection, and external influences, one of which included substance misuse. Both young people have continued to display the same behaviour post Crosslands. It can be difficult to support young people to medical appointment when they are in crisis. Moving forward, focus on understanding the young person's previous behaviour in relation to avoiding medical appointment. By this, in detail of how they were supported to appointments and not just the dates and reasons for appointments.

6. Complaints in relation to children accommodated in the home and their outcomes

Compliance is monitored through:

- Corporate Complaints Procedure
- Dedicated Complaints Officer
- Complaints Book
- Advocacy Service visit the Home
- CSSIW
- Regulation 32

The Complaints Procedure is readily available to all young people. All complaints are recorded and responded to in a timely manner via the management of the Home.

The young people are encouraged to use the Complaints Book to enable the current service provision to be improved. On admission all young people are given a copy of the Complaints Procedure and the names of services they can contact if they are unwilling to talk to us about their issues. The young people are also able to raise any complaints with their Social Worker or an Advocate who visits the Home on a fortnightly basis.

The Regulation 32 Visitor consults with the young people when they visit the Home to obtain their views about the standard and quality of the care provided to them.

Description of good practice

A young person's well-being was impacted upon by underlying psychological issues. The staff worked with Libby Erin, Clinical Psychologist for Developmental Trauma to explore methods of intervention to enhance the young person's daily experience of living in a Children's home. The team focused on improving the young person emotional wellbeing by always responding positively to complaints and promoting problem solving and solution focused strategies. The team provided unconditional care and regard to this young person by responding to complaints, renamed as 'positive communications', and purchasing random presents that triggered happy memories. This improved the young person's well-being, most noticed by a visual decrease of withdrawal from staff and the world. In addition, we noticed an increase conversations about engagement of common interest. The keyworkers introduced the young person to audio books which they would discuss at length as well as attending Star War events. Furthermore the young person met with a Child Adolescent Mental Health Services which demonstrated how far the young person had developed to be able to attend the appointment. Managers met with clinical psychologist who acknowledge the good work undertaken by Crosslands.

All complaints were discussed with the Managers and resolved within the Home.

Crosslands continues to implement a Restorative Approach, to minimise the need to make complaints. All young people are encouraged to bring issues that they have to the attention of staff and Managers and are supported in finding resolutions to these issues.

During this period all complaints have been resolved at the informal stage therefore there has been no involvement of the complaints officer.

The Advocacy team regularly visit Crosslands and act on any issues raised by young people.

Manager's Analysis

There were 11 complaints made within this period, 9 complaints were made by 1 young person and resolved internally. The complaints focused on the young person complaining about individual staff member's responses, attitudes, behaviours and being disturbed by the other young people. My judgement is that a complaint must never be read, or considered in complete isolation. There is always an underlying reason behind a complaint received which has to be explored in connection the current life situation for that young person.

7. Any allegations or suspicions of abuse in respect of children accommodated in the home and the outcome of any investigation

Compliance is monitored through:

- All Wales Child Protection Procedures 2008
- Completion of Multi Agency Referral Forms
- Central Regulation 29 record file

- Central incident record book
- Complaints book

All allegations of abuse are recorded as incidents or complaints and notified to the CIW via Regulation 29 notifications. These records are kept centrally and in the confidential section on the young person's individual file and the outcome are logged on the relevant section of the Regulation 29 reporting form. Any new entry is read and signed by a Manager.

In certain instances, young people may choose to select only a few members of staff to share their personal concerns with. It is explained that the Manager and social worker will be informed and act upon any concern in line with procedures. Dignity, privacy and regard will be shown to young people during this process.

Description of good practice

An area of good practice is the continuous professional development of the staff to enhance their ability to attune to the young people, understanding the need behind the behaviour and working closely with other professionals to focus on strengths and identify alternative strategies and coping mechanism.

The staff have attended Child Sexual Exploitation training and the work undertaken with vulnerable young people was successful in reducing their at risks behaviours.

Manager's Analysis

All young people looked after are likely to be vulnerable at some time or other and will require targeted intervention and support to manage their at risk behaviour. Crosslands have safeguards in place to protect vulnerable young people.

In this period there were 7 instances of child protection Multi Agency Referral forms involving 5 individual young people.

A young person posted inappropriately on social media. The young person refused to engage with CSE services to address current patterns of behaviour.

A young person disclosed past abuse. A referral was made to the wellbeing service as the young person refused to engage with any other service.

Another young person discussed past abuse but refused to engage with the wellbeing service.

A young person engaged in high risk behaviours and with support of staff the risks of harm reduced after engaging with the Think Safe team.

An allegation was made against a staff member. The young person later withdrew the allegation and admitted the assault had not occurred. No further action taken against the staff member.

A young person worked successfully with Barnado's Cymru Taith Service, also known as 'Better futures', to take responsibility for their behaviour and to hopefully move on to develop safe and healthy relationships. The young person engaged well and completed the sessions of work identified. Where relevant young people are provided with mobile phones to enable them to keep in contact with Crosslands whilst in the community.

A young person with CSE concerns continued due to vulnerabilities in the community.

Another young person made an allegation which they later withdrew.

My judgement is that every effort is made by the Registered Manager and the team to provide young people with support by providing secure, stable and caring placements. Building relationships is a key factor in reducing their vulnerability and exposure to harm. Staff are trained and knowledgeable in the importance of being attuned to the young people, noticing different and unusual behaviours and working in partnerships to enhance safeguarding factors.

8. Staff recruitment records and conduct of required checks for new workers in the home

Compliance is monitored through:

- All new staff members have to provide Schedule 2 information when applying for the post or after appointment and before commencement of work at the Home
- Enhanced DBS checks and references
- An individual supervision file is kept on each member of staff
- In house Induction Programme

Description of good practice

All staff are registered with Social Care Wales and all DBS certificates were checked and approved. There are 2 staff working towards their registration with Social Care Wales, one staff currently undergoing the All Wales Induction Framework and the other started the QCF framework and regularly engages with his assessor to support the completion of the award.

As a Manager I encourage staff to advance their practice through training opportunities and in this period a senior member of staff and Deputy Manager successfully completed the Level 5 Health and Social Care Advanced practice which includes a Children's residential Management module. The senior member of staff has been seconded as an Interim Manager of another residential home which highlights the benefits of investing in staff to develop highly skilled and motivated individuals.

A recent inspection by Care Inspectorate Wales reviewed the recruitment practices of Crosslands and recommended evidence of verifications of references need to

be held on the individual staff files. At the time of the Inspection the references were available but not held on the file which has been now been actioned.

The Registered Manager annually reviews and amends the job description of the Registered Manager, Deputy Manager, Senior Residential Childcare Officer, Waking Night and Maintenance Person. Also included in the review is the person specification, both completed in consultation with residential staff and the Operational Manager.

All staff are familiar with The Code of Professional Practice for Social Care and additional practice guidelines.

Manager's Analysis

In this period 1 permanent part time residential childcare officer appointed. During this period 2 maintenance person's appointed as 1 left to pursue entrepreneurial interests. Recruitment and retention of staff is a task highly valued in Crosslands with staff well-being at the forefront. Flexibility, care and kindness is demonstrated towards staff from the management team, with the restorative theme of the Home promoted in colleague relationships. Although we value and pride ourselves on the experience and knowledge of long serving staff, we welcome and embrace new recruitment to develop future care professionals.

9. Visitors to the home and to children in the home

All visitors to Crosslands must make themselves known to staff who will establish who they are and the nature of the visit (if it has not been pre-arranged).

Compliance is monitored through:

- All visitors to Crosslands must enter the building through the front door and be admitted to the building by a staff member
- The front door is fobbed for security purposes
- Visitors to young people held on their file
- ID is requested from all visitors who are unknown to the staff
- Regular checks of record of visitors to children, visitors book and daily logs for individual young people
- Monthly Placement Reviews
- CCTV Cameras

Description of good practice

A recent decision to hold young people's meeting outside of Crosslands has been successful and provided a more settled and homely environment for young people. The young people do not have to negotiate daily a range of visitors to Crosslands or accommodate the lack of access to rooms during meeting times as recommended by the last Inspection by Care Inspectorate Wales.

Visitors to Crosslands will not be permitted to enter unless they are able to provide the necessary identification and wherever possible, visits should be pre-arranged. While on the premises, known whereabouts of visitors is essential and must be shared with all people in the building.

The staff team are expected to take responsibility for monitoring and managing visitors to the Home, ensuring that visiting parents and relatives are not given unsupervised access to other young people.

If Crosslands receive an unannounced visitor, who requests contact with a young person, clarity is sought before access can be given.

Any known information about visitors must be shared with Crosslands and where necessary risk assessments provided. Where the risk is deemed high, alternative contact arrangements will be made away from the Home.

On occasions Crosslands facilitates contact which is organised, risk assessed and forms part of the young person's placement plan.

10. Notification of the events listed in schedule 5 (Reg. 29)

Compliance is monitored through:

Regulation 29 notifications are read by the management team. Crosslands has a single Regulation 29 Notifications file. The Registered and Deputy Managers monitor and identify any patterns of behaviour that may require increased resources.

- Result based accountability statistics
- Regulation 29 central file
- All staff complete Regulation 29 notifications
- All completed Regulation 29 notifications held on young person secure online
- The management team report back to CIW if any further action taken

Description of good practice

Crosslands worked closely with each young person to reduce their exposure to various at risk behaviours by the following:

- Restorative practice to repair and restore relationships
- Signs of Safety direct work
- Emotional literacy support work
- Supporting young people to consider safety in their decision making
- Engagement in planned activities
- Engagement in Local Leisure Centre
- Individual Behaviour Management Plans
- Individual work on self esteem
- Involvement with the police
- Missing person's coordinator

- Developmental Trauma Service
- Building relationships with family members
- CAMHS
- NYAS
- Think Safe Service

Manager's Analysis

In the reporting period there have been 10 notifications involving young people. The young people receive targeted support during their stay in Crosslands. The notifications consisted of an admission to hospital, assault in the community, assault of staff, inappropriate relationships with unknown males and indecent images found on hard drives and inappropriate use of social media sites.

The Registered Manager's priority is the safety and well-being of the young person involved in the notifications as well as providing any extra resources that may be required to reduce further reoccurrences. A monitoring system is in place to ensure that the actions and outcomes of each notified event have been recorded. My judgement is that the majority of the names occurrences above were unpredictable. Staff followed necessary processes in response to these and management followed through with analysis to further understand and learn from instances. In the situation with unknown males, staff worked closely with the Think safe team to reduce risk taking behaviours.

11. Any unauthorised absence from the home of a child accommodated there

Compliance is monitored through:

- Monthly Placement reviews
- Regulation 33 Quarterly statistics
- Individual daily logs
- Registers
- Chronological reports
- Independent visits from the case accountable Social Worker
- AWA recording forms

Manager's Analysis

In this period there have been 33 reports of young people reported AWA/Missing which involved 4 young people and 15 reports of missing related to 1 young person.

During the first quarter of the reporting period there were 7 AWA/Missing reports. A young person aged 15 accounted for 4 reports of AWA/Missing and on 1 occasion stayed out overnight with a young person from an out of area Children's Home.

The young person was at risk of serious behaviours in the community and despite the staff team's high supervision levels the young person struggled to self-regulate and cooperate with any safety plans eventually needing an out of area placement to reduce the significant risks. The other 3 reports concerned a young person

however this matter was quickly resolved when contact arrangements were eventually agreed. The staff continue to work closely to provide support.

In the second quarter there were 9 AWA/Missing reports. On 3 occasions a young person aged 15 reported missing as vulnerable. The combined amount of time missing on these 3 occasions was 12 hours. The staff team worked closely with the missing person coordinator and the young males identified were visited which acted as a warning and prevented the risks escalating.

The other 1 missing period of 11 days involved a young person with serious at risks behaviours. The young person was located and moved to the new placement.

Another young person was reported missing on 5 occasions and on 3 of those times another young person accompanied them. The young person had an extensive network of unknown associates in the area and in total the hours missing were 15. On all occasions staff and other agencies worked in partnership to identify and reduce the risks.

At the start of the third quarter there were 18 individual reports of 2 young people going missing together and frequenting unsafe areas and addresses. The staff worked closely with agencies to disrupt and locate the young people whereabouts ensuring that the longest period of time missing was 15.5 hours. A significant improvement towards the end of the quarter for one young person who stopped going missing and started to engage with staff and attend education.

There were no AWA/Missing reports in the last quarter.

Description of good practice

Individual risk assessments of young people set out clear timescales and guidelines on when to report the absence. In addition and when necessary, young people may also have safety plans.

The placement plan of the young person reported missing on 15 occasions was to be rehabilitated back to the family home. Although Crosslands was provided with information, risks assessments and pre planning was considered, many of the risks and networks surrounding this young person were unknown. This contributed to unforeseen increase to their exposure to an extensive network of unknown individuals and environments which increased the vulnerabilities in the community.

Crosslands is flexible in supporting older young people to stay out longer on the weekend to socialise with their friends which has been positive and reduced unauthorised absences. Staff work closely with the families of young people friends and partners, to ensure communication and safeguarding is held. When out in the community young people are encouraged to stay in touch via their mobile phone. Where required young people are provided with mobile phones to enable Crosslands to stay in contact with them, however, the young people do not always respond to this measure or answer their phones. In instances such as this we will endeavour to locate the young person and if needed collect them or send a taxi depending on their circumstances.

Manager's analysis

The Registered Manager has recognised that young people being absent without authority/missing does have a dramatic and dangerous effect on their lives. The Home works with professionals within a multiagency framework to prevent individual young people from establishing a pattern of unsafe experiences that have a profound impact on their physical and emotional wellbeing. The culture of the Home is to support a young person to self soothe and regulate, to be able to establish personal boundaries that keep them safe which is reinforced by showing empathy, understanding, respect and listening to their viewpoint. Staff encourage the young people to participate in activities, build relationships and connections to staff and to invest in the home environment. Staff endeavour to make the home and in particular the young person's bedroom a place of comfort, sanctuary and safety. This provides a familiar space for the young people to rest, enjoy and relax in.

Crosslands continues to build a positive working relationship with the Missing Person Liaison team and associates, strategic partnership and safeguarding team, think safe team and the developmental trauma service.

12. The use of measures of control, restraint and discipline in respect of children accommodated in the home

Compliance is monitored through:

- Incident Record Book
- Responses written at the end of incident reports and complaints
- PROACT-SCIPr-UK® Individual Behaviour Support Record Book
- Personal Intervention Record Book
- Regular checks of the Incentives and Action Book
- Audits by PROACT-SCIPr-UK® Instructors
- Audit reports of PROACT-SCIPr-UK® Instructors
- PROACT-SCIPr-UK® Refresher training twice a year
- PROACT-SCIPr-UK® introductory and foundation training for new staff
- Each young person completes a 'my behaviour analysis need. This identifies their needs and wishes about managing their own behaviour.
- Activities programme

Manager's Analysis

The use of Restorative Approaches, Signs of Safety and PROACT-SCIPr-UK® interlinks to form a model of care used to continually improve the way the team respond to young people's behaviour and consequences.

Incentives and Actions

There have been a significant shift away from the use of sanctioning and the focus has been on incentivising a young person's behaviour and realistic goal setting.

There have been 21 recordings in the Incentive and Action book of which 7 were recognition of achievements and included a range of activities and financial top up for mobile phones. All young people are encouraged to sign the book and record their own comments. This is an area of improvement and we are consistently reducing the number of action imposed year on year.

There is a daily activity programme for the young people, enabling and supporting them to culture, exercise and happiness. Young people are given choice and encouraged to explore external opportunities in this period the number of planned activities was 256 and the number attended was 228.

Incidents

A review of the number of incidents over the last 3 years indicates this is an area of great improvement as we are consistently reducing the number of incidents year on year. This reduction reflects the pre planning of admissions and consideration to the existing young people living in the Home.

In this period there have been 40 incidents involving 8 young people which is a significant decrease from 82 incidents involving 11 young people the previous year. Over half of the incidents involved 2 young people.

During the first quarter there was 2 incidents involving 1 young person refusing to wear his seat belt and attempting to distract the member of staff who was driving the vehicle.

In the second quarter there were 7 incidents involving 4 young people. A young person assaulted 4 staff members on 3 separate occasions. The young person has particular needs where they can experience high levels of frustration and anxiety if they perceive their routine is being disrupted or refuses to respond to a staff concerns or requests. During this time the young person had the hard drive from their computer removed as it contained inappropriate material. The young person was unable to process professional concerns or the decision for the computer usage to be supervised significantly which disrupted their routine. In response to the young person's needs and to protect staff members when working alongside the young person a reactive strategy was developed which overtime has been adapted and remains closely monitored by the Manager to ensure compliance which has successfully reduced further incidents of assault. The other 4 incidents included missing, refusing to leave a room, aggression towards staff in response to staff ending computer time and a disclosure of past harms.

During the third quarter there were 26 incidents, a young person involved in 4 incidents where presenting behaviours escalated and on 2 separate occasions staff were physically assaulted. A behaviour strategy was in place and for a

period of weeks the young person's behaviour reduced in the Home. Following the second assault on two members of staff the young person was arrested and the placement ended. The placement of this young person had a disruptive impact on the other young people's presenting behaviours and 1 young person with particular needs hit out at the young person and another when they disrupted the film they were watching by standing in front of the television. On another occasion the young person unhappy that staff had interrupted them when in their bedroom hit out at staff when leaving the pantry. In addition another young person was involved in 11 incidents where they kicked, punched, spat, pinched, pushed and pulled a staff member's hair. The other incidents involved young people refusing to settle at night or displaying physical or verbal aggression towards staff. The young person had a planned move to a smaller Children's home after the young person requested a move as struggled to adapt to a large group living environment.

The fourth quarter there were only 5 incidents involving 5 young people. A young person assaulted 3 staff during an incident where they fixated on a computer game and unable to control the number of characters dying. Staff tried to intervene but lashed out throwing items as well as punching and slapping them. Following the incident the young person was very upset and expressed how upset he was at his actions. The Manager debriefed all staff involved and the young person's reactive strategy was updated to reflect the incident and prevent a reoccurrence. Following debrief with staff and analysis of previous incidents involving this young person, it was clear that the crisis behaviour showed a pattern of hitting from above. In response to this, three additional person specific interventions were identified and taught to the staff. These were then included in their reactive strategy to minimise harm to them and staff.

Physical Interventions

There have been 16 physical interventions, 7 which were variations of PROACT-SCIPr-UK® taught interventions. The variation interventions include; Staff using their arm to prevent punching from a young person in a closed area, two occasions of staff standing in between young people, staff using hands to deflect blows from a young person, variation of touch support, staff standing in a doorway to prevent young person getting access to another young person to cause harm and, stabilising hair pull by staff with second staff member using body to block and prevent kicks and blows.

All young people have the opportunity to complete a 'my behaviour analysis need' document which is completed by the young person with the support of staff. The purpose of this document is for the young person to identify what causes their behaviour to vary, and the preferred ways of being responded to in crisis situations. All staff will read and know the methods identified.

Other supporting behaviour documents include; behaviour management strategy, reactive strategy and ABC charts. These are not necessary for all the young people, as often behaviours identified do not require a support strategy.

The young people are debriefed following physical interventions. This enables the Manager to reflect on the use of the intervention and its outcome. Young people's

feelings are essential in relation to this. Any difficulties shared can then be discussed with our trainers of PROACT-SCIPr-UK® and the young people to explore alternative methods of ways of working.

Plans for Improvement

The Deputy Manager has qualified as a licensed instructor in PROACT-SCIPr-UK®. She will work alongside fellow instructor to deliver training, improve and reduce crisis behaviours and identity strategy's to enable young people to manage self-behaviour and fulfil their potential.

A qualified PROACT-SCIPr-UK® Instructor audits the use of physical interventions and behaviour management at the Home and reports back to the Manager who implements changes in practice as a result.

All staff are PROACT-SCIPr-UK® trained and receive refresher sessions annually.

Although young people struggle with the management of their own behaviour the staff team have become more restorative in their working practices and relationships with young people. The Registered Manager will continue to work closely with the instructors to improve members of staff management of incidents by increasing their knowledge and skill in areas such as positive behaviour support and proactive approaches with a focus on repairing harm and restoring relationships. All PROACT-SCIPr-UK® training has been reviewed and updated in line with the audit of interventions and a training need analysis.

13.Risk assessments for health and safety purposes and subsequent action taken

Compliance is monitored through:

- The Manager completes the building risk assessment annually and it is reviewed on a 6 monthly basis
- Action plans are generated by the risk assessment with timescales identified for actions to be taken
- All individual young people's risk assessments are updated monthly or when required and discussed at the MPR
- Team meetings
- Building risk assessments signed and dated by the Registered Manager and the Operational Manager
- Fire Safety Management
- RAMIS system
- A comprehensive report and action plan are prepared

Manager's Analysis

The building risk assessment for Crosslands has been reviewed during this period of the report. Daily health and safety checks are standard practice in order to ensure a high standard of safety at the Home. Crosslands has a maintenance person who is able to take immediate corrective action on any matters that requiring improving in the fabric of the building.

The Registered Manager regularly discusses the content of the risk assessments received prior to the admission of a young person. It is necessary that these assessments are robust, accurate and up to date. The risk assessments on young people are audited monthly and are revised and updated at any time if required. Any Health and Safety issues are discussed at team meetings as a set agenda item.

During this period Crosslands had to be evacuated after the shower unit caught fire when a young person was showering. The young person was unharmed. The shower unit was found to be faulty and a different model has been installed. The young person was very brave and acted swiftly by sounding the alarm and as a treat for her bravery had a nail manicure.

Crosslands is a member of Cardiff Council's Health and Safety committee and works closely with the Health and Safety team to ensure compliance with all statutory legislation and requirements. The management team use RAMIS database to record all actions we have taken to address any issues raised as well.

Crosslands has developed a Business Continuity Plan. In this period an area of good practice has been the staff team's ability to maintain and deliver an essential service during any adverse weather conditions without any disruption to the service.

14. Medicines, medical treatment and first aid administered to any child accommodated in the home

Compliance is monitored through:

- The Health Link worker monitors the health record on a regular basis as part of the regular file audits that take place
- Signed and dated file audit sheets on the young person's file
- LAC Specialist Health nurse

Manager's Analysis

The Individual Health Record that is kept for each young person is comprehensive. The record has been reviewed and revised in consultation with staff to ensure that the recording and administration of medication, medical treatment and first aid treatment is conducted to the highest standard. Any issues, or queries, relating to individual young people are discussed with the LAC Specialist Health Nurse that frequently attends the Home. The Nurse will provide medical information relating to inoculations and has a specific section

within the health books to record information relating to her visit. All members of staff have been trained in emergency first aid so that there will always staff on shift that is qualified to administer emergency first aid. All Medicines are stored in a secure facility. The young people cannot access medicines unless it is appropriate for them to self-administer.

Crosslands medication policy and procedure has been reviewed and updated to reflect current practice.

15. In the case of a qualifying school, the standards of educational provision

N/A to Crosslands Children's Home

16. Duty rosters of persons working at the home and the rosters actually worked

Compliance is monitored through:

- The original rota is written in the rota book and a copy is held on the Home's computer shared drive
- Any changes are made in the rota book and this forms the record of rotas actually worked
- Timesheets are checked weekly against the rota
- Copies of rotas available in the Home
- Copies of timesheets are kept at the Home

Manager's Analysis

The current working rota is well established. The waking night staff continue to provide stability and security to young people and there is minimal disruption at night. The reduction of sleep-in shifts has increased the availability of staff during the day and evening. The staff team's flexibility of hours worked ensures that we can operate the Home when we experience levels of sickness or annual leave.

All staff with the exception of two are fully qualified.

The home's daily log of events

Compliance is monitored through:

Management ensuring that all sections of the log has been completed and all tasks are carried out.

Manager's Analysis

The Daily Log is used throughout the shift by staff. The Log Book is monitored and reviewed regularly and is a source of valuable information that can be accessed quickly. The Daily Log informs staff of recent and forth coming events,

the whereabouts of the young people, telephone calls made and received, actions needed and a daily check list of all tasks that need to be undertaken during the shift.

17. Fire Drills and tests of alarms and of fire equipment

Compliance is monitored through:

- This forms part of the building risk assessment process
- It is checked by Regulation 32 visitors
- It is monitored by the nominated person and management of the Home
- Fire Warden Training
- Completed, signed, dated risk assessments
- Regulation 32 reports
- Independent Building Fire Risk assessment

Manager's Analysis

Crosslands continues to take positive steps to keep young people, staff and visitors safe from risk of fire. All young people on admission to the Home are shown how to evacuate the building safely. The staff team receive annual fire Warden training and one appointed fire warden member of staff supports the management team ensuring fire safety compliance. We have systems in place to ensure that the staff team are competent in the evacuation procedure of the Home. As part of their induction training new staff are trained to meet the required fire regulations standards. During this period there were no incidents involving fire setting by young people or others.

18. Records of appraisals of employees

Compliance is monitored through:

- Digigov (Human Resources database)
- Supervision

Manager's Analysis

All Residential staff have an annual personal performance developmental review which is reviewed at six months. There are Corporate and Service led objectives which have to be undertaken by all staff as part of the process. In addition a member of staff has their own personal objectives which have been agreed with their Manager. The Operational Manager for the service will sign off the performance review of each member of staff ensuring measurable quality objectives.

19. Minutes of staff meetings

Compliance is monitored through:

- Managers facilitate the team meeting
- Minutes are read by all staff
- Agenda

Manager's Analysis

The Staff meetings have an agenda with regards specific areas of discussion i.e. Health and Safety, Core Brief, Anti-Discrimination Practice, Budgets, Review of the Home's practices and discussion concerning individual young people. There have been 14 team meetings held, with some team meetings being utilised for staff training. In this period the Registered Manager has delivered 2 in house training events on Behaviours and Attitudes which was well received. Each team meeting is conducted in a circle time format which gives all staff a voice and an opportunity to speak.

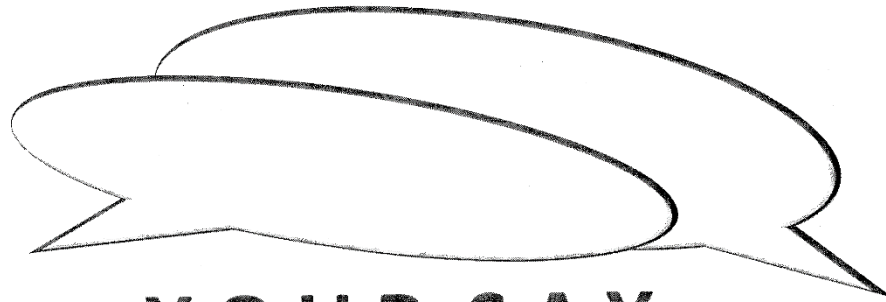
CIW inspection report 2018

This was a full unannounced inspection visit to the Home on Tuesday 23 October 2018 arriving at 10.00 and leaving at 17.00 and a second visit on Wednesday 24 October 2018 between 10.00 and 14.00.

Overall summary of inspection

'We found that young people are well cared for by consistent staff and management team. Young people are supported by a well trained staff team who use the "Signs of Safety" as the underpinning model of care alongside restorative justice, individual plans and risk assessments. Care is taken to involve young people in education, health, social, and leisure activities and to maintain positive family links in line with individual care plans. We found that young people were making progress.

There were no non-compliance areas within the inspection. There were nine recommendations, all have since been actioned.



YOUR SAY

What have you liked the most this week?

Seeing my sister in Essex.

What have you disliked this week?

The long train ride to Essex.

How do you like the food? What else would you like to eat?

Summer food is nicer than the winter food.

Eat out more.

What activities did you engage in this week?

Drayton manor.

Waterfalls

How are the staff helping you?

Trying to get me an education

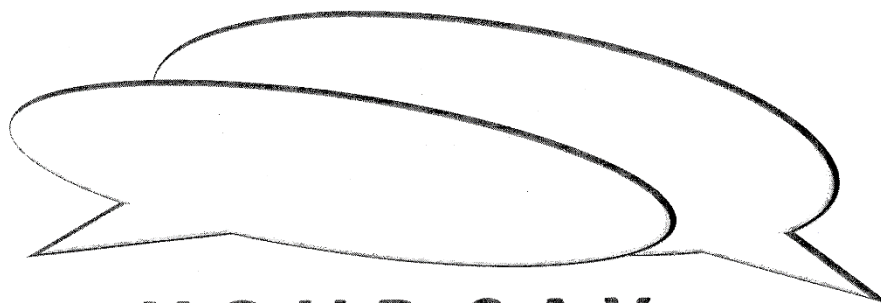
What would you like to be different?

Have my iPhone back.

What can we do to improve Crosslands?

To get a puppy.

Form devised by the young people of Crosslands following consultation



YOUR SAY

What have you liked the most this week?

Seeing my mum and siblings.

What have you disliked this week?

Getting up for school

How do you like the food? What else would you like to eat?

Its nice. 8/10

Waffles + chocolate sauce.

What activities did you engage in this week?

Horse riding.

Farm to feed animals.

How are the staff helping you?

Help me get to school.

See my mum, brothers and sister.

What would you like to be different?

To live at home.

What can we do to improve Crosslands?

A cinema room.

Form devised by the young people of Crosslands following consultation

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Corporate Parenting Advisory Committee 2019 to 2020 Forward Plan

(Version draft 0.4 Sept 2019)

	2nd April 2019 (occurred)		July 2019	September 2019	TBC	November 2019	January 2019	March 2020
Reporting Required						CPAC Progress report to Cabinet & Annual Report for Council		
Presentations	Safe reduction of looked after children: An update on the Ministerial Advisory Group – Phil Bradley / Deborah Driffield	Engagement Event* (require by terms of reference) Bright Sparks Award Ceremony	UNICEF Child Friendly City strategy (-Lee Patterson presenting) and how it relates to our work* (- Member's discussion) (Requested by Cllr Merry).	UHB Emotional and Mental Health Development work – Rose Whittle (Arising from CPAC recommendations in previous years & linking to Integrated services in ToR) Child Placement Board (re residential and fostering review) – Kate Hustler	Listening event* Event linked to Bright Spots . (Subject Requested by Cllr Lister. Event required by terms of reference) (Timing needs to be within school term)	NYAS review of residential services – Natasha Hilderley	Youth Offending Service: to hear about the work they are doing with looked after children & how they are linking in with other parts of Children's Services* - Finn Maddell (Requested by Cllr Bowden)	Wellbeing of Future Generations* - presenter to be identified. (Requested by Cllr Bowden)
	Introduction to part 6 Compliance requirements – Deborah Driffield.							Traineeship scheme – Helen Evans
	NYAS presentation: Headlines, good practise on the delivery of partnership working to achieve the implementation of the active offer and the work of the bright sparks group		Best Practice in Leaving Care presentation (required by terms of reference) – Natasha Hilderley	Education Consortium: to hear about the emphasis they are placing on CLA & use of PDG* – Gill James to arrange speaker Siriol Burford. (Requested by Cllr Bowden)		St David's Day Fund intended use – Natasha Hilderley	4Cs Commissioning (required by terms of reference). Angela Bourge	Care Leavers – mental health, drugs, alcohol, number who have children removed, impact of benefit sanctions, links with Housing / Communities, criminality – Phil Bradley
			Corporate Parenting Strategy / the Children's Services Strategic Plan (Requested by Cllr Lister)	Crosslands and Ty Storrie Registered Individual Reports – Angela Bourge		Life Journey work – Natasha Hilderley		
	Terms of Reference – Gill Nurton					Corporate Parenting Strategy – signoff new version (December deadline in CS Delivery Plan).	Plans / work to develop new Children's homes – Angela Bourge	Disabilities Futures Programme (Required in terms of reference) – Eve Williams
	Forward plan						Themes from CPRs – Ajade Harrison	
Part 6 compliance	See item above.		Care & Support Plans -NH			Mind of my own App - Natasha	Part 6 compliance	Part 6 compliance
Participation	See Presentation above.		-			Feedback from Bright Spots engagement*	-	Planning next listening event.
Annual Reports			-	Ty Storrie & Crosslands annual reports. (required by ToR)		Out of Area Annual Report (Required by the terms of reference).	VVC Adoption annual report (Scrutiny papers) (ToR)	Fostering Annual Report tbc. Kate Hustler (required by ToR)
Inspection reports	Tbc		tbc	tbc		tbc	tbc	tbc
IRO Report	-		-	IRO 6 month report – deferred until next meeting.		IRO 6 month report. (required by ToR)	-	IRO 6 month report. (required by ToR)
Education	Education report		Education report – DD presentation to Head Teachers.	Education report – see Above		Education report – see above	Education report - Integrated Services (required by ToR)	Education report – 3 reports (Milestones required by "CP12CS" in Directorate Plan
Children's home quality of care: RI/reg 32 reports	<ul style="list-style-type: none"> Crosslands – none available. Ty Storrie – Dec, Feb, Jan. Update re: Ty Storrie 		-	<ul style="list-style-type: none"> Crosslands & Ty Storrie (required by ToR) *As AB presentation listed above 		<ul style="list-style-type: none"> Crosslands Ty Storrie (required by ToR) 	<ul style="list-style-type: none"> Crosslands Ty Storrie (required by ToR) 	<ul style="list-style-type: none"> Crosslands Ty Storrie (required by ToR)
Performance	Quarter 3		Quarter 4 (required by ToR)	-		Quarter 1 (ToR)	Quarter 2 (required by ToR)	-
Complaints	Quarter 3		Quarter 4 (required by ToR)	-		Quarter 1 & Annual outturn	Quarter 2 (required by ToR)	Quarter 3 (required by ToR)
Member's Work Programme	Cllr Ashely Lister		<ul style="list-style-type: none"> Championing examples 	<ul style="list-style-type: none"> Championing examples Cllr Hinchey and Cllr Lister – update on up to 6 projects?? 		<ul style="list-style-type: none"> Championing examples Cllrs x2. 	<ul style="list-style-type: none"> Championing examples Cllrs x2. 	<ul style="list-style-type: none"> Championing examples Cllrs x2. Review membership.
Member visits	Cllr Bowden – Hywel Dda School		Member visits (required by ToR)	Member visits (required by ToR)		Member visits (required by ToR)	Member visits (required by ToR)	Member visits (required by ToR)

Key: Items required by the Terms of Reference. Items requested by Members. Member led work-streams. Item required by the Directorate Delivery Plan. Items suggested by OM / AD.

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By virtue of paragraph(s) 12, 21 of Part(s) 4 and 5 of Schedule 12A of the Local Government Act 1972.

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By virtue of paragraph(s) 12, 21 of Part(s) 4 and 5 of Schedule 12A of the Local Government Act 1972.

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