

Report of the Cabinet Merioei ioi Children's Services

Child and Family Services Scrutiny Performance Panel – 13 December 2021

TY NANT UPDATE

| Purpose | To provide an update on Ty Nant Children's Home. |
|--------------------------------|--|
| Content | This report includes an update on changes that have been implemented and overview of the action plan since the CIW inspection in May 2021. |
| Councillors are being asked to | Consider the report as part of their routine review of performance in Child and Family Services. |
| Lead Councillor(s) | Cllr Elliott King, Cabinet Member for Children's Services |
| Lead Officer(s) | David Howes, Director of Social Services |
| | Julie Davies, Head of Child and Family Services |
| Report Author | Christopher Francis Principal Officer for Care Services and Commissioning |

TY NANT UPDATE

By way of context, it is important to remember that the young people in Ty Nant are some of the most vulnerable members of our communities. They have multi-faceted and evolving levels of need which are varied and never the same. They often refuse to engage with other services offered by social services, health and education. Young people typically enter at very short notice and frequently move-in during the night and weekends. Thus, the home is routinely caring for some of our most complex young people at a time of acute personal crisis.

The last six months has seen considerable changes within the service. Most of these were known to be required before the inspection in May 2021, and would have been implemented, but there is no questioning that it (the inspection) has given momentum to the Improvement Action Plan. The more significant improvements include:

- expanding the staffing capacity following the restructure;
- introducing greater managerial capacity by taking the Deputy Manager off the staff rota;
- providing greater support to staff by way of more robust supervision and training arrangements;
- revisions to the Statement of Purpose so it is aligned to the service actually delivered;
- revised policies and procedures utilised by the home;
- changes to the assessment and planning documentation so they are better coordinated and help staff to have a more comprehensive understanding of the holistic needs of the young people and how they should be met; and
- changes to the quality assurance and monitoring arrangements including how feedback is captured.

Some of these changes have already started to have an impact; for example, there have been lower occupancy rates this year (75% as opposed to 90+%). One of the reasons for this is the changes made to the Admissions Policy and associated paperwork. Before they were introduced, there were instances where placements were agreed without a full understanding of the young person's needs and potential implications for those already in placement. This issue is evidenced by the admission of W who was accommodated over numbers (i.e. when there were already three young people in placement) and Y who was not a good match with the existing young people in placement. The changes to the process have meant referrals have been rejected on occasion.

Of the seven young people in placement during the period:-

- Two were accommodated on an emergency basis and for a very short period of time (less than a week between them).
- Two achieved positive changes against a number of their well-being outcomes (not least the level of risk they are exposed to) before they moved-on. Similarly, a third is still in placement but is settled and making progress.

 However, it is also important to acknowledge that the outcomes for the other two young people (T and U) were definitely more mixed. Although they were supported to make some positive changes by the time they left Ty Nant (e.g. U was accessing counselling and attending school every-day), it is also true that their behaviour was still dysregulated.

When looking to take lessons from these two cases, it is immediately apparent that both young people were in placement for much longer periods of time – e.g. over six months as opposed to less than twelve weeks for the others. Another reflection is that both enjoyed a period of time earlier in their placement when they were happier and doing well. These positive periods represented good opportunities to support them to move to a more permanent placement. Unfortunately, there were various challenges securing an alternative placement and these opportunities were missed. These young people still made some important changes, but the risk of not ensuring they move-on in a timely way is that they suffer further emotional harm and rejection.

What some of these examples demonstrate is that the ability of Ty Nant to realise and sustain a high quality service is (to a certain degree) interdependent on other parts of Child and Family Services. For example, there can be a potential tension between the needs of the young people in placement and others open to the Department in need of a placement (as in the case of W and Y). And, if the Care and Support Plan is not realised in a timely way for various reasons (see T and U) then it undermines the steps taken by the young people and the work of staff in the home. The dynamic between Ty Nant and Child and Family Services will need to be monitored closely going forwards. But, in terms of admissions specifically, there is value in looking at whether there is scope to slow down care planning, especially out-of-hours. How many of the placements made are genuine emergencies (very few) and how many could be made in a planned way, either before they came in or in the days that followed.

Putting this issue aside for a moment, it is also apparent that some of the changes required to make Ty Nant the best it can be will take longer to complete. Some require a cultural shift and staff working differently to how they have been accustomed to working over a long career in residential care. For example, having new assessment and planning tools will not by itself lead to improved practice. If they are not implemented properly then there is a risk they will be completed poorly or be ignored by staff.

These changes will therefore take some time to fully realise and become embedded in practice. They will need leaders and managers to have a clear sense of the way forward (shaped by the views and suggested solutions of others) and to communicate and provide support to staff to understand what the changes mean. As staff begin to see the benefits and differences the changes make this will help build momentum.

What specific actions do we need to take to make the improvements successful and how will they be measured?

As well as ongoing work to implement the changes already made, the Action Plan needs to be revisited to reflect we are in the next stage in the improvement journey. Specific actions to include:-

- The interim managerial cover arrangements to continue and be reviewed at the end of November 2021 when the Registered Manager is back in work fulltime.
- Continue to recruit to fill vacant positions in the flexi-pool so we have a sufficient number of staff we can call upon as and when required to fill gaps in the rota, and further reduce our need for agency workers.
- Training for the Responsible Individual in the performance of the role as per regulatory requirements. This is an outstanding action from the previous plan.
- Confirm and formalise the arrangements for the Internal Therapy Service (ITS) to support Ty Nant and the young people placed there.
- Audit of completed paperwork to ensure it is being completed to a good standard and with meaningful input of the young people.
- The Statement of Purpose and policies are revisited again by March 2022 with greater involvement from young people and other stakeholders.
- The Statement of Purpose developed in September 2021 reflects what the service looks like now. This is the legal expectation of the document. However, we need to be more ambitious for the service than this, and in March 2022, it would be valuable to reflect that the service has developed, e.g. staff have now completed training in therapeutic approaches (PACE and TIP) and their capacity to provide care in a therapeutically informed manner, is supported by a formal offer of support from ITS.
- The Regulation 73 template form is implemented to capture information gathered during visits by the Responsible Individual.
- We continue to monitor and learn lessons in terms of how young people are referred into the service and the timeliness with which we achieve move-on as a wider Child and Family Services Department.
- The new behaviour management policy needs to be finalised and put into practice.
- Parent / carer guide including information on complaints to be shared when new placements are made.
- A number of the changes made in the previous six months need to be audited and reviewed to ensure they are fit for purpose. This action applies to:
 - the new staffing structure;
 - o the quality assurance arrangements and feedback tools;
 - o the frequency and quality of staff supervision; and
 - the frequency and quality of direct work.