



## Implications from the Triennial Review

**Report to:** Board  
**Date:** 2 October 2015  
**Report by:** Rami Okasha, Acting Director of Strategic Development  
**Report No:** B-18-2015  
**Agenda Item:** 6.4

### **PURPOSE OF REPORT**

To advise members of the publication of the triennial review.

### **RECOMMENDATIONS**

That the Board:

1. Notes the report and considers the implications for the Care Inspectorate.

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**Version Control and Consultation Recording Form**

Version	Consultation	Manager	Brief Description of Changes	Date
1.0	Senior Management	ET		24.9.15
	Legal Services			
	Resources Directorate			
	Committee Consultation (where appropriate)			
	Partnership Forum Consultation (where appropriate)			

**Equality Impact Assessment**

To be completed when submitting a new or updated policy (guidance, practice or procedure) for approval.

Policy Title:

Date of Initial Assessment:

EIA Carried Out

YES

NO

If yes, please attach the accompanying EIA and briefly outline the equality and diversity implications of this policy.

If no, you are confirming that this policy will have no negative impact on people with a protected characteristic and a full Equality Impact Assessment is not required.

Name:

Position:

Authorised by Director

Name: R Okasha

Date: 24 September 2015

## **1.0 BACKGROUND**

The Care Inspectorate was established on 1 April 2011 and since then has completed four full years of scrutiny and improvement activities. The triennial report presents a summary of our findings for the first three of those.

## **2.0 APPROACH**

The review set out to describe what the Care Inspectorate believed, knew and evidenced about all the care services we regulate and the social work partners to whom we apply scrutiny.

Whilst evidence-based, it is not a statistical report: it is designed to present a more holistic picture of what it is we have seen in our scrutiny work. The findings are presented, broadly, by stage of service user. Where helpful, case studies are provided to illustrate the findings.

## **3.0 KEY FINDINGS**

The key findings are set out in the introduction from the chief executive at the start of the document. We have evidenced an improvement in the quality of social services in the last three years. There are some examples of excellent practice, but a number of services and areas where the quality of provision is not sufficiently good.

Overall, we found the quality of daycare and childminding services for young children to be positive and improving. Local authority nurseries, and private nurseries that work in partnership with the local authority, are performing particularly well.

We found that the life chances of young people who are in, or have been in care, are also improving. More needs to be done in some areas, though, and there have been cases where care providers should have acted more quickly when a potential problem was identified.

An increasing number of children who can't remain with their parents are being looked after the local authority or a relative. These children – and those in foster care – require permanent, settled environments in which they can prosper. However, some local authorities aren't doing enough to place these children in secure, nurturing environments.

Fostering and adoption services provide a consistently high level of quality, but we want to see them find more permanent homes for children as quickly as possible.

Housing support services are, in most cases, performing well. Many services for adults with a learning disability were found to be very good or excellent.

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Care homes for adults run by the voluntary or not-for-profit sector were found to be especially good. However, residential care for adults with complex learning disabilities is becoming increasingly specialised. Some people continue to be placed outwith their local authority area, and sometimes in larger care homes, where it can be hard to create a homely setting.

Whilst the majority of care homes for older people were found to be good or very good, the proportion of services operating at the highest levels has slipped. In some cases, high staff turnover could be seen to have slowed down improvements and a small number of services were found to be poor quality. We work closely with those services to help them improve - quickly.

#### **4.0 CHALLENGES AND IMPLICATIONS FOR THE CARE INSPECTORATE**

The key challenges are raised in the final section of the report. The review suggests that despite the presence of financial and demographic pressures, social care in Scotland can demonstrate significant improvement. The review notes, however, that:

‘if this improvement is to continue, frontline services need to be backed up by a strong, clear vision for the future, with strategic plans that set out how this is to be achieved, taking account of the financial and staffing issues that challenge local partnerships responsible for the delivery of social care. In view of this, we note with some concern the continued variation in standards of strategic planning and commissioning that we continue to find across Scotland. Whilst there is every expectation of, and justification for, local variation that serves to meet local needs and preferences, all community planning partnership areas in Scotland face similar challenges in terms of population changes, an increase in demand for childcare, and economic pressures, evident at both service and strategic levels.

Therefore, in order to establish conditions for future improvement, strategic partners need to consider what range of need social care and other services will be expected to meet in five, 10 years’ time and beyond. This includes effective planning so strategic outcomes and priorities are agreed. Future needs must be understood and forecasted, to inform a projection of what the future workforce will look like, given the challenge of recruiting sufficient staff, either due to the remoteness of the area and/or competition for labour from retail, industrial and other service sectors of the economy. Consideration of risk needs to inform the balance to be struck between prevention, early intervention and more intensive levels of support. Partners will need to take a long-term view as to which services and wider supports will provide effective, high-quality and person-centred care that delivers the best outcomes’.

The review highlights a number of areas where variation has been identified in different parts of the country. Notable examples presented include:

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- implementation of flagship policies such as self-directed support and Getting it Right for Every Child
- initiating organisational changes necessary to deliver integrated health and social care
- variation in performance across sectors: more often than not, it is the private sector that performs less well when compared with local authority and voluntary/not-for-profit sectors but the reasons for such differences are complex and varied, and should not detract from the fact that all sectors are capable of delivering excellence, and all need to continue to improve
- some age-related sectors also perform better than others: for example, care homes for children and young people and adults perform significantly better than those looking after older people, looking across all quality theme evaluations
- a particular need for continued focus on improvements in the health care and nutrition of older people resident in care homes, along with better standards of the care home environment; an improved care environment, a reduction in staff turnover and less frequent changes in manager would be important steps in this direction
- variation in the ways in which staff are supported to carry out the task of looking after service users
- variation in the standard of assessment and planning
- variation in the assessment and management of risk to individual service users – vulnerable adults as well as children.

As the policy landscape in Scotland is changing rapidly, these are areas the Committee may wish to reflect upon.

## **5.0 RESOURCE IMPLICATIONS**

The review was conducted and produced using existing resources, although consideration should be given as to how any future multi-year review needs is resourced. The principal authors were two strategic inspectors, and their authorship impacted on their capacity in other areas.

## **6.0 BENEFITS FOR PEOPLE WHO USE SERVICES AND THEIR CARERS**

This review is designed to present information about care services and social work in Scotland. A solid evidence base can support targeted improvement and provide public assurance.

## **7.0 CONCLUSION**

The Board is invited to note this report.

### **LIST OF APPENDICES**

**Appendix 1** - Inspecting and Improving Social Care and Social Work in Scotland: findings from the Care Inspectorate 2011 – 2014

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