

Highland Council Adult Placement Continuing Care Adult Placement Service

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Highland Council

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About the service

Highland Council Adult Placement Service is linked to the Highland Council Fostering service and supports young people remaining with their caregiver families past the age of 18 years old in continuing care.

Inspections of the Fostering and Adoption services have been undertaken and separate reports have been completed.

About the inspection

This was a short notice inspection which took place between 8 April 2025 and 8 May 2025. The inspection was carried out by two inspectors from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection. In making our evaluations of the service we:

- Two young people using the service.
- Two caregivers and four at the observed support group.
- Thirteen staff and management.
- Four external professionals.
- Panel chair and the Agency Decision Maker.

We also reviewed survey responses from:

- Thirty-two caregivers.
- Thirteen staff.
- Eight external professionals.

Key messages

- Children and young people experienced enduring loving relationships within caregiver families.
- Staff were knowledgeable and responsive to the support needs of caregivers.
- Caregiver families had access to a range of appropriate training opportunities including adult protection.
- Children and young people were supported to engage in their care planning.
- Improvements are required in relation to timely recruitment and assessment of caregivers.
- Caregivers should receive annual reviews in line with best practice.
- The service must review carer approval numbers, the assessment and placing of three or more children and young people on an emergency basis and out with approvals in line with legislation.
- The service should continue to review and implement continuing care policies and procedures.

From this inspection we evaluated this service as:

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

How well do we support people's wellbeing?	4 - Good
How good is our leadership?	5 - Very Good
How good is our staff team?	5 - Very Good
How well is our care and support planned?	5 - Very Good

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

How well do we support people's wellbeing?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on children and young people.

Young people experienced high quality, nurturing relationships which endured into young adulthood and beyond. This meant young people continued to be part of caring families and their networks, benefitting from the stability and support this provided.

Caregiver families felt very well supported by the service and enduring relationships were evident.

Young people's rights were prioritised and promoted. Independent advocacy was sought where appropriate to support young people. Caregivers were strong advocates for the young people living with them.

Young people experienced highly personalised care and support from caregiver families who understood their needs. Caregivers demonstrated a knowledge of the impact of trauma on young people and were attuned to their needs.

Caregiver families worked well with important people in young people's lives. We saw examples of caregivers working collaboratively with birth parents and a promotion of sibling relationships. Tracking of sibling relationships took place centrally to ensure that family links were maintained.

Young people were achieving positive outcomes in education and employment, had access to a range of leisure and social activities and enjoyed holidays with their caregiver families. Young people were being supported to have fulfilling lives with high aspirations for success and this positive culture contributed to positive outcomes.

Caregiver families had access to a range of training to support them in their role, including safeguarding and adult protection which formed part of mandatory requirements. Most caregivers had undertaken adult protection training, however, we noted that only half the staff had completed this. Caregivers we met with had a strong understanding of the impact of developmental trauma and were thoughtful and reflective in their responses to young people.

Some young people were not always being kept safe. Whilst protection processes were generally being followed, we identified a few situations which could have been better managed and improved recording would support clearer assessments and the protection of young people.

Young people's safety and welfare was not enhanced through the consistent use of individualised risk assessments. This meant that caregivers were not provided with individualised risk management plans which would assist them to identify and manage risk at home and in the community. The care to young people would be enhanced by having individual plans which are dynamic tools to help enable caregiver families to provide high standards of care and support. We discussed this during the inspection and are confident that the service is aware of this issue and have plans to progress this.

Young people experienced positive health outcomes because of the care they received. Caregivers were supporting young people to be well-informed about how to lead a healthy lifestyle and positive mental health was a priority. Health needs were comprehensively assessed, and there was a positive role of the Child and Adolescent Mental Health team to promote loving nurturing relationships. Consultations assisted caregivers to consider the impact of trauma and broken attachments and difficult early lives.

Children and young people's ability to develop a positive identity and sense of self was promoted. Staff and caregivers recognised the importance of ensuring young people could understand their own unique life story and complex family dynamics. The children's services wide approach to undertaking therapeutic life story work was sector leading. A worker trained in therapeutic life story work was a valuable addition to the team and we were of the view that many aspects of this life story work evidenced elements of excellent practice.

Child plans identified involvement and input from a range of professionals and specialists, supporting the young person, their family and the caregivers. This would contribute to holistic and comprehensive

assessments to promote positive outcomes for young people.

Caregiver families are comprehensively assessed to ensure that they have the capacity to meet the needs of young people. Assessment for annual and panel review and permanence approval were generally of a good quality. The areas for improvement relating to caregiver recruitment and assessment and the annual review and panel attendance have been repeated. (AFI 1 & 2)

Young people were supported to remain within their caregiver families past the age of 18. However, a number of caregivers are not yet approved as adult placement providers and therefore there were several young people being cared for in households who were not assessed and approved to do so. Continuing care policies and procedures are currently being reviewed we look forward to reviewing these at the next inspection. (AFI 3)

Areas for improvement

1. To support positive outcomes for children and young people the service should ensure that there is sufficient focus given to the timely recruitment and assessment of care givers and that guidance regarding assessment timescales are adhered to.

This is to ensure that practice is consistent with the Health and Social Care Standards which state: "I experience high quality care and support based on relevant evidence, guidance and best practice." (HSCS 4.11).

2. For children, young people and their foster carers to be best supported, the service should ensure to undertake regular reviews with clear recommendations for foster carer registration. To do this the provider should, at a minimum, ensure:

- Undertake annual reviews of all caregiver families.
- Ensure that all applicants and caregivers attend panel's and that this adheres to fostering regulation timescales.

This is to ensure that care and support is consistent with the Health and Social Care Standard which states "I experience high quality care and support based on relevant evidence, guidance and best practice." (HSCS 4.11).

3. The service should ensure that all young people over the age of 18 years are being cared for by caregivers who are assessed and approved to do so. To do this the provider must as a minimum:

- Ensure that the processes regarding continuing care are clear and concise.
- Assess and approve carers looking after this age group as adult placement carers.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My future care and support needs are anticipated as part of my assessment' (HSCS 1:14) and 'I experience high quality care and support based on relevant evidence, guidance and best practice.' (HSCS 4:1).

How good is our leadership?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

Continuous and robust evaluation of people's experiences were in place, to ensure they receive the best possible care and support. Data collection, analysis and solution focussed discussions with colleagues across children's services identified themes and patterns which influenced service improvement plans. Plans were based on research and best practice and subject to regular reviews and updates. They were specific, measurable, achievable, realistic and time bound (SMART).

The management team's approach to improvement planning was inclusive and empowering. The voices of people who use the service were sought. Staff development days provided opportunities to share data and discuss the relevance in relation to improvement planning. Input from external agencies encouraged open and honest discussion around high standards of care, promoting professional development and consistency in practice. Despite changes within leadership teams over the last year, staff were optimistic and confident with the management teams' vision and improvement plans.

We identified some issues surrounding attention to detail in record keeping and management oversight. The management team acknowledged the importance of accurate and robust recording in relation to complaints management, and ensuring notifications provided were categorised correctly.

Panel members were skilled and experienced. They raised questions in a sensitive manner and challenged appropriately. Panel members were proactive in seeking out training opportunities and had completed self-evaluations. Undertaking annual appraisals of panel members was an area for improvement in the previous inspection.

This was not met and will be repeated in this key question (AFI 1)

Areas for improvement

1. The service should ensure that panel members are provided with regular opportunities for support and that annual appraisals are undertaken.

This is to ensure that practice is consistent with the Health and Social Care Standards which state: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes.' (HSCS 3.14).

How good is our staff team?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

Staff practice, observed through sampled cases and individual discussions, aligned to the values and principles of the Health and Social Care Standards.

Staff displayed passion for their area of practice and had worked hard to build genuine and trusting relationships with caregivers. Consistency within the staff team meant that many caregivers had formed enduring relationships with their supervising social worker. Staff competence, knowledge and responsiveness were valued by caregivers.

Staff appreciated the level of support they received from their visible management team. They received monthly formal supervision in addition to a high level of informal supervision. Monthly team meetings provided staff with an additional reflective space for case discussion and consideration and prioritisation of key tasks.

Staff were empowered through strong leadership to be equipped to deliver best quality practical and emotional care and support. A strong culture of reflection and learning was facilitated through team meetings and the development of working groups. We asked the service to strengthen this through the provision of more reflective individual supervision.

The service is considering how best the views of caregivers and young people could also shape staff supervision and appraisal.

How well is our care and support planned?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

Young people were able to express their views in relation to care planning. Meetings were conducted in an age appropriate, friendly manner and young people were being supported to express their views. Access to independent advocacy further supported the ability of young people to participate in care planning.

Welfare assessments were in place for all young people who needed them.

Staff worked collaboratively with children and families' social workers to support care planning. They attended meetings, undertook joint visits and understood their role in supporting positive outcomes.

Participation and the views of young people for reviews of caregiver families could be strengthened as we saw no examples of young people expressing their views in relation to caregiver reviews. The service already has this included on their service development plan.

Young people experienced an individualised approach to safer caring which ensured their needs were met in caregiver families. Individualised safer caring plans were completed and regularly reviewed. Individual risk assessments were not consistently undertaken by the service. The care to young people would be enhanced by having individual plans which are dynamic tools to help enable caregiver families to provide high standards of care and support.

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

Requirements

Requirement 1

By 31 May 2024, the provider must take steps to support young people to remain with their foster carers post 18 years. To do this the provider must, at a minimum, ensure:

- They decide how best to assess, train and approve foster carers as adult placement carers and;
- How best to assess young people to ensure that continuing care is in their best interests.
- Any action is in line with regulations on continuing care.

This is to comply with Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state that: 'I experience high quality care and support based on relevant evidence, guidance and best practice.' (HSCS 4.11).

This requirement was made on 15 March 2024.

Action taken on previous requirement

The service now have in place a Continuing Care policy which outlines how caregivers will be assessed, trained and approved as adult placement carers. This policy is currently under review to include the assessment of young people ensuring service wide action is taken to support young people to remain with their foster carers post 18yrs.

This requirement has been met.

Met - outwith timescales

Requirement 2

By 31 May 2024, the provider must ensure that they access the up-to-date Care Inspectorate guidance on notifications and notify us of all incidents, accidents and allegations of abuse against foster carers in accordance with this guidance.

This is to comply with Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standard which states: 'I am protected from harm, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20); and 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19).

This requirement was made on 15 March 2024.

Action taken on previous requirement

The service have evidenced improved awareness of the Care Inspectorate guidance and there has been a notable improvement in the submission of notifications.

This requirement has been met, however, we ask that the service continue to review the guidance and oversight of notifications as we identified some incidents which had not been notified and others which had been incorrectly notified.

Met - within timescales

Requirement 3

3. By 31 May 2024, the provider must take steps to support enable young people to experience stable and consistent care beyond the age of 18. To do this the provider must, at a minimum, ensure:

- How best to assess young people to ensure that continuing care is in their best interests.
- That a continuing care welfare assessment is undertaken timeously for all young people using the service. Any action is in line with regulations on continuing care.

This is to comply with Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state that: 'I experience high quality care and support based on relevant evidence, guidance and best practice.' (HSCS 4.11).

This requirement was made on 15 March 2024.

Action taken on previous requirement

The service have evidenced sufficient progress in supporting young people to experience stable and consistent care beyond the age of 18yrs. Progress is continuing with the review of the current policy to include the assessment of young people ensuring service wide action is taken to support young people to remain with their foster carers post 18yrs.

This requirement has been met.

Met - outwith timescales

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

Areas for improvement

Previous area for improvement 1

To ensure that carer families are skilled and supported to care for young adults the service should develop and deliver Adult Protection training to all carer households.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14) and 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities.' (HSCS 3.20).

This area for improvement was made on 15 March 2024.

Action taken since then

The service have provided evidence that the majority of care giver families have completed Adult Protection training.

This area for improvement has been met.

Previous area for improvement 2

For children, young people and their foster carers to be best supported, the service should ensure to undertake regular reviews with clear assessment of recommendations for caregiver registration. To do this the provider should, at a minimum, ensure:

- Undertake annual reviews of all caregiver families.
- Ensure that all applicants and caregivers attend panel's and that this adheres to fostering regulation timescales.

This is to ensure that care and support is consistent with the Health and Social Care Standard which states "I experience high quality care and support based on relevant evidence, guidance and best practice." (HSCS 4.11).

This area for improvement was made on 15 March 2024.

Action taken since then

We saw evidence of the service making efforts to address the out of date care giver reviews and panels and we saw an increased attendance of care givers at panel. There are still, however, a number of carers with out of date reviews and the service is not yet annually reviewing carer givers in line with best practice.

This area of improvement has not been met and will be repeated.

Previous area for improvement 3

The service should ensure that panel members are provided with regular opportunities for support and that annual appraisals are undertaken.

This is to ensure that practice is consistent with the Health and Social Care Standards which state: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes.' (HSCS 3.14).

This area for improvement was made on 15 March 2024.

Action taken since then

Whilst we heard that there is a plan for future appraisals of panel members, these have not yet taken place and therefore this area for improvement has not been met and will be repeated.

Previous area for improvement 4

To ensure children and young people have opportunities and benefit from participation in decision that affect them, the provider must evidence of support provided to children and young people to express their views, attend meetings and understand how their needs will be met through care planning processes.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that 'I am fully involved in developing and reviewing my personal plan, which is always available to me' (HSCS 2.17) and 'my human rights are central to the organisations that support and care for me.' (HSCS 4.1).

This area for improvement was made on 15 March 2024.

Action taken since then

We saw some good examples of young people in continuing care being supported to express their views, attend their meetings and understand how their needs will be met.

This area for improvement has been met.

Complaints

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

Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.1 Children, young people, adults and their caregiver families experience compassion, dignity and respect	5 - Very Good
1.2 Children, young people and adults get the most out of life	4 - Good
1.3 Children, young people and adults' health and wellbeing benefits from the care and support they experience	5 - Very Good
1.4 Children, young people, adults and their caregiver families get the service that is right for them	4 - Good

How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement are led well	5 - Very Good

How good is our staff team?	5 - Very Good
3.2 Staff have the right knowledge, competence and development to support children, young people, adults and their caregiver families	5 - Very Good

How well is our care and support planned?	5 - Very Good
5.1 Assessment and care planning reflects the outcomes and wishes of children, young people and adults	5 - Very Good

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