

City of York Council

# Sharing Care - Community Short Breaks Scheme

## Inspection report

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## Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

# Summary of findings

## Overall summary

The inspection of Sharing Care - Community Short Breaks Scheme took place on 21 and 24 June 2016 and was announced. At the last inspection on 2 April 2014 the service met all of the regulations we assessed under the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010. These regulations were superseded on 1 April 2015 by the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Sharing Care - Community Short Breaks Scheme provides a flexible support service to families who have a disabled child or young person. It provides a break for families from their caring roles as well as social opportunities for children and young people. The aim of the service is to provide support when families need it, at weekends, evenings and in the school holidays.

Children and young people are linked with a sessional worker who can provide the support that families agree will work best for them. For example, this could include supporting the child or young person within their own home, supporting the child or young person's involvement in social activities or supporting children and young people alongside their families, as an "extra pair of hands" so that the child or young person can be involved in family leisure and social activities.

Prospective families are referred to the service by a health or social care professional who knows the child and their family well. The service was providing support to eight children or young people and their families at the time of the inspection.

The registered provider was required to have a registered manager in post. On the day of the inspection there was a manager that had been registered and in post for the last three years. A registered manager is a person who has registered with the Care Quality Commission (CQC) to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Children and young people were protected from the risk of harm because the registered provider had systems in place to detect, monitor and report potential or actual safeguarding children concerns. Community short breaks workers, placement workers and occupational therapists were appropriately trained in safeguarding children and young people from abuse and understood their responsibilities in respect of managing potential and actual safeguarding concerns. Risks were also managed and reduced for children and young people so that they avoided injury or harm whenever possible.

The agency premises were safely maintained, as they were part of the City of York Council's West Offices maintenance programme. Worker numbers were sufficient to meet children and young people's needs as they were allocated using a 'matching' system. Parents of children and young people said that once a match was found for their child the arrangements worked well to meet their needs. However, parents told us it was sometimes difficult to keep workers as they often worked for the agency in parallel to their

university studies, which meant they left once they had completed their courses.

Recruitment policies, procedures and practices were carefully followed to ensure workers were suitable to work with children and young people who may be vulnerable due to age and disability. The management of medication was safely carried out whenever it was necessary for workers to do so.

Children and young people were supported by trained and competent staff that were regularly supervised and had their personal performance appraised on a yearly basis. Children and young people were supported with their nutrition and health care needs where necessary and where parents gave consent for this to happen.

Children and young people received support from kind and caring workers that understood their needs and respected their preferences. Parents, children and young people were asked for their consent before workers undertook care and support tasks.

Children and young people's privacy, dignity and independence were monitored and respected and workers ensured they maintained these wherever possible. This ensured children and young people were respected and enabled to take control of their lives.

Children and young people were supported according to the instructions in their person-centred support plans, which reflected their needs and were regularly reviewed. Children and young people were supported to engage in pastimes and activities of their choosing and workers ensured regular outings were facilitated after carefully planning events and ensuring venues were suitable to meet the needs of someone with a disability.

There was an effective complaint procedure in place and parents, children and young people were able to have their complaints investigated without bias.

The service was well-led and parents, children and young people had the benefit of a culture and management style that were positive and inclusive. There was an effective system in place for checking the quality of the service using audits, satisfaction surveys and meetings.

Parent, children and young people's views were obtained through formal surveying about the quality of the service and from observations carried out by senior workers on support workers. Views were also aired by using the formal complaint system. Parents, children and young people were assured that recording systems used in the service protected their privacy and confidentiality as records were well maintained and held securely.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

Good ●

The service was safe.

Children and young people were protected from the risk of harm because the registered provider had systems in place to detect, monitor and report potential or actual safeguarding children concerns. Risks were managed and reduced so that children and young people avoided injury wherever possible.

The agency premises were safely maintained, as they were part of the City of York Council's West Offices maintenance programme. Sessional worker numbers were sufficient to meet children and young people's needs and recruitment practices were carefully followed. Medicines were safely managed if and when workers were responsible for this.

### Is the service effective?

Good ●

The service was effective.

Children and young people were cared for and supported by trained and competent workers that received regular supervision and had their performance appraised annually.

Children and young people received adequate support with nutrition and hydration where this was necessary and where parents requested it. Workers ensured they obtained consent from children, young people or their parents before supporting children with their needs. Workers also supported children and young people with their health needs if appropriate and if parents requested this.

### Is the service caring?

Good ●

The service was caring.

Children and young people received compassionate support from workers that were understanding and kind. Parents, children and young people were included and involved in all aspects of their care and support, and particularly in the activities they undertook.

Children and young people's privacy, dignity and independence were monitored and respected and workers ensured these were maintained wherever possible.

### Is the service responsive?

Good ●

The service was responsive.

Children and young people were supported according to the details in their person-centred support plans, which were regularly reviewed. Children and young people were supported to engage in pastimes and activities of their choosing on a regular basis.

Parents, children and young people had their complaints investigated without bias.

### Is the service well-led?

Good ●

The service was well led.

Parents, children and young people had the benefit of a well-led service, where the culture and the management style were positive and inclusive. Assessing and monitoring the quality of the service was effective.

Parents, children and young people had opportunities to make their views known and they were assured that recording systems in use protected their privacy and confidentiality. Records were well maintained and were held securely in the premises.

# Sharing Care - Community Short Breaks Scheme

## **Detailed findings**

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the registered provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

The inspection of Sharing Care - Community Short Breaks Scheme took place on 21 and 24 June 2016 and was announced. We gave 20 hours' notice of the inspection because the location provides a domiciliary care service, was small and we needed to be sure that someone would be available to assist us with the inspection. One Adult Social Care inspector carried out the inspection.

Information had been gathered before the inspection from notifications that had been sent to the Care Quality Commission (CQC). Notifications are when registered providers send us information about certain changes, events or incidents that occur. We also reviewed information from people who had contacted the CQC to make their views known about the service. We had received a 'provider information return' (PIR) from the registered provider, which gave us information ahead of the inspection site visit. A PIR is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

We did not speak directly to any children or young people that used the service, but we spoke with three relatives of children that used the service. We spoke with the registered manager, a placement worker and an occupational therapist who worked for the service. There were also community short breaks workers employed casually by the service. All of these staffing roles are referred to collectively as 'workers' throughout the report.

We looked at care files belonging to three young people that used the service and at recruitment files and training records for two workers. We looked at records and documentation relating to the running of the

service, including the quality assurance audits and medication management systems that were in operation. We also looked at records held in respect of complaints and compliments.

# Is the service safe?

## Our findings

Parents we spoke with told us they felt their family members were safe when supported by the workers at Sharing Care - Community Short Breaks Scheme. Parents said, "The carers are brilliant" and "The carers are exceptionally good. One of them in particular is brilliant. They are so well organised and I have no concerns when [Name] is out with them." When asked particularly about their child's safety and child protection procedures another relative said, "I know where to go and how to report any child abuse concern, so yes I am quite happy with my child's safety."

We found that the service had systems in place to manage safeguarding incidents and that all workers were trained in child protection procedures and responsibilities. Workers demonstrated knowledge of what constituted child abuse, what the signs and symptoms of abuse might be and how to refer suspected or actual incidents to the local authority's safeguarding children's team. Workers we spoke with said, "We at Sharing Care are all aware of our responsibilities regarding safeguarding children and we are also safety conscious, for example, with checking out venues and equipment" and "I have completed training in safeguarding children and fully understand my responsibilities." We saw evidence in staff training records that staff were trained in safeguarding children policies, procedures and practice, via an e-learning package.

There were no records to see in respect of handling incidents and making referrals to the local authority safeguarding children's team, as no incidents had occurred involving children and young people that used the service. We had received no notifications from the service in respect of safeguarding children since the service was first registered. However, we were assured that children and young people who used the service were protected from the risk of harm and abuse, because of the systems in place, the levels of training, staffs understanding of their responsibilities and their easy access to the safeguarding children team.

All children and young people received a full assessment of their needs, which included addressing risk factors evident in their lives. For example, with the activities the child or young person wished to undertake, with medication requirements or with medical interventions and support. At the core of the assessment was the child or young person's safety.

The service was based in City of York Council's West Offices in York, which was subject to all of the Council's safety and maintenance requirements and regulations. We had no concerns regarding the safety of the agency premises. There were appropriate facilities on site at West Offices for children and young people with a disability, should they and their parents need to visit.

The service had accident and incident policies, procedures and records in place should children, young people and workers out in the community or anyone visiting the offices have an accident or be involved in an incident. Records showed that these had been recorded thoroughly and action had been taken to treat injured persons and prevent accidents re-occurring.

The service had systems in place to safeguard children, young people and workers from financial discrepancies taking place because all workers had clear guidelines to follow when out with children and

young people, supporting them with their finances. Any support with and handling children's money was recorded in notebooks, but the service was looking to move in the near future towards an electronic means of recording children and young people's transactions while supported by workers.

Staffing rosters showed that workers were matched to children and young people according to their individual needs. Rosters were directly agreed between the relatives of children and young people and workers, so that everyone had the best possible flexibility. Relatives we spoke with told us they thought there were sometimes insufficient workers employed by the scheme to support children and young people with their needs, because the workers that came forward generally tended to be young people at college or on course secondments. One relative said, "Workers are great when we get them, but sometimes changes happen and we have to wait for someone to shadow and get to know [Name] before they can take on the calls properly. However, this has only happened once in the last twelve months" and "Usually I keep the same workers for [Name] and there are only problems if a new worker starts. Sometimes there is a lack of carers but this is not very often." This was because some workers took up their positions on a temporary basis and for the term of their college courses and so there could be frequent changes in workers working for the scheme.

The registered manager told us they had ensured they followed a thorough recruitment procedure to ensure workers were right for the job. Workers were recruited on a casual basis, through a partner agency – 'Work with York' and on a contractual basis directly through the City of York Council. This included making background checks, for example, with the Disclosure and Barring Service (DBS), on a person's right to work in the United Kingdom and obtaining occupational health and reference checks before workers started working for the scheme. A DBS check is a legal requirement for anyone applying for a job or to work as a volunteer with children or vulnerable adults. DBS checks if workers have a criminal record that would bar them from working with these people. The DBS helps employers make safer recruitment decisions and prevent unsuitable people from working with vulnerable groups. We saw evidence of DBS and other security checks in the worker's recruitment files that we looked at.

Using the 'Work with York' arms-length recruitment system meant the service could 'tap into' the candidates that had already been checked and vetted before it asked them to undergo an interview and complete an induction, which was a quick way of taking on new workers.

Workers also received a handbook and copies of policies and procedures whilst on induction. Workers' files also contained evidence of workers' identities, interview records, health questionnaires and correspondence about job offers. We assessed that workers had not begun to work in the service until all of their recruitment checks had been completed, which meant children and young people they cared for were protected from the risk of receiving support from workers that were unsuitable.

We asked about how medicines were managed within the service. Relatives of children and young people usually managed medicines in respect of ordering, collecting, storing and administering them, so there was no responsibility placed on the workers to deal with this. However, we were told by the registered manager that workers sometimes administered 'rescue' medicines, which they were trained to administer and for which they maintained medication administration records (MARs). MARs were used by workers to record medicine they had given to people who used the service. We saw some used MARs that had been received at the service for archiving and these showed that children and young people's medication was appropriately managed and signed for when given by workers.

## Is the service effective?

### Our findings

Parents we spoke with felt the workers at Sharing Care - Community Short Breaks Scheme understood their family members well and had the knowledge to care for them effectively. They said, "Carers are trained and skilled and seem to have the knowledge to care for [Name]" and "I think the carers are extremely competent at what they do."

We saw the registered provider had systems in place to ensure workers received the training and developed the experience they required to carry out their roles. A workers' training record was used to review when training was required or needed to be updated and there were certificates held in workers' files of the courses they had completed. The registered provider had an induction programme in place and reviewed staff performance via one-to-one supervision and an appraisal scheme. Because workers were involved in 'lone working' the ethos of the service was one that encouraged all workers to be in regular contact with their supervisors and to attend as much training and as many of the organised events as possible.

Staff told us they had completed mandatory training (minimum training required of them by the registered provider to ensure their competence) and had the opportunity to study for appropriate qualifications. Training completed included moving and handling, child development, child protection (specific to children with disabilities), medication administration and communication methods, for example, Makaton. All training could be accessed on-line through the Council's 'Workforce Development Unit'.

We saw two workers files that confirmed the training they had completed and the qualifications they had achieved. We saw that workers had received three monthly supervisions and that an appraisal scheme was used to improve workers' skills and development.

Communication within the service was good between the management team, the staff and relatives of the children and young people that used the service. Methods used included daily diary notes, telephone conversations, meetings and face-to-face discussions. Relatives said, "Carers always keep me fully informed about [Name]'s safety and where they are when on outings" and "Whenever [Name] is out with carers they keep me informed about times they are expected back or if there has been a problem." They said about arrangements for support, "I deal with the carers directly as they can be flexible and offer alternatives if it isn't a good day for [Name] to go out" and "Carers are usually pretty good about changing times of support sessions, to fit in with [Name]'s requirements. They make up any lost sessions through working flexibly."

The Children Act 1989, The Children Act 2004 and the Equality Act 2010 are legislation underpinning guidance in 'Working Together to Safeguard Children' (March 2015). The service used this legislation and paid due regard to children's wishes when determining the support they needed and before making decisions about action to be taken to protect individuals. The service adhered to its duties relating to the wishes and feelings of children who were 'looked after', including those who were provided with accommodation by the local authority or taken into police protection.

The service adhered to its responsibilities to pay due regard to the need to eliminate discrimination and

promote equality of opportunity. This applied to the process of identification of need and risk faced by individuals and the process of assessment. No child or group of children must be treated any less favourably than others in being able to access effective services which meet their particular needs and the service, being part of the local authority, ensured this was the case.

Sharing Care - Community Short Breaks Scheme, as a service provided by the City of York Council, has responsibility to follow these pieces of legislation and agreement in respect of the children and young people it provided a service to. We had no concerns in this regard.

Consent for workers to provide personal care to children and young people while in the community or in their own home, or to give medication and assist with nutrition was usually obtained at the start of a contract with parents. This was planned and agreed beforehand and was always in writing. We saw in one child's electronic support plan that their mother had signed all of the consent forms put in place by the service to ensure workers were given the permissions they needed to care for the child and to ensure any health or social care professionals that required access to information about the child could obtain it.

Workers supported children and young people to have their nutritional needs met through consultation with their parents about nutritional needs. Workers supported parents and family members to seek the advice of a Speech and Language Therapist (SALT) when needed and assisted parents in following any nutritional plans implemented. There were nutritional risk assessments in place where children and young people had difficulty swallowing or where they needed support to eat and drink. Workers received appropriate training to support children and young people with their nutritional needs.

We were told that children and young people had their health care needs met by the service whenever necessary, because their parents had been consulted about the children's medical conditions and information had been collated and reviewed with changes in those conditions. However, the main responsibility for children's health care support lay with relatives (parents), as children usually already had a health care plan in place as part of their referral to social services or the health authority.

Children and young people also already had an Education, Health and Care (EHC) plan in place. An EHC plan is the document which replaces Statements of Special Educational Need and Learning Difficulties Assessments for children and young people with special educational needs. These EHC plans set out what legally must be included as a minimum in any support plan for children and young people with such needs, as issued by a local authority. Social care needs were included in both these plans. We found that the service supported children and young people with their educational and health care needs and consulted parents at all times regarding any concerns that workers may have identified.

One of the parents we spoke with said, "My [relative] was taken ill a short while ago and the staff acted brilliantly to ensure [Name] was safe and taken to hospital. I have every confidence in them."

# Is the service caring?

## Our findings

Parents or carers of children and young people that used the service told us their child and workers got on very well with each other. They said, "The carers are brilliant and though it shouldn't make a difference, I think the older workers are better for having more life experiences and parenting skills. Although all the carers are lovely really", "Carers are exceptionally good" and "The workers are very good, sometimes they are young students who don't always stay that long in the job though."

Workers demonstrated in interview that they adopted a pleasant manner when they approached children and young people they were 'matched' to in order to provide them with the support they needed. Some of the workers had been employed in child care for many years and used their skills at Sharing Care - Community Support Scheme well to enable parents to enable parents to take a break.

Parents we spoke with said the management team led by example and that managers and workers were polite, attentive and informative in their approach to children and young people that used the service. They said that management and workers gave the sense that nothing was too much for them in offering and providing support. They said their children enjoyed being with workers and looked forward to going out with them as much as possible. This showed us that children and young people valued their time with workers and that parents received a regular break from caring. This was the main focus and design of the scheme.

Workers told us they were aware of children and young people's diverse needs, because they were trained in anti-discriminatory practice and gathered information from parents about their child's disabilities, race and religion, for example. Workers presented as sensitive to individuals' needs and parents we spoke with said workers were kind, caring and thoughtful.

Generally workers supported children and young people to take part in activities in the community and only when necessary supported with personal care, nutrition and medication. All workers with Sharing Care were carefully matched with children and young people to ensure that they were able to respond to their particular needs and interests. Families, children and young people were fully involved in this process and the service only offered a link to workers where everyone was happy and confident with the arrangement.

Parents of children and young people we spoke with told us their child's privacy, dignity and independence were always respected by staff. One parent said, "I'd very much like to think that [Name's] privacy and dignity are always respected when the carers are out with [Name], though I know that there are few places in the area with the right facilities for older children that need support with personal care. I usually check on the internet before [Name] is taken out anywhere. Workers certainly uphold [Name's] dignity when helping us out here at home." Another parent said, "Workers always maintain privacy and dignity for [Name], I have no concerns about that."

When we spoke with workers about this aspect of the support they provided they said, "Children's privacy and dignity are important and we try to uphold it always" and "Where a child or young person needed

personal care, I would ensure this was given in an appropriate place, though often there are few such facilities in reality. I always check out a venue first if I am taking a child out on social care, so that I know any need for privacy can be met."

The general ethos of Sharing Care - Community Short Breaks Scheme was that of encouraging children and young people to lead as inclusive and fulfilling a life as possible and to achieve their potential in all things. Workers achieved this in a caring, supportive and enabling way.

## Is the service responsive?

### Our findings

Parents of the children and young people that used the service told us they thought their child's needs were being appropriately met. One parent explained that their teenage child liked going shopping and the worker that took them tuned into their likes and preferences really well. They said that their child always enjoyed their outings, which were well planned and carried out. Another parent told us that sessions with their child's worker were always planned well in advance and sometimes included attending events organised by the Council.

We looked at three care files for children and young people that used the service and found that the support plans reflected the needs that workers had told us about. Support plans were person-centred and contained information under fifteen areas of need so that workers knew how best to meet children and young people's individual needs. Some of these areas, for example, were medication, nutrition, communication, behaviour, safety and personal care. One child had a moving and handling plan, which incorporated risk assessments that had been carried out by one of the occupational therapists employed by the service.

Children and young people also had health action plans in place, which included details of their medical background, what constituted an emergency for the child, the action to take in an emergency and who should be contacted in these situations. All documents in place were signed by the child's social worker, a parent or carer and the worker/s allocated to provide support. An example of this was instruction to workers to ensure swimming pool hoists were operating and pool attendants were made aware of the potential incidents that could arise, before a child was supported to swim in the pool.

Support plans contained personal risk assessment forms to show how risks to children and young people would be reduced, for example, with seizures, falls, moving and handling, nutrition, providing personal care, transport and taking part in activities. Support plans and risk assessments were reviewed monthly or as children and young people's needs changed.

Discussion with workers and the registered manager revealed that all children and young people that received the service had at least one particular diverse need in respect of the seven protected characteristics of the Equality Act 2010: age, disability, gender, marital status, race, religion and sexual orientation. We were told that some children and young people with disabilities and/or of particular race and religion were vulnerable to experiencing discrimination out in the community or when receiving health and social care.

However, we were told that all workers were trained in anti-discriminatory awareness and practice and therefore treated children and young people with respect, accordingly meeting their diverse needs. We saw no evidence to suggest that anyone that used the service was discriminated against. Workers responded well to children and young people's diverse needs, which meant the service was responsive to these.

Workers supported children and young people with activities of their choice, which was one of the main reasons for children and young people to use the service. Parents were happy with the activities their

children took part in and told us they felt workers were well matched to their child in terms of interests and likes. Some of the activity days that children and young people engaged in over the summer included baking days and swimming sessions.

Workers told us that it was important to provide children and young people choice in all things, so that they could make decisions for themselves, be in control of their lives and achieve their potential. Children and young people chose their activities and when they undertook them. Support plans were devised to ensure their choices were fulfilled. Children and young people's needs and choices were therefore respected.

The service had a complaint policy and procedure in place, which was linked into the Council's general complaint system known as "Have Your Say". The procedure was that parents or children and young people complained to their social workers in the first instance, then to the registered manager of the scheme, before complaining to the Council on a more formal basis. The main concerns parents expressed through the complaint system were about matching workers to their child or young person and about capacity of workers. These were appropriately managed and addressed satisfactorily. Parents we spoke with told us they knew how to complain. They said, "I have absolutely no complaints what-so-ever. If I do, I know I can speak with my child's allocated worker first and then the manager of the scheme second" and "I can speak with the manager or my child's social worker if I have a complaint about any aspect of the service my child receives."

Workers we spoke with were aware of the complaint procedure and had a healthy approach to receiving them as they understood that complaints helped the service to get things right the next time. The service had not received any complaints in the last year, but records of those relating to previous years showed that complainants had been given written details of explanations and solutions following investigation. All of this meant the service was responsive to children and young people's needs.

## Is the service well-led?

### Our findings

Parents we spoke with felt the service was progressive, family orientated and flexible. Workers we spoke with said that the culture of the service was, "Very positive" and "Committed, flexible and developmental."

The registered provider was required to have a registered manager in post and on the day of the inspection there was a manager in post, who had been the registered manager for the last three years.

The registered manager and registered provider were fully aware of the need to maintain their 'duty of candour' (responsibility to be honest and to apologise for any mistake made) under the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. We saw that notifications had been sent to us over the last year and so the service had fulfilled its responsibility to ensure any required notifications were notified under the Care Quality Commission (Registration) Regulations 2009.

The management style of the registered manager was open and approachable, encouraging of personal development among employees and sessional workers and inclusive of other professionals' ideas and involvement.

The service had written visions and values that included responding in a reliable, positive and flexible way to the workers at Sharing Care - Community Short Breaks Scheme, to the families that used the service and to colleagues within the Council. This translated into: - 'We do what we say we will do, we look for ways that enable us to say YES whenever possible and we try to be creative in the support we offer families.' Values included 'Positivity, respect, equality of access, openness, trust and accountability.' The visions of the service were 'To offer opportunity to learn, to build relationships and to have fun.' Workers gave the sense that these visions were followed because they gave examples of how they had built good relationships, provided learning experiences and enabled children and young people to have fun. Parents we spoke with also gave this this impression.

The registered manager told us they kept up to date with best practice and legislation via continuous development and changes of the service, with updates from social and health care professionals, Healthwatch publications, regular training and health and safety updates from within the Council.

We discussed systems for assessing and monitoring the quality of the service with the registered manager. We were told that the registered provider used a system called 'Survey Monkey' for seeking the views of children, young people and their parents or carers. This was last completed in March 2016 and we saw eleven of the questionnaires that the service had received. Ten respondents were overwhelmingly positive about the service and one respondent had mixed views about certain aspects of the service. Overall the satisfaction levels of people were good. The service had analysed information gathered and used it to improve on the service delivery but there was no clear feedback to parents of children and young people that used the service so that they were aware of the changes made as a result of their input into the survey.

The service also subscribed to an external 'Personal Outcomes Evaluation Tool' (POET) survey run by

Lancaster University. This surveyed nearly 3,000 professional practitioners from 70 local authorities (including 39 that worked with children in the City of York that had Education Health and Care Plans - EHCP). The POET survey also included surveying 47 parents of the children in York who had EHCPs. Feedback from the POET survey, which gave comparisons to the information gathered in the rest of the councils that took part in the survey and as seen in City of York Council's own report from Lancaster University, was positive.

There were quality audits completed on a regular basis, which included checks on electronic case files, accidents and incidents, staffing numbers / allocations / budgets and audits on equipment used, maintenance and safety. These were all carried out and recorded electronically and information gathered was analysed, discussed and used to develop action plans for improvement within the service.

Meetings were held for workers as part of the service's developmental work carried out with workers and this enabled them to share concerns or make suggestions for improvements to the service delivery. It also ensured any concerns they experienced while supporting children and young people were discussed and resolved. Workers were also observed by senior staff during care or support sessions to ensure they followed guidelines and to enable children and young people the opportunity to make their views known to the service about the support they received.

The service kept records on children and young people that used the service, workers and the running of the scheme that were in line with the requirements of regulation. Records were monitored by the Council under the requirements and guidelines of the 'Information Commissioner's Office' and we saw that they were appropriately maintained, up-to-date and securely held.