

1258276

Registered provider: Achieving Aspirations Community Interest Company

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This residential short-break service for disabled children provides care and support to up to six children at any time. The children have learning disabilities and sometimes additional complex physical and health-related needs. This small provider also operates a number of other support services for children and adults with learning disabilities.

The registered manager left a month ago following a period of secondment. Suitable interim management arrangements are in place.

Inspection dates: 4 to 5 September 2018

Overall experiences and progress of children and young people, taking into account	requires improvement to be good
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How well children and young people are helped and protected	requires improvement to be good
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The effectiveness of leaders and managers	requires improvement to be good
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The children's home is not yet delivering good help and care for children and young people. However, there are no serious or widespread failures that result in their welfare not being safeguarded or promoted.

Date of last inspection: 23 October 2017

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
23/10/2017	Full	Good

What does the children's home need to do to improve?

Statutory requirements

This section sets out the actions that the registered person(s) must take to meet the Care Standards Act 2000, Children's Homes (England) Regulations 2015 and the 'Guide to the children's homes regulations including the quality standards'. The registered person(s) must comply within the given timescales.

Requirement	Due date
If the Regulatory Reform (Fire Safety) Order 2005(a) applies to the home— the registered person must ensure that the requirements of that Order and any regulations made under it, except for article 23 (duties of employees), are complied with in respect of the home. (Regulation 25 (2)(b))	20/09/2018
The registered person must complete a review of the quality of care provided for children ("a quality of care review") at least once every 6 months. In order to complete a quality of care review the registered person must establish and maintain a system for monitoring, reviewing and evaluating— the quality of care provided for children; the feedback and opinions of children about the children's home, its facilities and the quality of care they receive in it; and any actions that the registered person considers necessary in order to improve or maintain the quality of care provided for children. After completing a quality of care review, the registered person must produce a written report about the quality of care review and the actions which the registered person intends to take as a result of the quality of care review ("the quality of care review report"). The system referred to in paragraph (2) must provide for ascertaining and considering the opinions of children, their parents, placing authorities and staff. (Regulation 45 (1)(2)(a)(b)(c)(3) and (5))	03/12/2018

Recommendations

- Any home using CCTV or other monitoring equipment should have a written policy describing how this will support the safeguarding and well-being of those living and working in the home in accordance with regulation 24. Homes must gain consent to any monitoring or surveillance by the placing authority in writing

at the time of placement. The use of CCTV is regulated by the Protection of Freedoms Act 2012 and the Surveillance Camera Code of Conduct (Home Office 2013). ('Guide to the children's homes regulations including the quality standards', page 16, paragraph 3.16)

- Staff should continually and actively assess the risks to each child and the arrangements in place to protect them. Where there are safeguarding concerns for a child, their placement plan, agreed between the home and their placing authority, must include details of the steps the home will take to manage any assessed risks on a day-to-day basis. ('Guide to the children's homes regulations including the quality standards', page 42, paragraph 9.5)
- Staff need the knowledge and skills to recognise and be alert for any signs that might indicate a child is in any way at risk of harm. The registered person should ensure that skills in safeguarding are gained, refreshed and recorded in the home's workforce plan. ('Guide to the children's homes regulations including the quality standards', page 43, paragraph 9.12)
- The registered person should actively seek independent scrutiny of the home and make best use of information from independent and internal monitoring (including under regulations 44 and 45) to ensure continuous improvement. ('Guide to the children's homes regulations including the quality standards', page 55, paragraph 10.24)
- As set out in regulations 31–33, the registered person is responsible for maintaining good employment practice. They must ensure that recruitment, supervision and performance management of staff safeguards children and minimises potential risks to them. ('Guide to the children's homes regulations including the quality standards', page 61, paragraph 13.1)

In particular, ensure that all staff who have worked for the home for more than a year have an appraisal of their performance. Furthermore, ensure that copies of staff qualifications are held on file and evidence that all staff benefit from good-quality induction.

- Regulations 35–39 detail the records that must be kept in children's homes. All children's case records (regulation 36) must be kept up to date and stored securely whilst they remain in the home. Case records must be kept up to date and signed and dated by the author of each entry. Children's case records must be kept for 75 years from the date of birth of the child, or if the child dies before the age of 18, for 15 years from the date of his or her death. ('Guide to the children's homes regulations including the quality standards', page 62, paragraph 14.3)

In particular, ensure that a copy of a school report is held on file for any child placed outside of short-break arrangements.

Inspection judgements

Overall experiences and progress of children and young people: requires improvement to be good

There are specific shortfalls in fire prevention arrangements which mean that the service is judged as not yet reaching good for help and protection. As a result, the service has been judged overall as requires improvement to get to good.

The home delivers individualised care which meets the children's particular and complex needs. However, information is missing from some children's case files which potentially limits staff awareness of their strengths and needs. For example, there is no copy of one child's school report or assessment of their special educational needs.

The children's needs are assessed and the manager ensures that the staff understand important routines before the children stay overnight for the first time. The children are gradually prepared for their stay through a series of introductory visits. The children settle quickly, and their families feel confident when they come to stay.

Partnership working is effective. Professionals and parents are complimentary about the service. They say that the service makes a difference to the children. One family member said, 'The staff all really care about her [the child]. She smiles as soon as she sees them, so we know she cares about them.'

The staff are mindful to both the children's physical health and emotional well-being. For example, the staff have sought professional support to help a child deal with bereavement. Managers and staff have the children's interests at heart. Senior managers have completely changed the operation of the service to allow a child to stay near to their family and school while suitable long-term care arrangements are made.

The staff have undertaken training in the past year around communicating with disabled children. Consequently, the communication systems that children individually use are more integrated into the daily care and support provided. The staff help the children to make choices about the care and support that they receive. For example, one child will make choices of what they want for dinner by touching staff's left or right hand to show their preference. As a result, the children trust and value the relationships that they have with the caring staff. For example, one child constantly reaches out to give and receive cuddles from the staff.

How well children and young people are helped and protected: requires improvement to be good

The building is generally well maintained and a program of refurbishment is in progress. Fire prevention arrangements are not consistently robust. Some communal fire doors and one bedroom fire door have holes in and are missing the intumescent strips. Some communal fire doors are left open as they are not fitted with automatic closures. This

means that fire has the potential to spread quickly through communal living areas. Some children's personal emergency evacuation plans and the home's fire risk assessment do not accurately reflect the staffing and fire prevention arrangements in place. The weekly building checks have failed to identify the problems with the fire doors. The manager took immediate and appropriate action during the inspection to implement improved night-time arrangements to support the child residing in the one bedroom affected. The provider has now reviewed the home's fire risk assessment and has contacted the local fire department to request guidance.

Significant incidents are rare. The staff are fully aware that keeping children safe is their core duty. The staff receive training in safeguarding, but this does not cover the needs of children with disabilities. Consequently, there is the potential for staff to not understand the particular issues which can increase disabled children's vulnerability. Staff know what to do if they are concerned about a child and bring any concerns to the attention of the manager. Senior managers have implemented a clear and transparent approach to safeguarding children with partner agencies. Despite the training provided, not all of the staff fully understand the home's safeguarding and whistleblowing policies and procedures. For example, staff are not always clear who they can raise concerns with outside of the home. This means that should an unsafe situation occur which involves senior management, other agencies may not be alerted and would therefore be unable to intervene.

Behaviour management is appropriate and the staff understand that the children use behaviour as an essential way to communicate. The staff seek to understand what is communicated by the behaviour and address those needs.

Due to some children's complex needs, cameras are used in their bedrooms to monitor them. Environmental restraints, such as wheelchair straps and restrictive beds, are regularly used. There is a transparent approach to the use of environmental restraints and written agreements are in place. However, the placing authority has not given the written agreement to the use of the cameras and there is no policy governing their use. This means that there is not clear transparency and agreement with all relevant parties of the appropriateness of their use.

The children feel safe and demonstrate this through their affectionate interactions with staff. Families and professionals have absolute confidence in the staff to keep the vulnerable children safe.

The effectiveness of leaders and managers: requires improvement to be good

This short-break service has been through some turbulent times in the past 18 months. There have been changes in ownership, management, staff and the operation of the service. Some of these changes have been necessary to secure the future of the short-breaks service. The changes have had a bearing on the management of the service. As a result, organisational oversight has not been as robust as the provider would wish.

Internal and external quality assurance systems are not robust. Reviews of the quality of

care provided have not been completed frequently enough and have not been sufficiently thorough. Some of the independent person's visits have been very short, taken place when no children have been in the home and the views of parents and professionals have not been sought. The provider has recently changed the independent visitor to address this issue. However, these shortfalls mean that there has not been consistently effective overview and monitoring, and as a result senior managers have not had a strong understanding of areas for development in the service.

The enthusiastic staff individually feel well supported by each other and the management team. One staff member said, 'I love working here. I cannot praise it enough.' The good support and contribution of the staff to the children's well-being is consistently recognised by children's families and the local authority who refer to the staff as 'amazing' and 'brilliant'.

Regular team meetings, supervision and training ensure that new staff feel well supported. However, the documentation which evidences the quality of staff induction is poor. Inductions have been signed by the inductee or the manager but not by both. There is not always clear evidence that the staff have completed all of their induction before it is finalised. Staff who have worked at the service for more than a year have not had a review of their performance. The provider ensures that robust vetting of prospective staff takes place, which ensures that only suitable people gain employment in the home. However, evidence of staff qualifications is not consistently held. These shortfalls in staff appraisal, and evidencing staff qualifications and induction, mean that there is not a consistently clear, shared understanding of all staff's skills, performance and development needs.

Staff generally maintain records of suitable quality. However, there is often not enough attention to detail. Documents such as epilepsy monitoring charts do not contain all the required information and children's risk assessments are not always accurate and updated as required. This means that important information is not consistently clearly documented and shared. There is a lack of clarity regarding records storage and as a result, the manager was not able to identify how many accidents had occurred since the last inspection and to whom. Staff have on occasion signed health and safety checks without due care, which means that shortfalls in the building have not been identified.

The new acting manager has an understanding of both the strengths of the service and the areas for development. She has begun to introduce more effective systems which aid improved oversight of the short-break service. The provider has recognised the difficulties that the service has been facing and has a development plan in place.

While there are a number of areas for development, there are also many strengths. The shortfalls identified have not negatively affected the children's enjoyment of their short breaks and there is good capacity for improvement.

Information about this inspection

Inspectors have looked closely at the experiences and progress of children and young people. Inspectors considered the quality of work and the differences made to the lives of children and young people. They watched how professional staff work with children and young people and each other and discussed the effectiveness of help and care provided. Wherever possible, they talked to children and young people and their families. In addition, the inspectors have tried to understand what the children's home knows about how well it is performing, how well it is doing and what difference it is making for the children and young people whom it is trying to help, protect and look after.

Using the 'Social care common inspection framework', this inspection was carried out under the Care Standards Act 2000 to assess the effectiveness of the service, how it meets the core functions of the service as set out in legislation, and to consider how well it complies with the Children's Homes (England) Regulations 2015 and the 'Guide to the children's homes regulations including the quality standards'.

Children's home details

Unique reference number: 1258276

Provision sub-type: Children's home

Registered provider: Achieving Aspirations Community Interest Company

Registered provider address: Achieving Aspirations Community Interests Company, Suffolk House, 7 Hydra Orion Court, Addison Way, Great Blakenham, Ipswich IP6 0LW

Responsible individual: Anna Boulton

Registered manager: Post vacant

Inspector

Joanna Heller: social care inspector

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