

Inspection report for children's home

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Inspector	Stephen Smith
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Service information

Brief description of the service

This children's home is operated by a national voluntary organisation. It offers short-break care and accommodation for up to ten children with a learning or physical disability, including one place for use in emergencies. The home currently provides a service to a total of 58 children and their families.

The inspection judgements and what they mean

Outstanding: a service of exceptional quality that significantly exceeds minimum requirements

Good: a service of high quality that exceeds minimum requirements

Adequate: a service that only meets minimum requirements

Inadequate: a service that does not meet minimum requirements

Overall effectiveness

The overall effectiveness is judged to be **good**.

This home provides a good quality of care to the children and young people who have short breaks and their families. Despite the fact that children only stay at the home a few nights per month, this good quality care helps children achieve positive outcomes across all areas of their lives. However, the home's Statement of Purpose does not set out in sufficient detail how it provides this care to children clearly enough.

The manager and staff team are experienced competent and well trained. Staff supervision and support is effective and support the high quality of care delivery. Quality assurance and monitoring processes are good. The home understands its strengths and the areas in which it plans to develop further. The manager liaises regularly with the local authority for which it provides services to help monitor the quality of the home's provision. However, the outcomes of this consultation are not reflected in the manager's monthly monitoring reports. The home works well with other organisations to support the care provided to children and young people.

The staff team has excellent relationships with young people and their families. Care planning is well developed and individualised. Care is focused on meeting young people's identified needs and supporting their families. This care helps maintain children's relationships with their families and supports parents to continue to be able to care for their children. A wide range of activities promote children's self-esteem and confidence and contribute to their local community. The home's staff work well to involve children and young people in their own care as far as is possible. Staff use

a range of methods to seek their views and information about their preferences.

The home provides young people with a safe environment that is suitable for their needs. It is well decorated and furnished, is child-friendly and equipped with the specialist equipment needed. The home's external doors are secured by an electronic fob system to safeguard children and young people from the risk of them leaving the home without staff supervision. However, this is not justified in children's plans and risk assessments, particularly in relation to how the effects of any restrictions can be minimised.

Young people are safe; the home responds effectively to any behaviour which may be regarded as bullying and a good staffing ratio ensures that young people's individual needs are met well. Behaviour management is positive and proactive and helps children and young people to learn to modify their behaviour. However, the home's record of incidents of physical intervention is not sufficiently tamper proof. Taking into consideration the significant needs of the children and young people, educational outcomes are good. Young people are also fully supported with their health. Consequently, their health improves and they learn new skills as a result of the care provided during their stays at the home.

Areas for improvement

Statutory Requirements

This section sets out the actions which must be taken so that the registered person/s meets the Care Standards Act 2000, Children's Homes Regulations 2001 and the National Minimum Standards. The registered person(s) must comply with the given timescales.

Reg.	Requirement	Due date
17B (2001)	ensure that within 24 hours of the use of any measure of control, restraint or discipline, a written record is made in a volume kept for the purpose. Specifically, that records are in formats that cannot be tampered with after the event (Regulation 17B(3))	02/11/2012
4 (2001)	ensure that the statement of purpose includes all the matters in Schedule 1 (Regulation 4(1))	30/11/2012
34 (2001)	ensure that the registered person's system for monitoring and improving the quality of care provides for consultation with placing authorities. (Regulation 34(3))	16/11/2012

Recommendations

To improve the quality and standards of care further the service should take account of the following recommendation(s):

- ensure that physical restrictions on normal movement within or from the home

are not used unless this is necessary to safeguard children and promote their welfare. Specifically, that the current practice of using electronic key fobs on external doors is fully reviewed, agreed and risk assessed so that restrictions for one child do not impose similar restrictions on other children. (NMS 10.4)

Outcomes for children and young people

Outcomes for children and young people are **good**.

Children and young people make good progress. They develop their skills, learn to manage their own behaviour and make progress during their time at the home. This improves their quality of life in other areas. Children and young people improve in confidence and self-esteem and learn a wide range of new skills practical and social skills.

Children and young people benefit from the health care provided during their stays. They learn new skills and broaden their horizons with new experiences. Children and young people eat healthily and manage their diets. For example, they learn to tolerate and accept a wider range of food than they would eat previously. For example, children and young people learn to accept having their teeth cleaned or learn to clean their own. This improves their health and improves their ability to meet their own health needs. The emotional health needs of children and young people, plus any needs arising from their disabilities, are identified and met. For example they learn to socialise and make friends which helps them to be less isolated. A parent said the home has improved their child's confidence and independence. Children and young people access all the primary and specialist health provision they need with support from the home's staff if necessary. Consequently, young people's health is maintained or improves during period of time they have short breaks at the home.

Children and young people acquire new practical and emotional skills and learn positive behaviour as a consequence of the care provided by the home. Children and young people learning is further supported by the home's good relationships with schools. Children and young people receive a consistent approach to their care, this helps maintain their routines and supports their learning. Where young people find school difficult they benefit from additional support provided by the home. For example, young people who may be excluded from school, benefit from an educational service provided by the local authority within the home. This helps them to continue to learn. Children and young people take part in a range of activities and interests that support their education and provide for their enjoyment. These also promote their involvement in the community.

Children and young people enjoy positive contact with their families and friends while they stay at the home. Their families are welcome to visit at any time and the care helps maintain their relationships with their families. This support is at times invaluable in keeping families together. Children and young people learn skills which will help them become more independent. For example, one young person is now able to make a drink and toast. Young people preparing to leave the home as part of

their transition to adult services, experience a planned transition as a result of the positive and proactive practice.

Quality of care

The quality of the care is **good**.

Children and young people have good relationships with the home's staff team who know them well and understand their needs. The behaviour of children and young people is managed in a very proactive and positive manner. This supports the high quality of relationships between staff and young people further.

Care planning is well structured and focused on young people's individual needs. Their plans set out overall aims and more specific goals and are clearly linked to assessments of risk. Recording and monitoring is good, allowing regular evaluation of children's progress and updates to the plans. Staffing levels allow individualised care. The individual needs of children and young people are carefully assessed before their admission. They visit for day care and 'tea visits' before their placements at the home are confirmed and they stay overnight. These introductions are carried out at a pace suitable to each child's needs. The frequency and pattern of their stays is based on their needs and those of their families. Careful consideration is given to the needs of other young people when planning stays to ensure that the needs of all the young people are compatible.

Parents and social workers are kept informed of all key events and their views and knowledge are sought when plans are developed and updated. There is an open approach to care delivery and excellent working relationships with parents. The home also works well with other professionals including schools, the community nursing service and social workers, who are welcome unannounced at the service. Partnership working ensures that the home's support to children and young people produces positive outcomes across their whole lives. A parent summed up this good quality care by saying, 'The unending support we receive from (the home) enables us to cope with, understand and enjoy our life with a child with complex and challenging needs better.'

Staff at the home consult with children and young people. They seek their views using a variety of methods that take into account the communication difficulties that children and young people may have. Children's meetings take place and staff use symbols, pictures and signs to communicate with children. Care plans reflect children's views and preferences. Aspects of the home's development, including the design of the play area in the garden, are influenced by children's views.

The home provides a healthy environment for young people to live in. Care plans and recording monitor children's health and individual action is taken as necessary. A range of activities are provided that help to improve children's physical and emotional health. Food provided to young people is healthy. Individual choices are available and staff members help monitor young people's diets to help them make appropriate food choices and to increase the range of foods they will eat. Medication

arrangements are well organised and ensure the safe administration of the correct medication. All staff members are trained in administering medication and good records are maintained. The home liaises appropriately with young people's doctors and other health professionals as necessary.

The home helps children and young people to learn new skills. The wide range of educational and leisure activities and the way care is provided helps children develop and progress. For example, children learn essential self-care skills, learn to socialise and mix with other young people and improve their communication ability. For example, one young person who was previously very isolated now has friends at the home and interacts and shares with them. These are skills for later life and help support their families' abilities to care for them. The home proactively works to support children's education. The home works closely with schools to help provide the young people with suitable educational services in line with their needs. For example, communication books between school and the home are maintained. The home ensures that transitions between the home and school are positive which means that children and young people are well prepared to learn.

The home's premises are suitable and support the delivery of good quality care. The exterior doors of the home are secured by an electronic key fob system which releases in the event of a fire. This is designed to prevent children and young people leaving the home unsupervised. This is referred to in the home's Statement of Purpose. However, it is not justified in care plans and risk assessments. Additionally, the consent of parents and placing authorities to this has not been sought. This means that there is not enough consideration given to how the effects of this restriction can be minimised for each child or young person.

The home works cooperatively with the placing authority and parents to ensure young people's smooth transition into adult services. Care planning promotes the development of new skills and the home works well with other providers to make the transition as easy as possible for the young person concerned. The views of children and young people's families and social workers of the care provided by the home are very positive. For example, a family member said they had 'absolute trust' in the home. A social worker said, 'I have every confidence in the home.'

Safeguarding children and young people

The service is **good** at keeping children and young people safe and feeling safe.

Relationships between children and young people and staff are good in this home. Young people are confident in staff and feel safe with them.

Behaviour management is positive and proactive. Children and young people have behaviour management plans individually tailored to their needs which staff understand and follow. Sanctions are not used within the home and physical intervention is not often necessary. Where young people are going through unsettled periods this can mean that staff need to intervene physically. In these situations intervention is at an appropriate level and well monitored. All staff are appropriately

trained in physical intervention and the home ensures that all relevant people are fully informed as soon as possible after the incident. The home's method for recording physical intervention when it occurs is a part of its system for recording any major behavioural incident whether physical intervention is required or not. This gives good information about how incidents were managed without in the need for physical intervention and provides opportunities for learning. However, records are completed electronically and emailed to senior managers in the organisation and children's social workers. The sheets are printed off and retained in loose leaf format. This means that these records are not kept in a form that is sufficiently tamper proof. Consequently, their future integrity cannot be guaranteed. However, the process of emailing copies to other people straight away means that three versions of the record exist, one with an independent organisation. This would allow any subsequent alteration to be identified and reduces the negative impact of this issue for children and young people.

High levels of staffing, good behaviour management, care planning and close supervision of young people means that bullying rarely takes place in the home. The staff team have all had recent training in managing bullying and record any incidents of behaviour which could be perceived as bullying. Work is then done to support both parties. A risk assessment is used to identify the times and places where bullying is more likely to occur. The home's practice in this area helps protect children and has resulted in it achieving an award from a national organisation. Young people do not go missing from the home or go absent without authority. Appropriate safeguards are in place should this situation occur because of the significant vulnerability of the young people concerned.

The staff team receives regular training in how to safeguard young people, including those who are additionally vulnerable because of their disabilities. They understand how to respond to any allegations, suspicions or evidence of harm should this occur. These arrangements make the home is a safe place for young people to live in.

Leadership and management

The leadership and management of the children's home are **good**.

This is a well-managed home. Managers work closely with the local authority for whom the home provides its services, to manage and monitor the quality of service. The home has a clear development plan and engages in discussion with the commissioning local authority regarding future developments. The home responds appropriately to issues identified through its own internal monitoring. There were no shortfalls identified at the last Ofsted inspection.

The home's Statement of Purpose sets out the aims and objectives of the home clearly but does not make sufficiently clear how these will be achieved. For example, its arrangements to promote children's health, education, consultation and activities or how complaints, behaviour management and physical intervention will be managed are not stated in enough detail.

The organisation monitors and evaluates the quality of service provided by the home well. Thorough external monitoring and internal monitoring by the manager is carried out formally on a monthly basis with the outcomes from this monitoring being sent to Ofsted on a six-monthly basis. This monitoring covers all the required areas but the reports produced do not include evidence that the process provides for consultation with the placing authority. However, this consultation does take place. For example, the manager meets formally on a monthly basis with the team manager of the social work team who place most children at the home to discuss quality matters.

The home's staff team are well trained and supported. Management arrangements, including staff supervision and appraisal, are effective. Staff are involved in developing and improving the home's practice. Staff are well motivated and committed and work to ensure that the best interests of children and young people are met. Training for staff is good. The great majority of the home's staff team have a diploma in childcare at level 3 or equivalent with the remaining four team members working towards this. There is a regular programme of on-going training in key matters, such as safeguarding, first aid, care planning, behaviour management, medication as well as specialist matters relating to young people's special needs. This training is provided by a mix of in house, external and on-line training. Staffing levels are based on the needs and mix of the young people staying at the home at any one time. This means that the care provided is individualised and young people are able to access a range of activities both within and away from the home.

About this inspection

The purpose of this inspection is to assure children and young people, parents, the public, local authorities and government of the quality and standard of the service provided. The inspection was carried out under the Care Standards Act 2000 to assess the effectiveness of the service and to consider how well it complies with the relevant regulations and meets the national minimum standards.

The report details the main strengths, any areas for improvement, including any breaches of regulation, and any failure to meet national minimum standards. The judgements included in the report are made against the *Inspections of children's homes – framework for inspection* (March 2011) and the evaluation schedule for children's homes.