

Inspection report for Children's Home

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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.

This report details the main strengths and any areas for improvement identified during the inspection. The judgements included in the report are made in relation to the outcomes for children set out in the Children Act 2004 and the relevant National Minimum Standards for the service.

The inspection judgements and what they mean

Outstanding:	this aspect of the provision is of exceptionally high quality
Good:	this aspect of the provision is strong
Satisfactory:	this aspect of the provision is sound
Inadequate:	this aspect of the provision is not good enough

Service information

Brief description of the service

A national charity owns and operates this children's home. Short break and respite care is provided for children and young people with disabilities up to the age of 18 years. The centre offers a range of services from day care to overnight and weekend stays. Up to six children and young people can be cared for overnight.

The home has previously undergone an extensive refurbishment programme and has been adapted and equipped to meet the needs of the children and young people. The accommodation consists of a number of single and double bedrooms, communal areas, hydrotherapy pool and sensory room and well-equipped bathroom facilities. To the rear of the property is a large secure garden which backs onto a local recreational area.

Summary

The overall quality rating is good.

This is an overview of what the inspector found during the inspection.

The overall standard of care for the children and young people at the home is good. The outcome group relating to being healthy is assessed as being outstanding. The outcome groups relating to staying safe, enjoying and achieving, and making a positive contribution, achieving economic well-being and organisation are assessed as good.

The home continues to demonstrate a commitment to improving the service that it provides. Senior staff have been proactive in reviewing practices and procedures in the home. They have used the inspection reports and internal and external monitoring processes to identify shortfalls in practice and have taken steps to address these. The children and young people are cared for by committed multi-professional team who have a good working knowledge of working with children and young people who have complex medical needs and disabilities. Staff have access to a range of training which supports their professional development and ensures that they meet the welfare and medical needs of the children and young people. Staff develop a good understanding of the children and young people's preferred means of communication. The availability of nursing staff ensures that there is consistency and continuity in the children's and young people's health care. Children and young people present as being happy and comfortable within the home. Four young people were present at the time of the inspection.

Improvements since the last inspection

The home has responded positively to the two actions made following the last inspection on 29th April 2010.

The home was asked to establish and maintain a system for improving the quality of care provided by the home. The senior care staff have implemented a new system for the routine monitoring and recording of those matters identified in Schedule 6. Senior staff use this to identify issues and shortfall and action is taken to address these. The home has formalised and extended its process for consulting with stakeholders on the quality of care being provided. A system for circulating questionnaires has been implemented. Returned questionnaires are analysed and this has led to new practices with the home.

The home was asked to determine the fitness of the acting manager to manage the home. An application to become the Registered Manager has been prepared and the initial stages for processing this have commenced.

Helping children to be healthy

The provision is outstanding.

Staff have a good understanding of the importance of good nutrition and what makes a balanced diet. The children and young people enjoy home cooked meals that make regular use of fresh products. Menus take into account the children and young people individual likes and dislikes. Special cultural and medical diets are fully catered for. The children and young people are provided with good choices and variety of food and particular attention is taken on how it is presented. Those young people whose traits include a rigid and narrowly focused menu are catered for, but are subtly encouraged to try to widen their experience of food. The home restricts the amounts of fizzy drinks and highly sugared or high fat content snacks available to the children and young people.

Individual regimes and protocols are in place for those children and young people who require assistance with their feeding. Staff receive appropriate training on how these are to be provided. The responsibility for cooking is shared between a cook and the project staff. All of the staff involved in the preparation of food have completed a food handling course.

The primary responsibility for the children's and young people's health remains with their parents and carers. A number of the children and young people accessing the home have complex medical needs and life limiting conditions. Robust systems and established practices ensure that there is consistency and continuity in their health care. Each of the children and young people have a clear comprehensive and easily understood health plan. This is drawn up on consultation with parents and carers and professional services working with the child or young person. Care in the home is provided by a multi-professional project team consisting of residential care staff and nurses. Health assessments determine the level of nursing support required for individual children and young people. In general, nursing staff are present or on call at all times that the children and young people are present at the home. Twenty four hour on site nursing cover is provided when this need is identified. All care staff are provided training on medical protocols and interventions and assist in the daily

medical care of the children and young people.

The children and young people's health needs are met and protected by effective procedures and practices, which are implemented extremely well. There are established systems in place for the safe storage, administration and recording of controlled, prescribed and non-prescribed medication. Parents provide prescribed medication on a visit by visit basis. There are systems in place to protect the children and young people if the right amount of medication is not provided or in case of an accidental spillage and loss of medication. All staff receive training and develop the competencies to administer medication. Rescue medication is available at all times for those young people with life limiting medical conditions. Staff ensure that they take this and the individual emergency protocols when they take the children and young people on trips away from the home. First aid is part of the mandatory training provided to all care staff. This arrangement, along with the availability of nurses, ensures that all of the children and young people have access to a suitably qualified first aider at all times.

Protecting children from harm or neglect and helping them stay safe

The provision is good.

There are good established procedures and practices in place which promotes the children's and young people's privacy. The children and young people require high levels of supervision and this is provided in a non-intrusive manner. All of the children and young people require some level of assistance with their personal care. Comprehensive details including personal preferences are recorded in individual personal care plans. These are drawn up in consultation with parent and carers. This ensures that there is consistency in how the children and young people's personal care is delivered. Personal and intimate care provided by all of the staff. Newly appointed care staff are given training, guidance and the opportunity to develop the skills and competency before taking on this responsibility. Personal care is provided sensitively with due consideration for the vulnerability and safety of the young people and the supervising staff.

The home follows the charity's procedures for dealing with complaints. Details of the home's complaints procedures are provided to the parents and carers and is contained in the home's Statement of Purpose. The home has implemented a logbook for recording formal complaints. Records show that no formal complaints have been made and the few concerns raised with the home are dealt with promptly and effectively. However, there is a lack of clarity about when a concern reaches the threshold for being recorded as a complaint.

A number children and young people living in the home have little or no verbal communication. Consequently, their ability for them to express concerns or make a complaint is extremely limited. Care staff develop a good understanding of the children's and young people's individual and preferred means of communication. They use this to effectively interpret when a child or young person is distressed, unhappy or feeling uncomfortable and take appropriate action to resolve this.

The children and young people are protected from abuse by established procedures and guidance for responding to child protection and safeguarding concerns. The home has established links with the local assessment team and uses this to seek guidance and clarification about actual or potential child protection concerns. The acting and deputy manager take the lead in responding to child protection issues. Both have undertaken an appropriate level of training for this role. All care staff receive training on child protection as a part of their ongoing professional development. All care staff demonstrate a good understanding of their individual roles, responsibilities and of the procedures to follow in response to information relating to actual or potential incidents of abuse.

Bullying and children and young people being absent without authority are not issues with the home. All of the young people receive high levels of supervision. Individual risk assessments identify those children and young people who have little understanding of danger and whose behaviour can at times be unpredictable and impulsive. Staffing ratios are adjusted when children and young people access off site activities and events. The home has implemented good security measures to ensure that the children and young people are not able to leave the accommodation without assistance and the knowledge of staff.

Staff are fully aware that behaviour displayed by some of the children and young people can have an unsettling affect or cause distress to others. Staff have developed simple, but effective strategies to reduce the opportunity of this occurring and to respond effectively to any incidents that do take place.

Staff have a good understanding of the children's and young people's behaviour. They recognise that a number of the children and young people are not fully accountable for their behaviour and have little or no understanding of the impact that this has on others. Staff build positive relationships with the children and young people. They use this effectively, along with their understanding of the children's or young person's preferred means of communication, to interpret and manage behaviour within the home. There is minimal use of sanctions. Some of the children and young people can display challenging and unwanted behaviours. Staff receive training on positive handling to assist in the management of this behaviour. This includes the use of de-escalation techniques and the use of restraint. This level of behaviour is managed well and there is little use of any physical intervention. The home liaises with a number of the children's and young people's schools about behaviour and where practicable adopt the school's individual behaviour plans. This ensures that there is consistency and continuity in the management of behaviour. The home follows the charity's own guidance in recording significant issues including behaviour alongside the statutory records required by the Children's Homes Regulations 2001. There are some inconsistencies in recording and a lack of clarity regarding when individual behaviour plans should be updated.

The home has implemented systems which help to keep children, young people, staff and visitors safe from fire and other hazards. Systems are in place for the regular checking, maintenance and servicing of fire safety and detection equipment. Detailed

records of fire safety activity including practise evacuations are kept. A fire risk assessment is in place and has been reviewed. All staff receive some level of fire awareness and fire safety training. The home is fully aware of the particular vulnerability of the children and young people. Personal emergency evaluation plans (PEEPS) clearly set out the individualised procedures to move a child or young person in the event of a fire. Simulated night time evacuations take place using only the staff on duty during the night. This ensures that the details within the PEEPS are tried and tested and is a significant contribution to the arrangements for keeping the children and young people safe.

There is a comprehensive system of risk assessing which cover activities, trips and the premises. These identify ways of managing and reducing levels of risk and specifically address the individual needs of children and young people with disabilities and/or with complex medical conditions. For example, individual travelling assessments are made for children and young people going on trips and activities away from the home. These are used to determine the number of staff, either care or nursing, required to supervise the trip and include protocols to follow in the case of a medical emergency.

The home follows the charity's recruitment and vetting procedures. Recruitment details are not retained by the home. However, procedures have been identified as being robust and meet, and in some aspects exceed, the requirements of the national minimum standards. Criminal Record Bureau (CRB) checks at an enhanced level are completed before staff take up their employment. There is a process for updating these CRB checks every three years. These measures are a significant contributory factor to the safeguarding of the children and young people and help to ensure that they are not cared by staff who may cause them harm.

Helping children achieve well and enjoy what they do

The provision is good.

The home provides support through individual respite care packages and is staffed and resourced to meet the children's and young people's daily social, emotional, health and personal needs. Attendance at the home is counted in days and over night stays. Parents and carers remain primarily responsible for ensuring that the children young people access the support that they need from educational, medical and social services. The children and young people receive care from a multi-professional team who work closely together to ensure their daily needs are met. Each of the children and young people are allocated a link worker whose responsibilities include care planning and liaising with parents, carers and involved agencies. Individual medical and nursing needs are met by project nursing staff who are assisted by trained and competent care staff.

The home does not have any responsibility for making arrangements for the children and young people's education. However, staff are fully aware of the importance of education and engage in activities and practices to promote this. All of the children and young people are supported to attend school, appropriately equipped and on

time. The home has been proactive in forging links with the schools attended by the children and young people. A communication book ensures that staff, parents and the school are able to keep each other fully informed of any significant events. The home adopts the school's individual behaviour plans to ensure consistency and continuity in the management of challenging behaviour. The schools and home share resources and training opportunities to improve the staff's understanding of the children and young people's needs and abilities.

Helping children make a positive contribution

The provision is good.

Each of the children and young people have a care plan titled 'My Profile' which clearly specifies how the home will care for them in accordance with his or her assessed needs. The care plans are comprehensive, clear, and easy to read and set out objectives for the placement and how these are to be met on a day-to-day basis. A significant aspect of care planning within the home is that the plans recorded in the first person and in effect gives a voice to each of the children and young people. The care plans are drawn up in consultation with parents and carers. Particular attention is given to individual preferences. There is evidence that the care plans are live documents and are routinely updated. However, when revisions of a plan are finalised it is difficult to identify what changes have been made and what items have been added. Staff check care plans on each occasion that the children and young people are staying at the home. This is good practice and ensures that the young people receive consistency and continuity of care.

Formal statutory and internal reviews of the children and young people's placement take place at the required intervals. Parents, carers, social workers and other agencies involved with the children and young people are routinely invited. Link workers are responsible for compiling, writing and presenting reports to reviews. The presence of the link worker at the reviews, ensures that the children and young people's views and wishes are represented. There is the opportunity for the children and young people to attend their reviews. However, as these are scheduled at times when they are at school, it is not an option that is routinely taken up.

The purpose of the home is to provide respite care. The maximum time that a child or young person may stay at the home is one or two of days. Consequently, they are in regular contact with parents, carers and friends. The home fully recognises that parents and carers may find the period of separation difficult and good arrangements are made for them to make contact during the times that their son or daughter is resident at the home. Children and young people are able to receive and make telephone calls. The provision of a cordless phone enables these to be made in private. Staff offer assistance and supervision for those children and young people who are unable to use the phone on their own. The children's and young people's daily diary provides a good means of communication and allows the home, school and parents to routinely update each other on significant and important events.

All admission to the home are planned and sensitively managed. Parents, carers and

the children and young people have a gradual introduction to the service. This enables them to become familiar with what the home has to offer and how it is organised. Staff use these occasions to familiarise themselves with the children's and young people's needs preferences , individual traits and routines. The mix of children and young people attending the centre at any one time is carefully chosen to be balanced and safe, as well as providing an appropriate social group where possible.

A number of the children and young people receiving care at the home have little or no communication skills and limited comprehension Staff understand the children and young people's individual ways of communicating and use this to interpret their moods, feeling and wishes. None of the children and young people are assumed to be unable to communicate their views. Staff are both patient and persistent in their communication with the children and young people. Care staff are very adept at creating opportunities for the children and young people to be involved in making choices about matters that affect their day-to-day life at the home. For example, there is ample evidence to show that the children's and young people's choices were considered in regards to the recent redecoration of the residential accommodation.

Achieving economic wellbeing

The provision is good.

The standard relating to young people about to leave care being prepared for the transition into independent living is not applicable in this setting. The majority of the young people move on to adult services which includes residential colleges. The responsibility for this transition lies with the local authority. Pathway plans are said to be in place for a number of the young people although the documentation relating to this is not retained by the home. Staff provide practical and emotional support to the young people and their families when a new placement is identified and will accompany them during any initial interviews and/or visits.

The children and young people live in a home that is fitted with suitable aids, adaptations and specialised furniture and equipment needed to meet to meet the complex needs of children and young people with disabilities. The recent redecoration and partial refurbishment to the communal areas, bedroom and bathrooms is child focused and softens the functional aspects of the accommodation.

All of the children and young people's accommodation is on ground floor level. The children and young people are provided with a individual bedroom. Whenever practicable, individual preferences to sleep in a particular room are catered for. All bedrooms are individually furnished and are of a good size and allow suitable access for wheelchair users. Some of the bedrooms are equipped with hospital beds. Bedroom doors are equipped with electronic devices which enable staff to monitor the children and young people when they are in their rooms. Details of this provision is included in the care plan and outlined the home's Statement of Purpose. The accommodation is well equipped to help in the care and manual handling of the children and young people; electric and manual hoists are available throughout the home.

There are a number of communal areas. These provide good spaces for socialisation to take place as well as providing spaces for the children and young people to be on their own. The children and young people have supervised access to a play room, sensory and hydrotherapy room and an enclosed garden. The play room is resourced well with age appropriate games toys and books.

The security and safety measures in the houses are good. Windows have restricted opening and all external doors are equipped with electric locks that can only be operated by the staff. Televisions and video and DVD players are kept in secure cabinets.

Organisation

The organisation is good.

Parents, carers, children, young people and significant others are provided with ample information about the services that they can expect from the home. The Statement of Purpose contains comprehensive information on how the home is organised and clearly sets out what care and support is provided. Information about the home and what it is like to live in is provided to the children and young people in the form of an illustrated children's guide.

The home demonstrates a commitment to developing the competencies of its staff; they undertake the training required to provide a good standard of care for children and young people. There is an expectation that all care staff will complete a National Vocational Qualification (NVQ) at level 3 in the care of young people. Currently 70% of staff have completed this training or have a qualification that has been assessed as having similar competencies. This shortfall does not impact on the quality of the care provided to young people. Project staff undertake a range of training that provides them with the skills and knowledge to provide a consistently good standard of residential care and meet the complex medical needs of the children and young people. Mandatory training includes child protection, food hygiene, fire awareness, first aid, administration of medication and positive intervention. Service specific training is provided on medical protocols, interventions and the delivery of personal care. Records indicate that the large majority of staff are current with their training or arrangements have been made for this to be undertaken. A number of staff are accessing training on communication provided by a local special school.

Supervision is viewed as an integral part of the staffs' professional development. The senior management team have made supervision a priority and this is regular scheduled on a monthly basis. The home offers practical support to ensure that staff can attend their scheduled supervision. Records indicate that the majority of staff have received regular supervision. Staff talk positively about their experience of supervision. They comment on it being a private arrangement in which they can share and discuss both personal and professional matters in confidence. Arrangements are made for nursing staff to receive supervision from a nursing supervisor and from the acting manager in regards to their social care

responsibilities.

The children and young people are looked after by committed well-trained multi-professional care staff. The large majority of the staff are experienced and have a good understanding of the needs of the children and young people. Staffing levels are sufficient to meet the day-to-day medical and welfare needs of the children and the young people. Staffing is arranged in shifts and these are led by a designated person. It is the designated person responsibility to allocate staff to each of the children and young people. The member of staff supervises the allocated child and is responsible for providing their personal care. A significant feature of the home is that the designated person can be any member of the project team. This is an empowering experience for less experienced staff and provides the nursing staff the opportunity to lead on social care. Staffing levels are adjusted in response to individual risk assessments. Senior staff are fully aware of the need to provide consistency and continuity of care by staff who are known to the children and young people. Absenteeism is covered by project members, from the home's bank staff or known agency workers.

The promotion of equality and diversity is good. All of the children and young people are valued and respected as individuals. They are encouraged to make personal choices and there is no assumption that any are incapable of doing this. The home makes sure that the young people's individual and specific needs are well met through assessment and careful planning. The home has been adapted and equipped to meet the needs of children and young people with disabilities. The home is able to meet individual medical, dietary and cultural needs as required.

System for monitoring records and for consultation with stakeholders on the quality of care are in place. These are used to identify shortfalls in practice and action is taken to address these.

Each of the children and young people have individual records containing personal information and details of the services and care that they receive. The home takes positive robust steps which ensure that this information, which is available written and electronic form, is kept secure and confidential.

What must be done to secure future improvement?

Recommendations

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

- determine the threshold for logging and monitoring complaints (NMS 16)
- ensure consistency in the recording of all measures of control (NMS 22)
- ensure that all individual behaviour plans are routinely reviewed and updated (NMS 22)

- review the process for recording the changes made to care plans. (NMS2)