

Inspection report for children's home

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Inspector	Gavin Thomas / Emeline Evans
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Service information

Brief description of the service

This home is run by a charitable organisation and is registered to provide care and accommodation for up to 19 children: 15 children with learning disabilities between the ages of 5 years and 18 years of age; and up to four places for children with a physical disability. Young people are accommodated in four separate houses: three of which offer residential services; and one provides three places for short break care only.

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 **adequate**.

Young people appear very settled in and familiar with their surroundings in each of their houses. Young people are clearly relaxed and comfortable with the staff and their peers. The culture of this setting is described by a parent as 'one big family'. This is because staff are reported to be good listeners, respect young people's needs, and proper space and time is given for family contact visits.

Young people are making significant progress since their admission and staff support all forms of progress for widening young people's potential. Young people are making very good use of communication systems to express their wishes and needs. As young people mature, they engage in activities appropriate to their age and understanding. Each of the four houses reflects individuality, giving young people opportunities to interact and live with peers who in most cases have very similar needs. One parent spoke glowingly about the quality of care provided and commented: 'My son has been excellent since his admission. The gradual process from short breaks to long-term care has been the best move for him.'

Young people are supported by a staff team who are familiar with their needs and vulnerability. As a result, safety is central to all aspects of care planning, shift planning and staffing arrangements. Due to recent changes and restructuring within the organisation and this home, a number of shortfalls have been identified. These shortfalls are reflected in the overall judgement for this inspection. They include:

changes required to improve staff training and supervision, ensuring that all staff are suitably qualified; improving the quality of the Statement of Purpose; ensuring that a children's guide is produced; and improving fire safety systems. The quality of management systems require improvement in areas such as: the quality of business planning; restraint and discipline records; reviewing the outcomes of internal statutory audits; and providing sound evidence of training undertaken by the staff team.

Young people and staff are now being supported by a new management team. This team has only recently formed but has already begun to explore areas for development and progress. However, it was too soon to evaluate any of these proposals at the time of this inspection. Staff report that recent changes, including the departure of a number of permanent and experienced staff, has been challenging but they remain optimistic under the leadership of the new management team.

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
28 (2001)	obtain a copy of any plan for the care of the child prepared by his placing authority, and of the placement plan (Reg 28(1), Schedule 3(18))	31/12/2012
17A (2001)	ensure that all incidents of restraint and discipline recorded contain all of the required information (Reg 17B (3)(a)-(i), (4)(a)(b))	30/11/2012
22 (2001)	obtain consent from the children's placing authorities regarding the use of electronic monitoring devices and ensure that this information is provided in the children's placement plans (Reg 22-(1) (a) (b))	31/12/2012
32 (2001)	take adequate precautions against the risk of fire, including the provision of suitable fire equipment; and provide adequate means of escape (Reg 32 (1)(a)(b))	30/11/2012
37 (2001)	ensure that Ofsted is notified in writing about the interim management arrangements and proposals for appointing another person to manage the children's home (Reg 37 (1)(b), (2)(a)-(e))	16/11/2012
38 (2001)	ensure that Ofsted is given notice in writing that the former manager has ceased managing the home (Reg 38 (b))	31/10/2012
4 (2001)	update the Statement of Purpose to ensure that it includes all of the required information (Regulation 4(1), Schedule 1)	31/12/2012
4 (2001)	produce a guide in a format appropriate to the age, understanding and communication needs of the children	31/12/2012

	accommodated in the home (Reg 4 (3), (4))	
27 (2001)	ensure that all staff receive appropriate training, supervision and appraisal; and are enabled from time to time to obtain further qualifications appropriate to the work they perform. In particular, training in autism, sensory integration and methods of communication. (Reg 27 4(a)(b))	30/11/2012

Recommendations

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

- ensure that any electronic record used for the purpose of recording restraint and discipline is barred so it cannot be amended at a later date (Volume 5 Statutory Guidance Children Act 1989 Children's Homes para 2.91)
- accelerate arrangements for ensuring that all staff are familiar with the revised processes to be followed in the event of a young person being missing from care (NMS 5)
- ensure that sufficient information (written or electronic) is retained at the home, demonstrating that the recruitment and selection of staff consistently follows good practice, and all applicable current statutory requirements and guidance (NMS 16.2)
- provide evidence of all training undertaken by staff, demonstrating that they are equipped with the skills to meet the needs of the children in placement. In particular, evidence of training completed for stoma care and gastrostomy feeds (NMS 18.1)
- accelerate arrangements for staff to achieve the level 3 Children and Young People's Workforce Diploma (NMS 18.5)
- undertake a review of matters set out in Schedule 6 of the Children's Homes Regulations 2001. Reports of these reviews should be completed at six monthly intervals and a copy of every report should be sent to Ofsted within 28 days of completion (Volume 5 Statutory Guidance Children Act 1989 Children's Homes para 3.14)
- devise and implement a written development plan, reviewed annually, for the future of the home, either identifying any planned changes in the operation or resources of the service, or confirming the continuation of the home's current operation and resource. (NMS 15.2)

Outcomes for children and young people

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

Young people's personal needs, wishes and preferences are all taken into account, including their faith, cultural needs and disabilities. Young people's care plans clearly

identify these preferences and include detailed guidance for staff to follow, such as young people's dietary requirements and personal care routines. Young people are given opportunities to express their wishes and feelings through a range of communication aids. One parent commented: 'My son is so happy here, so much that I can sleep knowing that he is in safe hands.' This parent also explained that their son is now making decisions, because staff help and encourage him to express his feelings and wishes.

The vast majority of young people are unable to communicate verbally. However, staff are proactive in responding to young people's gestures and expressions, particularly when young people are feeling emotional. This is often the case before, during or after contact visits, when young people are feeling upset and anxious. A well-established key worker system is in place and this forms a strong basis for staff to understand how young people express themselves and how to respond.

Healthy lifestyles are promoted according to young people's ability to understand what is socially acceptable or not. For example, sexual health and matters relating to puberty are explained to young people as they begin to mature. Staff work closely with clinical professionals to ensure that specialist care needs, such as gastrostomy feeds, are carried out safely and correctly. All young people, including those receiving short break services, are registered with primary health care professionals and outcomes of all medical treatments are well documented and monitored. Well-established procedures are in place for ensuring the safe receipt and storage of medications. A structured process is also in place for the administration of medication. Although there have been some recent errors in the administration of medication, full and detailed investigations have been conducted by the management team.

All young people are in full-time education and achieving 100% attendance. Young people's progress and attendance varies, but generally they are all making positive strides and doing well. Staff who work with the young people have very close working relationships with their teachers and regularly attend their school meetings and education reviews. These relationships help staff gain an overarching understanding of how young people are progressing and achieving their educational targets.

Young people are engaged in a vast array of community-based activities. Photographs show how much young people enjoy taking part in these activities, including holidays and short trips away from the home. An ample number of vehicles are provided to ensure that all young people are not restricted in accessing the community.

Facilities provided at the home include: a well-equipped garden with sensory facilities and adapted seating; a soft play room which has been recently refurbished; and a snoozelem room. These facilities are appropriate for all young people to use, including those with physical disabilities. In addition, young people enjoy the benefits of sensory stimulating environments created by staff in each of the houses. In one house, for example, the sensory equipment is used in the evenings for helping young

people relax and unwind as they prepare for bed.

Young people are not engaged in formal pathway planning processes. Where appropriate, social stories are created with and on behalf of young people as they prepare for moving on. Outreach work is provided for individual young people after they have moved. This enables staff to provide guidance and on-going support for a given period of time during these transitions. Where appropriate, young people are also invited back to the home for social events. This creates opportunities for young people to reacquaint themselves with friendships formed during their placements.

Quality of care

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

Trusting and fulfilling relationships are established between young people and staff. Staff are very responsive towards young people's needs and they know how and when to fade their presence or intervene more. These relationships help alleviate unnecessary stress or anxiety for young people.

Although the vast majority of young people do not communicate verbally, their abilities to contribute to the running of the house are not undermined. For example, personal care routines and menu planning take into account young people's wishes and views. Communication systems are used effectively to help young people make choices.

Staff listen to any grumbles young people may have and action is taken to address these. Parents and significant others are encouraged and supported to advocate and voice concerns on young people's behalf. Proactive measures are in place for responding to matters raised by parents.

Young people's care plans are comprehensive; they are tailored to young people's personal and diverse needs. These plans are reviewed periodically and are consistent with the outcomes of young people's statutory reviews. However, local authority care plans are not present on young people's files, therefore there is no mechanism for cross-referencing the agreed plan of care on admission.

Key workers contribute to young people's care plans and reports for reviews and, where possible, young people's views are sought about their care plans. This is often done through staff responding to ways in which young people express their likes and dislikes or indicating preferred changes to their routines.

All young people are accommodated in separate houses according to their assessed needs. Young people receiving short break care are accommodated separately, which does not cause any disruption to the young people resident. Young people's personal space is furnished and personalised according to their needs and preferences. This includes sensory integrated systems, overhead track hoists, adapted beds and play equipment.

Safeguarding children and young people

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

Young people are kept safe through on-going supervision of their whereabouts and the retention of high staffing ratios. Young people's vulnerability is central to all aspects of care planning, risk management and the supervision of young people for off-site activities. One parent commented that their child is in a safe place and that they have great confidence in the staff team communicating any concerns.

Staff are vigilant in responding to young people's gestures, expressions and unusual behaviours. Early intervention is encouraged to understand how young people are feeling but sometimes physical restraint is used in exceptional circumstances. A number of books and electronic records are used for recording all behavioural incidents, including the action taken. However, some entries lack clarity about the management of the incident and do not include all of the information required by regulation. Electronic records kept are not barred which means that information could be tampered with.

There are no reported incidents of young people being missing from care. A revised process is in place for responding to any incidents if young people were missing from care. These new processes are more thorough and clearly set out. However, not all staff are familiar with these updated processes so this is still work in progress.

All safeguarding matters are managed promptly and efficiently and, where appropriate, external professionals and agencies are consulted. Internal systems are comprehensive and include: the use of body maps; appointments with professionals, such as the General Practitioner; and a review of a young person's risk assessment. When necessary, the registered provider instructs an internal review of practice and procedures to be carried out. This demonstrates that matters relating to young people's safety and well-being are acted upon and taken very seriously.

The management team confirm that all staff are vetted prior to their offer of employment, including Criminal Records Bureau checks completed before they start work in the home. Currently, evidence of all recruitment checks are retained off site. Therefore it is not possible to ascertain from records in the home the processes undertaken for vetting all staff and their suitability to work with children and young people.

Young people are protected through the implementation of a range of personalised and generic risk assessments. These assessments include young people's health needs, mobility impairment, and environmental factors such as young people's lack of knowledge around personal safety. A high percentage of young people require close supervision 24 hours a day for reasons such as epilepsy. Electronic monitoring devices are therefore used at night in a way that respects young people's dignity and privacy. Although it is reported that parents and significant others are aware of these arrangements, there are no written consents and these details are not included in young people's care plans.

Improved systems are in place regarding the maintenance and upkeep of the premises and the undertaking of health and safety checks. These include a more robust system for communicating all works to be carried out and when these are completed. Records show that only one fire drill has taken place this year, although it was reported that other drills have taken place but not recorded in the log. This log was not accessible for inspection. Fire safety signage is clear and visible in all of the four houses and staff confirm that they have undertaken fire safety training. It is noted, however, that in some cases fire doors are still being propped open and the use of key coded pads on some doors prevents direct access to designated fire exits.

Leadership and management

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

A Statement of Purpose for the home is in place but in some cases the information provided lacks clarity and is outdated. This includes the staffing structure and details of the qualifications of the manager and staff. A children's guide is not in place and therefore young people are not given any visual prompts for supporting their transition to short breaks, long term or emergency placements at the home.

A Registered Manager is not in post. This post recently became vacant. Interim management arrangements are in place, but Ofsted has not been formally notified of these arrangements or that the Registered Manager has ceased working at the home. A new management team is now in place, including new line management arrangements and managers to oversee the day-to-day running of the home. The re-grouping of this team has only recently happened and it is still in the early stages of identifying and redeveloping practice and processes.

Recent changes within the organisation and the home have resulted in a number of permanent staff moving on. Recruitment processes are underway to fill vacant posts. In the meantime, young people are supported by regular sessional and external agency staff and the remaining permanent staff. Improved systems are in place for ensuring that regular agency staff are now receiving formal supervisions. However, there are still a number of permanent staff who have not received regular supervision or an annual appraisal of their work. Staff confirm that on-going informal support is available from managers at all levels.

Staff have undertaken a number of mandatory training courses and there is some evidence of this. However, not all staff have received training specific to the needs of the young people, such as autism, sensory integration and methods of communication. Staff are reported to have undertaken specialist training such as stoma care and gastrostomy feeds. There is no evidence, however, to confirm who completed this training and when. As a result of experienced staff leaving, a number of staff do not hold the level 3 Children and Young People's Workforce Diploma.

Young people's care is monitored via internal and external audits and reports of these audits are consistent. Currently, however, a six-monthly review of on-going

internal monitoring audits is not carried out and the outcomes reported to Ofsted. The new management team is currently in the process of reviewing management systems and key areas for development. Although there is an understanding about the home's strengths and weaknesses, a development plan or other methods of implementing change are not yet established.

At the previous interim inspection in March 2012, four requirements were made. This inspection found that work is still required to ensure that all staff are familiar with the 'missing from care' procedure. Systems are now in place for providing formal supervision to regular agency staff. Work is also being done to improve the induction for these staff. Some fire doors are still being propped open in some of the houses and further work is required to address this issue. An improved system is now in place for reporting notifiable incidents to the relevant authorities.

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.