Inspection report for children's home

Unique reference number	SC029950
Inspection date	19/06/2013
Inspector	Paula Lahey
Type of inspection	Full
Provision subtype	Children's home

Date of last inspection	08/01/2013

Service information

Brief description of the service

This local authority service is registered to provide care and accommodation for up to ten children and young people. The service can provide a home and a short break service for children and young people who may have a physical disability and/or a learning disability.

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 **inadequate**.

Despite there being a suitably qualified and experienced team in place, this home is not being effectively led or managed. This has resulted in regulatory breaches in the quality of care provided to young people. Senior managers are taking action to investigate this.

Progress has been made to address the requirement and most of the recommendations made at the last inspection. However, there is limited evidence to demonstrate that progress will be sustained over time. The home was judged as adequate at the last two full inspections. Requirements and recommendations were made at those inspections to address shortfalls in relation to staff supervision, development planning, effective shift planning, activities, meeting young people's individual communication needs and the quality of care planning. These remain current areas of weakness within the home.

Young people enjoy visiting the home for short breaks. They are settled in their individual routines and enjoy positive relationships with staff. The staff are caring and supportive; many have worked in the home for a long time and know the young people well. They work to the best of their abilities to meet young people's individual needs. Young people's health and essential care needs are appropriately met. Young people do progress; however, there is not a suitably planned and consistent approach to developing this due to a lack of clear measurable aims for each child.

Managers demonstrate an understanding of the service's strengths and weaknesses.

Internal monitoring has identified a number of areas where the home is underperforming. However, there has not been sufficient determination to drive forward the identified and necessary improvements in a timely manner. In part, some of this has been because of on-going sickness and absence in the staff team. This has affected the ability to focus on developmental work.

Not all staff receive regular supervision of a good quality. This impedes the ability of staff to consider their practice and performance. In general, young people's behaviour is managed well. However, there is limited reflection following the application of physical intervention. A recommendation has been made to address the on-going use of restrictions in the physical environment.

Feedback received from parents is positive. They report confidence that young people are cared for and enjoy their short break visits. Young people are happy during their visit; they demonstrate feeling safe and secure in staff's care.

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
9 (2001)	ensure that the Registered Manager shall, having regard to the size of the children's home, its Statement of Purpose, and the number and needs of the children accommodated there, manage the home with sufficient care, competence and skill (Regulation 9 (1))	12/08/2013
12 (2001)	prepare in consultation with the child's placing authority a placement plan for the child setting out, in particular (a) how, on a day to day basis, the child will be cared for, and their welfare safeguarded and promoted by the home. Specifically, ensure all children have a detailed care plan and risk assessment (Regulation 12(1B) (a))	12/08/2013
15 (2001)	ensure that any disabled child accommodated in the home is provided with access to such aids and equipment he may require in order to facilitate his communication with others. Specifically, ensure that all staff consistently use children's individual communication aids (Regulation 15 (5))	12/08/2013
17A (2001)	ensure that a measure of restraint is only used on a child accommodated in the home for the purpose of (a) preventing injury to any person; and (b) preventing serious damage to the property of any person (Regulation 17A (a))	12/08/2013
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	12/08/2013

	volume kept for the purpose of which shall include - (h) confirmation that the person authorised to make the record has spoken to the child concerned and the person using the measure about the use of the measure (Regulation 17B (3) (h))	
18 (2001)	ensure that children accommodated in the home are (a) encouraged to develop and pursue appropriate leisure interests and (b) are provided with appropriate leisure facilities and activities. Specifically, ensure that activities during the week are sufficiently varied, stimulating and purposeful (Regulation 18 (2) (a) (b))	12/08/2013
27 (2001)	ensure that all persons employed (a) receive appropriate training, regular supervision and appraisal (Regulation 27 (4) (a))	12/08/2013
28 (2001)	maintain in respect of each child who is accommodated in the home a record in permanent form which (a) includes the information, documents and records specified in Schedule 3 relating to that child; (b) is kept up to date; and (c) is signed and dated by the author of each written entry (Regulation 28 (1) (a-c))	12/08/2013
34 (2001)	establish and maintain a system for (b) improving the quality of care provided in the children's home. (Regulation 34 (1) (b))	12/08/2013

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 the home are not used unless this is necessary to safeguard children and promote their welfare and development. Such measures are only used where agreed with the responsible authority and, if appropriate, the parents. Such restrictions for one child do not impose similar restrictions on other children (NMS 10.4)
- ensure that there is a written development plan, for the future of the home, identifying any planned changes in operation or resources of the service. This relates specifically to ensuring development plans contain specific, measurable actions that are completed within appropriate timescales (NMS 15.2)
- ensure that staff are equipped with the skills required to meet the needs of the children. This specifically relates to staff having the training and skills to effectively communicate with children (NMS 18.1)
- ensure that staff are supported and guided to fulfil their roles and provide a high quality service to children. In particular, ensure that handover meetings include all staff working the forthcoming shift (NMS 19)
- ensure that children's records contribute fully to an understanding of the child's life. This relates specifically to ensuring that individual care plans document personalised behaviour support plans, details measurable outcomes and

comprehensively records children's progress. (NMS 22)

Outcomes for children and young people

Outcomes for young people are **adequate**.

Young people are happy and settled during their visits. This is due to the individual approach to induction and transition in the home. Young people visit the home, initially with parents and key adults, building-up to staying for tea, spending an evening and then staying overnight. This approach is personalised and benefits young people by developing their confidence and feelings of security.

Young people are warmly welcomed into the home at the start of each of their visits. Personal care needs are met with dignity and young people are supported to have a drink and snack. Some young people like to start their visit by walking around the home to familiarise themselves with their environment. Staff support this and interact with sensitivity; this enables young people to settle at their own pace.

Young people enjoy good health promotion during their visits. Staff are vigilant and competent at supporting complex health needs. Some young people's health has improved during their time in the home. One young person is now eating healthy food which has resulted in a positive weight loss. This in turn has developed their self-confidence. Care with supporting young people's gastrostomy feeding has enabled another young person to become more physically resilient. This has reduced the occasions this young person now spends in hospital.

Placing social workers can identify progress that children have made since visiting the home. For one young person this includes improvements in the child's general behaviour, communication skills, mealtimes, and sleep patterns. Some young people have decreased incidents of challenging behaviour. This is evident by the reducing numbers of incidents and use of physical intervention.

Young people, who live in the home, have made good progress in all outcome areas. There are clear and measurable aims of placement for these young people, and as such, developments are focused, and subsequently achieved.

The home has plentiful resources, good staff ratios and large spaces for children to play. However, not all young people have consistent opportunities to engage in a variety of purposeful and stimulating activities. At times activities are affected by the amount of time staff require to manage medication. During the weekdays there is a lack of creativity to enable young people to develop different interests and experience a range of exciting opportunities.

Some young people's progress in developing their communication skills is hindered. Communication aids are not consistently used by all staff. In addition, some staff lack the confidence and skills to use a total communication approach as required for some young people.

Quality of care

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

Not all young people have individual internal care plans, internal risk assessments or local authority placement plans on file. In addition, there are shortfalls in plans that are in place. Namely, not all internal care plans contain detail of young people's individual cultural and religious needs and there is a lack of information about how the home promotes young people's educational development. Internal care plans do not contain clear, measurable aims and objectives for each child's placement. This means that staff are not able to provide a focused and planned approach to developing and supporting young people's outcomes and identified needs. This shortfall has been highlighted at the last two inspections.

A number of the staff team demonstrate skill and competence at promoting young people's individual communication needs. However, this is not consistently applied across the whole team. Individual communication aids such as 'switches' and 'schedules' are not used for all young people who require them. This means young people are not able to fully develop their communication skills and limits their opportunity for making their needs understood. Leaders do not challenge this shortfall in direct care to young people, or provide staff with good role modelling and coaching. Not all staff can sign, despite some young people only using this form of communication. Additionally, not all of the staff team are suitably confident in using a total communication approach as required for some young people. Some staff report a lack of training and direction in how to use total communication approaches. This issue was raised in 2011. The home took action at that time and provided staff with additional training during regular team meetings. However, this development opportunity has not been sustained.

Staff appropriately follow young people's individual emergency health protocols. They support young people who are unwell or injured with care and attention. Personal care is delivered with dignity and respect. Appropriate and prompt links are made with other health care professionals and parents. Staff understand young people's health care needs well and ensure that appropriate care is given.

There has been a small number of medication errors this past year. As a result, senior managers instigated a full review of the medication structures and systems. In order to obtain an independent view this was completed by external partner agencies. The service is implementing recommendations following the review.

Young people's individual dietary needs are properly catered for. Meals are appetising and well presented. Young people appear to enjoy the good quality food provided. Mealtimes are generally utilised as an opportunity to develop social skills, choice and independence.

There is a mixed picture of purposeful activities available and offered to young people. At weekends and during the holiday period, there are increased opportunities for young people to spend time in their local community. Activities are planned, and

as a result they are purposeful and organised. However, during the term time, weekday activities have become repetitive. The home is well resourced with plentiful equipment, toys and space. However, there is a lack of imagination in ensuring activities are sufficiently varied and stimulating. Feedback from placing social workers shares the view that there is not enough purpose to activities, one specifically referring to a lack of organised purposeful activity taking place between arrival and the mealtime. Another says, 'I do not feel children receive sufficient stimulus. I feel staff could be more proactive with more detailed programmes to attempt with children.'

Parental feedback received about the service is generally positive. Some families say that their child is always happy to visit the home and this tells them that the child enjoys it. A number of families and placing social workers say that they would appreciate more information about their young person's stay, in particular, reports on the specific activities young people are engaged in. The service has started to provide families with regular communication sheets in response.

Safeguarding children and young people

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

Young people demonstrate feeling safe and secure in the care provided and parents agree with this. Feedback has been received from one family who wants to thank the service for caring for their child and making them feel safe and happy.

Staff are aware of and respond to young people's individual behaviours. Staff are quick to comfort young people who present with distress and they generally utilise distraction and de-escalation skills to good effect. However, on one occasion records show that staff did not try all other available options to de-escalate and negotiate with a child before resorting to a restrictive intervention. It is not evident that the managers have challenged this practice. In addition, records do not evidence that staff and young people involved in a restraint have the opportunity to debrief after the incident. This limits effective analysis and reflection on the incident and the management of it. The use of restraint is minimal and there is evidence of a reduction in its use over time.

The home has started to utilise individual support plans to assist the management of young people's behaviour. Staff are in the process of obtaining copies of plans used in young people's schools and are starting to adapt them for use in the home. This is having a positive effect on reducing the number of incidents for some young people. However, not all young people have plans in place yet. This limits the opportunity to ensure that each member of staff manages individual behaviour needs in a consistent and planned manner. Young people do not engage in high risk behaviours; bullying and going missing do not present as problems within the home.

On occasions, a central door on the ground floor is being shut. Young people are not able to open this door without assistance from staff. It is not clear that the closing of this door is always used to ensure young people's direct safety. Staff were reminded

of the reasons why this system can and cannot be used at a recent team meeting. Following a recent review by senior managers a decision to remove the lock is under consideration.

Health and safety matters are appropriately managed in the home. There are good records relating to fire safety. Young people and staff regularly practice the evaluation drill.

Staff receive regular training in child protection matters. A change of procedure and/or child protection officers are clearly shared with staff during team meetings, ensuring they know who to report any concerns to. There are effective links with placing social workers; concerns about young people are shared appropriately.

Recruitment of permanent staff is managed centrally. Previous inspection of recruitment records demonstrate that staff do not start work until the requisite checks have been undertaken. The home now obtains clarification from employment agencies that agency staff are also subject to the same checks as those required for permanent staff. There is effective monitoring of visits to the home. Because of these robust arrangements, young people's welfare is promoted.

Leadership and management

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

Leaders and managers have failed to drive forward the necessary improvements in a timely and planned way in order to provide young people with consistent high quality care.

At the last two inspections the home received judgements of adequate. Since that time there has been insufficient progress towards embedding previously set requirements and recommendations. Although initial attempts are made to address shortfalls, improvements are not sustained over time. This is evident, in that a number of shortfalls identified at this inspection have been raised in preceding years. The failure to embed necessary improvements successfully is a concern and indicative of weakness in the leadership and management of the home. During the inspection, the responsible individual accepted that the management arrangements were inadequate; an investigation into this was initiated and direct action taken.

In the last year and in addition to regulatory inspections, the home has undergone an internal review of the service, investigations into specific incidents, audits by senior managers and a review of medication systems. A number of recommendations have been made as a result. The Registered Manager has identified other areas he feels the service can improve based on his findings from internal monitoring of the provision. Managers are therefore aware of the strengths and weaknesses of the service and some attempts have been made to address these. However, managers have failed to collate all the necessary recommendations into one clear and time-focused action plan. This has prevented clear prioritisation and improvement on a systematic basis.

Requirements were made at inspections in 2008, 2009, 2010 and 2011 relating to providing all staff with regular supervision and appraisal. This remains an area of weakness. In particular, night staff are not being provided with regular formal supervision. In addition, the service has not considered how to ensure that regularly-used relief and agency staff are provided with supervision. Some staff report that supervision is not good quality; however, others feel well supported by direct supervisors. The quality of records relating to supervision meetings is variable. Some records do not evidence sufficiently robust opportunities to reflect on practice and explore how staff can improve in their work. Some records do not contain suitable action plans to address issues raised in supervision. This limits the opportunity to learn and develop.

There is a system whereby a shift leader coordinates the shift. This practice remains the same even when more senior staff work on the same shift. This practice could be positive; however, there is little evidence that more senior staff fully utilise this opportunity to role model and coach shift leaders and support workers.

The system of handover does not allow for all staff coming on the shift to engage in a group meeting. This limits the opportunity for joint planning and shared ownership and understanding of the expectations for the shift. As a result, some staff are not being suitably guided and directed in their role.

The team leaders and shift leaders lack awareness of the evaluation schedule for inspections. They have not had the opportunity to observe practice in other services and there is a limited sharing of practice. This restricts the ability of the team to effectively review their own practice, benchmark and learn from others.

Due to on-going sickness and absence among the staff team, there has been regular use of relief and agency staff. There is a higher percentage of permanent staff on shift than temporary staff. In addition, the home sources agency staff who have previously worked in the home. This ensures young people are provided with consistency. Staffing ratios as required by the Statement of Purpose are met in practice.

Records are kept secure in the home. Senior managers undertook an audit of young people's files in February 2013. Some action has been taken to address the identified shortfalls but this work is yet to be completed. The quality of records maintained by the home remains variable. Handwritten amendments to young people's internal care plans are not consistently signed and dated. Therefore, it is unclear who has agreed the change and when it is required to start. Daily records continue to document young people's presentation and the care given rather than evaluate their progress and/or achievements. Records of activities young people engage in are not consistently detailed. The lack of quality recording hinders effective analysis of a young person's placement and does not provide them with a good understanding of their time in the home.

The home has made progress to implement the previous requirement relating to

formally consulting with stakeholders. A detailed questionnaire has been provided to families and placing social workers. A newsletter has been produced to explain the findings from parental surveys to all families and let them know the action that has been taken in response.

Morale among some of the staff team is low. Senior managers have been visiting the home to meet with staff on a regular basis and each member of staff has been afforded the opportunity to meet in private and share their views on the service. Staff say they have welcomed this opportunity. Emerging findings from this review concur with the findings of this inspection.

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* and the evaluation schedule for the inspection of children's homes.