Inspection report for children's home

Unique reference number	SC034849
Inspection date	14/09/2011
Inspector	Michelle Moss
Type of inspection	Full
Provision subtype	Children's home

Date of last inspection	17/01/2011

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.

The inspection judgements and what they mean

Outstanding: a service that significantly exceeds minimum requirements
Good: a service that exceeds minimum requirements
Satisfactory: a service that only meets minimum requirements
Inadequate: a service that does not meet minimum requirements

Service information

Brief description of the service

The children's home is a purpose-built, and managed by a local authority. It provides short break care for up to six children and young people with disabilities. It is appropriately adapted to address the needs children and young people with physical and learning disabilities.

Overall effectiveness

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

Children receive a good quality of care within a warm and caring environment. This is made possible by a dedicated team of staff who put children's welfare as their main priority. This wonderful support enables children to make the most of their short break stays. The registered manager and staff promote a culture that enables children to build confidence so that they feel safe, protected and valued. This is achieved by the caring atmosphere created by staff.

Children are afforded wonderful opportunities to develop personal and social skills, talents and abilities and to spend time pursuing hobbies and interests that reflect their individual needs. Children make positive progress in relation to their starting point of their placement, across all aspects of their welfare and in being able to sustain their school attendance.

Where breaches in regulations do emerge, these do not have any direct impact on the welfare of children. The vast majority of shortfalls relate to weaknesses in record keeping. For example, there are shortfalls in holding all required information in areas of behaviour management and care planning. There is a limitation in the home accessing the communication systems used by children. This is hindering staff in securing more enhanced engagement with children. However, despite this shortfall, the staff never stop trying to find imaginative ways to sustain meaningful engagement.

The management fully understand where they need to improve and have a very clear development plan in place. This has evaluated where their strengths lay and also where shortfalls exist. There are clear strategies in place to counter these weaknesses.

Improvements have been made from the last inspection, with no recurring shortfalls identified. Staff are clearly committed and trained in safe working practices and deploy these skills highly effectively to keep children safe.

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 or restraint, a written record is made which includes a description of any medical treatment administered and confirms that the person using the measure has been spoken to (Regulation 17(3)(g)(h))	31/10/2011
24 (2001)	ensure that a written record is made of any complaint, the action taken in response, and the outcome of the investigation. (Regulation 24.(5))	31/10/2011

Recommendations

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

- ensure children have details on how to contact the Children's Rights Director (NMS 1.5)
- ensure each child's placement plan is monitored (NMS 25.2)
- ensure children's care plans include an individual health plan (Volume 5, statutory guidance 2.43)
- ensure suitable arrangements are in place to manage and dispose of any medication (Volume 5, statutory guidance 2.51)
- ensure arrangements are in place to support children's communication, so that they are able to make their views known. (Volume 5, statutory guidance 2.25)

Outcomes for children and young people

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

Children are supported by key workers who make sure links are maintained with their families, school and health professionals. Lots of planning is undertaken in the admission process ensuring all staff are informed about the things that are important to children. This extends to favourite activities, food, likes and dislikes. The information is then utilised by staff in their day-to-day care of children.

Children are able to maximise their independence and staff respect their privacy and dignity. This is achieved by staff recognising the importance of person-centred care,

empowerment and equality. Children are able to sustain meaningful engagement between their peers and staff. This is because the staff are very committed in trying to find different ways of using communication, despite not having access to communication systems used by children at school.

Great care is made for ensuring that children are provided with a homely and supportive environment. In doing so, the children can stretch their imagination through sensory engagement, or from being able to relax in comfort with friends. The level of usage of these facilities by children validates they are benefiting from opportunities provided.

The care staff are very resourceful in ensuring their support of children aids them in pursing hobbies and interests. This includes children engaging with the wider community on a daily basis. Children are supported well so that their school attendance can be sustained. This often means having good links with other services so that things like transport are arranged to reflect a child's stay.

Where children make remarkable progress, the care staff show genuine pride over these achievements. This helps children to develop self-awareness. The children's confidence is appropriate to their age and understanding. The care staff play an active role in helping children flourish in readiness for their transition to adulthood. This is enhanced through the inspiring opportunities developed by the service. For example, children have access to an adapted kitchen in which they can engage in preparing meals.

Children have inclusive access to health services in the wider community to meet their physical and emotional needs. Through imaginative care planning, children gain informed understanding of the importance of healthy lifestyles. Care staff reinforce this awareness through helping children learn about healthy food and staying safe. This is done through weekly children's meetings.

Children's backgrounds are thoroughly respected by care staff. This includes children being able to sustain practices that enhance their heritage and identity. This includes optimising meaningful contact with families and friends important to them.

Irrespective of disability, ethnicity, faith, gender or beliefs, children are accomplishing significant personal milestones that are preparing them for adulthood.

Quality of care

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

Relationships are strong between staff, children and parents. Staff provide a warm, secure and caring environment in which children are able to feel safe and relaxed. The home receives many thank you cards and letters from families reflecting their total satisfaction. Staff interact well with the children, and help them make informed decisions wherever possible. The children experience a good range of activities and use all facilities at the home including the sensory light room and soft play area to

the full. Equally, children have good access to the community where they can extend their social networking. Summer trips have included trips to the seaside, parks, shopping and attending local shows.

Children's progress is assessed and recorded. This is captured from staffs' observations and from regular discussions with children when doing welfare reports. Also, staff sustain regular contact with parents through the use of a communication book and making regular telephone calls.

The care staff implement positive behaviour strategies to support children to manage their emotions reflective of their learning difficulties. This includes having a resourceful range of redirection and de-escalation techniques that help children feel safe and secure. There are no recorded complaints raised by children or parents. A leaflet is available to children which informs them about raising a complaint. However, this is missing some external organisations' contact details which children may wish to approach who are independent of the home. When staff sit with children and evaluate their stays, they are not always considering children's comments about shortfalls as potential complaints and not recording them in a dedicated log. This hinders the home formally demonstrating they take action on the comments made by children.

Arrangements for dealing with medication are generally effective to safeguard children. However, there is no clear procedure on how to deal with disposing medication that cannot be administered but has been dispensed. This compromises having a rigorous system in which every medication can be accounted for and a log made of any outcome.

Care staff are assisted to develop their knowledge and understanding of each child's culture. Staff support children to sustain their religious beliefs during stays. For example, staff read each night a prayer to a child in accordance with their family's beliefs.

Professionals who are involved in the service hold the home in high regard. Areas of recognised strengths are the quality of care children receive. This includes enabling families to have the required reassurance that their child is well cared for, so that they can themselves receive a respite. Parents' comments about the quality of care extend to describing staff as brilliant and are very approachable.

Safeguarding children and young people

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

Through working together with parents, social workers and other agencies, the staff help children to stay healthy and to feel safe. Practices that enhance dignity and respect are well embedded in practice. All care staff receive safeguarding training as part of their ongoing training. Safeguarding is steered by the leadership to ensure the quality of provision is always maintained in the best interests of children. This includes children being protected from hazards associated with fire, water, electrical

safety and also from going missing.

Staff appreciate the serious implications of bullying and its potential harm to children's welfare. There is a commitment by staff to tackle all types of bullying through initiatives and strategies that improve behaviour and increase awareness.

Staff are suitably vetted and there are clear procedures for responding to any allegations or suspicions of harm relating to children. Established links are secured with the local authority's procedures to ensure multi-agency working always plays a part in safeguarding children's welfare.

Sometimes staff are required to use specialised arm splints for children known to self harm when distressed. These are designed at limiting movement so that children do not sustain unnecessary injuries. However, this level of support has not been considered as a potential restrictive physical intervention and therefore requires to be recorded in a restraint log. Furthermore, the log book in place does not hold all the required information. For example, it is missing a section for recording any medical treatment administered and a section for staff debriefing. Despite these shortfalls, children are seen to be happy and at ease with staff. The staff are very sensitive to the individual needs of children and respond immediately if a child is showing any sign of becoming distressed and intervene before it escalates.

Within children's care plans are risk assessments. These clearly identify risks and provide details of the protective measures that help minimise any impact on the welfare of children.

Leadership and management

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

Children are supported by dedicated staff who work tirelessly to improve children's quality of life and to meet all aspects of their physical and emotional needs. Joint working is common place. Multi-agency partnerships are forged with health and schools. This working together ensures everyone has the best interests of the child central to decisions. This is evident in the coordinated work being undertaken to help children through the transitional stages to adult care. Children are afforded opportunities to contribute to discussions. However this is not always in line with their preferred methods of communication. This is hindered by communication aids used by children within their education, not being available within the home.

All children have an individualised care plan. However, the quality and level of detail does tend to vary. The best plans provide a clear and concise assessment of a child needs. In contrast, others fail to capture key information such as health details and making sure the plan remains up to date to reflect changes in children's development and needs. Some care plans are regularly monitored, while others have not been reviewed for sometime.

Children are supported by sufficient numbers and skilled staff to meet their needs.

Staff receive regular supervision in which their performance in monitored. Staff training is also given a priority to ensure they hold the required qualifications and knowledge necessary to support children with disabilities. The trust between children and staff is evident within their everyday interaction; there is wonderful banter between them. This fabulous engagement means children experience rewarding short breaks.

The management team monitor and sign appropriate records as part of their internal quality assurance. Regular Regulation 33 visits take place to provide additional quality assurance mechanisms. The management demonstrate a clear commitment to meeting the needs of children. The level of progress made in addressing previous requirements and recommendations, is a testament of the impact the management are making to improve and develop the service so that children are able to aspire, irrespective of their disability, ethnicity, gender or faith. For example, children now have access to a new kitchen that has been designed with their needs in mind. Improvements in furnishings and fittings are also enhancing the privacy for children. Lastly, the home is investing in new sensory equipment as a further way of enhancing children's experiences during their stays.

There is a clear, accessible and comprehensive Statement of Purpose that clearly sets out the aims and objectives of the home. These objectives are being utilised in everyday practice, inclusive of ensuring children stay safe, feel protected and well cared for during their short breaks.

Equality and diversity practice is **good**.