Inspection report for Children's Home

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Inspector	Ian Dickson / Linda Christie
Type of inspection	Key

Date of last inspection	23/11/2006

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

Aycliffe Secure Services is managed by Durham county council. It is located in grounds belonging to Durham county council, which it shares with other council facilities.

Aycliffe cares for boys and girls and is registered and approved by the Secretary of State to provide accommodation for up to 43 young people, between 10 years to 18 years of age.

Children under the age of 13 years placed under section 25 of the Children Act 1989, may only be placed after prior approval by the Secretary of State.

There were 35 young people placed at Aycliffe at the time of this inspection.

The establishment has a contract with the Youth Justice Board (YJB) to provide thirty five placements. Accommodation is provided to young people for whom the period of restricted liberty has been deemed necessary by a court.

There are four main admission routes to the unit: Young people remanded into secure care by a criminal court, young people convicted of offences and serving the custodial element of any Detention and Training Order (DTO's), young people convicted under Section 90 and 92 of the Powers of the Criminal Courts (Sentencing) Act 2000 and young people subject to Section 25 of the Children Act 1989, who are a risk to themselves or others.

Aycliffe Secure Services comprises four different houses which are Heron, Siskin, Merlin and Royston. There is also a school, swimming pool, gym and play courts on site for use by young people.

Summary

The overall quality rating is good.

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

This inspection was to follow up the requirements and recommendations of the random inspection carried out by Commission for Social Care Inspection (CSCI) in November 2006. It was a key inspection and all the key standards as well as achieving economic wellbeing, were looked at.

The CSCI random inspection in November, reviewed progress in meeting the requirements and recommendations of the earlier licensing inspection in May 2006 and imposed three repeated requirements.

Managers must ensure that all staff receive formal supervision as set out in the National Minimum Standards (NMS) for children's homes. This was previously identified to be addressed by 30 July 2006.

Priority must be given to ensuring staff gain National Vocational Qualification (NVQ) Level 3 or similar accredited qualifications.

The Registered Person must ensure that the home's procedures for the use of physical intervention includes a paragraph to advise staff that where there has been a physical intervention, the child will have the right to be examined by a registered nurse or doctor within 24 hours.

The Registered Person must also ensure that within 24 hours of the use of any measure of control or restraint, a written record is made that includes all the elements listed in Regulation 17 (4).

Staff working at the children's home must be clear that physical restraint is only used to prevent likely injury to the child concerned or to others, or likely serious damage to property.

There were 21 recommendations were also made following that inspection.

More efforts should be made to provide written evidence of consultation with young people, particularly in relation to planning with them whilst in placement. House unit meeting minutes should also be more consistently recorded.

Written consent should be sought from parents for the use of homely remedies with their children whilst placed in the secure establishment.

The book used to record any incidents of suicide or self-harm should be reviewed and advice given to staff on the most effective use of this documentation.

Staff should be given further advice about the checking of young people whilst in their bedrooms.

Managers and staff should ensure that young people's privacy and dignity is preserved when wearing dressing gowns without cords for health and safety purposes.

The care planning and recording procedures should be reviewed to ensure they fully reflect the assessed needs and targets for individual young people.

Procedures should be in place to remind placing officers of the need to provide Looked After Children (LAC) documentation for young people remanded to the establishment.

The records of all meetings held between key workers and young people should be both signed and dated.

The plans to review and improve the catering provision should be implemented as soon as possible. The menus offered to young people should be viewed in order to provide a wider choice of meals. Vegetarian options should also be expanded.

The guidance available to staff on how best to deal with potential child protection issues should be further improved, with more specific steps for them to follow, should an issue arise. Information about the investigation of any such matters should be held in the establishment.

All staff should receive regular training in understanding child protection matters, including advanced training for more senior and experienced staff.

The issues highlighted in relation to the use of personal alarms and communication telephones should be addressed as a matter of priority (LS 2.2).

Every effort should be made to address the identified problems with the viewing panels in young people's bedrooms in Royston house (LS 2.2).

Managers should provide staff with regular refresher training in security and health and safety matters. This should be available at least on an annual basis.

Efforts should be made to preserve and if possible increase the available space for young people for private study and for one to one work with their key workers and other professionals.

Once finalised, the revisions to the behaviour management system should be clearly reflected in the Statement of Purpose, young people's and parents information packs.

The planned restructuring of the management team should be carried out as soon as is feasible. The roles and responsibilities of middle managers need to be included in this process.

The post of learning and development coordinator should be filled as soon as is feasible.

The range of records maintained should be reviewed and revised to avoid duplication. The recording systems should be simple and effective.

Critical incident reports should be returned to the individual house units as soon as possible after typing. They should be accessible to staff and young people.

Managers should ensure that the policy and procedural manual is reviewed as a matter of priority. The night care officers should have an easily accessible practice manual or work handbook.

Each of these requirements and recommendations were reviewed as part of this inspection. The inspection was carried out using the NMS for children's homes and

the additional standards included specifically for secure children's homes.

The inspection team was composed of four secure estate inspectors and one of Her Majesty's Inspectors (HMI). HMI inspected the educational provision, whilst the secure estate inspectors inspected the residential provision. HMI's inspection findings are included in this report.

The managers and staff continue to work hard to meet the requirements and address the recommendations following the last inspection.

There remain issues related to premises and equipment at the centre. These need attention to ensure that staff and young people remain safe. Staff deployment, training, support and supervision also need to be addressed.

Improvements since the last inspection

The provision at Aycliffe secure children's home has improved. The managers and staff team present as child centred and try to ensure that young people receive good quality care, both within the centre and when they are discharged.

Progress has been made in developing child protection procedures and the routine quality assurance carried out across the centre. The managers agree that these areas of work have potential for greater development.

By introducing the 'Behaviour for Life' behaviour modification programme, the centre is proactively seeking to improve the behaviour modification and incentive scheme. This is to encourage and support young people to engage positively with staff and to reduce the need for sanctions. Although still in the early stages, this commitment to improve is commendable.

Records confirm the commitment expressed by managers at the centre for ongoing staff training.

There are ongoing improvements to the facilities and services available, which have increased the capacity of the centre to meet the needs of the young people. This improvement will continue when the adaptations to the external perimeters are completed.

Young people speak highly of the staff who support them and the overall atmosphere in the centre is positive.

Helping children to be healthy

The provision is good.

The centre offers young people nutritious food however, the young people say that they remain dissatisfied with aspects of the overall service. They say that the quality and quantity of meals varies.

Lunch and evening meals are cooked in a central, commercial kitchen. Supplies for breakfasts, suppers and drinks are provided to the four residential units on a daily basis. These meals are prepared by residential staff for young people on the units.

Catering staff transport the two main hot meals of the day in heated trolleys to each of the four residential units. Care staff then serve the meals. The young people say that they do not like this arrangement, as food may be delivered on time, but there may be a delay in it being served. This can result in food being dry at times.

Senior managers agree that the current system of transporting meals is not ideal and continue to pursue ways of improving this aspect of the service.

Young people say they would like to have opportunities to meet with the cooks. Although there is a food and nutrition action group, young people do not form part of the group. The young people feel it would be positive to be included, to talk directly with the cooks and discuss food preferences and grumbles informally.

There is a three week rolling menu which includes healthy options. However, there is little evidence to show care staff actively promote healthy eating. For example, young people's health care plans do not show how healthy eating is to be implemented in practice.

Weekly menus are displayed in the units although vegetarian options, provided on separate sheets, are not displayed. Fresh fruit is readily available during weekdays and young people can have snacks and 'tuck' at appropriate times. The quality of food is good, although young people say vegetables are boring as they are simply steam cooked.

The lack of effective communication between care and catering staff affects the delivery of the service to young people. For example, catering staff rely on information gained from young people about their preferred choice of meals for the following day. Inaccurate information results in some young people not receiving a meal of their choice, leading to dissatisfaction.

On the day of the inspection, sufficient food was available for young people to have additional helpings. However, records of meetings contained occasional comments about insufficient food at lunch times.

Young people are encouraged to be involved in preparing and cooking food. Each of the four residential units has a small kitchen, where young people can prepare snacks and drinks. A separate cookery room is also available for young people to plan and prepare dishes as part of the school curriculum.

The home offers a wide range of health services. All young people have a health assessment within 24 hours of their admission. Individual health care plans are formulated following the assessment.

The health plans for young people are similar in content and do not show what contribution is to be made by care staff. For example, how care staff will facilitate improved personal hygiene or promote healthy eating for individual young people.

Whilst medical and health information on young people available at the time of admission is often reported to be sparse, records show nursing staff are proactive in gaining relevant information from parents, carers and previous health care professionals. They also plan to send out a leaflet to parents and carers outlining the health services available to the young people.

Nursing staff visit the four living units each weekday morning to meet with care staff and young people to respond to any concerns. They work in close partnership with other health professionals to provide a coordinated service to young people.

Records show health education is promoted. Relevant issues are discussed with young people in their individual key working sessions and as part of their education curriculum. However, the frequency and recording of key working sessions varies between the residential units. Sessions take place on a two weekly basis in some units but are not so regular in other units.

Discussions with young people can be related to items in their health plan. However, not all sessions are signed or dated by staff or the young person.

A health discharge summary is compiled for each young person. Relevant health agencies are notified of arrangements for the discharge of each young person, to try to ensure continuity in the services they receive.

Arrangements for young people to receive a range of health services on-site are embedded in practice and are well organised. An optician and dentist visit the home regularly. They also provide an emergency service.

Professional advisors support young people with drug and alcohol related problems. The home has a contract with a local adolescent mental health facility which is responsive to the diverse needs of the young people.

Young people are assessed at the point of admission using information provided by the placing agency and interviews with the young person. A risk assessment is prepared to address any identified risk of suicide or self-harm.

There are clear strategies in place to address any young person assessed as presenting a high risk of self-harming behaviour. The centre has reviewed the recording of self-harming behaviour from young people and further guidance has been provided to the staff team.

All young people receive a full mental health assessment within ten days of admission. A full-time mental health worker completes the assessment.

The worker also carries out direct work with young people and advises staff about

positive intervention strategies for individual young people. They are supported by a community psychiatric nurse who provides two sessions per week to young people.

A consultant in child and adolescent psychiatry coordinates the mental health service. The consultant attends a weekly professionals meeting to review the health care needs of individual young people.

Systems for auditing and reviewing health care provision within the home are effective in highlighting gaps or delay in the delivery of health services to young people.

The homes' health care action plan for 2007-2008 contains further evidence of the priority given to ensuring all young people continue to receive a quality service. Health professionals provide good support to care staff.

Working relationships between care staff and health professionals are positive and there is a coordinated approach to addressing the health needs of the young people.

Arrangements for the storage and disposal of medication on each unit are good. Each unit has a lockable cabinet sited in the staff office.

Care staff who administer medication complete training beforehand in the safe handling of medicines. Trained persons include all members of the waking night staff team. This concurs with good practice. Nursing staff also assess the practice of care staff in this area.

Prescribed medication is administered from pre-packed dosage cards. Record keeping in this respect has improved. A check of the medication system in one of the units shows accurate records are maintained. The administering and disposal of controlled medication is closely monitored and managed by nursing staff.

A previous recommendation that consent be gained from parents for the administration of non-prescription medicines has been met. In a few cases, parents or carers have not completed the forms and the signature of the local doctor has been gained instead.

Protecting children from harm or neglect and helping them stay safe

The provision is good.

Young people's privacy is respected by staff during the daily routines. Young people still wear cordless dressing gowns in the evening. Staff report that they now include tapes sewn into the garment to preserve the dignity of the young people.

The attitude of members of staff towards the young people is positive, friendly and generally relaxed. The staff try to encourage and persuade young people to comply rather than compel them wherever possible.

The centre has an explicit written complaints procedure that is generally known to staff and young people. Young people may complain to staff or through the advocate from the National Youth Advocacy Service (NYAS). There is currently no other internal means for young people to complain.

Complaints on each unit within the centre are recorded in a complaints book on that unit. The unit manager is responsible for making sure the complaint is addressed.

Records of the investigations and outcomes are included in the unit complaints books. The investigation records are sometimes lengthy and the complaints books have notes and reports stapled inside them. This makes some of them unwieldy and difficult to use.

The complaints procedures are included in the centre's Statement of Purpose and information provided to young people at admission. Most young people spoken with know how to complain and are generally satisfied that their complaint would be taken seriously.

A young person recently admitted they could not remember what the complaints procedure was. They had been told by staff and given an admission pack with complaints information included in it, but they had difficulty reading. The complaints procedures are not yet available to young people with limited literacy or communication skills.

Records confirm comments by staff and young people that complaints are taken seriously and addressed within appropriate timescales wherever possible. There is a commitment within the centre to ensure that young people are listened to and their concerns addressed as far and as quickly as possible.

The quality assurance coordinator seeks to record and collate complaints centrally, although they acknowledge that the records are inexact and this work needs to be developed.

Several complaints records identify child protection issues to be addressed with the local safeguarding children's team. These were not all found in the child protection records at the centre.

The centre has revised and introduced child protection procedures that reflect the Durham Local Safeguarding Children's Board procedures. These were revised and updated in 2007 and reflect 'Working together to safeguard children' (2006).

The manager says that staff receive training in child protection and refresher training at least every three years. The centre's action plan shows that refresher training in child protection was offered to staff in October 2006 and revised child protection training was offered to staff and managers in February 2007.

The child protection procedures are easily accessible within the centre and available on line. Staff spoken with are familiar with them and confident that they know what

actions to take if they see or are made aware of any suspicion of abuse of young people.

There is clear evidence of action being taken quickly to protect young people when suspicions of abuse, alleged inappropriate behaviour by staff or historical abuse arise. This is reflected by discussions with managers, staff members and the child protection records seen at the centre.

However, the child protection records are not sufficiently well maintained. There are loose letters and notes on the file that are not attached to report. Child protection referrals identified in the complaints records were not all included on the child protection files. The manager and quality assurance officer agreed that the recording of child protection work needs to be improved.

The last inspection in November 2006, recommended that young people be reminded that they might seek medical support if they had been restrained and felt they had been hurt. The manager says that young people should be advised by staff to have a medical examination if they had been hurt in a restraint.

A unit manager says that nursing staff say that they cannot become involved in offering first aid to young people following a restraint, in case it compromises them in any future child protection proceedings.

This apparently results in the duty manager offering first line first aid support as a certified first aid trained person. This view is not supported by a nurse seen, who says that they will only decline to become involved after a restraint, if child protection procedures have already been invoked. The manager agrees with inspectors that this confusion must be resolved.

The centre has a clear and explicit dealing with bullying policy which is known to staff and young people. Commendably, Aycliffe has nominated a member of staff to lead on bullying. They have engaged with staff and young people to define bullying and to revise the anti-bullying strategies within the centre.

An anti-bullying strategy which includes individual work and an anti-bullying work book has been introduced. The anti-bullying service is accredited with Durham county council.

Young people who bully will be asked to engage in individual work to improve their insight and address their behaviour. Young people spoken with say that bullying is not tolerated and the staff challenge any bullying immediately.

There are very clear procedures to be followed in the event of any young person being absent without authority from the centre. No young people have absconded from within the secure perimeters at Aycliffe.

The centre has explicit procedures to advise managers and staff about the duty to notify appropriate agencies in certain cases. The manager says that the transition to

Ofsted has resulted in confusion about notifications, which has resulted in some notifications not being forwarded appropriately.

The centre has introduced a new form to manage critical incidents, which includes an action box for key individuals. The manager and quality assurance officer have agreed to include notifications on the revised critical incident form.

The centre's new critical incident report forms include sections for the young people involved to make their own written submission.

The staff teams use positive professional relationships with young people to encourage young people to comply with behavioural expectations.

Relationships between staff and young people throughout most of the centre are presented as relaxed and friendly. Some young people on one unit were presenting challenging behaviour, which the staff tried to address calmly and appropriately.

The centre is implementing the 'Behaviour for Life' behaviour modification and incentive scheme to encourage and support young people to engage positively with staff. This points based system is based on individual work with young people.

Some young people who have not responded positively in previous placements have made very good progress with 'Behaviour for Life'.

The centre are aware that the system is still developing and there are young people who have not engaged with it fully or positively as yet. The application is under routine review and modifications are being introduced to improve it.

The 'Behaviour for Life' system was under review at the time of the inspection and will be reviewed again in late September. Managers and staff are optimistic that the implementation of 'Behaviour for Life' will reduce the use of single separation and restraint at Aycliffe.

The centre's complaints and compliments books include a number of cards and notes of appreciation from young people, their families and placing agencies.

A survey of parents of young people placed at the centre took place in July and August. The survey results were collated and included in a 'Quality newsletter'. This is a pamphlet produced by the quality assurance officer. It records that parents and carers of all young people placed at Aycliffe in the 12 months prior to the survey, were sent questionnaires.

The results included are highly complimentary and 100% of parents say Aycliffe is a safe place for their child.

The staff team at Aycliffe are trained in 'Protecting Rights in the Care Environment' (PRICE) methods of restraining children. All the care team were trained and receive refresher training every six to nine months.

Information provided by the centre suggests that the number of restraints being used have fallen significantly in the last two years, for the periods January to July. Inspection of the data confirms this.

Information provided by the centre showed a gradual rise in the use of single separations since January 2007 until the end of July 2007. The quality assurance officer says that the overall trend since November 2005 is downwards and that single separations are now carefully monitored and evaluated.

The single separation record that staff complete is very detailed and includes information about the episodes when young people are separated and whether the door is locked or unlocked. Staff also record any use of single separation on a critical incident form which has been modified to make it easier to use.

The quality assurance officer checks every day and visits each unit to monitor the incidence and recording of single separations. Elective separation is recorded. Single separation is now well monitored.

An advocate from NYAS said that they are very happy with the support and cooperation given by staff at the centre. They are always prepared to listen to any concerns raised on behalf of young people and to try and resolve them.

The secure service forms part of a large site, which includes other county council services. The buildings within the secure perimeters are ageing and considerable investment is required to maintain standards, including safety and security systems.

The county council has continued to invest in the building. Bids have been made to the Department for Children, Schools and Families (DCSF) for capital funding to improve the facilities within the secure establishment.

The education provision has recently been improved with a new extension, attached to part of the old facility. This has provided a range of new classrooms and other facilities that will enhance curriculum delivery.

The secure fence is being extended to provide additional external garden and play areas. Staff will also have access to a workshop from which they can provide vocational training for the young people. The young people's bathrooms and toilets have also been improved.

A number of staff, including those working during night time periods, said they are concerned about the management of young people in the bedrooms in Royston house.

A recommendation was made in the report of the last licence approval inspection that managers address the problems with the viewing panels in the young people's bedrooms.

Staff have reported that they could not see young people clearly when they were on their beds. Some remedial action has been taken, but staff say this has not fully resolved the problem.

Staff also report some issues with the emergency call system on this unit.

The centre has closed circuit television (CCTV) operating across parts of the campus. The management have previously taken the view that their installation on the bedroom corridors of the four units is inappropriately intrusive.

However, there is an increasing awareness that CCTV cameras sited on these corridors would provide evidence in the event of any concerns, about restraints or incidents occurring in these areas.

Staff report that there are continuing problems with the personal alarms they carry when on duty. The manager says that there have been problems with the alarms in the past and the engineers have attended to them. The manager agreed to review the reliability of the alarms once more.

Staff are aware of the importance of maintaining a secure and safe environment. A range of good safety systems are in place, with procedures for checking their effectiveness. Managers consistently monitor practice in this respect.

Fire drills and checks are carried out regularly and records kept. These are checked by the managers and the appointed visitors who comment on compliance in their monthly reports.

The centre has a thorough recruitment and selection procedure for new staff which conforms to the expectations of the Warner Report 'Choosing with Care'. Commendably, the recruitment process involves participation from young people.

Managers ensure that the Disqualification for Caring for Children Regulations (DCCR) 2002, are now fully complied with.

Personnel files examined during the inspection contain all the information required by regulation and recognised good practice. However, copies of the interview notes or scoring grades are not held on staff and are not retained on the files.

Helping children achieve well and enjoy what they do

The provision is satisfactory.

The inspection of 'enjoying and achieving' was carried out in two parts. Leisure and recreational activities were assessed by a secure estate inspector and HMI later inspected educational provision.

The inspection of leisure and recreational activities found that young people's individual hobbies and interests are not recorded in their files, although daily records

show they have opportunities to engage in a range of recreational activities on-site.

However, there is variation between the units in the use of the facilities available. Records show some units offer a more structured and imaginative programme of activities during the evenings and at weekends.

Young people say some staff are more enthusiastic than others. This can determine what activities are offered.

Swimming is a favourite activity with many of the young people. Whilst the activity is risk assessed and adequate staffing is maintained during the sessions, it is unclear whether staff are trained in compliance with the county council policy.

Young people can freely access a wide range of books, games and age appropriate DVDs in each of the units. They are also able to use computers in the education section with staff supervision. The extension of the education facility includes additional outdoor space that is currently being fenced off. It is anticipated the space will be used to offer horticultural activities to the young people.

The home continues to review how it can improve this aspect of the service. An audit and analysis of staff skills and interests is planned to help identify different activities which they may be able to offer to young people.

HMI reports that overall, satisfactory progress has been made in meeting the five recommendations from the previous inspection report.

The acting head teacher, acting deputy head teacher and the education team have worked extremely hard to maintain stability during a particularly challenging period. This involved the closure of an open school on the same site as Aycliffe Young People's Centre. This resulted in restructure, redundancies and redeployment of teachers and managers from both schools.

In addition, the completion and move into the new accommodation caused significant disruption to the timetable. This process was well managed and the new building is now providing high quality classrooms and specialist areas.

The acting head teacher has developed systems for self-evaluation and observation of teaching and supervision of staff are now carried out per term. However, not all staff are involved in the self-evaluation process.

A comprehensive review of the behaviour management system has been carried out in consultation with education and care staff to ensure that there is a more coherent approach across the unit. Effective support has been provided by the local authority from the School Improvement Partner (SIP) and the literacy consultant.

Good progress has been made in appointing a suitably experienced Special Educational Needs Coordinator (SENCo). A well qualified and experienced SENCo had been in post for around three months at the time of the visit.

Provision for young people with special education needs has been developed and will begin to be delivered when the furnishing of the library and resource area is completed. Links with external agencies have been developed to provide access to speech and language therapy for those young people who need it.

Satisfactory progress has been made to urgently develop and implement a basic skills curriculum.

A literacy working group has been established that has developed plans for improving young people's levels of literacy across the curriculum. For example, weekly literacy targets are now displayed in all classrooms to ensure a more consistent approach to developing young people's skills.

However, the group's plans are not integrated for the literacy curriculum into whole school improvement planning processes. The local authority literacy consultant is providing effective support to help the group to improve the quality of teaching and learning in this area.

There has been limited progress in establishing arrangements to identify and share good practice within the unit. The acting head teacher and the head of the unit have attended national conferences and visited similar schools in other parts of the country to help ensure that the provision meets national guidelines.

The literacy group is beginning to provide a forum for teachers to share strategies for teaching and learning. However, there is room for similar mechanisms to be put in place in other areas of the curriculum.

The last inspection also included a recommendation to improve procedures for self-evaluation, appraisal and performance management to reflect national developments.

The acting head teacher, supported by the SIP, has made satisfactory progress in establishing procedures for self-evaluation. The report produced for this visit, provides a good basis upon which the unit can begin to develop a school improvement plan which covers all aspects of the provision.

Observation of teaching and staff supervision are carried out per term for all staff. However, the outcomes from these processes are not used effectively to inform self-evaluation and to improve outcomes for young people.

Good progress has been made to implement plans for the use of the new accommodation to respond to issues raised at the last inspection in 2003.

The new accommodation completed in May 2007, provides high quality classrooms and specialist facilities for science, performing arts, hairdressing, art and design. A large and welcoming library and resource area was in the final stages of completion at the time of the visit.

The SIP is working with the acting head teacher to develop and implement plans to use outdoor areas and a classroom to develop vocational provision for horticulture and motor vehicles.

The HMI made some additional recommendations and said that the senior staffing structure for education needs to be agreed and implemented as a matter of urgency. Both the head teacher and the deputy have been in an 'acting' role for an extended period of time.

The roles and responsibilities of the teaching and learning assistants are not reviewed and evaluated to ensure that they are used effectively to support learning.

The timetable is not reviewed and evaluated in consultation with all education staff, to make best use of the new accommodation, to create stability in teaching groups, to reduce the movement of young people between lessons, to integrate the curriculum for young people with special education needs and to take account of planned developments in vocational provision.

Helping children make a positive contribution

The provision is good.

Placement and planning information is available on the majority of young person's files. On files where this is not available, staff members are expected to request any missing data from the appropriate placing authority. An evidential record of the request is not always kept.

'Asset' and LAC documentation is used to inform the completion of the assessed needs of the particular individual and includes details on safeguarding, educational needs, health and contact arrangements.

Information is integrated into the plan from all available sources, including any educational statements and input from any previous placements.

Plans of care are audited as part of a case file quality check, with up to eight files being monitored monthly. No written record is held of these checks on a file audit checklist.

An initial care planning meeting is planned to take place within 24 hours of a young person's arrival at the home, with involvement from all disciplines within the centre.

A key worker system is utilised and the plans of care are monitored by the staff members working within the house unit, where the young person is placed.

Key working teams also carry out one to one sessions with a young person to offer individual support and guidance and the outcomes of these discussions are recorded. Many staff have undergone a short training session in understanding the key worker

role and attendance is planned for those who still need to cover this area.

Should a young person express a desire to change their key worker, they are able to request this and a system is in place to allow their wishes to be taken into account when any request is discussed.

Support is provided for young people who may have learning or communication difficulties. The content of their plan is openly shared with the young people and they are able to make some active contributions in regard to their future.

Reviews of plans and statutory care reviews are held and there is opportunity for young people to contribute either verbally or by use of a consultation form. Care plans are also monitored internally every two weeks through a multi-disciplinary team meeting.

The manager reports that a written prompt has been added to the duty manager checklist to remind them to request LAC documentation for young people placed on remand.

Copies and results of reviews which have taken place, are held on individual young person's files with any actions required clearly identified, along with the expectation of who is to carry this out.

Information contained in plans of care does not always allow for contingency in the event of parts of the plan that have not been achieved. On occasions plans of care set out, may not be attainable or initial placement information may not be realistic.

There are good and workable contact arrangements in the home for young people, enabling them to maintain relationships with families and friends. Contact arrangements are agreed upon admission and any restrictions on contact are clearly recorded.

Young people may receive visits, make telephone calls and write and send letters and cards. Visits are carried out under supervision where this is assessed as necessary. A record is held of all visits and contacts made to and from a young person. Written guidance for staff is available in relation to maintaining contact.

There are written procedures available relating to the admission and discharge of young people. Information is made available to young people about their stay at the home and what expectations are to be made of them.

Some young people report that, although they are given information verbally and also some in written form, they might quickly forget it. This is particularly true of young people with limited reading skills. There are currently no other means available to ensure the young people have this information and are able to retain it.

Young people are able to bring personal possessions with them to the home subject to any assessed or standard restrictions.

Young people's opinions in relation to the running of the home are sought. An 'investors in children' group meets monthly and young people's representatives from the units attend to discuss any issues which have been made known to them from their peers. The representatives are able to make requests for changes and comment on the day to day running of the home.

Individual house meetings are planned to take place however, the frequency of these is variable and minutes are not always compiled when they have occurred.

The effectiveness of the recently introduced incentive and reward scheme is to be reviewed shortly. Young people are to be involved in review of the implantation of this programme.

The centre's quality assurance coordinator, recently carried out a survey of the opinions of parents of all young people placed at the centre within a 12 month period. The findings are included in a newsletter which is distributed across the centre.

The home uses the services of the NYAS, who visit the home and act as advocates for the young people if required. Young people have the opportunity to participate in this process by sitting on interview panels for NYAS when they have recruited volunteers for the service.

Some positive professional relationships are apparent in the home between young people and staff. A number of young people have demonstrated that they feel safe and are not afraid to approach staff members.

Where an individual young person's needs conflict with the needs of a group, staff are able to communicate these issues to young people in a manner which they understand.

Negotiation with young people occurs over many areas of daily living, whilst still ensuring appropriate control and boundaries remain in place to ensure the safety and welfare of all. Staff members receive training in positive care and control of young people.

Some staff movement between houses has recently taken place and there is awareness that this is currently having an impact on the structure and ethos of the houses, and will continue to do so until staff members become established in their new placement.

Achieving economic wellbeing

The provision is good.

There is ongoing work taking place in the centre's school to promote vocational activities that might lead to an appropriate qualification.

The head of education says that the school were planning to develop opportunities for young people to work with motor bike engines. When the planned extension to the perimeter fence is completed, the young people will have the opportunity to ride trial bikes within the secure perimeters.

There are also plans to introduce instruction in 'trowel skills'. This might involve an introduction to brick laying, flag laying and possibly plastering. The head teacher says they hope to offer qualifications to young people who participate successfully. Young people also have the opportunity to gain skills in hairdressing and beauty therapy.

The centre have a resettlement officer who was previously a 'connexions' worker. Files include letters from the resettlement worker to local 'connexions' and Youth Offending Teams (YOT).

Files seen, include a resettlement plan to prepare young people to re-integrate into their community and ensure that there were appropriate arrangements made for them. None of these plans were completed on the files inspected.

Young people may involve themselves in some domestic tasks on the residential units. However, there are no dedicated activities designed to give the young people appropriate life skills included in the routines or activities within the centre.

Young people receive a clothing allowance from the centre. They are allowed to choose their clothes from the internet and staff then purchase the selected clothes for them. Young people spoken with were satisfied that staff try to get the clothes that they want for them.

Organisation

The organisation is good.

The centre has a detailed Statement of Purpose. However, this has not been updated to include current information.

Similarly, an admissions pack is available for young people which includes a range of useful information. However, the contents of this pack are not up to date. The Registered Manager says that this will be reviewed and updated.

The management team comprises of the secure services manager, two deputies and four team leaders. The team leaders are responsible for the management of each of the living units. Each is supported by an assistant team leader.

The planned restructuring and review of the roles and responsibilities of the senior and middle management teams has not been fully implemented. Managers are continuing to review roles. They acknowledge that further consideration is needed to ensure they can meet the responsibilities of their positions.

All managers have had an opportunity to participate in training and career counselling with a human relations consultancy service. This is to be commended. However, this process has taken some considerable time to influence change.

The redeployment of another senior manager from the secure unit to lead on support services across the site, has also had an impact on the secure services manager's plans to move forward with changes to strategic and operational management roles.

The two care and programmes managers each have management oversight of two of the living units. They supervise and support the unit team managers and deputise in the absence of the secure services manager.

The senior management team are considering allocating the overall operational management responsibilities to one of the two deputy managers.

One senior manager would have an over arching responsibility for care services. This will provide a framework to ensure the quality of care to young people is consistently applied across all four residential houses.

Managers interviewed who have attended the management training provided say this has had a very positive impact on their professional development.

The appointed visitors carry out the statutory visits required by 'Regulation 33' as required each month. There is evidence to confirm that they check relevant records and comment on practice. Elected members are also allocated to visit the secure unit periodically and report on their visit.

The Registered Manager introduced the post of quality assurance coordinator almost two years ago. The post holder was formerly a member of the middle management team. The manager reports that this has resulted in continuing improvement in quality assurance and performance management systems across the centre.

The quality assurance consultant gathers and presents information in a format that is useful to the operational management team. Recording practice and procedures are under routine review to minimise duplication and to make them more efficient and easier to use.

The quality assurance coordinator is also responsible for gathering evidence for Key Performance Indicators (KPI) for the YJB on a monthly basis and at intervals throughout the financial year.

They also collect the same data for young people placed on welfare grounds under Section 25, Children Act 1989. The two sets of data form a comprehensive picture of the incidents and issues the secure unit address.

Data collected by the quality assurance coordinator over the last two years reflects an increase in the annual population. The young people are also being placed for

shorter periods.

Managers also report an increase in the number of young people remanded to the secure unit. They believe that this has an impact on the ability of the staff to engage with the young people and to help them settle into group living.

Managers meet once a month to review all quality assurance information. Detailed reports submitted by the quality assurance coordinator are carefully reviewed.

Whilst there is some evidence of the quality checking and performance management information being used to inform practice development and improvement, the quality assurance coordinator acknowledges that this could be further developed.

The quality assurance coordinator confirms that a substantial amount of information is gathered through quality checking and the gathering of statistical data. However, the administrative and Information Technology (IT) systems are not yet equipped to provide the levels of analysis to meet the centre's needs as an evolving and learning organisation.

Managers are aware of the benefit of gathering data and utilising any lessons to inform practice and improve service delivery. However, it is a very time consuming process.

Aycliffe secure unit will be one of the first children's homes in the country to introduce the YJB's 'Wiring Up' programme for electronic recording for case management and incident recording and reporting.

The quality assurance coordinator has taken the lead on a review of the policies and procedural guidance available to staff in the secure setting. They report that the policies and procedures have been reviewed and now reflect the county council's policy guidance.

Copies of the revised manuals are available in the residential houses. However, the practical guidance, or workplace instruction manual has not yet been completed.

Managers are aware that the practical application of some of the county's policies and procedures within the secure setting require further explanation for staff.

Managers were advised during the last inspection to produce a practice manual for staff working during night time periods. This has not been achieved.

A review has been undertaken of the range of records and reporting systems across the centre and there has been some improvement. The quality assurance coordinator has revised some of the recording procedures in an effort to prevent duplication.

However, care staff continue to record the same information in a number of different places. For example, the daily log record maintained in each living unit continues to include confidential information about individual young people. The manager

recognises that this is inappropriate, as the record may become publicly accessible.

Staff use the daily log record as a communication book. They continue to use the daily log to pass on information and highlight issues or changes for individual young people that should be recorded in their individual case file.

Staff also often repeat considerable details in the daily log book, which they have already written on a Critical Incident Form (CIF). This is unnecessary duplication. The daily log should be used to sign-post staff to other recordings and provide a cross referencing facility to relevant documents, as appropriate.

The majority of staff spoken with during the inspection criticised the amount of paperwork they have to deal with. They said the time taken to record incidents and other documents was time away from the young people.

The post of learning and development coordinator (LD coordinator), which had been vacant for over a year, has now been filled. The LD coordinator is implementing the county council's commitment to ensure staff obtain their NVQ Level 3 in working with children and young people. There has been considerable progress in this respect.

During the last inspection, it was reported that only 22.5% of staff had obtained their NVQ, this has now increased to 71%. The training coordinator provided evidence to show that an additional 27% of staff are currently working towards their qualification.

Only two permanent staff have not completed or are currently registered to achieve the NVQ. They are both seeking to ascertain if other professional qualifications they hold are considered to be equivalent to an NVQ Level 3. This is being investigated on their behalf.

The next group of staff to commence this training are 14 sessional staff, employed to work as and when needed and paid an hourly rate.

The secure services manager has set up a learning support panel. The aim is to support and monitor staff to ensure they complete the NVQ training within 18 months of registration. Managers say that staff receive whatever support necessary to ensure they can successfully complete the modules expected.

All new staff, including sessional staff, participate in a detailed induction training programme over a period of three weeks. This is commendable practice.

However, examination of the most recent three week induction programme showed it had not included training in basic child protection. It did not include a session on dealing with young people's complaints, or details about how to deal with suicide and self-harm (SASH) attempts.

The secure services manager say they would expect these areas to be routinely covered during induction training. Training in PRICE, the model of physical

intervention and behaviour management, has been increased from four to five days.

The behaviour management aspect of the training has been increased and is linked to the new incentive system. Staff receive detailed training in health, safety and security matters prior to them working directly with the young people.

Each new staff member is expected to complete a foundation training workbook over a six month period, linked to their probation period. The foundation training is an on-site learning and development process. Staff are expected to demonstrate an understanding of policies and procedures, which are countersigned by their supervisor.

The focus of training for the staff team during recent months has been linked to understanding and implementing the new behaviour management system 'Behaviour for Life'. Four senior staff are being trained as trainers in Restorative Justice (RJ). Once they have concluded their nine days of training, they will cascade the training to all care staff.

The training strategy for the coming months, includes all staff being trained in pro-social modelling. The aim is to ensure staff fully understand the impact of modelling positive behaviour with young people. Staff will be expected to consistently help young people understand the impact of their behaviour and attitudes to others.

The staff training strategy does not include a focus on more advanced or specialist strategies on dealing with potential child protection. The local safeguarding service within the county council provides a wide range of training in child protection however, the take up of these courses is limited at Aycliffe.

Staff in the residential houses have an opportunity for up to three away days each year to review practice as a team and plan developments. This is commendable practice.

Managers clearly understand the importance of staff retention and supporting staff in their difficult roles with young people. Efforts are made to ensure that a range of welfare systems are in place to support staff, including providing counselling and other services.

However, previous inspection reports highlight concerns about staff supervision not meeting NMS. Inspectors found that there have been some improvements in this respect. A number of staff spoken with confirmed that they are now receiving formal supervision more regularly.

The statistics provided by the quality assurance coordinator confirm that supervisors are not consistently managing to provide an opportunity for supervision each month.

The evidence provided indicates an improvement at the end of 2006 and beginning of 2007, when the quality assurance coordinator said they and another senior manager were more consistently monitoring frequency of supervision.

The statistics show that one residential unit achieved 100% supervision for the month of May, but that was the only occasion in any of the living units. Once again, there is evidence of some good quality supervision records and new staff say they feel supported during their probationary period.

Inspectors were told that when supervisors are not available, for example when on annual leave or sickness absence, their supervisory commitments are fulfilled by other colleagues.

There is a good gender and age balance within the staff team. Managers have made efforts to increase the balance of staff from minority ethnic backgrounds within the team, but have not been successful in this respect. Managers confirm that they intend to keep this firmly on the agenda.

Staff sickness is carefully monitored and addressed by managers. Managers shared statistics that reflect a reduction in sickness absence in one residential unit of 1.5%. However, another unit had a 9.6% sickness level. The general trend is for decreasing levels of sickness absence.

The county council's sickness management procedure is being implemented and managers confirmed some staff have been assisted in moving on from the secure setting, if necessary and appropriate.

Managers shared information that shows the turnover of staff has been slightly higher during the past year, although they did not share the figures. There are seven care staff vacancies at the current time. A recent recruitment campaign has resulted in a good response.

A number of applications have also been received recently to increase the support or sessional staff pool. A good use is made of support staff to cover vacant posts.

What must be done to secure future 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 Provider(s) must comply with the given timescales.

Std.	Action	Due date
26	ensure that staff on Royston unit are able to supervise young people safely when they are in their bedrooms (Regulation 31)	07/03/2007
26	ensure that the personal alarms used by staff are consistently reliable (Regulation 23)	07/12/2007

26	ensure that young people on Royston unit have a reliable means of alerting staff if they need attention whilst in their bedrooms (Regulation 23)	07/12/2007
30	ensure that the number of staff deployed on the residential units does not fall below the minimum agreed level (Regulation 25)	07/12/2007
17	ensure that child protection records are maintained appropriately (Regulation 16)	07/12/2007
35	maintain the daily log record to reflect events of the day, but avoid including confidential information about individual young people (Regulation 28.2)	07/12/2007
28	ensure all staff receive formal supervision as described in the National Minimum Standards for children's homes (Regulation 27).	07/12/2007

Recommendations

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

- consider the installation of cameras to the bedroom corridors on the residential units (NMS 26)
- amend the Critical Incident form to include 'notifications' in the manager's advsory text box (NMS 20)
- clarify the role of nursing staff to offer medical assistance or first aid to young people following episodes of restraint (NMS 22)
- consider alternative means for young people to use the internal complaints procedures without the need for access to members of staff (NMS 16)
- consider alternative means of advising young people being admitted who may have limited literary or communication skills about the expectations of Aycliffe (NMS 5)
- review resources allocated to quality assurance within the centre to ensure they remain adequate (NMS 33)
- ensure that all staff, including night care officers, have easy access to a 'practice manual' or on site handbook (NMS 28)
- ensure that staff receive appropriate training in dealing with the range of potential child protection or safeguarding matters they may need to deal with in a secure setting (NMS 17)
- record evidence that any missing information on case files from placing authorities has been requested (NMS 35)
- consider the provision of a case file audit sheet for each young persons file (NMS 35)
- consider keeping a record of the minutes of house meetings with young people (NMS 15)
- ensure that the statement of pupose and the information pack for young people are reviewed and updated to reflect changes and include current information (NMS 1)
- consideration should be given to reviewing life skills work and training towards

independent living for young people on the residential units to see how it might be enhanced (NMS 6)

- ensure health plans for young people include the contribution to be made by care staff (NMS 12)
- consideration should be given to young people being included in the food and nutrition action group meetings(NMS 10)
- ensure young people are aware of the vegetarian option in the menu each day (NMS 10)
- ensure that the senior staffing structure for education is agreed and implemented as a matter of urgency(NMS 14)
- review and evaluate the roles and responsibilities of the teaching and learning assistants to ensure that they are used effectively to support learning (NMS 14)
- review and evaluate the timetable in consultation with all education staff to make best use of the new accommodation; to create stability in teaching groups; to reduce the movement of young people between lessons; to integrate the curriculum for young people with special education needs; and to take account of planned developments in vocational provision (NMS 14).