

SC060034

Registered provider: Break

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

A registered charity owns this home, which provides short breaks for up to six children at any one time. The children who use the service have a learning disability and/or a social and/or communication disability. The children may also have associated physical disabilities.

Inspection dates: 24 to 25 May 2017

Overall experiences and progress of children and young people, taking into account **good**

How well children and young people are helped and protected **good**

The effectiveness of leaders and managers **good**

The children's home provides effective services that meet the requirements for good.

Date of last inspection: 22 March 2017

Overall judgement at last inspection: Improved effectiveness

Enforcement action since last inspection

None

Key findings from this inspection

This children's home is good because:

- The children and their families benefit from a child-centred and flexible service.
- There are strong and effective relationships with external professionals.
- The staff, leaders and managers are active contributors to plans designed to

keep children safe.

- The children enjoy a range of activities that they would not otherwise experience.
- The shortfalls identified at this inspection have had no impact on the children using the service.

The children's home's areas for development:

- The staff, leaders and managers are not consistently following the organisation's policies and procedures in relation to medication records and responding to concerns.
- There is a lack of knowledge regarding the availability of advocacy services in the local area.
- A number of staff have yet to access learning and development opportunities relating to safeguarding children who have disabilities.

Recent inspection history

Inspection date	Inspection type	Inspection judgement
22/03/2017	Interim	Improved effectiveness
24/11/2016	Full	Requires improvement
21/03/2016	Interim	Sustained effectiveness
10/11/2015	Full	Good

What does the children's home need to do to improve?

Statutory requirements

This section sets out the actions that the registered person(s) must take to meet the Care Standards Act 2000, Children's Homes (England) Regulations 2015 and the 'Guide to the children's homes regulations including the quality standards'. The registered person(s) must comply within the given timescales.

Requirement	Due date
The protection of children standard is that children are protected from harm and enabled to keep themselves safe. In particular, the standard in paragraph (1) requires the registered person to ensure— that staff are familiar with, and act in accordance with, the home's child protection policies. (Regulation 12(1)(2)(a)(vii)) In particular, ensure that managers follow the home's procedures in reporting incidents when children raise concerns following physical intervention.	16/06/2017
The registered person must make arrangements for the handling, recording, safekeeping, safe administration and disposal of medicines received into the children's home. (Regulation 23(1)) This is with particular regard to ensuring that records are kept relating to emergency medication taken out of the home during trips out, as required by the home's own policy.	16/06/2017

Recommendations

- Ensure that leaders, managers and staff are aware of the advocacy support that can be called on to support children placed in the home. ('Guide to the children's homes regulations including the quality standards', page 23, paragraph 4.18)
- Children must feel safe and be safe. ('Guide to the children's homes regulations including the quality standards', page 43, paragraph 9.9)

This is with particular regard to ensuring that appropriate environmental checks take place prior to children who have pica using the service.
- Ensure that staff have the knowledge and skills to recognise and be alert to any signs that might indicate a child is in any way at risk of harm. ('Guide to the children's homes regulations including the quality standards', page 43, paragraph 9.12)

In particular, ensure that the staff, who have yet to do so, access professional development in safeguarding children who have disabilities.

Inspection judgements

Overall experiences and progress of children and young people: good

The manager, leaders and the staff have sustained the improvements identified at the interim inspection. The issues that have been identified during this inspection have not had an impact on the children's safety or well-being, although they have the potential to do so if they remain unchecked.

The children and their families benefit from flexible, child-centred short breaks. The children have positive relationships with the staff. The staff know the children well. A teacher said about a child, 'They [staff] definitely know him, they know him very well.' Parental feedback reinforces this. The staff spend time prior to each shift reading and discussing the children's plans. This enables them to reacquaint themselves with the needs, likes and behaviours of the range of children who use the service.

Although this is a short-break service and the focus is on providing enjoyable activities, the staff are ambitious for the children. The staff encourage the children to develop their independence skills. They liaise with schools, families and the children themselves to identify goals. Parents say that their children make tangible progress. One parent said about their child, 'He has made loads of progress. They [the children] have their own plans and he achieves things. He has been toilet trained, mainly because of them.'

The children benefit from access to a range of activities which they would not otherwise be able to participate in. Parents say that the staff have a can-do approach, taking considered risks in relation to new activities. One parent said, 'The things that they do with [child], they see no barriers. He went on the train. They took him to the pantomime. He accesses a lot more. They [staff] try it with him first and then it gives me the confidence to try it at home.'

The children's health needs are met. However, the process for managing emergency medication is not strong enough. This includes crucial medication linked to severe allergies. Although staff are aware of the need to take the children's medication with them on trips out, there is no record to show that they do. This contravenes the home's own guidance and does not provide sufficient opportunity for monitoring and oversight.

The staff are aware of the children's communication needs. Some staff have specialist training in relation to some communication systems. However, there is limited understanding regarding the availability of advocacy support for the children. Many of the children do not use speech to communicate. For many, their cognitive abilities mean that they are not in a position to engage an advocate themselves and would be reliant on others to do so. This gap in staff's knowledge means that leaders, managers and the staff are unable to identify local resources that may benefit the children in their care.

How well children and young people are helped and protected: good

Parents and professionals speak with confidence about the children being safe in the home. Communication with placing social workers, schools and families is good. There is effective contact and planning. A social worker said, 'I have no concerns. The children

are safe in [this home]. They [staff] share concerns quickly and appropriately.'

The recruitment process for permanent staff is sufficiently robust. At the last inspection, there remained an issue regarding the level of checks relating to agency staff. Since then, no agency staff have been used. The wider organisation is creating a checklist and process to address the issue. Until this is completed, the service is not using agency staff and is covering shifts using substantive post holders.

The staff complete and regularly update the children's risk assessments. Two of the risk assessments seen during the inspection required some slight editing for greater clarity. The deputy manager ensured that this was completed during the inspection.

The manager, leaders and staff work collaboratively and flexibly when children are subject to child protection plans or experiencing complex mental health crises. A social worker said, 'The manager came to the conference and the core groups. She contributed. They [staff] know him [child] well, they understand his needs. They share concerns quickly and appropriately.' This approach means that children are able to experience a degree of stability during very difficult times in their lives.

Children do not go missing from this home. No children are currently known to be misusing drugs or alcohol. When the staff have concerns regarding potential child sexual exploitation, they work in partnership with safeguarding professionals. A mental health professional said, 'While maintaining [the child] at the centre of practice and managing difficult multi-agency dynamics, they [staff] have always been objective regarding safeguarding. They have clearly shared concerns while putting clear plans in place. They have done this sensitively.' This support has enabled positive relationships with families and professionals without collusion or compromise. As a result, children who would otherwise have been taken into care are able to remain in the care of their families.

There have been very few incidents of physical intervention. Since the interim inspection, only one has taken place. The staff use de-escalation techniques, distraction, and their knowledge of the children to manage unwanted behaviour. A professional commented, '[Two children] came in with very challenging behaviour and the staff have worked incredibly well to manage that in the most proactive way. The staff are very reflective. In my experience, the staff are very skilled in managing behaviour that challenges.' A social worker supported this by saying, 'I can only sing their praises. They have had to take on a difficult young person and adjust their work. They have been extremely supportive in trying to make it work. She [child] is challenging. The staff have not shied away from the challenge.' As a result, the service continues to provide support to children whose behaviour can be complex and challenging for professionals, without routine recourse to physical interventions.

Regular fire tests, fire drills and health and safety tests take place. The children have personal emergency evacuation plans which are routinely updated. Consequently, the environment is generally safe for the children. However, there were drawers in the dining area that contained debris and small leftovers from art and craft activities. These pose a potential risk to children who are compelled to eat non-food items (pica). These drawers were cleared during the inspection.

Discussions with staff across the organisation demonstrate a reflective open approach

regarding practice. Senior managers are known and accessible to staff. The frontline staff are aware of their responsibilities regarding sharing concerns about the safety of children or the conduct of colleagues. However, in one instance, a child has stated that they were hurt during a physical intervention. While this comment was shared with safeguarding professionals, no discussion took place with the designated officer. A similar issue was identified at the last inspection and a requirement raised. This omission, while having no impact on the safety of the child, contravenes the home's own safeguarding procedures.

The effectiveness of leaders and managers: good

A permanent, suitably qualified manager manages the home. She has been in post for ten years and works closely with the deputy manager. Two skilled and experienced senior staff support them. The staff report being led well. The staff spoke of the pride that they have in their work and they say that they enjoy the job.

The management team has an understanding of the needs and experiences of the children. There are sufficient staff in place to meet these needs and enable the children to engage in activities in the local community such as swimming, walks and trips to the fair.

The management team ensures that significant events are notified to Ofsted and that updates are provided. Leaders and managers monitor the quality of the care. They complete monthly reports and submit these to senior managers in the organisation. An independent person visits the service each month. Her visits are of a sufficient duration and provide challenge to the service. This monitoring has the potential to drive further improvement.

The staff receive regular supervision and annual appraisal. They have access to a range of training opportunities. All eligible staff have received generic child protection training, emergency first aid and care of medication, food hygiene and physical intervention training. All eligible staff hold a level 3 diploma, or are working towards one. However, only half of the team have attended training specifically focusing on safeguarding children who have disabilities. This increases the potential for gaps in knowledge regarding the vulnerability of children who have disabilities.

Relationships with families are strong. The families consistently talk with enthusiasm about the quality of the service, the quality of the staff and the impact that this has on their children and their wider family. One parent said, 'They [staff] are brilliant. They have been brilliant for [child]. They have been great for us as a family. He loves it there.'

The service has strong relationships with the local mental health support team and social work teams. Parents say that the staff attend school meetings and contribute to discussions. A school teacher spoke positively about the home's engagement with them. This partnership working ensures that children receive a joined-up approach to meeting their needs.

Information about this inspection

Inspectors have looked closely at the experiences and progress of children and young people. Inspectors considered the quality of work and the difference made to the lives of children and young people. They watched how professional staff work with children and young people and each other and discussed the effectiveness of help and care provided. Wherever possible, they talked to children and young people and their families. In addition, the inspectors have tried to understand what the children's home knows about how well it is performing, how well it is doing and what difference it is making for the children and young people who it is trying to help, protect and look after.

Using the 'Social care common inspection framework', this inspection was carried out under the Care Standards Act 2000 to assess the effectiveness of the service, how it meets the core functions of the service as set out in legislation, and to consider how well it complies with the Children's Homes (England) Regulations 2015 and the 'Guide to the children's homes regulations including the quality standards'.

Children's home details

Unique reference number: SC060034

Provision sub-type: Children's home

Registered provider: Break

Registered provider address: Break, Spar Road, Norwich NR6 6BX

Responsible individual: Hilary Richards

Registered manager: Melanie Julier

Inspector

Ashley Hinson, social care inspector

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