

Inspection report for children's home

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Inspector	Seka Graovac
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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

This children's home is privately owned. It is registered with Ofsted to accommodate up-to-eight children. It offers long-term care, as well as respite care for children and young people with a learning disability, aged between 10 and 17 years.

Overall effectiveness

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

Children, their parents and social workers are positive about the quality of care and the quality of the relationships between staff and children. In the registered manager's absence, the service is satisfactorily managed. Children are safe and have their needs adequately met. Supported by staff, children are making good progress in all aspects of their lives. However, the quality of some paperwork is falling behind an acceptable standard. This has some negative impact on the communication in the home. The identified weak areas in respect of record keeping include care planning, restraints, accidents, medication, children's register; staff qualifications, supervision, appraisal and recruitment; complaints and disciplinary procedures. The overall quality of care children receive is satisfactory.

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, restraint or discipline, a written record is made in a volume kept for the purpose that includes all details as required by legislation (Regulation 17B (3) (4))	20/12/2011
21 (2001)	ensure that any medicine is stored in a secure place and a written record is kept of the administration of any medicine to any child (Regulation 21 (2))	06/12/2011
24 (2001)	review and amend the complaints procedure so that it includes all information as required by legislation (Regulation 24 (2) (4))	29/12/2011
25 (2001)	ensure that staff are suitably qualified (Regulation 25 (1))	21/02/2012
27 (2001)	review and amend a disciplinary procedure so that it includes all information as required by legislation (Regulation 27 (2))	29/12/2011

27 (2001)	ensure that all staff receive appropriate supervision and appraisal (Regulation 27 (4) (a))	21/02/2012
28 (2001)	ensure that children's individual care plans accurately reflect their needs and are kept up to date (Regulation 28 (1))	20/12/2011
29 (2001)	maintain a record in the form of a register in respect of each child accommodated with all information specified by legislation (Regulation 29 (1) Schedule 4.1)	20/12/2011
29 (2001)	maintain a clear record of all accidents occurring in the home, or to children whilst accommodated by the home (Regulation 29 (1) Schedule 4.4)	06/12/2011
37 (2001)	give notice of absence of the registered manager to Ofsted in writing including all details specified by legislation. (Regulation 37 (1) (2) (3) (4) (5))	13/12/2011

Recommendations

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

- make telephone enquiries in respect of each reference provided as a part of the staff recruitment process. (NMS16.1)

Outcomes for children and young people

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

Taking into account the complex needs and learning disabilities of children who live in this home or use its services, children are making good progress in all aspects of their lives. Their health is improving. For example, one child does not need to take their anti-psychotic drugs on a regular basis any longer. Another child's mobility is getting much better. Children's ability to manage their personal hygiene is also improving. Children engage in learning either at the home or at special needs schools. The social workers comment very positively about the children's increased school attendance and the general progress they are making. Children are actively involved in activities at the home and in the community. They benefit from having appropriate contact with family and other people who are important to them. Their social awareness and communication skills are improving. For example, a child who in the past hardly spoke is now more able to engage in simple conversations.

Quality of care

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

Children live in the home that is appropriately maintained. However, sofas covered with plastic material, televisions placed inside wooden boxes and transparent plastic, the lack of mirrors in bathrooms, bare bedrooms and key-padded internal doors give it a somewhat institutional feel.

The home provides a healthy environment. Staff support children to access health services for regular checks or when they need it. However, the home's robust procedure for storage and administration of medication is not always followed in respect of topical medication.

Despite the majority of children having limited understanding and limited or very limited communication skills, staff are committed to providing opportunities for children to express their views. Children are involved in regular monthly residents' meetings and individual key-working sessions. They indicate through Ofsted's pictorial questionnaires that they are listened to. Children and their parents judge the quality of support they receive as generally good. Children benefit from having developed positive and trusting relationships with staff.

Staff are sensitive towards children's needs and able to meet them adequately. However, the home does not utilise the care planning process effectively. For example, two children with very different level of need have exactly the same written care plan. The other weakness is that some care plans developed by the home contain contradictory information about the child. For example, one placement/ care plan states that the child is continent, but also that they are doubly incontinent.

The home's complaints procedure is not comprehensive and therefore, does not contribute fully to the quality assurance of the service. For example, it does not explain how a complaint can be raised against the registered person or how this would be dealt with. Children would need significant help to complain. The home has appropriately and swiftly dealt with the minor complaints that were raised by the parents and social workers.

The home's strategies for supporting and enabling children to engage in education is the strength of the service.

Safeguarding children and young people

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

Children live in a physically safe and appropriately secure environment. Suitably high staffing levels provide the appropriate level of supervision to children and minimise any chances of children going missing. The home works in close partnership with other services to ensure that children are safe and that their welfare is promoted appropriately. Individual care plans clearly identify risks and strategies for enhancing children's safety.

The home promotes children's positive behaviour effectively. Parents and social workers say that the children's behaviour has continued to improve since they started using the service. One child has significantly reduced incidences of challenging behaviour from a previous placement and is hardly ever engaging in challenging behaviour when at this home.

However, the quality of the paperwork is letting the home down. Records of accidents are inconsistently kept and do not always include information about the injuries sustained. This raises concerns whether appropriate action is taken and limits the learning opportunity for the home. Records of physical interventions are also not detailed enough. In some instances, even a description of the measure used is not included. This impacts on communication and makes monitoring more difficult.

Although staff are clear about the requirement to report any safeguarding concerns or suspicions without delay, the home's disciplinary procedure does not explicitly promote this process, as required by legislation. For example, it does not provide that the failure on the part of an employee to report an incident of abuse or suspected abuse to an appropriate person is a ground on which disciplinary proceedings may be instigated.

Leadership and management

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

The Registered Manager has been absent from the home for almost six months. The provider failed to inform Ofsted about this. The current management arrangements are adequate, but the lack of certainty with regards to long term management is impacting negatively on the home.

Children live in the home that is satisfactorily managed in line with its Statement of Purpose by an acting manager and a deputy manager. Another manager who is registered with the Care Quality Commission regularly visits and monitors the quality of the service. A consultant is also available to provide additional support and guidance to the management.

Children benefit from receiving service from a stable and dedicated staff team. However, children are looked after by staff who are not appropriately qualified and do not always receive adequate supervision. Individual staff performance appraisals are also overdue. Staff receive mandatory and additional training, but certificates are not always available on their files.

Although staff recruitment records have improved since the last inspection, the recommendation to validate each staff reference by a telephone call has not been fully taken on. All requirements given at the last inspection have been addressed demonstrating the home's capacity to improve.

The management and staff are committed to achieving improved outcomes for children. Good attention is given to any additional needs arising from a child's cultural heritage. Children are doing really well. However, inconsistent and at times, poor record keeping is stifling the home's further progress. The social workers comment positively on the communication with the home. However, the home's internal communication processes are not always effective. For example, on the day of the inspection, the management has not received full feedback from the night

staff. They were unaware that a significant incident took place in which a staff member was injured by a child. The incident was recorded in the child's daily observations book, but it was not logged either as an incident or accident. The home's register is also not appropriately kept.

Equality and diversity practice is **good**.