

Inspection report for children's home

Unique reference number	SC366002
Inspection date	17 June 2009
Inspector	Karen Forster
Type of Inspection	Key

Date of last inspection	7 October 2008
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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.

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 outcome for children set out in the Children Act 2004 and relevant National Minimum Standards for the establishment.

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

This service is a private children's home registered to care for four young people with emotional and behavioural difficulties. The service was registered in January 2008.

The home provides a variety of recreational spaces for the young people within the property and grounds, and a registered in-house school facility is also included on site. The home is situated on the outskirts of a residential and retail town development.

There were four young people resident at the time of the visit, who all contributed towards the inspection.

Summary

This visit is an unannounced key inspection aligned with Ofsted's inspection of the educational facility on site. A full report of the school's inspection can be found by visiting Ofsted's web page.

All of the Every Child Matters outcome areas were inspected, two of which are satisfactorily met by the provider. Whilst the quality of placement and healthcare planning is satisfactory, the outcomes for young people within the remaining areas are poorly addressed by the home, providing an inadequate service overall.

The overall quality rating is inadequate.

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

Improvements since the last inspection

The provider has addressed the actions raised at the last inspection, which has helped to provide a suitable number of staff with a basic level of training to care for the young people. Established staff members have now completed training in the areas of food safety, safeguarding, behaviour management and restraint techniques as required at the last inspection.

Although staffing rotas now allow for a suitable complement of staff within any one shift, the loss of the home's manager has meant that the action to provide a suitably qualified Registered Manager is reissued at this inspection.

Helping children to be healthy

The provision is satisfactory.

The young people have a varied and balanced diet, mainly prepared by staff. This means that, although young people feel able to access drinks and snacks according to their wishes, there are few opportunities to shop for and prepare main meals. Access to stored food items is restricted at times, as an additional stocked fridge is maintained within the locked staff office area. Some staff are trained in food safety; however, the food safety arrangements within the home have not been assessed by the local Environmental Health Officer.

Young people's current healthcare needs and a basic medical history, along with strategies to address the same, are outlined in satisfactory health plans for young people. This means that young people with presenting needs relating to either clinical, dental, ophthalmic or psychiatric

fields, for example, receive the appropriate level of health service. There is some evidence of health care programmes, where staff follow suitable guidance from clinicians to address issues, such as smoking reduction programmes. Young people are advised and supported to maintain a healthy lifestyle.

The relevant individuals with parental responsibility have provided signed consent for house staff to administer first aid treatment and prescribed medication. Whilst the home's records of medicine administration are satisfactory, the medication storage within the home is below the standards. The service provides an insecure cabinet for items of medication, and some items of stock relate to concluded short courses of prescribed medication. This means that there is a gap in the medication disposal procedures, leaving outdated drugs stored with easy access within the home.

Protecting children from harm or neglect and helping them stay safe

The provision is inadequate.

The practice within the home towards entering occupied rooms and within room searches indicates that the privacy of young people is well promoted and protected. Personal data relating to young people is stored securely in line with internal policy and the standards.

The home maintains a suitable procedure for the collection of complaints from service users, their families and other stakeholders. The home's record of complaints shows that young people's comments are suitably followed up in practice. This means that young people are listened to and their comments are taken seriously.

Although young people's welfare is a priority for the staff group, and safeguarding protocols are in place, the gaps in Criminal Record Bureau (CRB) clearance for some staff can only jeopardise outcomes for young people. Staff confirmed that they are aware of their responsibilities within the home's child protection procedures and have received safeguarding training. However, the home's policy statement regarding child protection does not refer to the correct Local Safeguarding Children Board (LSCB), which is confusing for staff in the event of making a referral. The internal procedure does not indicate that staff must not promise confidentiality when a disclosure is made. This means that policy and procedures are below the standards.

There is an anti-bullying policy maintained within the service, where the stated aim is to address and reduce any bullying behaviour. Young people feel that bullying is not an active issue within the group at present.

The home's protocol regarding young people going missing from care is slightly below standard in content, as it does not include the young person's contact with an independent person upon return to the home. This means that returning young people would explore their reasons for leaving with care staff, which may impede their open responses. There is a lack of clarity amongst the staff team regarding the permissible measures to use in an attempt to stop young people leaving the home without authority. The home's policy is not clear, as it refers to the authorised use of 'restraint of freedom', strategies which do not meet the standards for an open setting.

Staff support young people in the management of their own behaviour through the use of positive rewards, with some success. The sanctions used within the group include financial

penalties and fines, which does not meet the standards. The recording of applied sanctions is clear and meets the standards.

All established staff have received instruction in the safe control of challenging behaviours. The preferred model of physical intervention includes de-escalation and only uses restraint as a last resort, which meets the standards. The written accounts of restraints do not meet the recording requirements of the standards, as there are loose pages which have obviously been removed from the log.

The home does not maintain suitable measures to ensure that the environment young people live in is safe and free of hazards. This poses a degree of risk to all occupants and visitors to the home. The fire safety risk assessment does not include any checks on fire appliances or highlight the means of emergency lighting. The fire safety risk assessment has not been ratified by the local Fire Safety Officer, who has not been invited to complete an audit of the fire safety measures used by the provider. This means that there is no measure of whether the provider is maintaining suitable risk management strategies for fire safety. The portable electrical appliances have been suitably checked for safe use within the home; however, there is no evidence of an engineer's safety check on the electrical installation.

The service has deployed staff within the home prior to the receipt of their CRB clearance. Other elements of clearance information relating to schedule two of the regulations are also missing, including the written explanation of any employee's gaps in employment history. Staff deployed from other homes within the company do not provide a means of identity check for the home's records. This practice breaches the regulations, and puts the young people at unnecessary risk.

Helping children achieve well and enjoy what they do

The provision is inadequate.

The home's statement of purpose refers to the therapeutic element of the provision; however, there is no evidence of therapy or direct work with the resident young people. This means that there is a gap in the placement content for the young people, and some care needs are not being suitably addressed by the service.

The placement for each young person includes both social care and educational elements. The service educates all of the resident young people in-house, within the on-site school resource. Ofsted has judged that the quality of educational provision at the school is inadequate, where the impact on outcomes for young people is that they do not benefit from a broad and balanced curriculum.

Helping children make a positive contribution

The provision is inadequate.

The internal placement plans provide clear details of the young people's care objectives. Although these plans cannot reflect the detail provided within some of the looked after child documentation that is missing, they do provide an adequate account of young people's plans and targets.

The care of individuals is not always reviewed in line with the standards, with young people's attendance and contribution towards their reviews being patchy and inconsistent. The

contribution made by young people to their statutory reviews early in their placement is impeded by the trend for newly placed young people to be away from home during this vital period. This means that some placement plans and decisions are made without the young people's knowledge and involvement.

The home's telephone unit for young people is kept in the office and provided upon request for use on the main house line. Although this means that young people have a share of its use, they cannot make contact with external parties without recourse to staff, which does not meet the standards. The service has supported young people in their face to face contact with significant people, which is important to those individuals.

The home's admission record indicates that recently admitted young people spent the majority of their first month of placement outside the home at different residential venues. The impact on young people has already been explored above, and regulations have been breached when the alternative accommodation is not a registered children's home.

There are some strategies within the home for consultation with young people regarding the group's routines, activities and shared responsibilities within the home. Records of young people's meetings show that consultation regarding the composition of the group, new staff members and plans for the house are less developed.

Achieving economic wellbeing

The provision is satisfactory.

The satisfactory planning system for essential life skills within the home enables staff to assess the young people's progress with independent living skills and to plan for development of such skills. This does provide young people with a foundation for their adult life; however, their internal 'essential living records' are not fully reflective of the placing authority's pathway plans as this transitional information is not as yet available in the home.

Single bedrooms are provided for young people and suitable designated facilities are provided for sleep-in staff. The bathing and toilet facilities for the group are lockable from the inside; however, there is no facility for staff to gain access to these areas in an emergency. The occupants and staff have the use of communal areas that include some damaged fittings and fixtures, and the utility room and garden appear very cluttered with clothing and discarded house doors and furniture respectively. This reduces the level of comfort and safety within the home. The lack of open access to a young person's telephone is reported upon under making a positive contribution.

Organisation

The organisation is inadequate.

The home's statement of purpose mostly meets the standards, with the major part of the enclosed information being relevant and current. However the document also relates to the company's other children's homes, and does not specify the input from the service's therapist. This means there is some unhelpful ambiguity for the reader.

The promotion of equality and diversity is satisfactory. Young people are treated respectfully as individuals by their carers. All staff have a limited working knowledge of the heritage of each young person, but this information is used reasonably well to inform the care of the young

people. The group enjoy the same access to their local community leisure and educational resources as their peers, and do not feel any disadvantage from being looked after. The company's treatment of job candidates within interview panels is not equitable between the genders. There is evidence of different questions for male candidates than for female candidates.

The establishment's staffing levels are suitable for the numbers of young people and their care needs, although the staff are kept busy with many challenges daily and nocturnally. Although some structure has been introduced to the young people's programmes, including the educational day and contact plans, the home's atmosphere still feels very chaotic with reactive responses to young people's requests and demands. Recurrent changes in the home's management have not helped in the redress of this culture, and the very newly appointed home manager is not registered with Ofsted.

The number of staff qualified to National Vocational Qualification (NVQ) at level 3 is well below the threshold in the standards. This means that young people are cared for by reasonably experienced staff, but staff competence has not been verified by an independent body. Likewise, the home's induction programme is totally policy based and specific to the home, with no broad instruction for staff in the field of residential care of children and young people. This reduces considerably the level of reflective practice in the home, and means that the care of young people is inconsistent between shifts. Staff mainly work in isolation from each other to apply service procedures, although this is done to the best of their knowledge and with the best of intentions.

The internal monitoring of the quality of care provided to young people, completed against Schedule Six of the regulations, is inconsistent and unrecorded. There is evidence of some quality monitoring by the provider's representative; however, the resulting reports do not include sufficient feedback from young people, their families or social workers. This means that the service is only using a small proportion of the available information, to review and improve the quality of care for young people.

The young people's records do not consistently include all of the personal information as required by Schedule Three of the Children's Home's Regulations 2001. This means that there are major gaps in both current and historical personal data for young people, which makes it very hard for staff to formulate informed care programmes for individuals that address care needs.

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 meets the Care Standards Act 2000, The Children's Homes Regulations 2001 and the National Minimum Standards. The Registered Provider must comply with the given timescales.

Standard	Action	Due date
10	arrange for a food safety visit and respond to the findings from the local Environmental Health Department (Regulation 23)	30 June 2009
17	ensure that the home's safeguarding policy refers to the LSCB and includes procedural information that staff do not promise	31 July 2009

	confidentiality when young people disclose abuse (Regulation 16)	
22	ensure that fines or financial penalties are not used as sanctions outside the parameters of reparation (Regulation 17)	31 July 2009
22	maintain a sequential record of episodes of physical intervention that meets the regulations and has no missing pages (Regulation 17)	19 June 2009
26	arrange for a Fire Safety audit and respond to the findings from the local Fire Safety Office (Regulation 32)	30 June 2009
26	ensure that the home's fire safety risk assessment as ratified by the local Fire Safety officer is compliant with the Fire Safety Order 2005, and includes a regular check on fire equipment within the premises (Regulation 32)	30 June 2009
26	provide Ofsted with a copy of the electrical installation certificate for the property (Regulation 23)	31 July 2009
27	provide written explanations of gaps in employees' employment histories (Regulation 26)	31 July 2009
27	ensure that no member of care staff is operational within the home, prior to the receipt of their CRB clearance (Regulation 26)	17 June 2009
7	ensure that where therapeutic input is an identified element of a placement, it is consistently provided, recorded and monitored within placement reviews (Regulation 11)	31 July 2009
3	facilitate and support young people's attendance at all their looked after child reviews and planning meetings (Regulation 12)	31 July 2009
5	ensure that all home admissions are completed in line with the regulations, and young people reside consistently within one identified property (Regulation 11)	10 July 2009
24	ensure that external and internal areas of the home are clear from clutter and discarded furniture, and are kept in good order and fit for use (Regulation 31)	10 July 2009
29	provide 80% of NVQ level 3 qualified staff within the home (Regulation 25)	1 September 2009
31	provide a competence based induction programme for staff, such as the induction standards provided by the Children's Workforce Development Council (Regulation 27)	31 July 2009
33	provide a quality assurance programme in line with Regulation 34, especially in relation to the collection of feedback from young people, their families and social workers (Regulation 34)	1 September 2009

35	secure sufficient personal information regarding young people from their placing authorities, which fully meets the requirements of Schedule Three to the regulations (Regulation 28)	31 July 2009
34	provide a Registered Manager for the home. (Regulation 7)	14 August 2009

Recommendations

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

- review the provision of a food fridge in the office area (NMS 26)
- ensure that the key to the medicines cabinet is not kept in the cabinet lock or within an open access key cabinet (NMS 13)
- develop a medicine disposal system within the home (NMS 13)
- review the missing from care procedure, to include the young people's contact with an independent person upon their return (NMS 19)
- review the physical intervention policy in relation to the reference to 'restraint of freedom' (NMS 22)
- ensure there are means of checking staff identities included within the home's personnel records, including those staff deployed from other homes within the company (NMS 27)
- provide a telephone for young people, which can be used without the help of staff (NMS 4)
- provide bathroom locks that could be over ridden by staff in an emergency (NMS 25)
- ensure that pathway plans are developed for those eligible young people (NMS 6)
- review the format and content of the shared statement of purpose to ensure compliance with the standards, especially in relation to the details of the company therapist (NMS 1)
- review the use of different questions for male and female job candidates during interview. (NMS 30)