

Inspection report for children's home

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Inspector	Christy Wannop
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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 home offers care for three children aged between 10 and under 18 years of age who have emotional and behavioural difficulties. It is operated by a large national provider of children's residential care.

Children live in a detached house with a garden, on a main road, near local shopping and leisure facilities. There are three bedrooms for children, one staff sleeping room, bathrooms and a private room for small meetings and therapy on the first floor, and two separate living rooms on the ground floor. There is a kitchen dining room and ground floor toilet and utility room.

The service has changed its purpose and no longer provides care for children in an emergency. There have been no new admissions since the last inspection. Two young people were present during the inspection and both contributed their views. The Registered Manager was not present.

Summary

This was an unannounced full inspection and covered all the key national minimum standards in each of the ECM outcome groups, plus organisation. It also looked at the progress made to meet the seven actions made at the previous inspection in January, when the judgement was satisfactory. The Registered Manager has taken action to meet these shortfalls, though some further improvement is required in records of prescription medication, maintenance of the environment and in ensuring that each new child admitted benefits from a proper educational placement. This inspection makes three actions.

Outcomes for children are improving and there are some strong features in this service. For example: the therapeutic support given to both children and staff, good child centred care planning and key working systems. Children at this home are well cared for by sensitive staff who have good relationships with them. They are encouraged to lead healthy lifestyles, their individual needs are promoted and they have a good level of individualised care. They are listened to and respected by the manager, who has a strong child focus. Management is effective and there is strong support from the provider.

The overall quality rating is good.

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

Improvements since the last inspection

At the last inspection, seven shortfalls were identified and actions made in relation to poor outcomes for children in education, and inaccurate information within the Statement of Purpose about how the service can meet children's educational needs. Recruitment information was not available and inexperienced staff assumed high levels of responsibility for children. There was no phone for children to use in an emergency, and children's records generally were not good.

Admission arrangements are now clear and ensure full information from placing authorities to support assessment process, particularly in relation to health and educational needs. The manager has made strenuous efforts to ensure full-time education for each child, but this has not been part of the placing authorities plan. The manager is prepared for future admissions

of children to ensure they are adequately educated and this is now very clear in the Statement of Purpose.

There is now within the home, evidence of a rigorous recruitment process and it is now clear that the Registered Manager plays an active role in the decisions about staff 'fitness' to work with children. Staff are still building confidence and experience, but have guidance on each shift from an experienced senior and new staff do not take sole responsibility for children. Children now have independent access to a house telephone so they can contact Child Line. Records about medication, health and behaviour are much improved.

Helping children to be healthy

The provision is good.

Children's good health is promoted. They lead healthy lifestyles, learn about making positive choices and live in a healthy environment. Staff encourage energetic and sports activities and talk to children in one to one key working sessions; giving guidance, advice and support about health and social issues, including sexual health. The records of discussions with children show that good health is seen as an intrinsic part of the children's life experience. Staff learn about child health through an induction programme linked to nationally recognised standards. Children's health needs are identified and staff work with a range of external health professionals, including now with Child and Adolescent Mental Health services, to make sure services are provided to meet them. There is an excellent written health plan with good detail about children's medical histories and the current levels of support needed. A social worker described the efforts that staff make to encourage healthy diet and good hygiene, and said that regular medical appointments arranged.

Children's welfare is safeguarded by the home's policies and procedures for administering medicine and treatment. The Registered Manager makes sure that only competent, trained staff take responsibility for giving medication or first aid so that children get the medication and treatment they need. Staff are clear about current medication regimes and this was confirmed by a doctor during the inspection. However, records of prescription advice are not available in the home to confirm the verbal instructions given by prescribing doctors for dosage and where this contradicts the prescription label. This has the potential for error.

Children enjoy healthy nutritious meals that meet their dietary needs. Staff are trained in safe and hygienic food preparation. Children say 'I cook for myself,' and they help with shopping and choosing the menus. 'I buy healthy stuff when we go shopping.' They can now enjoy barbeques in good weather and plan a wide variety of foods and learn about different cultures and countries. Menus show food to be wholesome and nutritious and with regard to cultural, ethnic and religious backgrounds.

Protecting children from harm or neglect and helping them stay safe

The provision is good.

The service makes good arrangements to keep children safe and sound. Children say their privacy is respected and that staff always knock before entering. They trust staff with confidential information. Children can lock their bedroom doors and so keep precious things safe. Staff are sensitive when helping children to take care of their own personal hygiene. Children now have a phone they can use to contact emergency help lines for children. They can ask to use the office phone for approved phone calls with family and friends.

Children and social workers know that their complaints or concerns will be taken seriously and they get a good response to issues they have raised using the complaints procedure. Complaints about the home are investigated in accordance with the organisation's policy and the registered person takes account of these when reviewing the operation of the home and takes action to improve things.

Children are safe, their welfare is promoted and they are protected from abuse by staff who have been well trained by the Local Safeguarding Children Board (LSCB) and know what to do in the event of an allegation or suspicion of abuse. The Registered Manager has taken satisfactory action to protect children when there have been allegations of abuse. Social worker says that she has been consulted about managing risk and about levels of supervision to ensure safe care and that these are reviewed and updated after incidents. The therapist and key worker share discussions with children about how they can keep themselves safe too.

Children are protected from bullying and benefit from an atmosphere where bullying is known to be unacceptable. They said there was some bullying but that staff sorted this out. 'I told a staff member and they talk to the young person.' The Children's Guide gives excellent information to children about bullying and strategies to use to get strong and deal with bullies and also acknowledges that child may be the bully.

If children run away or run off, staff follow written guidance and respond positively to them on their return. The Registered Manager has taken action to improve the practice and has established a draft protocol with the local police. Staff help children to behave well and encourage socially acceptable behaviour. Children thought that the rules in the house were generally fair and they like the reward system because they can earn money by doing chores. Children who behave inappropriately know they will get a constructive response from staff. Some children do have behaviour which challenges staff and sometimes staff use restraint. They are trained to manage behaviour and the manager takes improvement action if they do not work in accordance with the behavioural ethos.

Children live in a home that provides physical safety and security because the manager takes positive steps to keep everyone safe from unnecessary risks. There are risk assessments for premises and grounds, known and likely activities of children, potential for bullying, abuse in and out of the home, impact of emergency admissions for the admitted child and the group. There is a system of review and implementing effective action to counter risk.

Children are safeguarded from abuse by the procedures used for selecting and vetting all staff and volunteers, and the monitoring of visitors. Children are cared for by adults who have been carefully selected and vetted through a careful recruitment procedure and there is a record of this process in the home. Full staff records are held at the organisation's head office and are not available in the home. Staff monitor visitors closely to prevent children being with potential abusers.

Helping children achieve well and enjoy what they do

The provision is satisfactory.

Children receive individual support when they need it. Staff are sensitive and fully informed about young people's individual needs and wishes and give help and guidance about personal, health, social and sex and relationship education in one-to-one key working sessions. In addition children have weekly sessions with a therapist employed by the organisation. Therapeutic

techniques are carried out by qualified adults under supervision. This person is well liked and the time alone, talking about past and present worries, is much valued by children. Young people know that their cultural, religious and racial identities are respected and that any additional support for mental or emotional or physical health needs will be organised.

This positive picture of enhanced child development is in contrast with the provision for education. Not all children attend and enjoy school, because the service cannot always organise education in local schools and the organisation has not yet achieved registration of its school with the DCSF. Whilst staff are aware of personal education plans, the day to day detail of how staff implement this is not clear in care plans. The Registered Manager has advocated with placing authorities to try to secure appropriate full-time educational provision and is clear that this will be in place for all new admissions to the home in future. Staff do value children's education and it is seen as part of their preparation for adulthood. Social workers confirm that staff encourage children to complete school work and keep them informed about activities and education.

There is a good understanding of how children need to be occupied, challenged and excited by leisure time as well as the importance of lots of fresh air and running around. Children say they go horse riding, swimming, like walking with staff, go bowling, and play football as well as planning their holiday in the summer. There will be individual holidays for children tailored to their interests, ages and needs. Social workers confirm that staff encourage children's individual hobbies and interests and this is clear from the toys, art and craft equipment and literature in the house.

Helping children make a positive contribution

The provision is good.

There are good systems now in place for assessing, planning and reviewing children's care. Children have good written placement plans that outline how their needs will be met and staff make sure these plans are implemented so that child get good care. Plans are written in the child's voice and this helps to reduce institutional style records and make them accessible to the child. Daily reports too are written as though the staff are talking to the child and this makes the day real. Children know they are cared for and are making progress at the home because staff give this daily feedback. Records show that excellent key working sessions cover feelings about family, racial and ethnic identity, different religions, insecurities and complaints. This is good focussed work by staff who clearly value the importance of communicating with children. The therapist guides and advises staff through a written communication book about each child. This helps everyone to keep the child's experience and development at the heart of all daily contact. Staff are learning skills in interpreting the meaning behind behaviour as children struggle with confusing, sad and angry feelings.

Children have the contact they want and need according to the placing authority plan. Some children have independent visitors because they have little contact with families. Staff help children to maintain constructive contact with families, and other people who play a significant role in their lives and help when there is sadness and confusion for children about this contact. Children do not have local friends, nor are they part of any local social groups and have limited social relationships in the community. Staff are aware of this and try to encourage children to form friends with peers and extend opportunities for meeting and mixing.

The Registered Manager has developed systems so that children are now able to move into and leave the home in a planned and sensitive manner. Most children moved in an emergency and the home has now changed its statement of purpose to accept only planned admissions in future to ensure that all needs can be met, particularly education. Possible new admissions are discussed with the existing children so that any anxieties are understood.

Children say they can make their views known and that they have a say in what happens in this home. This is clear from the way the staff build their day around the children, and in the records of meetings with them. Children get plenty of opportunities for mature conversation and children value one-to-one time with the therapist. However, one child felt that staff had too much paperwork to complete and that sometimes children came second, particularly at the end of the day.

Achieving economic wellbeing

The provision is satisfactory.

Children receive care and active support that helps them to prepare for adulthood. Children are helped to save money in their own accounts. Staff adapt independent living programmes to take account of emotional needs and worries. Self-esteem and personal life skills are promoted through involvement with household chores, independence training, key working sessions and therapy.

This is a large, modern, family sized home providing sufficient space and facilities to meet the needs of children with emotional and behavioural difficulties. Some parts of the house are very well furnished and maintained and other parts are not. Repairs are not effectively or promptly carried out. At the time of inspection there had been no hot water for over 24 hours, a plug socket had burnt out and the stair light bulb was not working, leaving the stairs dark and potentially dangerous. The maintenance team did arrive during the inspection to effect a temporary repair. Staff and children's bathrooms are shabby and there is no blind for privacy. The garden is sparse and there is no garden furniture, play equipment or plants. There is however, a good range of large private and communal spaces so that children can be sociable or alone when they want to. One room is given over to play and craft, with no TV or music. Children like their bedrooms and have decorated them personally.

Organisation

The organisation is good.

Children live in a home that is organised around their needs, and prioritises and seeks to improve their life experiences. Leadership and management of the service is effective. The senior management of the organisation have assisted the Registered Manager in taking action to strengthen the day to day operation to build a service that meets children's needs beyond day to day care.

Children have the information they need about life in the home so they know what to expect, how they will be cared for and who they are likely to share with. The Children's Guide is an enabling and interesting leaflet with the aim of empowering, not patronising the child. Parents and placing authorities now also have a clear, revised statement about the operation of the home.

The promotion of equality and diversity is good. Policy, procedure and good practice helps children to know that their individual needs on the basis of race, ethnicity, disability, sexuality, gender, age and religion are valued and the service is able to meet their diverse needs in everyday life in the home. Staff are drawn from a range of ethnic and cultural backgrounds, male and female and the Registered Manager trains staff in equality issues for the organisation. Social workers value the staff's prompt communication with them about any incidents and say that there is good joint working with other agencies.

Children are cared for by an increasingly confident, but young staff team. They are improving skills through training and under direction of senior staff in the home. The Registered Manager takes staff development seriously and promotes training linked to the needs of the children living at the home and the home's purpose and function. There are sufficient staff on duty and a senior usually leads each shift. Staff are well supported through systematic induction and probation periods, professional supervision, appraisal and regular staff meetings. Systems for staff discipline and performance monitoring are in place and effective, with the aim of improving practise, and this is an active and enabling process. Staff are keen to complete induction and move onto training to achieve NVQ 3 in working with children and young people. This programme is well established at the organisation's registered NVQ centre.

The welfare of the children in the home is promoted by regular monitoring by the Registered Manager. He carries out a considered and comprehensive review of operations and gives a picture of the children's lives behind the records. Records about children reflect their individuality. They are securely stored and children can access and add personal statements. The records contribute to the child's progress and development.

There is a supportive team of senior managers within the organisation, who have a good rapport with children and staff. They further monitor the operation of the home and make use of this information to continually adapt the care of children. Children benefit from living in a setting where their experience of life in the home is taken seriously.

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
13	ensure medication is administered as prescribed (Regulation 21(2b))	30 September 2009
23	ensure that all parts of the home are adequately lit, kept in good repair and afford privacy (Regulation 31)	30 September 2009
14	make proper provision for the education of children accommodated (Regulations 11 and 18).	30 September 2009

Recommendations

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

- ensure prescribed medication is given in accordance with the prescription or instructions from the pharmacy (NMS 13.8)
- ensure each child is given full access to educational facilities, at both school level and in further education and that children's care plans are clear about the daily support for educational attainment (NMS 14)
- encourage children to make and sustain friendships with children of their own age outside the home (NMS 15.12)
- ensure a satisfactory maintenance and repair programme so the home provides good quality domestic facilities for children's use. Provide window coverings for bathrooms, systems to replace light bulbs easily and a garden that meets the needs of the children, for example with outdoor play equipment and garden furniture (NMS 24)
- ensure staff have time scheduled to ensure that completion of records takes place without compromising overall care of children, for example at bedtimes (NMS 29.6).