

SC387148

Registered provider: Fairfield Residential Ltd

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

The home provides residential care and shared care for up to five children who may have physical and/or learning disabilities. The home is run by a private company. This home offers education on site at a registered school.

Inspection dates: 9 to 10 April 2018

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 **requires improvement to be good**

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

Date of last inspection: 16 May 2017

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
16/05/2017	Full	Good
25/01/2017	Interim	Sustained effectiveness
24/05/2016	Full	Good
02/02/2016	Interim	Sustained effectiveness

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 registered person must compile in relation to the children's home a statement ("the statement of purpose") which covers the matters listed in Schedule 1. (Regulation 16(1))	30/05/2018
In meeting the quality standards, the registered person and staff must ensure that if they consider that a placing authority's or relevant person's performance or response to be inadequate in relation to their role, challenge the placing authority or the relevant person to seek to ensure that each child's needs are met in accordance with the child's relevant plans. (Regulation 5 (c)). This specifically relates to the need for a child's up-to-date care plan and medical consent to treatment to be in place.	30/05/2018

Recommendations

- Staff should continually and actively assess the risks to each child and the arrangements in place to protect them. This specifically relates to staff signing each young person's risk assessments to demonstrate that they have read and understand the risk associated with providing care and support to each young person. ('Guide to the children's home regulations including the quality standards', page 42, paragraph 9.5)
- For children's homes to be nurturing and supportive environments that meet the needs of their children, they will, in most cases, be homely, domestic environments. Children's homes must comply with relevant health and safety legislations (alarms, food hygiene, etc.); however, in doing so, homes should seek as far as possible to maintain a domestic rather than an 'institutional' impression. ('Guide to the children's home regulations including the quality standards', page 15, paragraph 3.9)
- Records of restraint must be kept and should enable the registered person and staff to review the use of control, discipline and restraint to identify effective practice and respond promptly where any issues or trends of concern emerge. The review should provide the opportunity for amending practice to ensure it meets the needs of each child. ('Guide to the children's home regulations including the quality standards', page 49, paragraph 9.59). This specifically relates to ensuring that when the registered manager is involved in a restraint the record is reviewed and evaluated by a senior manager.

Inspection judgements

Overall experiences and progress of children and young people: good

The home provides good-quality care for children with disabilities and complex needs. Children make small but measurable progress from their starting points, responding to the routines and boundaries of the home. Examples include improvements in their self-care, communication and behaviour.

Children enjoy warm and trusting relationships with staff. Children were observed approaching staff for help and attention, including seeking staff out for hugs. Staff engage very positively with children. Mealtimes are pleasurable and social occasions, and one child was seen taking great delight in teasing a member of staff who was supporting them to eat their meal. The member of staff was observed following the child's cues when they were ready to eat and drink. This improves the child's ability to be independent.

Children, including those who do not communicate verbally, are well supported by staff to participate in day-to-day decisions. They are supported to share their views through the use of picture exchange communication systems, as well as spoken word. One child who refused to speak prior to coming to live at the home is now using some speech. Staff also encourage the child to express their wishes and feelings by writing things down. A parent said, '[name] is coming on leaps and bounds, she loves it here, gets on brilliant with the staff. I can't fault it!'

Children attend school and are making good progress in relation to their individual targets. There is improvement in attendance and participation for some children from their initial starting points. Children are further supported to access a range of social and recreational opportunities, for example baking, making their own pizzas, and listening to music. Children also enjoy outings to places of interest, including the beach, museum, parks, and visiting the organisation's farm. Most children like spending time in the garden during the warmer weather, which is equipped with a trampoline and swing. This means that children are able to try new experiences and increase their skills.

Staff have a good understanding about each child's complex needs. This means that children experience care and help that is sensitive to their needs. Staff respect children's privacy and dignity, particularly when providing personal care. For example, children who leave their bedroom while still undressed are provided with a blanket and discouraged from entering the communal areas until they are dressed.

Children receive good levels of support to help them move into or out of the home, for example visits to the home prior to moving in. The registered manager also visited a child at their previous placement, which ensured that she was familiar with all the child's complex needs. An assessment of need was also undertaken to ensure consistency of care. Transitions into adult services are well coordinated to ensure that young people receive the right level of care and support during this challenging time in their lives.

Parents spoken to during the inspection confirm that there is effective communication between them and the staff. Parents are made welcome into the home to spend time

with their child. Staff transport and supervise contact as required. This enables children to sustain positive relationships with their families.

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

The home's safeguarding arrangements help to keep children safe and protect them. Children receive high levels of support and close supervision because of their complex needs. Consequently, they do not go missing from the home and are unlikely to be exposed to any unnecessary risks.

Staff are trained in safeguarding and understand what actions to take if, for example, they have any concerns about a child's welfare. This ensures that children are effectively safeguarded. There have been no safeguarding concerns or complaints since the last inspection.

Sanctions are not used to modify children's complex behaviours. Instead, staff use planned ignoring or re-direction to help reduce a child's anxieties and escalating behaviours. Restraint is only used as a last resort to protect children and staff from harm. Records are completed and evaluated by the manager to identify trends and patterns. However, on one occasion the registered manager was involved in a restraint and evaluated their own practice. Senior management oversight would provide a more open and transparent assessment of the registered manager's practice.

Risk assessments clearly identify children's risks and how these should be managed. Staff are required to sign the risk assessments to demonstrate that they have read and understood them. However, a number of assessments have not been signed by all staff, which means that there is a potential that staff are not fully aware of the risk management strategies. This recommendation was raised at the last inspection and is repeated.

Sufficiently robust recruitment and selection processes ensure, where possible, that staff are suitable to work with children. Regular health and safety checks ensure that the home environment is physically safe and secure.

The effectiveness of leaders and managers: requires improvement to be good

The home is achieving its aims and objectives as set out in the statement of purpose. However, some errors are noted in the current document; for example, on page 12 it states that the age range is 0 to 18 years, then page 13 states that the age range is eight to 18 years, and page 17 states that the age range is six to 18 years. This requires updating to accurately reflect the service provided.

The number of permanent staff has increased following the last inspection. This means that the continuity of care is good. The home does use a pool of regular bank workers to ensure that consistency for children is maintained. Staff either hold, or are working towards, a relevant childcare qualification. Staff benefit from monthly supervision sessions, regular team meetings and annual appraisals. This provides them with the opportunity to reflect on and improve their practice. Staff spoken to expressed a real sense of pleasure in their work.

The registered manager has revised the training matrix in order to make it clear what training staff have completed and what needs updating. The registered manager is committed to ensuring that staff develop the skills necessary in caring for children who have disabilities. However, on one occasion a child was restrained by staff who have not completed the Team Teach training in physical intervention. This restraint was for a short period, and was successful in helping to calm the situation, but this potentially placed the child and staff at risk of injury. The majority of staff have completed this training, with the remainder scheduled to complete it in the next few months. The registered manager has said that, going forwards, they will ensure that two Team Teach trained staff will be on duty on each shift.

The registered manager has a good understanding of the strengths of the home and is committed to improving care practice. She uses her own monitoring and the findings from the independent person's monitoring visits to ensure that standards are well maintained in the home.

Overall, children's records reflect their everyday lives and the work that is undertaken with them. However, key documents such as local authority care plans and delegated authority were not on one child's file. The registered manager has followed up the missing care plan with the local authority, but the current plan refers to the previous placement. This has not had any direct impact on the quality of care that the child receives.

The registered manager has taken action to address the majority of the recommendations made at the last inspection. For example, the home has introduced individual development targets for each child. The key workers identify three targets per month for each child to focus on, and, at the end of the month, the key workers evaluate these. This has enabled some children to develop their self-care skills. As stated earlier, one recommendation is repeated.

Improvements have been made to the decor of the home, including new curtains and furnishings. However, one child has caused significant damage to their bedroom and the area just outside of their bedroom. Plans are underway to rectify the damage, but this requires meticulous planning because the child will need to move out of their bedroom while this work is done. The dining room door was being propped open by a chair, causing an obstruction for a child in a wheelchair. Other doors were also observed being propped open, including an internal fire door. The registered manager should consider reviewing this and finding an alternative solution to propping open the doors.

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 differences 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 whom 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: SC387148

Provision sub-type: Children's home

Registered provider: Fairfield Residential Ltd

Responsible individual: Kendall Cope

Registered manager: Debra McGarrigan

Inspector

Michelle Bacon, social care inspector

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