

Inspection report for children's home

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Inspector	Mary Timms
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Date of last inspection	30 March 2009
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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 provides respite support for families with children who have a learning difficulty. The premises have been updated to provide appropriate accommodation and adaptations to support the needs of children using the service. There are two adjacent lounge areas, a dining room, a kitchen which may be accessed by children with supervision, two bathrooms, appropriate office and storage space, a covered play area outside and garden areas. The home is situated in a residential area within easy travelling distance from a range of community resources.

Summary

At this announced full inspection, all key standards were inspected.

This is a satisfactory service with many good features. The service has a sound management structure and children are cared for by experienced and competent staff. The home provides a safe and well-maintained environment for children. Good arrangements are in place to safeguard children. Whilst there is evidence that staff have a good understanding of the needs of children and also that they consult with families and social workers, placement planning fails to capture the level of detail necessary to ensure that individual needs will always be fully met.

The overall quality rating is satisfactory.

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

Improvements since the last inspection

Not applicable as this is the first inspection of this service, which was newly registered in April 2009 as a requirement after local authority re-structuring.

Helping children to be healthy

The provision is satisfactory.

The primary responsibility for children's health care planning and support remains with parents. Comments from parents include 'I am very pleased with the way staff support my child's health needs' in addition to confirming that they are updated promptly if health issues arise. Staff have a sound awareness and understanding of children's individual health needs, which are identified and discussed with parents and social workers during the referral stage. However, health care planning documents sometimes fail to set out clearly children's assessed health needs and lack the necessary guidance for staff to ensure that needs will be fully met.

A safe medication administration system is operated. In addition to the monitoring checks undertaken by the Registered Manager a member of staff has delegated responsibility for monitoring the medication stock and the operation of the system. Medication is stored appropriately and securely. Staff undertake medication administration training. Two staff administer medication and a record is made on each occasion medication is given to children.

Meals are served in a pleasant dining environment and adequate facilities are provided to support children to eat separately if required. Dietary restrictions and personal preferences inform menu planning. Children are able to try cooking activities, which promotes their independence. Food preparation, storage and handling is informed by a written food management safety system and staff undertake food hygiene training. A labelling system is

operated to guide the storage of opened food in the refrigerator, however, it was noted that this is not always used for opened cartons of drink.

Protecting children from harm or neglect and helping them stay safe

The provision is good.

Good arrangements are in place to safeguard children and to promote their general wellbeing.

A safe environment is provided. The premises and garden are secure, preventing children from leaving unsupervised and from any unauthorised access to the home. Risk assessments guide care arrangements clarifying known and potential hazards for individual children. Fire safety is prioritised. Fire evacuation drills are undertaken with both staff and children. Each child has an individual plan to guide any necessary evacuation during a fire.

Behaviour is well managed. Staff attend behaviour management training, including the use of physical intervention. Staff know and understand children's behaviours in the context of their disabilities and are aware of the potential for bullying to occur. Groups of children staying together are well planned and are informed by any known concerns about interactions between children. There is limited use of sanctions which are monitored by the Registered Manager and are proportionate. Areas of record keeping lack the level of detail necessary to evidence the full protection of children.

Care arrangements are guided by appropriate policies and procedures. Local Safeguarding Children Board procedures are provided for staff, in addition to procedures produced by the local authority. Guidance recently issued by the Department of Children Staff, Schools and Families aimed at safeguarding disabled children is displayed for staff. Staff undertake safeguarding children training. New staff are required to familiarise themselves with these procedures and guidance and demonstrate their understanding during induction supervision meetings.

Children are safeguarded by robust recruit procedures. All required checks are undertaken prior to staff commencing work in the home.

Children's dignity and right to privacy is supported during the provision of personal care. Staff comments include 'we regularly discuss good practice and children's individual personal care needs'. However, Staff training has not been provided to support this care need and placement plans sometimes lack full details about individual personal care needs and preferences.

Children and families are able to make a complaint. Families are issued with information setting out the home's complaints policies and procedures during the referral process. Procedures for children are displayed in the home which use symbols and pictures. Comments from parents include 'I am confident that the manager will investigate any issues of concern I may have'.

Helping children achieve well and enjoy what they do

The provision is satisfactory.

Children receive support during short respite stays at this home. Children are supported to access community resources and are provided with many activity options within the home. Staff are knowledgeable about children's differing individual needs, an understanding which guides the appropriate response being made to support needs. Comments from parents include 'staff

are brilliant, they liaise with me and follow through on any changing support needs'. Comments from placing social workers include positive comments about the quality of the support and service provided and also that 'staff are committed and knowledgeable about the children'.

Children's educational needs are primarily planned and supported by their parents, however, staff also consult with schools, they attend review meetings and support children to attend school whilst using this service.

Placement planning documents sometimes lack an adequate level of detail about children's support and educational needs, necessary to guide care arrangements and to ensure that needs will always be appropriately met.

Helping children make a positive contribution

The provision is satisfactory.

Children and families are supported during the referral process. Families receive a copy of the Statement of Purpose document and a children's guide. Staff meet with families and social workers collating necessary information to guide care arrangements. Children and families have an opportunity to visit the service prior to overnight respite arrangements commencing.

Individual needs are reflected into placement planning documents. However, plans sometimes lack an adequate level of detail to clarify how the service will meet children's assessed needs. For example, a lack of detail to clarify the arrangements and targets to support an identified need for a child to develop their independence. As needs change, plans are not always updated promptly, which means that some plans are out of date. For example, reference to a child's need for the use of a schedule board when in practice this is no longer an assessed need. Whilst the Registered Manager undertakes a review/audit of children's placement plans and may identify areas for improvement, action is not always taken to ensure that these documents are then suitably updated to provide appropriate guidance for care arrangements.

The service contributes to formal review meetings and processes. However, action is not always taken by the service to update plans and respond to updates to care arrangements agreed within review meetings.

The service consults with families and uses feedback to inform service development. Comments from parents include 'staff always consult with me about the care my child requires'. Staff support children to make choices, for example, their preferences are included in menu planning, they make drinks and snacks choices, they are able to choose activities they take part in. Staff spend time with children gathering their views about the service, when possible.

Achieving economic wellbeing

The provision is satisfactory.

The home provides children with a range of shared and communal accommodation and adaptations. Facilities are well maintained and kept clean and tidy. Bedrooms are appropriately decorated and furnished. The home has a large covered play area which allows children to play outside in all weathers, in addition to a garden also providing play areas and equipment.

Children are encouraged to take on appropriate areas of self-care and to develop new skills, when appropriate. They may undertake cooking activities and may spend time with staff in the

kitchen learning food preparation skills. Placement plans lack details of focussed areas of work and clarity about how the service will support children to develop new skills. This raises the potential for staff to work inconsistently and for areas of need to be missed.

Organisation

The organisation is good.

Children and families are provided with information about the facilities and services available. The Statement of Purpose accurately describes the services provided. Information is made available for children in accessible formats. Children's files are well maintained and are stored securely.

The service is led by a Registered Manager who is supported by a suitably experienced and knowledgeable assistant manager. Children are cared for by competent staff who are available in adequate numbers to support children's care needs. The service provides staff with key areas of training, however, not all staff have undertaken recent training to support the care of children with a diagnosed Autistic Spectrum Disorder. Staff receive one-to-one supervision and staff meetings are facilitated on a regular basis.

The promotion of equality and diversity is good. Updated training in relation to equality and diversity is planned for an imminent team day. Staff are aware of their role in promoting children's rights and in providing care which enhances children's ability to achieve.

The quality of care is monitored by external managers who visit the home and by the Registered Manager. Areas for improvement are identified and action is taken when necessary to develop the service provided.

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
2	ensure that there is an up to date and fully detailed placement plan for each child or young person accommodated at the home. (Regulation 12.1)	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 that staff are provided with written guidance on the home's procedures and practice. In particular this relates to the need to include open drink containers within the food labelling system (NMS 28.8 and 10.9)
- ensure that placement plans set out clearly the assessed needs of the child, and how these are to be met by the service on a day-to-day basis, including the areas set out in National Minimum Standards (NMS 2.1)

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- ensure that records kept in relation to measures of control provide adequate detail as guided by National Minimum Standards and Children's Homes Regulations. In particular this relates to the need to provide full details should a child be 'moved' from one area to another (NMS 22.9 and 22.10)
 - ensure that all staff involved in the provision of intimate personal care receive appropriate training and are provided with clear and appropriate written guidelines, which are followed in practice (NMS 9.7)
 - ensure that there is a comprehensive plan for young people preparing for adulthood. In particular this relates to the need for plans to fully detail agreed areas of focus and to clarify how needs will be met in relation to the development of independence skills (NMS 6.1 and 6.7)
 - ensure that staff receive training and development opportunities that equip them with the skills required to meet the needs of the children and the purpose of the home. In particular this relates to the need to facilitate training about Autistic Spectrum Disorders. (NMS 31.1)