

## Inspection report for children's home

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**Inspection date** 27 January 2010

Inspector Malcolm Stannard / Elizabeth Taylor

Type of Inspection Random

**Date of last inspection** 16 June 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

The centre is situated in the north of England. The centre can, when fully operational, offer secure accommodation for up to 17 young people between the ages of 12 years to 18 years, whose behaviour has placed themselves or others at risk. There are three residential units at the centre, however one unit is not presently operating. At the time of inspection, six young people were accommodated.

Facilities at the centre for young people include outdoor exercise areas and a sports hall. Furnishings in the living units are as domestic in nature as is safely practicable.

## Summary

This was an unannounced inspection to monitor progress against the actions and recommendations made at the last inspection in June 2009. All of the key standards in the staying safe outcome were also looked at during this visit.

Strengths of the centre include the identification of the specific needs of young people, individualised work and support available for young people, and the experience and skills of staff which allows needs to be addressed. Areas for development include weaknesses in the internal quality assurance to inform development of the centre and the formal process of staff support.

The overall quality rating is satisfactory.

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

## Improvements since the last inspection

At the last inspection in June 2009, the management at the centre was required to address three actions and a further six recommendations were made. Progress has been made in regard to one of the actions and four of the recommendations.

A requirement was made that management ensured behaviour management records accurately recorded the incident and any actions taken. The quality of recording in the restraint and single separation logs has improved. Whilst there are still some occasions when records are not fully completed, the actual details of the occurrence are evidenced. This helps to ensure that patterns of behaviour can be monitored and the information used to develop young people's positive behaviours.

It was recommended that the times at which fire drills were carried out were varied throughout the day. Fire tests and drills are now carried out randomly. This helps to ensure that all staff at the centre are able to experience a practice and that young people are able to experience drills under differing conditions.

Care plans for young people were recommended to contain defined measurable targets. Information in the plans is now broken down to state how the needs of young people are to be met, rather than merely identifying the need. This helps staff to understand what they need to do to meet young people's needs effectively

Training for staff in mental health issues which impact on young people was recommended. This has now been undertaken by all staff and has helped them to increase their knowledge and practice when working with young people with complex needs. The system of internal monitoring of records and practice has improved. Records are viewed on a regular basis by a member of the management team, who also makes comments on the quality of recording and actions taken. The procedure helps to assist development of practice.

## Helping children to be healthy

The provision is good.

The centre has good arrangements in place to promote young people's health. A nurse works on site during weekdays and works closely with care staff and community based health professionals to ensure young people's physical and mental health needs are addressed. A full health assessment is completed on all young people when they are admitted. This, together with information provided on young people's referral forms is used to compile their risk assessments and individual health care plans. Health records show young people have access to appropriate treatment and are advised and educated about a range of health issues. This ensures they have accurate information and a greater understanding to be able to make more informed decisions in the future.

Many of the young people placed in the centre have a history of, or emerging evidence of, serious self harm or suicidal tendencies. Nursing and care staff act to support the psychological welfare of young people. However, local resources are currently not able to provide the breadth of professional support and service the unit previously received. This means the needs of young people with complex mental health issues can not be addressed effectively at the present time although a few young people continue to receive some professional support. The centre's manager and senior managers within the organisation have acted to try to address this major shortfall. They continue to meet with the local primary care trust to formalise a contract which will deliver a quality service to young people. Whilst progress has been achieved towards this goal, arrangements to provide a comprehensive service have not been finalised. Therefore, this remains an area identified for action. In the meantime, the management team continues to carefully 'gate keep' admissions to the centre to ensure it can adequately meet each young person's needs.

# Protecting children from harm or neglect and helping them stay safe

The provision is satisfactory.

The privacy and dignity of young people at the centre is respected. There are policies and procedures in place which guide staff in ensuring practices carried out are respectful of young people's needs. All confidential information is held securely.

A complaints system is in place at the centre which is easily accessible to young people. Complaints are addressed within short timescales and an outcome is always fed back to the young person. Records are made of a young person's satisfaction or otherwise with the outcome of a complaint and each young person is invited to sign this. On occasions where a young person has declined to sign, this form is absent from the complaint records. A senior staff member or the visiting advocate talks to all young people to explain how they can take any issues further should they be unhappy with the response.

Written child protection procedures are in place at the centre. Members of staff are aware of how to proceed should an allegation be made. There are good links with child protection services and the external manager for the centre is a member of the Local Safeguarding Children Board. Staff at the centre undertake relevant training during their induction period and this is supplemented by refresher courses. Records are held of any allegations or disclosures which are referred to the external safeguarding services. The welfare of young people is protected by this practice.

The centre has a zero tolerance approach to bullying and relevant policies and procedures are in place. All staff receive appropriate training and a logging system is in place should any instances be suspected. Young people are made aware of the centre's stance on bullying in the information they are given when they arrive at the centre. Young people have access to a visiting advocate and telephones, enabling them to access people external to the centre should they have any concerns.

Any significant events are notified in writing to the appropriate authorities. A procedure is in place to guide staff should there be any unauthorised absences; this includes a system to ensure that young people can access an independent person following their return to the centre.

There is an established incentive scheme in operation at the centre which promotes positive behaviour by the young people with a system of rewards. A record of all sanctions which are given for negative or disruptive behaviour is held. A recommendation was made at the last inspection that the centre's management explore and employ a range of alternatives to sanctions. Many of the sanctions employed, whilst not inappropriate, continue to be unimaginative and irrelevant to the negative behaviour which has been displayed. For example, disruptive behaviour in school receiving a sanction of loss of electrical items. This can make it difficult for the young person to associate their action with the sanction received.

Records are held of all physical interventions and single separations which have occurred. These records have improved considerably with regard to the level of information they contain. They are now a true reflection of the actual occurrence. Some of the recordings continue however to be incomplete regarding any injuries or further action taken. This means that tracking of incidents can be difficult. Evidence is available of all behaviour management records receiving regular audits from members of the management team.

A manager at the centre is responsible for health and safety issues. All electrical and gas systems are inspected under service agreements. Fire prevention equipment checks are undertaken regularly and practice drills are held at different times of the day. This helps to ensure that everyone has the opportunity to experience a drill.

Staff recruitment files were not inspected on this visit. The vetting system employed by management at the centre was found to be appropriate to protect the welfare and safety of young people at the last inspection.

## Helping children achieve well and enjoy what they do

The provision is good.

Young people are supported to achieve positive outcomes in education. Care staff provide practical, physical and emotional support to maintain young people in education whenever possible.

Little progress has been made in the planning and delivery of leisure and recreational activities for young people since the last inspection. Some equipment is available and there are outline plans are for sessions to take place. Many activity sessions however do not occur or are substituted on the actual day of delivery. There are some good sessions which enable the young people to experience a wider choice of activities, for example swimming opportunities; however the delivery remains inconsistent. There remain many occasions when a programme of meaningful and enjoyable activities is not available to engage and stimulate young people.

#### Helping children make a positive contribution

The provision is good.

Plans for young people's care are detailed and cover all areas of their need. Practical, measurable targets are identified in most sections of the plans. This makes it easy to assess whether the issue has been addressed or not. Some young people actively engage in developing the plan for their care and are happy to sign their plan. However, others choose not to do so. This remains an area for staff to promote and evidence, to show young people are consulted and supported to contribute to the planning process.

A link worker system operates in the centre although all staff are expected to support young people. Records of key working sessions and other individual work carried out with young people contain greater detail. These demonstrate that targets in young people's placement plans are linked to their placement objectives and are designed to equip them with improved self-esteem, skills and knowledge. This means young people are given the tools to make more informed and positive choices when they move back in to the community.

There is an effective reviewing process which ensures young people's changing needs are identified and addressed. Young people's placement plans are reviewed at least weekly or following a significant event affecting their care or welfare. Individual risk assessments are also reviewed weekly; although a checklist is completed on each young person on a daily basis to indicate any change in their needs or circumstances.

## Achieving economic wellbeing

The provision is not judged.

## Organisation

The organisation is satisfactory.

Good opportunities are available for staff to meet as a team. The staff teams in both units currently operating meet on a weekly basis to discuss the young people and matters relating to the efficient running of their units. Handover sessions take place between staff each day. The informal support network between staff is reported to be good. Formal supervision is planned for all staff on a monthly basis and a monitoring system is in place to ensure sessions take place in accordance with specified timescales. Despite these measures, there are still instances of sessions being cancelled due to other demands and not being rearranged quickly. Consequently, the delivery of the supervision programme continues to be very variable. At best, two thirds of the staff team is supervised on a monthly basis but in some months a lower level is attained. There is a need to ensure formal supervision is consistently provided to all staff. This will ensure staff are properly managed and supported.

The importance of staff development is understood and staff are supported to obtain a nationally recognised qualification in caring for children and young people. They also have opportunities to attend other related courses. A previous deficit in specialist training for staff in managing young people with identified or emerging mental health needs has now been addressed. Training in this area has now been delivered to all staff. This is to be complemented by on-going training in mental health and counselling. Opportunities for staff to increase their knowledge and develop their skills ensure they are suitably equipped to support young people's emotional well-being and meet their varied needs.

The internal monitoring and auditing of records has improved, with all central records been reviewed by the management team on a regular basis. Comments are made in some of the behaviour management records by the auditor in relation to the incidents and the quality of the recordings. The information gathered by the auditing procedure is not however used sufficiently to further develop the practice at the centre.

# 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 Childrens Homes Regulations 2001 and the National Minimum Standards. The Registered Provider must comply with the given timescales.

Standard	Action	Due date
12	ensure each child has access to such psychological and psychiatric treatment as they may require (Regulation 20(2)(b))	30 April 2010
1	ensure that all staff receive formal individual supervision in line with the minimum frequency set out in the national minimum standards. (Regulation 27(4))	30 April 2010

#### Recommendations

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

- ensure all records of behaviour management occurrences are consistently fully completed (NMS 22)
- explore and employ a range of alternatives to the present sanctions in place (NMS 22)
- ensure opportunities for young people to engage in a range of appropriate leisure activities are followed through in practice (NMS15)
- ensure young people know the content of their placement plan and are encouraged to sign it (NMS 2)
- ensure that the information collated by the internal monitoring of records is used to development practice at the centre (NMS 33)