

Inspection report for children's home

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Inspector	Gwen Buckley / Gaynor Moorey
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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 is a registered children's home approved by the Secretary of State to provide secure accommodation and care for up to 16 girls and young women, from 10 years of age to 17 years, who are subject to a court order on 'welfare' grounds in accordance with Section 25 of the Children Act 1989. Children aged 10 to 12 years may only be placed subject to approval of the Secretary of State.

The home comprises four individual living units with formal education provided on site. The education unit is undergoing a major rebuild which is funded by the Department for Children Schools and Families and as a result an external courtyard is not accessible to the young women. Internal and external on-site leisure facilities are however available including a gymnasium and fitness suite and small external courtyard areas.

Parents, staff and all the young women assisted in the inspection process by talking to the inspectors and completing pre-inspection surveys.

Summary

This announced full inspection assessed all the key national minimum standards and gauged the home's progress in addressing the recommendation from the previous inspection.

The home provides individual care and support to young women which are focused on meeting their identified needs and ensuring their wellbeing and safety. External professionals are complimentary about the commitment of staff to meet the needs of the young women and the high level of care provided.

The home is well managed and staff have access to training opportunities to help them meet the individual needs of young women. The management team is committed to improving the service and have good systems in place to monitor individual progress and practice. However, improvement is needed to the quality of the food provided and access to primary health care services

The overall quality rating is good.

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

Improvements since the last inspection

The actions and previous recommendations made at the last inspection in September 2009 have been addressed. The home has developed a programme that looks at how the young women are engaged in activities throughout the day and care planning now reflects their particular interests. New bound and numbered books have been introduced for restraint recording and these records are well kept. The new book however does not evidence that young women are given the right to see a health professional after a restraint. Young women are happy with access to the complaints system and confirm they receive the relevant information on admission

Helping children to be healthy

The provision is good.

Good arrangements with a local dietician ensure those with special medical dietary needs are catered for. There is a choice of meals available which also reflects cultural and religious preferences. However, the young women do not always like the choices and the management team is currently reviewing the menu planning process and seeking the input of a nutritionist. The manager is also aware that the views young women have on the quality of the food vary considerably and is reviewing how catering services are provided.

Staff sit with the young women at meal times helping them to develop their social skills. Young women are able to make drinks and have access to fresh fruit throughout the day. The catering facilities available in the new education building will greatly enhance the facilities and opportunity for young women to cook and prepare meals.

Previous arrangements for a GP to visit the home have changed in the last few months. At present, a GP does not visit the home and young women have to be taken to a local surgery, where they are registered as temporary patients. The majority of young women placed are not from the host local authority and only young women placed by the home's local authority receive a visit by a looked-after-children's nurse. There are good links with the local diabetic nurse and midwife who visit the home to advise staff on how best to care for individuals and to support the young women themselves.

Young women assessed as not safe to leave the building do not routinely receive the medical services they would if they were in the community, such as visits by a GP, immunisations and routine optician and dental checkups. To address this, the manager has made considerable efforts to identify and resource appropriate medical cover, and continues to pursue this by advertising for private services and negotiating with the Local Primary Care Trust.

Medication administration, recording and monitoring systems are good. Records of controlled drugs, prescribed and non-prescribed medication are well maintained and medication appropriately stored. A clear medication audit trail is in place ensuring appropriate records are maintained and young women receive medication when they need it.

Training on the safe handling of medication is provided to staff. A self-administration policy is in place which enables young women, when assessed as safe to do so, to take responsibility for administering some of their own medication. Written permission is sought from those with parental responsibility for the administration of first-aid and non-prescribed medication. A first-aid trained member of staff is always available and good detailed records are kept of any accidents.

Good arrangements are in place to provide mental health services for young women. The psychologist and psychiatrist attend regular multi-disciplinary meetings to help plan and review care plans. They provide one to one sessions with young women when needed and direct and support staff on how best to care for the young women.

Protecting children from harm or neglect and helping them stay safe

The provision is good.

The privacy of young women at the home is respected. Staff knock on bedroom doors before entering and observation windows on bedroom doors are used sensitively to minimise invasion of privacy. All sensitive and confidential information is held securely and only shared with those that need it and are authorised to have the information.

A good complaints procedure is evident. Complaints from external parties are managed well. Young women know how to complain and they are confident they will be addressed. However, by the use of one-to-one sessions, lounge meetings and young women's council meetings, staff are pro-active in seeking out the views and concerns of the young women before they developed into complaints.

Robust and transparent child protection procedures are in place. Excellent links with the local authority designated officer and other external agencies with safeguarding responsibilities are in place. Incidents that occur at the home are referred appropriately to the local safeguarding team. All staff receive safeguarding training before working with the young women and refresher training forms part of the ongoing staff training programme. Staff awareness of child protection promotes the safety and welfare of young women.

There is a zero tolerance approach to bullying within the home. On admission, young women are given information to help them understand what bullying is, why they should talk to someone about it if it happens, and the impact it may have. Young women are clear bullying is not acceptable and that racist comments or behaviour are not acceptable either. Action is being taken through individual, group work and the school to help all young women understand the impact of bullying, to support them and to promote diversity as a positive aspect of life.

Staff are aware of action to take when young women are absent without authority and how to ensure they are welcomed on their return in a positive manner. Risk assessments are in place to support authorised outings from the home and young women work towards and appreciate this mobility when provided.

An excellent level of management scrutiny provides effective monitoring of records and incidents ensuring action is taken to protect young women. After incidents young women are seen by a member of staff not involved in the incident, they are encouraged to talk about their feelings or comment on what happened. Records of measures of control and physical restraints provide a clear detailed record of events. The registered manager signs records and comments on any follow up action required.

An effective behaviour management system is in place. Staff work well with the young women to help them manage their behaviour and any risks posed to themselves or others. Acceptable behaviour is expected, encouraged and rewarded. As a result of consultation with young women the rewards system has been amended and each hour, points are awarded for good behaviour. The young women report this is working well by helping them to manage their behaviour in school and the living units and it provides them with more incentive to behave.

Health and safety at the home is well managed. Staff ensure the environment is safe, risk assessments have been regularly undertaken and updated during the building programme, fire safety training and drills are carried out and up-to-date health and safety certificates are maintained.

Those at risk of self-harm or suicide are given appropriate consideration and individual strategies are used to care for them. Appropriate procedure are in place to help support young women who may self-harm or are anxious on admission or at other times during their stay. Staff are aware that living in a group environment can have an adverse effect on some young women and have taken action to create an environment that is as homely as possible in the

circumstances. Young women's safety and welfare are also promoted by a consistently rigorous staff recruitment and selection processes.

Helping children achieve well and enjoy what they do

The provision is good.

Young women receive good individual support, guidance and care. Staff adopt a holistic approach and are imaginative and creative when looking at ways of providing specific care. Very clear placement and care plans are in place, listing comprehensively the needs of each young woman. The placement care planning is built on the five Every Child Matters outcomes for children with equality, diversity and leisure also considered. Staff encourage and support the young women to undertake appointments with professionals within the unit. The young women observed appeared to be at ease in the company of all the staff on duty, and social interaction was both spontaneous and warm.

Staff actively support the young women in their education. The unit has a policy that aims to ensure that the young women have access to appropriate education. The school has recently brought in a certificated arts programme which offers the young women the space to express themselves creatively both in and out of school time. Files contain personal education plans. Each young woman has clear records on file of their progress at school and care staff provide support to young people with their homework. The school and care staff have clear lines of communication and work together for the best outcomes for the young women.

Individual and group activities are specifically geared towards each young woman. The unit has brought in a new activities programme which again reflects the five outcomes for children and equality and diversity. Each activity is risk assessed to minimise the risk factor for each young woman. The programme is in its early stages but is already having some success; monitoring questionnaires filled in by the young women reflected this. The views of young women who live at the home are sought via regular group meetings, council meetings and one to one sessions.

Helping children make a positive contribution

The provision is good.

Comprehensive documentation is kept on file to provide information on each young woman. The young women have placement and care plans that identify their health, physical, social, educational cultural and leisure needs. Staff review the progress of each young woman and identify changes to meet individual needs. Reviews to chart the progress of the young women take place as required.

Every effort is made by staff to ensure that admissions and discharges are planned. Preparation for leaving starts well in advance of the agreed leaving date. Good pathway plans were seen for those young women where they were needed. The home has brought in new transition plans and each young woman has a plan which is worked on during their time at the unit. This includes mobility and how this can be used for life skills training and working towards leaving the unit, such as visits to, and over-night stays at, their new placements. The plans were specific to each young woman's needs.

Staff encourage and facilitate young women to have appropriate contact with family and friends. Any restrictions regarding access are made clear to all parties. Young women confirmed they

could maintain regular contact via visits, telephone calls and letters. They also stated that they are able to make telephone calls in private and they have access to independent advocate services to help support them if needed.

Staff consult young women on a daily basis and empower them, as far as it is possible, to consider their circumstances, behaviours, relationships and interactions. The young women are provided with forums both formally and informally to discuss any choices and views they may have. This can be with their key workers or with any staff member. Staff strive to create an inclusive, reflective and participatory environment that encourages consultation and discussion. This is balanced by realistic boundaries.

Achieving economic wellbeing

The provision is good.

There is good input into preparing young women for adult life. Staff liaise closely with local authorities regarding individual plans. Young women get help with life skills such as budgeting, personal hygiene, domestic chores, sewing, health and safety and food hygiene.

The ongoing building work has left the home looking unkempt in many areas. Plans are in place to re-carpet and redecorated throughout when the refurbishment to the bedrooms and school building are complete. Where the unit has been changed it provides good and potentially excellent facilities for the young women.

The home comprises of four units with four young women living in each. The units each have a bedroom area with en-suite bathrooms, a lounge and dining area and a small office and kitchen. The home has a number of communal areas such as a quiet area, external secure yards, gym and fitness suite. There are also dedicated rooms used for young people to meet with their families and other visitors.

Organisation

The organisation is good.

Young woman and their parents receive a comprehensive range of information on how they will be cared for and what life is likely to be like at the home. This is being updated to reflect the changes to the reward scheme. There is information in a variety of formats such as leaflets, DVD and brochures and all have clear statements of how the home operates. The information is in child friendly formats and staff discuss this with young women during their first few days at the home to be sure they understand it. Information in different languages can be obtained if needed.

Although staff feel supported and managers are available when needed, all staff do not always receive formal supervision in line with the frequency set out in national minimum standards.

There is little use of agency staff at the home; care staff will, when possible, cover extra shifts to ensure young people have staff that are known to them rather than strangers. Some care bank staff are used, and plans are in place to have more care bank staff and provide them with thorough induction training. This will further help to provide consistent care and support to the young women.

The management of the unit is good, being clearly influenced by the manager’s knowledge and experience. Teaching and care staff work closely together to ensure a consistent, comprehensive approach is used in the management and running of the home. The staff group is culturally diverse with a mix of mature people and younger staff. They all receive training to help meet the needs of the young people.

Staff receive an excellent and comprehensive training programme from the beginning of their employment. This training continues and ensures that they have the knowledge of issues affecting young women to help to meet their care needs and keep them safe.

The staff are supported by the systems in place; these are monitored by the manager and regulation 33 visitor. Staff and young women can and do talk to the manager and the person undertaking the monthly monitoring visits.

The promotion of equality and diversity is good. Care is taken to assess individual needs and promote respect for difference of all types. Managers are taking action to address an inequality for young people currently unable to access primary health care provision as readily as the general population.

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
13	ensure that primary health care is available for all young women at the home (Regulation 20.2b)	31 August 2010

Recommendations

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

- ensure the meals provided offer a suitably balanced nutritious diet (NMS10)
- ensure where there has been physical intervention, the child will have the right to be examined by a registered nurse or medical practitioner within 24 hours (NMS 22.13)
- provide staff with supervision from a senior member of staff at least once a month. (NMS 28.2)