

inspection report

RESIDENTIAL FAMILY CENTRE

Jamma Umoja

94 Plaistow Lane Bromley Kent BR1 3JE

Lead Inspector
Cheryl
Carter

Announced 23 June 2005 0930

The Commission for Social Care Inspection aims to:

- Put the people who use social care first
- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

| Reader Information | | |
|---------------------|---|--|
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This is a report of an inspection to assess whether services are meeting the needs of people who use them. The legal basis for conducting inspections is the Care Standards Act 2000 and the relevant National Minimum Standards for this establishment are those for *Residential Family Centres*. They can be found at www.dh.gov.uk or obtained from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering: www.tso.co.uk/bookshop

Every Child Matters, outlined the government's vision for children's services and formed the basis of the Children Act 2004. It provides a framework for inspection so that children's services should be judged on their contribution to the outcomes considered essential to wellbeing in childhood and later life. Those outcomes are:

- Being healthy
- Staying safe
- Enjoying and achieving
- Making a contribution; and
- Achieving economic wellbeing.

In response, the Commission for Social Care Inspection has re-ordered the national minimum standards for children's services under the five outcomes, for reporting purposes. A further section has been created under 'Management' to cover those issues that will potentially impact on all the outcomes above.

Copies of *Every Child Matters* and *The Children Act 2004* are available from The Stationery Office as above.

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SERVICE INFORMATION

Name of service Jamma Umoja

Address 94 Plaistow Lane, Bromley, Kent BR1 3JE

Telephone number 020-8249-6434

Fax number 020-8464-3886

Email address

Name of registered provider(s)/company (if applicable)

Jammo Umoja

Name of registered manager (if applicable) Karen Marie Greene

Type of registration Residential Family Centre

No. of places registered

(if applicable)

9

Category(ies) of registration, with number of places

SERVICE INFORMATION

Conditions of registration:

- 1) Registration is granted conditional to the environmental standards being met by 30 April 2004 - Imposed 9 January 2004.
- 2) The centre is registered for a maximum of 9 families with the following composition in each area;

Main Building:

8 families, comprising of a maximum of 15 adults and 12 children (this number includes Room six 1 adult 1 child)

Annex flat

- 1 family comprising of a maximum of 2 adults and 1. Imposed 9 January 2004.
- 3) The above conditions have been agreed by the agency Imposed 9 January 2004.

Date of last inspection 14.06.2004

Brief Description of the Service:

Jamma Umoja is a Residential Family Centre offering assessment and treatment services for a miximum of of 9 families. the family centre is situated near the centre of Bromley in a large converted Victorian building. The accommodation is provided over three floors and there is an annex loacted on the side of the main building that has a separated access via the rear garden. Some of the rooms provide accommodation for one parent and one child while others can provide accommodation for two parents and up to three children. The Centre has in place systms and structures to monitor and evaluate the care provided. Referrals to the centre are largely received from courts across the UK to enable a full assessment to be undertaken on parents and their parenting skills with their children under close observation and supervision.

SUMMARY

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

The Inspection was carried out over six hours in the presence of the two Service Managers. This inspection focused upon outcomes for Service Users and their views of the service provided. The inspection considered the centre's capacity to meet requirements minimum standards of practice.

The main method of inspection was 'case tracking' which involved selecting service users that were resident at the centre at the time of the inspection and tracking the care they received through review of their records, discussion with them, the care staff and observation of care practices. The inspectors also addressed areas where requirements and recommendations were identified at the previous inspection.

What the service does well:

A review of records confirmed that the families' case tracked had identified needs in accordance with the Statement of Purpose. A review of records confirmed that the individual program for each resident family is based on referral information, which identifies the purpose and scope of the residential assessment of parenting skill and capacity. Interviews with staff and a review of the centre's policy demonstrated the organisations positive attitude to encouraging parents to play an active part in the information that is recorded about them, and the work that is undertaken in the centre to enable parents to make their own contribution. Staff and parents confirmed that regular meetings are made available to parents to discuss their plans and assessments. Parents have the opportunity to challenge a decision. During the inspection staff were observed to maintain appropriate boundaries with parents and children. On the whole interviews with families confirmed positive relationships with staff. Interviews with staff confirmed relationships with families are based on honesty and mutual respect. The centre has a complaints policy in place and there are systems in place to record the nature of complaints, the investigation and outcome. The centres philosophy of care places a strong emphasis on child protection. Policies are in place to incorporate the protection of vulnerable adults. Regulation 25 visits are carried out and reports are sent to the Commission.

What has improved since the last inspection?

Since the last inspection the Registered Manager has developed the centre's policies and procedures to incorporate policies on adult abuse, the management of visitors and procedures regarding privacy and confidentiality.

What they could do better:

The garden at the rear of the property although clean and tidy could be better maintained to create an ambience in line with all the efforts in place for the care of the families.

Please contact the provider for advice of actions taken in response to this inspection.

The report of this inspection is available from enquiries@csci.gsi.gov.uk or by contacting your local CSCI office.

DETAILS OF INSPECTOR FINDINGS

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Being Healthy

Staying Safe

Enjoying and Achieving - There are no NMS that map to this outcome

Making a Positive Contribution

Achieving Economic Wellbeing

Management

Scoring of Standards

Statutory Requirements Identified During the Inspection

Being Healthy

The intended outcomes for these standards are:

 Families have access to health care, education, employment and leisure activities which promote their good health and well being, including their mental health, in a safe environment. (NMS 4)

JUDGEMENT - we looked at outcomes for standard(s) 4

There are systems in place to ensure service users placed at the centre have access to a range of health services at the centre and via their General Practitioners.

EVIDENCE:

The registered manager explained the arrangements made with local GPs to ensure that service uses accommodated have access to doctors, regular immunisation programmes and health screening. The registered manager stated that a range of health services could be accessed via GP referral, including psychiatry. The service users are given information about local opticians dentists and hospitals. Each parent service user had been required to sign a consent form for medical treatment and first aid provided by home staff to either parent or child accommodated.

Family assessments are generally over 12 weeks. Children of school age are admitted to a local school during this period of assessment: Parents who are employed can continue in their employment and assessments are carried out in the evenings.

Staying Safe

The intended outcomes for these standards are:

- Parents and children enjoy a level of comfort and security within the centre based on mutual respect and an understanding of what may have an adverse effect on other residents.(NMS 8)
- The privacy of parents and children is respected and information about them is handled with appropriate confidentiality.(NMS 9)
- Parents and children are able to complain if they are unhappy with any aspect of the centre. They are confident that any complaint will be taken seriously, investigated and addressed without delay and they will be kept informed of the progress.(NMS 10)
- The welfare of children is promoted, children are protected from abuse, and an appropriate response is made to any allegation or suspicion of abuse.(NMS 11)
- Families are protected from abuse, neglect and self-harm.(NMS 12)
- All significant events relating to the protection of children or vulnerable adults within the centre are notified by the registered person to the appropriate authorities.(NMS 13)
- There is careful selection and vetting of all staff and anyone else resident on the premises.(NMS 15)
- Parents and children stay in accommodation that provides physical safety and security.(NMS 22)
- Parents and children enjoy a level of comfort and security within the centre based on mutual respect and an understanding of what may have an adverse effect on other residents.(NMS 8)

JUDGEMENT – we looked at outcomes for standard(s) 8, 9, 10, 11, 12, 13, 15, 22,

There are systems in place to record all visits to the centre, to ensure that the needs and rights of families to privacy are respected and supported, to enable service users to complain.

The centre philosophy on care places a strong emphasis on child protection

EVIDENCE:

Standards of acceptable conducted are promoted throughout the centre's information and documentation. These standards are discussed at the pre-

admission meeting and included in the placement plan, which includes where appropriate more specific agreements with individual families. There is information regarding restraint and staff are trained in the use of de-escalation techniques. It is anticipated that staff will make use of these skill in the first instance. There is a signing in book for all visitors and the home has a policy on visitors to the Unit and standards of accepted behaviour, preferred visiting times and the rights of others in the centre. Service users are responsible for the behaviour of their visitors and this is made clear at the admission meetings.

There are policies and procedures regarding privacy and confidentiality. Staff demonstrated awareness of the rights of the service users in this respect. Service users confirmed that staff respect their privacy as much as possible given the need to observe their behaviour in relation to their children. All service users have a key to their room and said that staff always knock and wait for a reply before entering their room. The home has a master key locking system that allows the staff access to a service user's room in the case of an emergency. Files are securely locked in the staff office.

All families are given information regarding the complaints procedure on admission. All complaints are recorded and investigated. There are written procedures for dealing with formal and informal complaints. On examination of the complaints file there were three informal complaints recorded since the last inspection and these were resolved and the service users where happy with the outcomes.

There are comprehensive child protection procedures in place at the home and staff are inducted into the procedures and regular training in this area is mandatory. The centre has a 'Vulnerable Adults' policy that defines how adults could become vulnerable and what action to take if there is suspicion of Adult Abuse. All staff have now received training in adult abuse.

Examination of the records and procedures confirmed that the centre's written procedures offered sufficient guidance to staff to ensure that all relevant parties were notified of any significant events in accordance with Regulations.

Information supplied in the pre-inspection questionnaire completed by the centre manager confirmed that staff with suitable training and experience have been employed to work in the centre. Duty rotas examined found the rota cover to be adequate and allowed for a considerable amount of handover discussion, shift preparation and administration. The centre manager has suitable qualifications and experience to undertake her role. Since the last inspection the centre has employed another full time manager. Both managers are qualified Social workers. A number of Staff are currently undertaking Level 3 NVQ. The recruitment process and staff files checked were found to be satisfactory.

| to the equipment in the home. There are regular tests and drills in relation fire safety. | tion to |
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Making a Positive Contribution

The intended outcomes for these standards are:

- Parents and children are admitted to and leave the centre in a planned and sensitive manner.(NMS 2)
- Children and their parents have their needs assessed and written plans outline how the assessment will be undertaken.(NMS 3)
- Parents and children using the centre feel well-informed and party to decisions made.(NMS 6)
- Parents and children enjoy sound relationships with staff based on honesty and mutual respect(NMS 7)

JUDGEMENT - we looked at outcomes for standard(s) 2, 3, 6, 7

Parents are encouraged to participate in decision-making in the Centre and relationships with staff are generally good.

EVIDENCE:

Parents and children are only admitted to the centre if their needs are consistent with what is set out in the Statement Of Purpose provided to the Social Worker. The centre has a written policy and procedure on moving in and leaving the home. Placement plans are developed to reflect the identified areas of known weaknesses and strengths in the parenting of the referred family. This information is collected from reports from social workers and preadmission meetings and these are developed alongside the core areas of assessments used for all families.

Each family has a placement plan that is reviewed at the required intervals. The key worker has regular meetings with the parent/s to provide individual support, advice and guidance. The registered managers provide support to the key workers and maintain overall responsibility to ensure that needs are being identified and fully met. The placement plans examined contained information required by Regulation 13 of the Residential Family Centres Regulations 2002 and National Minimum Standard 3.

There is evidence in the files that care planning is a joint activity with families and that individuals are listened to and their needs responded to. Service

Jamma Umoja

Users confirmed that their views are sought over key decisions, which affect their lives and future. Race, culture, religious and cultural backgrounds are considered in undertaking assessments and care plans reflected this. The centre employs an art therapist the works with parents and children. There are a number of group work and individual sessions that are carried out at the centre.

From my interview with service users and staff and examination of the Statement of purpose there is clear evidence that there are clear indicators of the standards of acceptable behaviour, boundaries within the centre and consequences for breaches in agreements. Service Users felt that staff are clear about the importance of building relationships with them and staff work hard to achieve this.

Achieving Economic Wellbeing

The intended outcomes for these standards are:

- Parents and children live in pleasant, well designed and maintained surroundings providing sufficient space and adequate facilities to meet their needs.(NMS 19)
- Parents and children enjoy homely accommodation, decorated, furnished and maintained to a high standard, providing adequate facilities for their use.(NMS 20)
- Shared spaces complement and supplement residents' private rooms.(NMS 21)

JUDGEMENT - we looked at outcomes for standard(s) 19, 20, 21

The environment is clean and well maintained.

EVIDENCE:

The accommodation is provided over three floors and there is an annex located on the side of the main building that has separate access via the rear garden. Some rooms provide accommodation for one parent and one child while others can provide accommodation for two parents and three children. The centre is well maintained and all communal areas were clean and free from hazards. Work on the conservatory outstanding at the last inspection has now been completed.

The inspector saw accommodation for three families. The rooms were well furnished and had all the furniture set out in this standard. Family group have facilities such as kitchen fittings that are appropriate for the purpose. There is a staff office on the ground floor. There is also a small sitting room and a conservatory that provides communal sitting areas for families. Regulation 25 visits are being carried out and reports are sent to the Commission

Management

The intended outcomes for these standards are:

- Parents and children who use the centre know what they can expect, how they will be treated, how the centre operates, and have had this information in written form prior to admission. (NMS 1)
- Parents' progress is recorded to reflect their ability to care for the children in a safe manner, promoting their welfare. (NMS 5)
- Parents and children receive the care and services they need from competent staff.(NMS 14)
- Staff are sufficient in number, experience and qualification to understand the needs of parents and children and who are able to respond appropriately when required. (NMS 16)
- Parents and children receive a service from staff who are themselves supported and guided in safeguarding and promoting the children's welfare.(NMS 17)
- Staff are trained and enabled to carry out the role to which they are appointed.(NMS 18)
- Parents and children enjoy the stability of an efficiently run service and purchasers have confidence that they are getting value for money. (NMS
- The service's work with parents and children is continually adapted in the light of information about how it is operating. (NMS 24)
- There are adequate records of both the staff and families using the service.(NMS 25)

JUDGEMENT – we looked at outcomes for standard(s) 1, 5, 14, 16, 17, 18, 23, 24, 25

The manager is supported in her role to provide clear leadership by her senior staff. Staff are aware if their roles and responsibilities. Systems are in place to ensure the safety of the children placed at the home.

EVIDENCE:

A comprehensive Statement of Purpose has been developed for this service. This document provides a description of the work at the centre, the accommodation and facilities and services that are available to residents during their stay. Since the last inspection the Statement of Purpose was updated and complies with the requirements of Schedule 1 of The Residential Family Centre Regulations. The Statement of Purpose is available to Staff, Social Workers, Residents, The CSCI and other professionals who may request to see it. Staff interviewed was fully conversant with the Statement of Purpose.

Discussions with staff suggests that staff are committed to keeping residents informed and aware of how their assessment is progressing and to provide access to written records on an ongoing basis. A sample placement plans found that everyone involved including parents, key worker and social workers signs these documents. Conversations with parents confirmed that they were satisfied with the levels of support and information provided by staff.

The centre provides strong leadership, management and a good range of skilled staff to deliver the service as detailed in the Statement of Purpose. There are two service managers and a social work manager, Three Family Assessment Co-ordinators and 7 Family Support Workers. An Art/Play Therapist and an Administrator and Business Manager compliments the work of the team.

Jamma Umoja provides a well-qualified and experienced core staff team that have worked together for some time. The recruitment process and files checked were found to be satisfactory, showing attention had been paid to all relevant checks. Competent family support workers staff the centre 24 hours. The staff have access to appropriate training and annual appraisals and reviews of staff performances durining probationary period are undertaken.

The Fire Records showed evidence that regular fire drill and fire alarm tests were carried out. The units PAT testing was recently undertaken and he unit has report for their fire appliances evidencing annual servicing. Gas and Electrical certificates were up to date.

The service maintains and retains satisfactory records as required by Regulation 19 of the Residential Family Centres Regulations 2002.

SCORING OF OUTCOMES

This page summarises the assessment of the extent to which the National Minimum Standards for Residential Family Centres have been met and uses the following scale.

4 Standard Exceeded (Commendable) 3 Standard Met (No Shortfalls)
2 Standard Almost Met (Minor Shortfalls) 1 Standard Not Met (Major Shortfalls)

"X" in the standard met box denotes standard not assessed on this occasion "N/A" in the standard met box denotes standard not applicable

| BEING HEALTHY | |
|---------------|-------|
| Standard No | Score |
| 4 | 3 |

| STAYING SAFE | | |
|--------------|-------|--|
| Standard No | Score | |
| 8 | 3 | |
| 9 | 3 | |
| 10 | 3 | |
| 11 | 3 | |
| 12 | 3 | |
| 13 | 3 | |
| 15 | 3 | |
| 22 | 3 | |

| ACHIEVING ECONOMIC WELLBEING | | |
|------------------------------|---|--|
| Standard No Score | | |
| 19 | 3 | |
| 20 | 3 | |
| 21 | 3 | |

| ENJOYING & ACHIEVING | |
|-----------------------------------|-------|
| Standard No | Score |
| No NMS are mapped to this outcome | |

| MAKING A POSITIVE | | |
|-------------------|---|--|
| CONTRIBUTION | | |
| Standard No Score | | |
| 2 | 3 | |
| 3 | 3 | |
| 6 | 3 | |
| 7 | 3 | |

| MANAGEMENT | | |
|-------------|-------|--|
| Standard No | Score | |
| 1 | 3 | |
| 5 | 3 | |
| 14 | 3 | |
| 16 | 3 | |
| 17 | 3 | |
| 18 | 3 | |
| 23 | 3 | |
| 24 | 3 | |
| 25 | 3 | |

Are there any outstanding requirements from the last inspection?

STATUTORY REQUIREMENTS

This section sets out the actions which must be taken so that the registered person/s meets the Care Standards Act 2000, Residential Family Centres Regulations 2002 and the National Minimum Standards. The Registered Provider(s) must comply with the given timescales.

| No. | Standard | Regulation | Requirement | Timescale |
|-----|----------|------------|-------------|------------|
| | | | | for action |
| 1. | | | | |

RECOMMENDATIONS

These recommendations relate to National Minimum Standards and are seen as good practice for the Registered Provider/s to consider carrying out.

| No. | Refer to Standard | Good Practice Recommendations |
|-----|----------------------|-------------------------------|
| 1. | | |

Commission for Social Care Inspection

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