

# Inspection report for children's home

**Unique reference number** SC046276 **Inspection date** 05/05/2011

**Inspector** Michelle Oxley / Jim Palmer

**Type of inspection** Full

**Provision subtype** Secure Unit

**Date of last inspection** 05/05/2011



# **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 to assess the effectiveness of the service and to consider how well it complies with the relevant regulations and meets the national minimum standards.

The report details the main strengths, any areas for improvement, including any breaches of regulation, and any failure to meet national minimum standards. The judgements included in the report are made against the *Inspections of children's homes – framework for inspection* (March 2011) and the evaluation schedule for children's homes.

#### The inspection judgements and what they mean

**Outstanding**: a service that significantly exceeds minimum requirements

**Good**: a service that exceeds minimum requirements

**Satisfactory**: a service that only meets minimum requirements **Inadequate**: a service that does not meet minimum requirements

#### Service information

## **Brief description of the service**

This secure unit is managed by a local authority. The unit is registered as a secure children's home and is approved by the Secretary of State to provide secure care and accommodation. The unit is currently providing placements for up to 10 young people aged from 10 to 17 years. Youth Justice Board officials are able to place a young person on a spot purchase basis should it be identified that they would benefit from a placement at the unit.

Formal education for all the young people at the unit is provided on site. The facilities include an indoor gym and sports hall, external recreation areas, a music room, garden and poly-tunnel for horticultural use. There is also a vocational kitchen on site which is available for use by the young people.

## Overall effectiveness

The overall effectiveness is judged to be **good**.

The unit continues to develop positively, building on its nurturing ethos and an approach to care which takes account of young people's diverse backgrounds and welfare needs. The management team are forward thinking and demonstrate a desire and an ability to drive the service forward. Managers are effective leaders who model excellent practice. The service operates robust systems to ensure that child welfare concerns are effectively managed and that young people are protected. The staff team approach their work with commitment and good care. Behaviour is well managed through creative strategies, using the principles of restorative justice to which young people respond well. Mobility is used imaginatively and effectively, producing some excellent results for young people.

A more rigorous approach to the completion of records and logs is required to facilitate accurate record keeping. Attention to the effective deployment of staff and the gender balance of the team is recommended in order to improve the quality of care delivered. The Registered Manager continues to pursue services to provide increased support in the area of mental health in order to reinstate the level of provision previously in place.

# **Areas for improvement**

## **Statutory Requirements**

This section sets out the actions which must be taken so that the registered person/s meets the Care Standards Act 2000, Children's Homes Regulations 2001 and the National Minimum Standards. The registered person(s) must comply with the given timescales.

Reg.	Requirement	Due date
28	maintain in respect of each child who is accommodated in a	10/07/2011
(2001)	children's home a record in a permanent form which is signed	
	and dated by the author of each written entry. (Regulation 28	
	(1))	

#### Recommendations

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

- ensure targeted assessment of young people's needs in providing greater independence skills (NMS 12)
- ensure that the staff group in day to day contact with young people includes staff of both genders (NMS 17.10)
- create an overall development plan to inform the future direction of the service.
  (NMS 15.2)
- ensure that staffing arrangements facilitate young people's increased participation in meaningful leisure activity and one-to-one time with staff (NMS 17.1)
- ensure that children are able to receive specialist mental health services in a timely manner (NMS 6.9)
- ensure that a detailed accurate record of medicines administered is maintained (NMS 6.15)

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# Outcomes for children and young people

Outcomes for children and young people are **good**.

Staff work with and support young people based on an understanding of their diverse backgrounds and needs. Key workers are particularly adept at helping young people to develop emotional resilience and self confidence, supporting them with sensitivity and care. One young person who had received some difficult news since being place at the unit said, 'My key worker was there for me, he helped me not to worry, he made sure that I got the help I needed'. Another young person has worked closely with their key worker and has learnt how to use sign language. The young person was able to demonstrate how this newly found skill has helped them to develop self confidence and communicate with others whilst out on mobility.

The team ensure that young people are able to maintain important relationships with family and other approved contacts. Young people are able to use the telephone to keep in contact outside of school hours. Calls from relevant professionals such as social workers can be taken at anytime. A room is set aside where young people can receive visitors. Young people are aware of the arrangements for receiving visitors and say that they are told about these when they are first admitted to the unit.

Mobility is used imaginatively and to good effect. Although risk assessed, the use of mobility is not dependent on behaviour within the unit, this impacts favourably as young people are routinely able to demonstrate their ability to behave in a socially acceptable manner outside of the context of a secure setting. The team provide young people with some excellent opportunities to develop their skills and to make links with the wider community. One young person who has found it difficult to settle in a secure setting has responded remarkably well to working with horses. The young person has been given the opportunity to interact with members of the public as well as developing work based skills, producing extremely positive results. Young people have also had good opportunities to make links with local organisations, some have delivered leaflets on behalf of the local church group, and others have contributed to a local news letter. This has been achieved by creatively linking mobility with the restorative justice process.

All young people are currently receiving a package of education. In the main young people participate willingly and are aware of the benefits gained from attending. All were up and ready for the school day during this inspection visit. Many young people placed have not attended school for significant periods of time prior to this placement and therefore by engaging they are making progress and significant changes to their life style and enhancing future opportunities.

The Award Scheme Development and Accreditation Network (ASDAN) system is utilised for the development of skills for adulthood and resettlement, promoting learning in a range of areas such as food hygiene, parenting, cooking and laundry. A small kitchen area is set aside for the purpose of developing independent living skills which young people enjoy using, but which is currently not being used to its full potential. Individual assessment of need and detailed individual planning around a more targeted approach to preparation for adult life is not yet established. In relation to moving on, a designated member of staff operates as a resettlement coordinator and there is good evidence that the service works in conjunction with placing authorities to produce clearly defined exit plans for each young person.

Young people say that they feel their medical needs are met. All young people are registered with a local doctor, dentist and optician. If young people express a preference for specific health professionals based on gender or culture, staff will seek to make those arrangements. Young people say that they are able to choose a doctor of their preference and are happy with the arrangements for their health care. Young people receive good opportunities to learn about healthy lifestyles. Health education is well promoted by staff including, the nurse, teaching staff, substance misuse services and residential staff. Young people have regular access to substance misuse counsellors and undertake group work in drugs, in sexual health and diet in order to support healthy lifestyles.

There is a wide variety of attractively presented, well cooked plentiful meals available to young people. The catering team seek the views of young people when they design the menu, these include personal preferences and reflect cultural and any special dietary need. Fresh salads and a vegetarian option are available for all main meals. At weekends and in holidays a more relaxed cafeteria arrangement is in place and young people enjoy ordering their food directly from the catering staff. All menus' are colour coded using a traffic light system so that young people can identify and learn about healthy options at a glance. Most meals are taken in the dining room. During the inspection these were pleasant relaxed social occasions, with young people remaining in the dining room in small groups holding informal conversation after the meal was concluded, providing a sociable experience.

### **Quality of care**

The quality of the care is **satisfactory**.

The approach to care giving is one that is increasingly based around the development of strong nurturing relationships and a recognition of welfare needs. Relationships between staff and young people are good humoured and supportive. Young people receive a good level of emotional support from the team; the approach is flexible and sensitive. One young person said, 'I like the staff, there isn't anyone I don't get on with, they all want to help us'. Consequently young people are more inclined to behave in a socially acceptable manner. During the visit the behaviour of young people and their interactions with the staff team were positive and helpful.

Young people are cared for in line with their assessed needs as set out in their placement plans. The plans are detailed and link clearly to the local authorities plan. Key workers are responsible for ensuring that the plans are up to date and that they incorporate the diverse needs of young people. Placement plans which were examined included needs arising from race, culture, religion and gender. The staff team ensures that review process is held in a timely fashion and that young people are fully involved and recommendations from reviews are incorporated in to plans for care. When required the home has acted as a strong advocate on behalf of young people, supporting them to actively participate in the review process.

Permanent staff operate as designated key workers for individual young people. Key workers are effectively deployed and regularly support young people on a one-to-one basis. Key worker time is given a high priority and is important and valuable to young people. However, young people consistently stated that due to a recent rise in the number of residents staff do not have sufficient time to dedicate to activities and informal requests for one-to-one time. This is attributed to the current staffing arrangements which results in a mixed team of permanent staff and agency staff who do not have the same level of responsibility. Young people also noted that on some shifts the gender balance of the staff team does not reflect that of the young people living at the unit. They felt that this could be particularly problematic when they needed to approach staff with a personal concern. These matters have been raised with managers who have taken steps to rectify the issues by recruiting additional permanent staff. However, at the time of this inspection visit the recruitment and selection process was still underway.

The views of young people are routinely sought and have become integral to the day to day operation of the unit. Staff were observed interacting with young people in a democratic manner, consulting them about decisions that impact upon their daily living experiences, listening and responding positively. On a formal level there are good systems in place to ensure that young people's views are heard. Young people meet weekly as a group to decide which issues they would like to discuss with managers. Two young people are nominated to attend the weekly management team meeting where any issues are discussed. A recording system has been introduced to note the action taken in response to young people's comments, providing a more effective audit trail to monitor consultation with young people.

Young people know how to raise a complaint should they be unhappy with any aspect of the service provided. They say that they are given written information about how to complain when they arrive, in addition, staff explain the procedure to

them. All complaints are comprehensively recorded and include the process of investigation and the outcome. Staff react swiftly in order to improve practice in response to information received as a result of young people's complaints.

Staff support young people to attend and to attain at school. The transition between home and school operates smoothly, young people are aware of the daily routine and expectations for attending school. There are good working relations between care and education staff. Young people are rarely removed from class, when this does occur young people are supported to engage in educational activities with the care team. Programmes of education are tailored around the individual; the service uses mobility as a tool for education purposes and will draw on young people's interests to engage them creatively. Outside of school hours young people enjoy completing ASDAN courses and workbooks in a range of subjects such as equine management, animal care, anger management and first aid for which they receive certificates. These activities are a successful means of highlighting the value of learning and young people are keen and interested participants.

There is a robust system to ensure that all young people receive a health assessment shortly after admission. This is usually undertaken by the unit nurse or the visiting doctor, who holds a weekly clinic. If young people have immediate medical needs on admission the staff will call the duty on-call doctor to carry out an immediate assessment. All young people have individual health plans, ensuring that needs are identified and can be met speedily. A current consent for medical treatment was not present on all of the young people's files, though these were being sought by staff, to ensure there is no delay if medical treatment is required.

Young people's medicines are securely stored in the home. All staff who administer medicines have received training from a local pharmacist and the home's nurse. However the administration of medicines is not always accurately recorded and errors were found between the recorded stock levels and those medicines actually held.

Young people's emotional and psychological health is supported by the use of a clinical psychologist, who works with staff and young people in order to develop strategies to address identified needs. A weekly multi-disciplinary meeting holds an overview of case management and regularly reviews the emotional needs of young people and referrals to specialist agencies may be made as a result. However the consultant psychiatrist had recently retired and a replacement is being sought. The mental health team currently has no community psychiatric nurse available to young people despite the very best efforts of the management team. As a result there may be a delay in accessing such services for young people.

Since the last inspection five young people's bedrooms have been redesigned and improved. These offer increased privacy in the form of window blinds and new doors with frosted glass portholes. Rooms provide ample storage and are all fitted with televisions. Young people are able to choose their own bedding and where risk assessment allows can personalise their rooms. Communal facilities are well maintained and are sufficient to meet number and needs of young people. There is

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ample space indoors and within the secure area for relaxation and facilities to occupy young people in meaningful activities are available.

# Safeguarding children and young people

The service is **good** at keeping children and young people safe and feeling safe.

The staff team has worked particularly hard to ensure that the systems in place to protect and promote young people's welfare are robust and transparent. Young people say that they feel safe and protected at the unit and all could identify a member of staff who they would talk to if they wished to raise a concern. Records relating to child welfare concerns are well maintained and demonstrate good working relations with Local Children Safeguarding Boards. Effective consultation and a prompt referral process are in place in order to protect young people. The process is monitored and quality audited by a member of the management team. Staff receive regular training opportunities consistent with their role, to ensure that they are able to identify safeguarding concerns. They know how to react should they receive an allegation or have suspicions that a young person is at risk of harm. Young people are visited regularly by an independent advocate who is able to raise their concerns with the manager. The current advocate is well known to young people who say she is approachable and helpful.

The managers continue to promote an approach which stresses the importance of avoiding the use of physical interventions and sanctions as a means of managing behaviour. They support a non punitive culture which operates around an incentive scheme, rewarding positive behaviour and which uses the principles of restorative justice. These are underpinned by the development of nurturing relationships and an understanding of young people's backgrounds and welfare needs. Young people respond well to this approach and understand its benefits. One young person said of the progress they had made, 'now, I listen more, I get on with people better, particularly adults'. Young people are supported to gain an insight in to their own emotional responses resulting in a service which helps them to manage conflict and maintain relationships. The restorative approach continues to develop positively, leading to an overall reduction in the use of physical interventions over the last twelve months. Restorative justice is now used more extensively and creatively, although there is still a little way to go before the approach is fully embraced and embedded across all of the staff team. There are processes in place to monitor the use of physical restraint, sanctions and single separation. All records are monitored by the management team and all incidents are discussed with the team in order to examine alternative and future approaches.

Risk assessments are carefully carried out and adhered to. Risk management strategies are developed through a multi disciplinary approach to identifying and devising preventative strategies. These are supported by good written documentation and effective cross team communication. Room searches are carried out on a frequency that relates directly to the assessed risks and young people say these are not excessively intrusive. Risks related to self harm are skilfully and proportionately managed. Strategies are devised by the clinical psychologist and implemented by the team. The approach is individualised and supportive and has resulted in a reduction of self harm in those cases examined.

Procedures which are devised in conjunction with the local police force are in place to protect young people who go missing from the unit or from mobility. Since the last inspection visit there has been one incident of a young person going missing from mobility. This was dealt with in line with the homes protocol ensuring that relevant

agencies and individuals are informed.

The staff team remains stable with only one new appointment since the last inspection. Recruitment records for established staff have been previously examined and found to be held in line with the requirements of the legislation. The local authority has provided written confirmation of the recruitment process and has verified that all the relevant documentation has been obtained.

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The health and safety of the building is overseen by a designated member of staff who carries out this role efficiently and effectively. All relevant safety checks of the building including fire safety and risk assessments are up to date. The building is secure with a new separate secure entrance for staff now in operation. The home is covered externally and internally in communal areas by closed-circuit television.

#### Leadership and management

The leadership and management of the children's home are **good**.

The service is operated by a well motivated management team who demonstrate a determination to develop and improve the service for the benefit of young people. The Registered Manager has ensured that all recommendations and requirements set following the last inspection have been met in full. Since the last inspection the home has employed a new deputy manager who has a full range of responsibilities related to the care of young people and the management and supervision of staff. The Registered Manager leads by example and is an excellent role model. He promotes supportive nurturing relationships and emphasises the requirement to respond to diverse needs.

The staff team demonstrates commitment to providing good quality care. Team moral is good and staff feel that they work well together. Staff retention is good and a system to monitor of staff absences is in place. Care staff are well supported through the supervision and appraisal process. Supervision records are up to date and provide a comprehensive record of the process. Staff receive good training opportunities. All mandatory training is up-to- date and staff feel that they are supported to develop their skills relative to the needs of young people. Training needs above and beyond mandatory training are identified through supervision and appraisal.

Staff work across three teams with four or five members of care staff on duty. The teams are made up of permanently contracted staff and a team of non-contracted staff who work on an agency basis for the local authority. All staff have regularly worked at the home over a number of years, providing stability and consistency of care. An additional member of staff comes on duty at 6pm to help out with activities. The manager has been in recent negotiation with the local authority to establish additional permanently contracted staff. This will negate the use of staff who work on an agency basis and give more responsibility for individual work to all team members; currently agency staff do not have the same level of responsibility as permanent staff. An agreement has been reached to employ an additional seven permanent staff.

There are good systems in place to monitor the performance of the home these include monthly Regulation 33 visits. The latest report demonstrated a significant improvement in the quality of reporting on the findings of the visit to which the manager has responded. All the requirements set out in Schedule 6 of the Children's Home Regulations 2001 are rigorously monitored. Statistical information is produced regarding the use of restraint, single separations, incidents and sickness and absence, these are shared with the staff team and used to inform future practice. All significant incidents are recorded and reported promptly to relevant agencies as required. There are a number of development plans in place related to different aspects of the operation of the unit. These demonstrate an understanding of the unit's strengths and weaknesses and how the unit intends to proceed. However, there is no overall comprehensive plan for the development of the unit which includes quality monitoring information to provide a more holistic overview for future progress and improvement.

Case files, log books, records and other sensitive information are stored securely.

Children's files contain a good level of information which contributes to an understanding of young people's lives. However a number of recordings are not signed or dated despite there being a system in place to quality audit files. Several records including medication logs contain similar errors.

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The management team and staff have established good relations with other professionals and the wider community. Communication with social workers is reported to be good with key workers making frequent contact in order to consult about arrangements for care; social workers receive a monthly progress report for each young person. The home is currently working in conjunction with a well know horticultural project with a view to redesigning the outside space

Equality and diversity practice is **good**.