

### Inspection report for children's home

Unique reference number Inspection date Inspector Type of inspection Provision subtype SC036740 21/06/2011 Shaun Common / Jim Palmer Full Secure Unit

Date of last inspection

08/12/2010

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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 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**

The home is managed by a local authority and is located in a small town in the Midlands. It comprises three purpose-built separate living units, providing a total of 18 secure places, catering for children and young people aged between 10 and 17 upon admission.

Two of the units provide care for six boys and the other unit caters for six girls. The home has education on site and internal and external recreation areas are available. The home also has a large gymnasium and a range of other accommodation, including offices, kitchens, medical and meeting rooms. High levels of security are maintained within the building and within the secure perimeter there is access to a BMX track. Mobility, time away from the home, is provided subject to risk assessments and agreement with the placing authority.

Three of the 18 places are for children placed on welfare grounds and 15 are commissioned by the Youth Justice Board for those serving sentences or remanded by the courts to a secure setting.

## **Overall effectiveness**

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

Effective plans detail young people's assessed needs and how these needs will be met. However, the names of the individuals responsible for aspects of planning objectives are not always clearly recorded in the documents. Young people have their health needs assessed and appropriate support ensures good health outcomes. There is very good attendance at school and very good progress in education is made. Young people have access to a range of activities that they can enjoy and supported to keep in touch with people important to them.

Staff have very good relationships with the young people and support them effectively. They use encouragement, incentives and role modelling to help young people develop socially acceptable behaviour which delivers positive outcomes.

Staff are knowledgeable, appropriately qualified and experienced; however, they are not well supported through formal supervision. Not all staff have undertaken some important training which would help them to provide the best care possible for young people.

Young people are kept safe, though some processes and procedures are not robust to ensure the safest possible care and environment are provided. Young people are able to give their views of their care and these are taken seriously and acted upon to improve overall provision. Young people know how to complain and concerns are addressed in a timely manner.

External monitoring processes are inconsistent and visitors under Regulation 33 do not examine or consider some important matters at each visit. Internal monitoring by the Registered Manager covers a range of relevant matters indentifying shortfalls and making improvements. However some processes are not monitored effectively with the potential to affect the safety and well-being of young people. Areas for improvement identified at the last inspection have not all been addressed.

# 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
16 (2001)	revise the written policy which is intended to safeguard children accommodated from abuse and neglect to set out a detailed and specific procedure to be followed by staff and managers in the event of any allegation of abuse or neglect (Regulation 16, Working Together to Safeguard Children 2010 (Chapter 11 and Appendix 5), Children Act 1989 Volume 5 (2.68))	31/07/2011
34 (2001)	maintain the system for improving the quality of care provide in the children's home; specifically ensure that items 6 and 8 of Schedule 6 are robustly monitored, any shortfalls identified and improvements made as appropriate (Regulation 34(1)(b)	01/08/2011
23 (2001)	ensure that all parts of the home to which children have access are so far as reasonably practicable free from hazards to their safety; specifically ensure that policies and practice, agreed with the Local Safeguarding Children Board, relating to routine searches of communal areas, are in place and implemented (Regulation 23(a), NMS 23.3)	31/07/2011
26 (2001)	ensure full and satisfactory information is available for all staff in respect of each of the matters specified in Schedule 2; specifically items 3,4 and 6 of that Schedule (Regulation 26(3)(d))	31/07/2011
27 (2001)	ensure all staff receive appropriate levels of formal supervision (Regulation 27)	01/07/2011
27 (2001)	ensure that all staff receive appropriate training that is kept up to date and that evidence of such training is provided, specifically in child protection, anti-bullying, complaints, safe handling of medicines, first aid and resettlement (Regulation 27(4)(a))	31/12/2011
33	ensure that visitors under this regulation interview children,	01/07/2011

(2001)	their parents, relatives and persons working at the home and inspect the premises and records of complaints at each visit.	
	(Regulation 33(4))	

### Recommendations

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

- effectively monitor all records, specifically staff training and supervision and policies, procedures and their implementation (NMS 21.2)
- ensure that children's views, wishes and feelings are acted upon in the day to day running of the home, specifically by ensuring an outcome to issues raised by children in council meetings is provided to them and recorded in the minutes (NMS 1.1)
- make suitable arrangements to manage medication, specifically ensure that a controlled drugs register is maintained in a hard bound page numbered book and appropriate records are kept for non-prescribed medications in accordance with good practice, as detailed in the Royal Pharmaceutical Society of Great Britain guidance (Children Act 1989, Guidance and Regulations Volume 5, 2.51)
- submit the child protection procedures, when revised, to the Local Safeguarding Children Board and the Local Authority Designated Officer for consideration and comment (NMS 20.4)
- devise a system that sets out a robust record for any allegation made against a staff member as set out in the national minimum standard (NMS 20.7)
- ensure a written report of a visit carried out under Regulation 33 is lodged in the home in a timely manner for the manager and staff to read and respond to; ensure that visitors inspect restraint records at each visit (NMS 21.7 and 21.8)
- ensure that individuals responsible for pursuing actions at the home arising from reviews of care plans are clearly identified in such plans. (NMS 25.8)

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

Good health outcomes for young people are promoted by the provision of a wide range of services, including psychological and mental health. Good liaison between professionals and regular monitoring ensure that all health concerns are addressed. Regular health assessments take place and all appointments, treatments and outcomes are recorded in case records. Specialist health care services are available if required and appropriate.

Young people are provided with advice and support by staff from the home and visiting specialists, in areas such as sexual health, relationships, healthy lifestyles, substance misuse, exercise and diet, personal hygiene and behaviour management. This ensures young people have the knowledge and information they need to develop a positive and healthy lifestyle.

All young people have very good levels of education attendance. If young people do not attend school, staff work with them to achieve attendance at the earliest possible opportunity. The home promotes and delivers a routine that encourages attendance and learning. Reports available show that young people make excellent progress while at the home ensuring they develop, progress and achieve.

Young people say that they feel they have benefited from their educational experience while at the home, and are now undertaking GCSE course work that they had not previously considered possible. Young people who spoke to inspectors said this has increased their confidence significantly and has helped them to develop a more positive view of themselves. Each young person is encouraged and supported to complete any homework set. This can be completed in the dining room or individual bedrooms.

Young people are encouraged to develop their potential and are involved in a range of activities designed to promote self-esteem, such as participating in gaining awards in national arts and literature events. Young people have been involved in working with external artists in creating some excellent decorative murals and in the creation of some very high quality art work using plastics technology. Programmes of work are designed to take into account individual skills and enable young people to succeed wherever possible.

Contact arrangements are clearly recorded in care plans, are known and followed by staff. Young people are able to keep in touch with people important to them through visits to the unit and by telephone. This enables young people to develop and strengthen relationships with family and others providing them with important networks and links into adulthood.

Discharge planning takes place from the time a young person is admitted to the home. Staff and managers work with young people's social workers and youth offending team to ensure that planning for the return to the community takes place in a timely manner. When this is not the case the home advocates on behalf of the young people and a process is in place for reminding local authorities of their responsibilities. Young people are encouraged to carry out daily practical tasks within the home to encourage the development of the skills they will need to live more independently in the transition to adulthood. This is undertaken informally and is consistent with young people's age and stages of development.

For young people who are placed at the home for long periods good planning and good quality preparation for returning to the community is being developed. This more formal comprehensive resettlement pack includes enabling access to community resources and visits to the area that a young person will move to with a mobility plan. In the case of young people on short-term placements this initiative will have less impact. Most young people say that they have benefited from the support they are receiving and are more confident of a successful return to the community than when they were admitted to the home.

### **Quality of care**

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

All young people have placement plans which identify individual needs and risks. These are monitored by staff and managers through a weekly multidisciplinary team meeting. This process ensures plans are being progressed and implemented. Young people are fully involved in reviewing their development and progress and are invited to attend placement reviews. However, some plans lack specific details about timescales and who will undertake what tasks and by when. The evaluation of some targets is also not always clearly recorded in case files, although the home does hold some target monitoring information on electronic records. As a result it is not clear in all cases what action is being taken to ensure young people's needs are being met. Young people's cultural and religious needs are assessed, planned for and supported.

Young people are able to discuss any personal concerns with any staff member, which helps them to develop a sound understanding of the reasons for their placement and a more positive approach to planning for their future lives. Young people benefit from positive relationships with staff, who display a thorough knowledge of individual young people's backgrounds, their identified needs and action required to meet those needs. Staff challenge inappropriate behaviours in a skilful, constructive, firm but caring manner, helping young people to reflect on their behaviours and the impact that this may have on themselves and others. Most young people say that this helps them to develop more positive strategies for self-managing their behaviours.

All young people have an initial medical examination from a visiting doctor shortly after admission. A visiting nurse carries out a health assessment with all young people, usually within 24 hours of admission. Each young person has a detailed personal health plan, which identifies physical and emotional health needs. This is regularly reviewed and updated. Mental health assessments and screening are also undertaken on admission and any needs are identified and appropriate support provided.

There is a very good range of health facilities available to all young people. These take into consideration any individual preferences or needs that may arise from any cultural, religious or personal circumstances. Appropriate consents for emergency medical treatment are held, ensuring that all young people can receive treatment without delay so they stay healthy and well. All young people are registered with a doctor, dentist and optician. The visiting doctor and visiting nurses are also available to young people for advice, guidance and treatment, and both hold twice weekly surgeries. Emergency medical services are available to young people outside of those times.

Specialist psychological and emotional health needs are well catered for through a range of services. These include a consultant psychiatrist, child and adolescent mental health workers who are available each weekday in the home for young people, and various therapists. Specialist health professionals provide support and guidance to all staff and members of the professional services team who provide individual support to young people in managing complex emotional and behavioural issues. The network of health professionals and staff review the emotional well-being of young people regularly to ensure that appropriate resources are provided to

support and care effectively for young people.

All medicines are securely stored, which keeps young people safe. A clear administration process shows that young people get the medicine they need, when they need it, to stay healthy and well. However, records of the administration of controlled drugs are held in individual young people's health records and no single controlled drugs register is maintained in line with best practice. There is no stock control system for non-prescribed medicines such as paracetamol. Records of administration of young people are recorded on individual health records; however, staff occasionally access this medication for personal use and there is no mechanism for recording this and hence auditing the stock held.

The home is appropriately maintained and is well decorated and furnished throughout. It provides an environment that is conducive to the safe, positive and secure care of young people. There is a maintenance team, who attend to any repairs that are required, in a timely manner. There is a rolling programme of improvement work to ensure that all units are refurbished to the same good standard.

Staff hold daily meetings with young people, and individual keyworker sessions take place regularly, affording young people the opportunity to discuss any aspects of their care and the running of the home. Young people have been involved in the planning and design of some impressive art works in recreational areas. They have also had some choice in décor of rooms and furnishings

A monthly young people's council meeting is held and they are able to approach any staff member to share their views and discuss aspects of life at the home. There are examples of how young people's views expressed at these meetings have resulted in changes, such as in how food is provided and the content of the welcome guide. Young people informed inspectors that if their views and wishes cannot be acted upon they are always offered an explanation of the reasons why this may not be possible or in their best interests. However, there are occasions when young people have given their views and made requests and the records do not reflect that these have been considered.

There is an imaginative range of leisure activities available to young people, given the limitations of a secure unit with a small outside area. Facilities include a small garden area in an inner courtyard, which provides a valuable activity for a small number of young people. There is an outdoor BMX bicycle track and an outdoor area used for football and socialising. Indoor activities include the use of the gym, indoor sports, computer games, hairdressing, cooking and arts and crafts. Young people say there is a sufficient range of activities and enrichment opportunities provided, but that at times they can be repetitive. Young people are able to make suggestions for new leisure activities.

A complaints policy and procedure operates effectively to ensure young people can raise concerns that are appropriately responded to in a timely manner. Complaints forms are accessible to young people and staff support them to access the procedure where required. Young people gave examples of where complaints had been dealt with and stated they felt confident in the process. Complaints are fully recorded showing the matters of concern and how these are addressed with the outcome. Young people are able to write their comments in relation to the outcome of the complaint. There is a process for them to take complaints to further stages if they are dissatisfied.

The home has regular visits from an advocacy service. Young people can see the visitors in private and have the means to contact advocates for advice and support. There is evidence to show young people have received support from advocates when making a complaint.

Young people's dietary needs are assessed on admission. Their individual needs such as any health issues, allergies, religious or cultural needs are planned and catered for. The cook meets with each young person as soon as possible after admission. She ensures she is aware of background information, young people's likes and dislikes and provides balanced meals for young people which are prepared in the main kitchen. A main meal choice is provided, however, young people can also choose from several other options each day. Each of the three individual units in the home has a dining area. Staff and young people are able to prepare snacks and cook in the small kitchens located on each unit. All young people spoken with said that the food was plentiful and generally well cooked and enjoyable.

#### Safeguarding children and young people

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

All child protection matters are dealt with by referral to the local authority children's services department and through discussion with the Local Authority Designated Officer (LADO). However, some aspects of the internal process and procedure for dealing with safeguarding concerns lack clarity and could compromise children's rights. For example, issues raised through complaints or internal monitoring follow a process that includes preliminary checks by managers before referral to the local authority or discussion with the LADO. This process is not included in the child protection procedure, which lacks clarity and has not been agreed with the Local Safeguarding Children Board and therefore may contradict best practice. The records relating to allegations contain some details, but are not sufficiently robust to show all action taken and how decisions were reached. Staff have a satisfactory understanding of how to deal with any safeguarding matters though not all staff have undertaken training or have up-to-date training in child protection to help them keep young people safe.

There have been no absences of young people without authority. Although incidents of bullying do occur, there is an anti-bullying policy and a zero-tolerance approach by staff to bullying behaviour. Young people stated that bullying does occur sometimes, but staff address it fully and immediately. This means young people are kept safe. Young people report that the anti-bullying strategy is effective and that there are good opportunities to discuss the impact of each other's behaviours on the group in daily meetings.

There are very good relationships between young people and staff. Behaviour management plans show how staff will provide appropriate support and keep young people safe. Staff set reasonable and appropriate boundaries and expectations for young people and encourage them to develop social skills. There is an incentive scheme that young people understand. Young people stated that the scheme helps them to change their behaviour, is fair and has good rewards. Young people are therefore encouraged to develop socially acceptable behaviour through incentives, rewards and positive relationships with staff.

The home has a restraint minimisation strategy, which sets out how the use of physical intervention will be minimised and has a focus on positive relationships, diversion and de-escalation. Staff are trained in the use of physical restraint which is used as a last resort. As a result of the strategy and de-escalation the use of physical restraint has reduced in the last 12 months.

Sanctions used are appropriate to the misdemeanour and are fully recorded on each occasion. When a sanction is imposed, young people have the opportunity to negotiate a reduction or cancellation of the sanction by demonstrating more positive behaviour or making amends. Most young people stated that sanctions are fair.

The use of single separation is also appropriate and accurately recorded. Records include young people's views; this encourages young people to develop understanding and responsibility.

A policy and procedure are available for searches of young people and living areas.

The procedures incorporate a risk-led approach and a focus on the process for locating restricted items inside the secure perimeter. However, the procedure and practice do not evidence that routine searches of all living areas are carried out in a robust and methodical manner.

Health and safety matters are managed very well, which helps to keep young people safe. For example, maintenance is carried out on portable electrical appliances, gas installations, fixed electrical wiring and fire equipment. Thorough risk assessments take place of young people's likely and known activities. These are known, understood and followed by staff which helps them keep young people safe. Staff and young people participate regularly in fire drills. This ensures that all know what to do to stay safe.

The home has employed a number of new staff since the last inspection. The recruitment process is robust in some aspects but not in others. In one case there was lack of clarity in relation to a reference provided and gaps in employment history. In another case there were gaps in employment history and checks were not carried with previous employers where the individual had worked with children, to ascertain the reasons for leaving the post. The recruitment process is therefore not sufficiently robust to ensure as far as is possible, that the right people are employed to work with vulnerable children.

#### Leadership and management

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

The home's Statement of Purpose has been recently reviewed and sets out clearly the home's aims, objectives and services. The children's guide developed by the home is in a suitable format. It has recently been reviewed and updated with young people contributing to this process. It shows the rules, routines and services that young people can expect. Young people's records are accurate, kept up to date and provide information that will help in their understanding of their care.

The Registered Manager is very experienced and qualified and an experienced deputy manager is in post to take charge of the home in the manager's absence. Sufficient staffing levels are provided to care for the young people and keep them safe. In each unit, there is a minimum of two staff on duty at any time, but usually three and sometimes four. Staff are knowledgeable and mostly qualified and there is a good mix of experience. Where staff are not yet qualified they are undertaking formal induction and foundation training, are undertaking a suitable qualification or are waiting for a place on the next available course. They have not, however, undertaken sufficient training in all areas to support them to deliver the best possible care to young people. Not all have undertaken training or have up-to-date training in complaints, anti-bullying, resettlement, child protection, first aid and the safe handling of medicines. They are provided with inconsistent support from their line managers in that formal supervision is good for some but sporadic or lacking for others.

External monitoring visits under Regulation 33 of the Children's Homes Regulations 2001 take place by designated persons to each of the three individual units. Reports focus on each unit's strengths and highlight any areas for improvement. However, all visitors do not comment on or examine the environment, complaints and physical restraint records at each visit. The visitors do not always speak with young people and reports are not always provided in a timely manner after the visit. The home at the time of the inspection had not received a report for a visit to one unit carried out the previous month. Therefore visits help the home to improve the quality of care provided to young people in some respects, but some important areas that would assist improvement are not always examined.

Internal monitoring processes are in place these are not however fully effective. The Registered Manager ensures that practice is monitored so trends and patterns are recognised; shortfalls are identified and addressed to improve the quality of care. A weekly management meeting oversees and monitors the holistic care provided to each young person, including care planning, risks and behaviour management. This process helps to ensure that objectives to meet the needs of each young person are being progressed and the best possible outcomes are achieved. However, some matters are not sufficiently monitored which has the potential to affect the safety and well-being of young people. The child protection procedure is not sufficiently detailed. Some complaints that should be considered as part of the child protection policy do not routinely record the action taken and how decisions are made. Staff are not adequately supported through regular formal supervision and training. Shortfalls are evident in the recruitment process and records. Procedures relating to searches lack details and routine searches of the living areas do not take place.

The home has made inadequate progress since the last inspection. Some matters have been resolved; however, two statutory requirements and a recommendation from the last inspection have not been met. This means important matters that improve the care provided to young people have not been satisfactorily addressed.

Equality and diversity practice is **good**.