

Inspection report for children's home

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Inspection date	06/02/2012
Inspector	Rachel Ruth Britten
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Provision subtype	Children's home

Date of last inspection	30/05/2011
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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 progress made by the provider since the last full inspection, identifies any further strengths, any areas for improvement and makes judgements as outlined in the *Inspection of children's homes – framework for inspection (March 2011)*.

The inspection judgements and what they mean

Good progress	The children's home has demonstrated continued improvement in quality of care and outcomes for children and young people and where appropriate has addressed all requirements and the large majority of recommendations that were raised at the previous inspection.
Satisfactory progress	The children's home has maintained quality of care and outcomes for children and young people and where appropriate has addressed all requirements and the majority of recommendations that were raised at the previous inspection.
Inadequate progress	The children's home has failed to address one or more requirements and/or has not met the majority of recommendations and/or the quality of care and outcomes for children and young people have declined since the last full inspection.

Service information

Brief description of the service

The home is privately owned. It provides therapeutic care, accommodation with education and outdoor activities for up to eight young people with emotional and behavioural difficulties.

Progress

Since their previous inspection the service is judged to be making **satisfactory** progress.

The home has maintained the quality of care and outcomes for young people since the last full inspection in May 2011. There has been stability of placement for a number of young people and this is reflected also in the stable staff team providing care. This has enabled young people to benefit from continued good quality care even during periods of significant upheaval from safeguarding and behaviour incidents. Staff continue to increase their skills in care and in management. There has been relevant training and consultation with specialists to ensure that staff are well equipped and supported to do their jobs. In addition, team working systems and the delegation of tasks between managers, and down to senior staff, is effective in ensuring that the home runs well day to day, whoever is working.

Young people continue to benefit from a home that is run well by leaders and managers who are skilled and committed overall. Managers continue to act on the matters raised by both regulation 33 visitors and identified through their own monitoring. They have addressed the requirement and the majority of the recommendations that were raised at the last inspection, but some of these have only been partially effective. In addition, two recommendations have not been acted upon and are raised again. Additionally a new requirement and one new recommendation are raised as a result of this inspection. The impact of all these shortfalls on the quality of care is small. However, managers have not been able to show consistent improvements during the last eight months and have not prioritised the monitoring and development of the home sufficiently, despite their evident capacity to continuously improve.

There have been improvements in the systems for recording and administering medication since the last inspection. This enables young people who may safely take their own medication to do so safely, and ensures that medication is disposed of when no longer needed. The home's policy on the use of electronic alarms has also been improved to include how young people are told about the alarms and also ways in which safe care practice protects young people from the abuse of such devices. Young people are protected and empowered by these changes. Similarly, the young person's guide to the home now gives information about how they can contact the Children's Rights Director, information which helps ensure that their voice can be

heard outside the complaints system of the home. A small remaining shortfall is that young people are still not always furnished with the name and contact details for their Independent reviewing Officer when they are introduced to the home and given their young people's guide. This information is also important to ensure that young people know where they can address any concerns about their placement or plans generally.

Young people are receiving more encouragement to sign and engage with the records that are made about them, particularly risk assessments and consequences records. They are also contributing more to their review meeting reports. This helps to ensure that young people understand the plans being made about them and what they need to do to develop as individuals. Similarly, staff and managers are now more effective and consistent with young people because they are working clearly to their roles and using handovers and communication to good effect. Staff state during the inspection that they are very well supported by managers and that they support one another well too. They say that specific training about areas of particular need for young people has proved relevant and enabling for them. As a result, staff are successfully meeting young people's emotional and behavioural needs, even where there are very specific issues to consider.

Managers have not been able to assure a completely effective record of recruitment. They have initiated some relevant checks in respect of students that are working with young people, but have not been able to complete these satisfactorily within timescales. For example, reference requests have not been replied to and managers have not chased these up until many months later. The safety of young people has not been significantly put at risk by this because evidence of Criminal Records Bureau checks has been obtained. Also, the evidence of who carried out checks has not been satisfactorily recorded. Young people's safety may be compromised by this if it results in an unsuitable person being able to work in the home.

The deputy manager is conducting periodic Regulation 34 monitoring and is ensuring that practice matters, patterns and trends are shared with all staff in an effective way. There is also good use of informative Regulation 33 reports from the monthly visitor to the home. This ensures that issues are addressed in a timely way and all staff are well informed. However, there is still no written development plan for the home, showing what priorities and aims exist for the continuous improvement and development of the service. This holds back the service and means that the ideas of the motivated staff group are not clearly being capitalised upon. Similarly, staff are not receiving their annual appraisals on time and young people are not being regularly consulted, along with their placing authorities and families. These management tasks represent missed opportunities to develop stronger relationships and devise plans for change, improvement and staff development which are supported by young people and stakeholders.

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
34 (2001)	ensure that the system for improving the quality of care in the home provides for consultation with children accommodated in the home, their parents and placing authorities. (Regulation 34 (3)(1))	06/03/2012

Recommendations

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

- ensure that all staff have their performance individually and formally appraised at least annually and that this appraisal takes into account any views of children the service is providing for (NMS 19.5 and 19.6)
- ensure that the home's record of recruitment and vetting checks is complete in respect of all persons working in the home, including showing who carried out each check (NMS 16.3 and 16.4)
- provide a written development plan, reviewed annually, for the future of the home, identifying any planned changes to the operation or resources of the service, or confirming the continuation of the home's current operation and resource (NMS 15.2)
- ensure that the children's guide sets out how a child can contact their Independent Reviewing Officer. (NMS 13.5)