

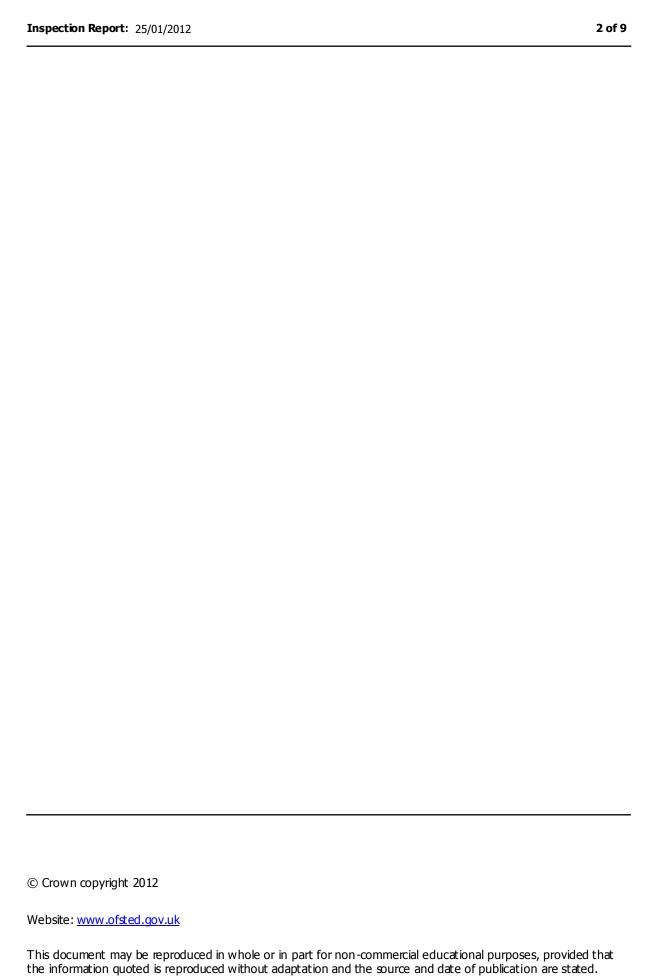
Inspection report for children's home

Unique reference numberSC381531Inspection date25/01/2012InspectorKaren Forster

Type of inspection Full

Provision subtype Children's home

Date of last inspection 11/05/2011



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.

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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 home is a specialised children's home that is provided by a private residential childcare provider in partnership with an independent mental health community service. The service provides residential care for children and young people who have experienced moderate to serious mental health problems. The home offers a therapeutic environment that will facilitate a transition between inpatient treatment and integration into the community. The home is registered to care for five children at any one time

Overall effectiveness

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

The home provides a satisfactory quality of care, with suitable individual plans for some young people. Placement plans incorporate multi-disciplinary programmes, such as nursing and therapy, and this leads to some positive outcomes for young people. Young people see their care and support as helpful and in line with their specific needs. Young people benefit from consistent relationships with their key carers; however changes to staff teams have meant there are a number of temporary staff in the home. Key staff are motivated and demonstrate a continued interest in the welfare of individuals, which helps young people to feel comfortable while in their care. A safe environment is provided for young people with satisfactory health and safety control measures, although personal risk assessments are an area for development.

Additional areas for development include; the records of administered medication; the missing from home protocol with the police and the content of quality assurance procedures. The maturity of the resident young people means there is a risk that the majority of residents will be aged over 18 during the coming months. This calls into question the home's continued status as a children's home.

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
23	ensure that any activities in which children participate are so	27/04/2012
(2001)	far as reasonably practicable free from avoidable risks, and	

	record and regularly update risk management assessments (Regulation 23 (b))	
29	maintain the records specified in Schedule 4 and ensure that	27/04/2012
(2001)	they are kept up to date, especially in relation to the records of	
	the administration of any medicine to any child (Regulation 29	
	(1))	
16	maintain a procedure to be followed when any child	27/04/2012
(2001)	accommodated in the home is missing from care which has	
	regard to any relevant local authority or police protocols on	
	missing children (Regulation 16 (4) b)	
4	ensure that the children's home is at all times conducted in a	27/04/2012
(2001)	manner which is consistent with its Statement of Purpose,	
	especially in relation to the majority of occupants being	
	children aged under 18 years (Regulation 4 (6))	
25	ensure that there is at all times a sufficient number of suitably	27/04/2012
(2001)	qualified, competent and experienced persons working at the	
	home (Regulation 25 (1))	
34	ensure that the system for monitoring the quality of care within	27/04/2012
(2001)	the home provides for consultation with children, their parents	
	and placing authorities. (Regulation 34 (3))	

Recommendations

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

- ensure that each child's placement plan and pathway plan is monitored by a key worker within the home, who ensures that the requirements of the plan are implemented in the day-to-day care of the child (NMS 25.2)
- ensure that the home is comfortable and homely and is well maintained, especially in relation to the damage to the conservatory floor (NMS 10.3)
- work consistently with the placing authority to ensure effective sharing of information regarding the young people (NMS 22.7)
- ensure that the staff group who are in day-to-day contact with children includes staff of both genders whenever possible (NMS 17.10)
- ensure that the manager regularly monitors, in line with regulations, all records kept by the home, in particular specific incident reports, and the records of medicine stocks within the home, ensuring that missing records are accounted for. (NMS 21.2)

Outcomes for children and young people

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

Young people feel able to openly consider their specific needs and the impact this

has on their lives. Young people understand the importance of healthy lifestyles, and the need for their therapy sessions. They engage in their treatment programmes and understand the reasons for their treatment and care.

Most young people work towards and achieve success in relation to their vocational training or further education. Young people learn independent living skills at their own pace. This might include public transport use, laundry or money skills for example. Individual young people practice self-help skills regularly and learn new skills, which helps prepare them for adult life. Those young people, who are approaching the end of their placement, are actively involved in suitable transitional tasks, such as securing accommodation for themselves.

Young people benefit from appropriate levels of contact with their families and people who are important to them. While contact is fully facilitated by care staff, break downs in communication between the home and placing authorities have meant that some plans have not been fully implemented. The home's motivation in this area is evident, for example transporting individuals to contact sessions, but shortfalls between planning and implementation do impact on young people's experience.

Quality of care

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

Young people benefit from the warm relationships that are in place between them and their carers. Key staff demonstrate motivation and continued interest in young people's welfare. Young people see that their key worker helps them with most things in their life and facilitate special and memorable events.

Young people readily make their personal preferences and choices known. The home's complaints system is available and accessible; this enables young people to indicate when they are unhappy. The home complaints record indicates that the home suitably acts upon concerns from young people and stakeholders.

There is a suitable level of detail within some young people's placement plans, and this information is known and implemented by carers. However, in isolated cases, risk assessments provided by other professionals, are not incorporated into the home's placement plan. Not all pathway and placement plans are up-to-date with clear outcomes and measurable objectives, making it difficult for the group to mark success.

The home's arrangements for the administration of medication are effective, which means that young people receive their medication in line with their prescription. However the recording of administered medication has small gaps, which makes the record unclear for the reader. In addition, the records of audits on stored medication are incomplete. This means that staff cannot be clear over how much stored medication is in place.

The home is furnished in a domestic and comfortable style. Young people and staff make good use of the premises, and individuals can see their visitors in private. The conservatory flooring is damaged and has been reported as such within repeated monitoring reports for the home. This damage detracts from the quality of the remaining furnishings in the home. Young people's bedrooms are effectively decorated and furnished to their own taste, which helps individuals to value their own space.

The promotion of equality and diversity is satisfactory. Young people benefit from a staff group who have a suitably developed understanding and sensitive approach to their individual needs. Care is provided with a reasonable regard for each young person's history, and an approach that considers their specific needs. The staff group is not balanced in relation to the gender of staff, as there are very few male staff employed. This reduces the young people's opportunities for male role models.

Young people's health is comprehensively assessed by the independent mental health community service, that is closely involved in the packages of care. This means that young people have access to consistent services that address their emotional and psychological health needs.

Some young people are engaged in vocational or further educational programmes, with obvious success. Resident young people make good use of their own choice of leisure activities, either in their community or within the home. These opportunities include outdoor holidays, shopping or cooking for example. Support staff promote access to these activities, so young people can enjoy a range of varied activities alongside their peers.

Safeguarding children and young people

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

Young people recognise and value the support provided by their key workers, from care and health teams, who they feel able to turn to if feeling troubled. This means that young people have suitable access to trusted adults, both from inside and outside the service, whom they can talk to.

There are recorded incidences of young people going missing from the home. The home's procedures do not include a protocol with the local police, which is a shortfall. Young people are responded to appropriately upon their return to the home. Staff are trained in non-aversive restraint techniques and apply these strategies, when only really necessary. The home's system for recording restraint is in line with the regulations. However, an isolated incident report is missing, which means staff and young people only have the details in the home's log of incidents to refer to.

Investigations into safeguarding allegations are suitably handled by the home, and passed over to the statutory agencies as required. The home maintains satisfactory

checks on prospective staff, which are clearly recorded. This means that young people are cared for by suitably cleared staff. These measures keep young people safe from unsuitable carers.

The home's health and safety control measures are suitably refined to provide a safe environment for young people, staff and visitors. Young people and staff receive prompt first aid from trained personnel, which means that emergency incidents are satisfactorily managed.

Leadership and management

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

The home has not met the requirement raised at the last inspection, which related to the involvement of stakeholders in Regulation 34 monitoring. Therefore the requirement is made again, following this inspection. The home has met two of the three recommendations made at the last inspection. Suitable action has been taken in relation to development planning and the content of Regulation 33 reports. The remaining recommendation, which relates to the clarity of pathway plans, has not been met. This remains a developmental area following this inspection.

The home's Statement of Purpose clearly describes the multi-disciplinary nature of the service. The document details the services available to resident young people, and clearly promotes the individual as being at the centre of this service. Home staff suitably integrate their care with the medical and clinical programmes provided by other professionals. This means that young people receive suitable support to meet their specific needs. The maturity of the resident young people means there is a risk that the majority of residents will be aged over 18 during the coming months. This is an area for development because it calls into question the home's status as a children's home.

There are records of the home's external and internal quality monitoring procedures, which demonstrate regular house visits by the responsible individual's representative. While the internal monitoring reports include an assessment of record keeping and premises checks, there is little evidence of young people and stakeholder feedback on the care provided. This means that the leadership team is using some available data to assess the quality of care, but is not consistently capturing the personal experience of young people.

The service currently maintains a reduced staff team to meet the needs of the young people. Rotas demonstrate some gaps in staffing levels, that are addressed with the use of agency staff. The employment of new staff and deployment of agency staff has meant considerable changes to the staff group and new faces within shifts. New staff are completing the induction standards for new residential staff, which means that their competence will be assessed against a national standard. The level of qualified staff is low, however, and is an area for development.

Care staff benefit from a rolling programme of relevant training, which means that

staff are suitably trained in areas that match the needs of the young people. The care of individuals is informed by these sessions, which might include child development and attachment, and working with teenage young people for example.

Young people's records include most of the historical and current documents, that help their carers to provide a suitable level of care. Internal monitoring of the home's records is incomplete, as a missing incident report and gaps in data for stocks of medicines have not been picked up through the system.

Information relating to significant events affecting young people's safety is notified to relevant agencies, this includes Ofsted and the safeguarding teams from the local and placing authorities. This ensures young people's safety information is shared by the home, to help protect them from abuse. Routine communication with placing authorities and families is inconsistent, with messages being mislaid and agreed plans for individuals being delayed.

Equality and diversity practice is **satisfactory**.