

Inspection report for children's home

Unique reference number	SC361167
Inspection date	25/07/2013
Inspector	Elizabeth Barrett
Type of inspection	Full
Provision subtype	Residential special school (>295 days/year)

Date of last inspection	12/03/2013
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Service information

Brief description of the service

This setting is an independent residential special school registered as a children's home. The school offers specialised education and care for up to 20 children on a full-time basis, and two children under short-break arrangements. The school cares for children who are diagnosed with an autistic spectrum disorder and associated complex needs.

The inspection judgements and what they mean

Outstanding: a service of exceptional quality that significantly exceeds minimum requirements

Good: a service of high quality that exceeds minimum requirements

Adequate: a service that only meets minimum requirements

Inadequate: a service that does not meet minimum requirements

Overall effectiveness

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

Inspectors were aware during this inspection that serious allegations of a child protection nature have recently been investigated by the appropriate authorities. Action taken by the setting in response to the incidents was considered alongside the other evidence available at the time of the inspection to inform inspectors' judgements.

Most young people generally make adequate progress at this home, particularly in their individual educational achievements, managing their own behaviour, their personal and health care, and independence skills. There is an individualised, holistic approach to care and education, which is implemented by a multi-professional team of staff.

There are, however, serious concerns with regards to the health, safety and welfare of young people in this home. These are in respect of: poor safeguarding practice; poor record keeping; management of risk; failure to make appropriate notifications to parents, placing authorities and Ofsted; and ineffective leadership and management. These concerns are not fully understood by the provider, the Registered Manager, or the management team around him. In particular, the provider did not adequately complete an internal investigation with regard to allegations made about staff practice. The investigation did not, therefore, present all the available evidence to the appropriate safeguarding authority. Furthermore, other allegations regarding staff practice have not been reported to the appropriate

safeguarding or regulatory authority. This is a serious concern about the effectiveness with which the home continues to keep young people safe.

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)	ensure the prompt referral to the local authority in whose area the children's home is situated, of any allegation of abuse or neglect affecting any child accommodated in the children's home and give consideration to the measures which may be necessary to protect children in the children's home following an allegation of abuse or neglect (Regulation 16(2)(b)(e)) *	05/09/2013
23 (2001)	ensure all parts of the home to which children have access are so far as reasonably practicable free from hazards to their health or safety and ensure any activities in which children participate are so far as reasonably practicable free from avoidable risks (Regulation 23(a)(b)) *	05/09/2013
27 (2001)	ensure that all persons employed by him receive appropriate training, supervision and appraisal (Regulation 27 (4)(a))	05/09/2013
28 (2001)	maintain in respect of each child who is accommodated in a children's home a record in permanent form which: includes the information, documents and records specified in Schedule 3 relating to that child; is kept up to date: and is signed and dated by the author of each written entry (Regulation 28 (1))	05/09/2013
30 (2001)	ensure that, in relation to a children's home, if any of the events listed in column 1 of the table in Schedule 5 takes place, the registered person shall without delay notify the persons indicated in respect of the event in column 2 of the table (Regulation 30 (1))	05/09/2013
34 (2001)	establish and maintain a system for monitoring the matters set out in Schedule 6 at appropriate intervals and improving the quality of care provided in the children's home (Regulation 34 (1)) *	05/09/2013
31 (2001)	ensure that all parts of the children's home used by children are kept clean and reasonably decorated and maintained (Regulation 31 (2)(e))	05/09/2013
30 (2001)	notify the parent, without delay, of any child accommodated in the home of any significant incident affecting the child's welfare unless to do so is not reasonably practicable or would place the child's welfare at risk (Regulation 30 (2))	05/09/2013
11	ensure that the children's home is conducted so as to promote	05/09/2013

(2001)	and make proper provision for the welfare of children accommodated there (Regulation 11 (1)(a)) *	
32 (2001)	ensure that the requirements of the Regulatory Reform (Fire Safety) Order (2005) and any regulations made under it, except for article 23 (duties of employees), are complied with in respect of the home. This specifically refers to the routine disengagement of fire door closers (Regulation 32 (1A)(b))	05/09/2013
17 (2001)	ensure that no measure of control or discipline which is excessive, unreasonable or contrary to paragraph (2) shall be used at any time on children accommodated in a children's home (Regulation 17 (1))	05/09/2013
25 (2001)	ensure that there is at all times, having regard to the need to safeguard and promote the health and welfare of the children accommodated in the home, a sufficient number of suitably qualified, competent and experienced persons working at the children's home. (Regulation 25 (1))	05/09/2013

*These requirements are subject to a compliance notice

Recommendations

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

- ensure handovers are held and that they include the planning of spending time with individual children. This specifically refers to the poor quality of handover between day and night shifts (NMS 17.6)
- ensure children's views, wishes and feelings are acted upon, in the day to day running of the home and important decisions or changes in the child's life, unless this is contrary to their interests. This specifically refers to ensuring complaints from children are taken seriously and responded to within appropriate timescales (NMS 1.1)
- ensure staff can develop constructive personal relationships with children in their care so that they understand how each child makes their opinions known and be clear when this constitutes a complaint. It is particularly important that all staff possess an appropriate range of communication skills, so that they can assist children who cannot easily communicate their views. This specifically refers to independent advocacy for children (Volume 5, statutory guidance, paragraph 2.32)
- ensure all children and staff are given an opportunity to discuss incidents of restraint they have been involved in, witnessed or been affected by, with a relevant adult. (NMS 3.17)

Outcomes for children and young people

Outcomes for young people are **adequate**.

Young people like living in this home. They are generally happy. A social worker said, 'He looks happy in the classroom and in care.' Most young people make good progress in relation to their individual educational achievements, managing their own behaviour, their personal and health care, and independence skills. A social worker commented, 'They taught her to indicate what she wants in more acceptable ways.' This means that young people learn more appropriate ways of communicating, therefore reducing their challenging behaviour. However, some young people have been exposed to poor care practices. This means young people have been injured, treated inappropriately when ill, or gained weight when on a strict diet. This indicates outcomes that are not consistently good.

Young people develop tolerance towards others. Young people who previously were unable to cope with people around them, due to their autism, can now tolerate people including strangers in their environment. This demonstrates the good progress some young people make at this home.

Young people benefit from regular contact with their families and other people who are important to them such as social workers. As young people struggle with communication, their parents and social workers are important to advocate on their behalf. They explore their religious and cultural beliefs. For example, young people who wish to practice their religion do this by accessing the local or their family's religious institution. This ensures young people have strong links to their religious and cultural background.

Young people participate in a wide range of activities in the home and in the local and extended community. For example, some young people attend youth clubs which enables them to integrate with the local community and build friendships with young people outside of the home. Furthermore, activities help young people to expand their repertoire of things they like to do and subsequently learn new skills.

Young people carry out tasks independently such as eating, dressing and bathing. They use a system which breaks down tasks or the young person's day, which enables them to carry out the task independently or progress through their day. Young people who suffer from anxiety are also helped by this system to reduce their anxiety.

Quality of care

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

There are aspects of good practice; however, there are more serious and significant failings in the quality and consistency of care. Young people generally build positive relationships with staff and their peers. A social worker said, 'He has a good relationship with residential staff. He will sit next to them. He now interacts with his peers. He also has a few friends.' The social worker felt this was good progress as the young person finds it difficult to form relationships. However, some parents and placing authorities have lost confidence in the ability of some staff to work with their

children, following unsubstantiated allegations of verbal abuse and poor behaviour management at night.

Staff, generally, have a good understanding of the complex young people they work with. They understand the individual ways in which they communicate and are able to communicate with them. This helps to reduce the challenges young people present. However, some staff do not have a good understanding of the young people and their disabilities and therefore react inappropriately to the challenges they present despite clear and detailed planning documentation. Most staff deliver organised and structured care on a consistent basis. However, this is not true of all the staff. For example, not all staff consistently complete records about children's care at night; this makes it difficult to monitor the quality of care provided during the night and means there is not a full picture for children in their statutory records.

Staff use language which reflects a lack of professionalism. For example, they regularly refer to young people as 'YPs' rather than young people. They 'do' young people rather than 'support' them or they have 'a cracking shift'.

There is limited success in advocating for individual young people because of the difficulties in communicating with them. Young people have access to an independent advocacy service, which visits every two weeks. While communication passports are available for all young people, and some staff use them, the advocacy service is unfamiliar with these. Therefore, young people are not provided with advocacy and representation suited to their individual and specific learning disabilities. This is of particular concern because of recent safeguarding allegations made at the home. Although the allegations were unsubstantiated, young people were not able, nor did the organisation try, to communicate with them to find out their feelings and concerns as part of the investigation process. Furthermore, systems for managing young people's complaints are not widely or well used. The system relies on staff documenting what they think the issue is, because the majority of young people are unable to voice their concerns independently. When this system has been implemented, the Registered Manager has not given young people a good response and so has not properly addressed the reported issue.

There are signs that communication between the home and parents is improving. A social worker said, 'Communication between parents and the school has not been good in the past but has improved a lot.' A social worker complimented the quality of information provided to them, particularly at statutory reviews. They added: 'At review they present a slide show of photos of things he enjoys doing.' Therefore, young people have the opportunity to be part of the review process, even if they would find it too stressful to be there in person. However, parents and placing authorities are not always notified of safeguarding incidents.

Young people benefit from a multi-professional approach. They have access to healthcare workers such as a psychologist, speech therapist, nurses and an occupational therapist. Therefore, young people are provided with specialist support and guidance which helps to promote their health and well-being. However, there have been incidents where the health and well-being of young people have not been

promoted, and parents and placing authorities have concerns about this. Examples include where young people have been exposed to extremes of heat, given poor care when they have been ill, or provided with first aid dressings which have expired and therefore are no longer sterile. Furthermore, young people on strict diets have gained weight. Staff have whistle blown about poor care practice, but the provider has not promptly implemented changes to care practice.

The home is within the grounds of a special school which all young people attend. The houses are sparsely furnished, which helps to reduce the anxiety levels of some of the young people who require a clutter-free environment. Each young person has their own bedroom with en-suite facilities. Bedrooms are equipped with robust furnishings to ensure safety, and air conditioning to provide a constant temperature. However, the maintenance of the buildings is poor in places due to the amount of damage being caused to the environment. Furthermore, there are too few people employed to maintain the buildings adequately. Additionally, some areas were not thoroughly cleaned and some areas looked worn and tired.

Safeguarding children and young people

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

Most staff have a good understanding and good training about how to keep young people safe and safeguarding procedures. However, some staff have demonstrated poor safeguarding practices. Furthermore, when the Registered Manager has been asked by the lead safeguarding authority to investigate child protection concerns, the internal investigation has not addressed concerns about the application of consistent care standards across day and night shifts. Additionally, there have been subsequent concerns about staff practice that have not been reported to the local authority designated officer or Ofsted. Therefore, the service has worked in isolation from the appropriate safeguarding and regulatory authorities. These are serious concerns about how the home continues to effectively keep young people safe.

The approach to behaviour management varies between staff, with some really good practice and some which demonstrates inconsistency. Most young people, at times of distress, are supported in a calm, caring and professional manner which helps them to return to a calm state of mind. Physical intervention is infrequently used. However, some staff have used non-approved techniques of physical intervention and become angry with young people. Some young people have very complex needs and some staff experience extreme challenges from young people and occasionally are injured. Staff do not always receive a debrief of the incident to support them to reflect on the incident and discuss what they may do differently next time. The Registered Manager does not take a systematic overview of the application of behaviour support plans in order to pick up practice issues and identify any concerns regarding the challenging behaviour presented by young people.

The environment is not completely safe for young people because avoidable risks are not reduced and there have been unnecessary injuries. A young person required

hospital treatment after treading on screws in a discarded plank of wood. Furthermore, trailing cables, trip hazards and screws hanging from a doorway add to the lack of attention provided towards the health and safety of both young people and staff. First aid boxes contained out-of-date dressings, although recently checked by staff; the application of these to wounds would risk infection. Furthermore, fire safety is compromised because staff routinely disconnect the mechanical fire door closing devices to avoid noise at night. This contradicts the fire risk assessment and increases the risk to young people in the event of fire.

Staff, generally, have good risk assessments to work to, enabling them to minimise or eliminate risks regarding most activities that young people participate in. However, no thought has been given by the Registered Manager to reducing risks of extreme weather such as the current heat wave. The health of young people and staff is put at risk because some areas of the school and home which are under Perspex, such as the transition tunnel, become excessively hot. The Registered Manager has not considered this aspect of health and safety.

Young people are protected by good vetting procedures for new staff. Furthermore, visitors are asked for their identification and asked to wear a badge during their stay which clearly identifies them as a visitor. This helps to protect young people from unsuitable adults. However, the security of the site is sometimes compromised when the main gate to the site is left open during the night. This is contrary to the home's risk assessment and further adds to inconsistencies of practice between night and day staff and the lack of attention towards the safety of young people.

Leadership and management

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

While the staff team are mostly skilled, qualified, experienced and caring, the implementation of training is inconsistent across day and night teams and between night teams of staff. The management monitoring of all staff does not consistently challenge poor practice and strengthen good childcare practice. There are pockets of poor practice, for example, inappropriate physical intervention, poor implementation of health and safety practices and lack of attention to the health and welfare of young people. There is a lack of formalised support for staff who work on night shifts. For example, supervision meetings are irregular and staff are not always debriefed after an incident; therefore, there is a lack of reflective focus. This means staff are not properly supported to fulfil their roles and responsibilities.

There is a poor handover between the day and night shifts. It is brief and misses out important information about young people. Furthermore, the organisation of the handover/planning session is poor and at times chaotic. For example, staff are not always in the same room and talk throughout handover. Therefore, not all staff effectively hear the handover or planning session.

The provider and the Registered Manager do not fully understand the strengths and weaknesses of the home. They do not take prompt action to address concerns that

have been identified. Leaders and managers of the service do not challenge poor practice, therefore, young people may continue to be cared for by some staff in an inappropriate manner. For example, the Registered Manager has not yet implemented changes in the staffing arrangements following the safeguarding investigation.

The Registered Manager does not notify Ofsted, placing authorities and parents consistently of events listed within Schedule 5 of the Children's Homes Regulations 2001. This means Ofsted and placing authorities are unable to effectively monitor the conduct of the home and parents are not kept up to date with incidents regarding their child.

Leaders and managers do not make good use of monitoring activities, such as Regulation 34 checks, to ensure the home operates to a high standard and within its Statement of Purpose. For example, there is no clear review of incidents of challenging behaviour which examines emerging trends or issues. Furthermore, there is a lack of depth of evaluation, planning for improvement or consultation with young people, their parents or placing authorities in these reports. A senior member of the organisation also visits the home monthly to assess the conduct of the home. Reports produced from these visits provide good evidence of life within the home and outcomes for young people.

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* and the evaluation schedule for the inspection of children's homes.