

1183621

Registered provider: A & T Home Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This children's home is run by a private company. The home is registered to provide a service for up to four children. It is a task-focused assessment unit working with children to help them reunite with their families and/or secure permanence in their future. The service has a therapeutic ethos, and ongoing family outreach services are available if required.

Inspection dates: 26 to 27 April 2017

Overall experiences and progress of children and young people, taking into account **good**

How well children and young people are helped and protected **good**

The effectiveness of leaders and managers **requires improvement to be good**

The children's home provides effective services that meet the requirements for good.

Date of last inspection: 10 August 2016

Overall judgement at last inspection: Requires improvement

Enforcement action since last inspection

none

Key findings from this inspection

This children's home is good because

- The children are very positive about their experiences of living at the home and feel well supported.
- The children feel safe. Even when physically restrained, the children say that they have felt safe and protected.
- The children settle quickly. They establish positive relationships with the staff.
- The children benefit from onsite therapy, which helps them develop improved emotional stability and resilience.
- The provision of consistent boundaries, balanced with a strong ethos of listening to the child, helps the children feel valued and accepted. They are helped to understand the reasons for and impact of their behaviour.
- Partner professionals and the children's families have confidence that their child's individual needs are well met, by caring and nurturing staff.
- The staff are successful in promoting contact and helping the children to rebuild positive relationships with their families.

The children's home's areas for development

- Improve systems for staff recruitment, supervision, training and appraisal.
- Improve recording and documentation in case files and improve physical restraint records.
- Provide the staff with suitable accommodation for sleeping on site.
- Risk assess the placing of any fire extinguishers that are stored out of clear sight.
- Ensure that medication is administered by staff who have had their competence to do so assessed.

Recent inspection history

Inspection date	Inspection type	Inspection judgement
10/08/2016	Full	Requires improvement
09/05/2016	Full	Inadequate

What does the children's home need to do to improve?

Statutory requirements

This section sets out the actions that the registered person(s) must take to meet the Care Standards Act 2000, Children's Homes (England) Regulations 2015 and the 'Guide to the children's homes regulations including the quality standards'. The registered person(s) must comply within the given timescales.

Requirement	Due date
<p>The registered person must ensure that the requirements of the Regulatory Reform (Fire Safety) Order 2005 (a) and any regulations made under it are complied with in respect of the home. (Regulation 25(2)(b))</p> <p>In particular, ensure that all fire extinguishers are clearly visible and accessible, unless a clear risk assessment is in place detailing suitable arrangements.</p>	29/05/2017
<p>The registered person must only employ an individual to work at the children's home if the individual is mentally and physically fit for the purposes of the work that the individual is to perform; and full and satisfactory information is available in relation to the individual in respect of each of the matters in Schedule 2. (Regulation 32(3)(c)(d))</p> <p>In particular, ensure that prior to employment suitable references are sought and verified, relevant qualifications are evidenced, and a clear employment history is in place.</p>	19/06/2017
<p>The registered person must ensure that all employees undertake appropriate continuing professional development; receive practice-related supervision; and have their performance and fitness to perform their roles appraised at least once every year. (Regulation 33(4)(a)(b)(c))</p> <p>In particular, ensure that all staff receive suitable training in safeguarding, and to meet any particular needs of the children placed, such as management of self-harming behaviours. Ensure that all staff have their performance and fitness to perform their roles appraised at least once every year.</p>	19/06/2017

Recommendations

- Provide staff that sleep in the home overnight with appropriate accommodation and facilities to do so. ('Guide to the children's homes regulations including the quality standards', page 17, paragraph 3.26)
- Medicines must be administered in line with a medically approved protocol. Records must be kept of the administration of all medication, which includes occasions when prescribed medication is refused. Regulation 23 requires the registered person to ensure that they make suitable arrangements to manage, administer and dispose of any medication. ('Guide to the children's homes regulations including the quality standards', page 35, paragraph 7.15) In particular, ensure that staff only administer medication when their competency to do so has been assessed. Furthermore, provide suitable mechanisms to monitor the temperature within the medication storage area.
- Ensure that all incidents of control, discipline and restraint are subject to systems of regular scrutiny to ensure that their use is fair. ('Guide to the children's homes regulations including the quality standards', page 46, paragraph 9.36)
- The registered person should actively seek independent scrutiny of the home and make best use of information from independent and internal monitoring (including under regulations 44 and 45) to ensure continuous improvement. ('Guide to the children's homes regulations including the quality standards', page 55, paragraph 10.24) In particular, ensure that children's views are sought and evidenced as part of the quality of care review.
- Ensure that staff understand the importance of careful, objective and clear recording, ensuring that information regarding the child is recorded in a way that will be helpful to the child. ('Guide to the children's homes regulations including the quality standards', page 62, paragraph 14.4)

Inspection judgements

Overall experiences and progress of children and young people: good

Good planning and matching of current placements mean that the manager can confidently predict whether the home will be able to meet the child's needs. The child and their social worker are fully involved in the planning of placements. One social worker said, 'Staff have gone over and above to ensure everything has been taken care of and put in place prior to her arrival.' The children feel consulted about the placement process. The manager ensures that the effective information sharing at the time of placement feeds into detailed care plans. The plans are strengthened by personal information, which promotes the staff's ability to meet

the children's needs.

One placement breakdown has occurred since the last inspection; however, the majority of the children are experiencing stability. The children settle quickly into an environment that feels like a home-from-home and the children build positive relationships with the staff. As a result of the quality of staff support, the children have made progress from their starting points concerning their emotional well-being, behaviour and personal safety. The children are given opportunities to explore their emotions and develop tools for appropriately communicating and managing their anger. As a consequence, there is now little antisocial behaviour in the home.

Good relationships between the staff and the children are established and interactions are warm and nurturing. The children feel valued, cared about, stable and secure. As a result, they grow in confidence, with improved self-esteem. One social worker said of a child in their care, 'He feels happy and safe. He has consistency of relationships and despite all of his aggression, staff show lots of warmth and nurture.' The staff are proactive and committed to finding ways of communicating and listening to the children to further meet their evolving needs. One social worker said, 'The staff have a good insight into the child.' The children are encouraged to contribute to care planning, and as a result, they feel fully involved. One child said, 'All of the staff are really nice'.

The children engage in the in-house therapy. Detailed records show that this has enhanced the emotional well-being of one particular child. These therapeutic sessions and positive relationships with the staff help the children identify and develop an emotional vocabulary to express their feelings. Parents can access family therapy. This is aimed at enhancing positive parenting and family relationships, both during the time the child remains at the home and ongoing family support once the child leaves.

The atmosphere in the home is very warm and calm, and social interaction is friendly and fun. The children enjoy a variety of activities of their choice, such as trampolining, and visits to places of interest, such as the local 'fast car' showroom or the 'Harry Potter' tour. Enrichment opportunities are available that reflect the children's particular interests and talents. For example, one child is an accomplished pianist who enjoys his music lessons and delights in displaying his skills to visitors.

The children are supported and encouraged to maintain existing school placements wherever possible, recognising the importance of these stable relationships for the child. Where this is not possible, the manager has been proactive. She liaises with the schools, placing authorities and the virtual head to ensure that individually suitable educational arrangements are in place. The staff are consistent and proactive in engaging educationally disaffected children to learn at a level and style that is relevant to them. The staff maintain intensive support for the children throughout this journey. This support helps the children to feel more confident in taking gradual steps into a formal learning environment.

The children are healthy and receive good support from the staff to maintain a healthy lifestyle. For example, they are eating a wider and more balanced diet due to the encouragement and positive role modelling from the staff. The children experience improved emotional well-being, developing their resilience as a result of the positive relationships they enjoy with the staff and the therapist. Although there have been no incidents of significant self-harming behaviours in the home, some of the children may have a history of presenting these behaviours. Only half of the staff have undertaken some training in this area, although this was an action set at the previous inspection. It is important that all staff have suitable knowledge of aspects of care that affect the children in order meet their needs effectively.

Staff undertaking medication administration receive basic training. However, medication processes require some improvement to meet best practice. For example, those staff who are required to witness and sign medication given are not always trained. Furthermore, the competence of staff who give medication is not consistently assessed. This means that the manager has not satisfied herself as to the competence of these members of staff in relation to medication management. Medication is securely stored in a room which the provider acknowledges can become quite hot; this has the potential to affect the efficacy of the medication.

The home is a spacious detached house, with individually decorated bedrooms and generous living space. The children enjoy the ability to keep small pets, such as their hamster 'Sanchez'. The accommodation overall provides a homely and welcoming environment for the children. Since registration, the provider has changed the night-time staffing arrangements and staff now sleep on site. While this continues to meet the needs of the children, there are no clear and appropriate arrangements in place. For example, staff currently sleep on fold-up beds, either in the office or in a currently unused child's bedroom.

One child said, when asked to rate the home, 'I'd give it 9.6 out of 10. It's definitely good, nearly brilliant. I really like it.' When asked what could be better, he said, 'I would want 'X' [member of staff] to live here, and the home to have a Lambo [Lamborghini]'.

How well children and young people are helped and protected: good

The children say that they always feel safe, listened to and well cared for by the staff. They believe that the staff genuinely care for them and they can talk to staff about anything that is worrying them. Partner agencies and parents are very positive about the improvements that children have made in relation to their behaviour and personal safety since coming to live at the home.

Effective risk assessments are in place which outline the children's needs and guide the staff effectively in how to support them. As a result, significant incidents are rare. There have been no instances of children going missing or situations that

have required police involvement in the past six months. This is an area of significant improvement for some of the children.

The manager has worked effectively and transparently with partner agencies to promote the children's individual well-being and safety. The majority of the staff have undertaken basic training in safeguarding. All staff should receive good quality training, which is regularly updated, to manage risk effectively and robustly protect children.

Behaviour strategies are making a positive difference for the children. Systems in place for promoting positive behaviours are effective. This approach is valued by the children as they build up their positive rewards for something of personal value, for example towards new items for their hamster. The positive relationships with the staff help the children to learn appropriate social boundaries and begin to develop strategies of self-control. This resolves issues of conflict without resorting to violence. One child said, 'They are helping me understand why I get so angry and we've worked out things I can do to not get so stressed out.'

Physical intervention is used only by suitably trained staff when thresholds of potential harm are met. The records of physical restraint, however, do not always meet regulatory requirements or best practice. On two occasions, no suitable independent person reviewed the physical interventions conducted by the manager. Furthermore, children's views on restraint have not always been documented as having been sought. The impact is reduced as the children say that they do feel safe and that the staff help them reflect on the situation. One child said, 'Staff restrain me if it gets like I'm going to hit somebody. It feels okay. They do talk to me afterwards, and I understand why it's had to happen.' There are no concerns regarding the use of physical intervention, but the lack of clarity and accuracy of the documentation inhibits effective auditing of events and the impact of these on the children.

Staff vetting procedures are not consistently sufficiently robust. On occasion, the most suitable references, such as that from the previous employer, are not sought, references are not consistently verified, and short gaps in employment are not documented as explored. This means that there is insufficiently documented scrutiny of an applicant's employment history and character.

The manager ensures that the children live in a suitably safe environment. However, fire extinguishers have been removed from the communal areas without a clear and detailed risk assessment.

The effectiveness of leaders and managers: requires improvement to be good

The suitably qualified and experienced registered manager has been in post for seven months. She has ambition for the service and has overseen significant improvement in the home during her tenure. The manager and the provider have addressed some, but not all of the requirements and recommendations from the last inspection. In particular, staff recruitment, supervision and training continue to require improvement, and as a result, leadership and management of the service is not yet good.

The home is suitably resourced to ensure that the service meets the aims and objectives as set out in the statement of purpose. The home is sufficiently staffed to meet the needs of the children. The children are making good progress from their individual starting points, as a result of the personalised good quality care they receive. The staff are individually highly committed, and the children feel listened to and valued.

While staff have access to therapeutic support to help support their resilience, they do not have sufficiently regular practice-based supervision. One member of staff has only received two practice-based supervisions since joining the home some 10 months previously. Furthermore, there is no system of annual appraisal in place to support the periodic review of staff's individual competence and performance. While this is a breach of regulation, the impact of this is minimal, as not many staff have been employed for more than one year. The manager and the staff say that while there have been lots of improvements in the home, supervision is an area where the home continues to struggle. A lack of supervision may affect the manager's ability to share her vision for the home effectively and ensure that all of the staff are working consistently to a high level.

The staff benefit from a training programme that has improved since the last inspection. However, some staff have not yet completed training in safeguarding or management of self-harming behaviours, despite this being a recommendation from the previous inspection. Very few members of staff hold a level 3 or higher level qualification in working with children. However, the manager has suitable plans in place, and those staff who are not yet enrolled on this training are scheduled to enrol within three months. Staff professional awareness and competence has the potential to be undermined where key training has not been undertaken.

Recording systems in the home are generally sound. However, on specific occasions suitably detailed records of care are not maintained. For example, children's information is not always up to date. Some records contradict each other. In one instance, confidential information was not securely held.

Quality monitoring arrangements have improved since the last inspection. This has provided greater scrutiny of the home as a result. The manager has a clearer understanding of the quality of care and areas for development. However,

opportunities for feedback are not fully utilised as the views of the children are not considered as part of the quality of care review. While there are some weaknesses in the service, these shortfalls have not had an impact on the quality of care that the children receive. In focusing on improvement, the manager has prioritised the needs of the children effectively and successfully. She is aware of the need to provide an effective and supportive environment for staff and have the capacity to implement this.

Information about this inspection

Inspectors have looked closely at the experiences and progress of children and young people. Inspectors considered the quality of work and the difference made to the lives of children and young people. They watched how professional staff work with children and young people and each other and discussed the effectiveness of help and care provided. Wherever possible, they talked to children and young people and their families. In addition, the inspectors have tried to understand what the children's home knows about how well it is performing, how well it is doing and what difference it is making for the children and young people whom it is trying to help, protect and look after.

Using the 'Social care common inspection framework', this inspection was carried out under the Care Standards Act 2000 to assess the effectiveness of the service, how it meets the core functions of the service as set out in legislation, and to consider how well it complies with the Children's Homes (England) Regulations 2015 and the 'Guide to the children's homes regulations including the quality standards'.

Children's home details

Unique reference number: 1183621

Provision sub-type: Children's home

Registered provider: A & T Home Limited

Registered provider address: L B Group, Unit 7, Hydra, Great Blakenham, Ipswich
IP6 0LW

Responsible individual: Nina Clark

Registered manager: Sally-Anne Slade-Watts

Inspectors

Joanna Heller, social care inspector

Catherine Russell, social care inspector

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