

SC394025

Registered provider: The National Centre for Young People with Epilepsy
Interim inspection
Inspected under the social care common inspection framework

Information about this children's home

The home provides education and residential care for up to 60 young people, aged from eight to 18 years, across eight separate homes. Young people attend the organisation's special school, which is approved by the Department for Education. Young people who have a variety of disabilities, primarily learning difficulties, autistic spectrum disorder, complex health needs and physical disabilities, are accommodated for 38 weeks or 52 weeks. Many, but not all, young people who stay at the home have a diagnosis of epilepsy.

An adult college and some houses that are exclusively for 18- to 25-year-olds are on the same site. These are separately regulated by the Care Quality Commission.

The provider organisation is a registered charity.

Inspection date: 9 January 2018

Judgement at last inspection: requires improvement to be good

Date of last inspection: 6 June 2017

Enforcement action since last inspection:

None.

This inspection

The effectiveness of the home and the progress and experiences of children and young people since the most recent full inspection

This home was judged requires improvement to be good at the last full inspection. At the interim inspection, Ofsted judges that it has sustained effectiveness.

During the inspection it was recognised that there has been progress in some of the houses across the site and a greater awareness of strengths and weaknesses was

demonstrated by the staff teams. However, in some of the houses there is necessary progress still to be made. It is evident that there has been an improvement in the staff's morale and the atmosphere in all of the homes. Staff were observed to be much more relaxed (than at the previous inspection) and this had a positive impact on the care being provided for the young people. Young people show affection for the care staff and appear confident that staff can support them. Senior leaders have worked hard to change the culture in the homes, supported by the individual home managers, who have spent significant quality time with the staff and young people. Young people are supported to build positive relationships with staff and each other. Relationships were seen to be nurturing, staff were attentive to young people's varying support needs and clear boundaries were seen to be consistently reinforced. Staff have a good knowledge and understanding of each young person.

Staff vacancy rates in the children's homes remain high, and have increased since the last inspection: the vacancy rate is now 31%. The figure does not take into account the staff members who are unavailable because of suspension, long-term sick leave or maternity leave; together, those staff increase this rate to 39.2%. The organisation continues to employ a number of fixed-term agency staff and the use of these staff reduces the vacancy rate to 21.6%. The organisation continues to actively try and recruit to the vacant positions. It currently relies on permanent staff undertaking overtime, and on casual staff. With the red, amber and green rating continuing to be in place, there is more oversight by senior managers, who can foresee when staffing levels will be low in the individual houses and take action to address this. They implemented a staff retention plan in December 2017. However, the impact of this is yet to be seen. The staff reported that staffing levels are having an impact on the quality of care being provided. Some of the managers and staff are creative in managing the staffing levels. Currently the houses are deemed to be safe, but they do not have the levels of staffing required.

There have been internal transitions between the houses due to the temporary closure of one. In addition, a new young person has moved into one of the homes. An impact risk assessment format has been developed by managers for completion prior to young people's placements. These risk assessments are also used for internal transitions between the on-site houses. However, not all risk assessments have been updated at this stage, and neither an evaluation of the young person's compatibility with the current group of young people nor the wider suitability of the placement has been recorded. This fails to demonstrate the detail of decisions underpinning some admissions and transitions.

The 'my student support plans' for young people have been revised, and are much improved; they now incorporate health information which enables staff to support young people. The plans give staff clear direction. Risk assessments have now been updated to include information following incidents.

Allegations or suspicions of harm to young people have been promptly and appropriately shared with external safeguarding agencies, and significant events and updates are regularly communicated to Ofsted. Staff attend relevant professionals' meetings and share appropriate information about young people's well-being. This demonstrates

effective partnership working. There is good oversight by the safeguarding team. Staff have all undertaken safeguarding quizzes to test their knowledge. Any support required for staff is then recognised and action is taken. Team meetings are not consistently being used as opportunities to enhance the staff's knowledge of safeguarding. The quality and frequency of team-meeting minutes in each house were variable. The safeguarding team has produced information to keep staff up to date; however, this has not been effectively used and discussed during these times.

Medication procedures have been further strengthened through increased oversight and auditing. As a result of this, auditing errors are identified and the learning from mistakes is subsequently assessed. The nursing team continues to seek to reduce any medication errors. Some prescribed medication is prescribed to be taken 'as required'; however, there isn't currently a protocol in place to inform staff of how to assess when this is to be administered.

Due to young people's medical needs, video monitoring is used for some young people. Privacy is not maintained in all cases, including when personal care takes place. There are no guidelines in place around the use of this monitoring and its impact on young people's privacy. In addition, during the inspection, a child was seen to be contained using a specialised bed. This did not allow him to leave his bed without assistance. Staff were unclear on the reasons for its use. Inspectors were provided with a copy of the completed risk assessment and bed guidelines, both of which were signposted in the young person's support plan. However, the risk assessment did not provide any clarity around the timescales for staff monitoring the young person when they were left alone in the bed and this needs to be added.

There remain inconsistencies across the houses in the frequency of supervision sessions for staff. They are not undertaken in line with the organisation's policies. However, there has been an improvement in the quality of supervision; staff are now being adequately supported to reflect on and improve their professional practice.

Since the last inspection, the organisation has appointed a new learning development coordinator to ensure that staff are enrolled on and working towards the required qualifications. A number of staff have not completed this within the required time frame. Meetings are being arranged to provide necessary challenge and to support the staff to review their progress. However, this previous requirement is not met.

The managers in each of the houses now have more responsibility, and monitor and audit the practice in their homes. There is a higher level of oversight and understanding of the areas that require improvement. Although it is clear that some internal monthly monitoring is undertaken by the registered manager, the latest six-monthly review is overdue. This delay inhibits full evaluation and monitoring of the service.

Since the last inspection, a huge amount of work has been done to evaluate the current level of service and to plan ahead for future developments in the coming year. Staff are enthusiastic about the care of young people and young people were seen to be happy. The views of parents from Ofsted surveys were much more positive and comments

included: 'excellent care from caring, alert and aware staff', and, 'Staff are friendly, welcoming and make the children feel safe and secure.' The majority of parents feel that their children are well cared for, and that they progress as a result of their placements at this children's home.

Recent inspection history

| Inspection date | Inspection type | Inspection judgement |
|-----------------|-----------------|---------------------------------|
| 06/06/2017 | Full | Requires improvement to be good |
| 05/12/2016 | Interim | Declined in effectiveness |
| 09/08/2016 | Full | Requires improvement |
| 23/02/2016 | Interim | Sustained effectiveness |

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 leadership and management standard is that the registered person enables, inspires and leads a culture in relation to the children's home.</p> <p>In particular, the standard in paragraph (2) requires the registered person to— ensure that the home has sufficient staff to provide care for each child. (Regulation 13(2)d))</p> | 28/02/2017 |
| <p>The care planning standard is that children— receive effectively planned care in or through the children's home; and have a positive experience of arriving at or moving on from the home.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure— that children are admitted in to each of the homes only if their needs are within the range of needs of children for whom it is intended that the home is to provide care and accommodation, as set out in the home's statement of purpose.</p> | 28/02/2017 |

| | |
|---|-------------------|
| <p>(Regulation 14(2)(a))</p> <p>This specifically relates to carrying out impact risk assessments to determine the suitability of placements within house groups.</p> | |
| <p>The registered person must ensure that— the privacy of children is appropriately protected; any limitation placed on a child's privacy or any access to any area of the home's premises— is intended to safeguard each child accommodated in the home; is necessary and proportionate; is kept under review and, if necessary, revised; and allows children as much freedom as is possible when balanced against the need to protect them and keep them safe.</p> <p>In particular, this relates to having guidelines in place on the use of video monitoring and specialist beds. (Regulation 21(a)(c)(i)(ii)(iii))</p> | <p>28/02/2017</p> |
| <p>The registered person must recruit staff using recruitment procedures that are designed to ensure children's safety.</p> <p>The requirements are that— an individual who works in the children's home in a care role must attain or hold the required care role qualification by the relevant date. (Regulation 32(4)(a))</p> | <p>28/02/2017</p> |
| <p>The registered person must ensure that all employees receive practice-related supervision by a person with appropriate experience. (Regulation 33(4)(b))</p> | <p>28/02/2017</p> |
| <p>Establish and maintain a system for monitoring, reviewing and evaluating the quality of care provided for children and the feedback and opinions of children about the children's home. (Regulation 45(2)(a)(b))</p> | <p>28/02/2017</p> |
| | |

Recommendations

- Ensure medications are administered in line with a medically approved protocol. ('Guide to the children's homes regulations including the quality standards', page 35, paragraph 7.15)
- Ensure that staff have the skills to recognise and be alert for any signs that might indicate that a child is in any way at risk of harm. In particular, ensure that staff meetings discuss safeguarding as an agenda item. ('Guide to the children's

homes regulations including the quality standards', page 43, paragraph 9.12)

- Staff must help children to live independently. ('Guide to the children's homes regulations including the quality standards', page 17, paragraph 3.27)

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 differences 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.

This inspection focused on the effectiveness of the home and the progress and experiences of children and young people since the most recent full inspection.

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: SC394025

Provision sub-type: Residential special school

Registered provider: The National Centre for Young People with Epilepsy

Registered provider address: NCYPE, St Piers Lane, Lingfield, Surrey RH7 6PW

Responsible individual: Carol Long

Registered manager: Duduzile Robbins

Inspectors

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Jennie Christopher, social care inspector
Suzy Lemmy, social care inspector
Maire Atherton, social care inspector

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