

# SC042446

Registered provider: The Rose Road Association

Interim inspection

Inspected under the social care common inspection framework

## Information about this children's home

The service is for eight children from the age of four to 18. The home's statement of purpose describes the home as providing care and accommodation for children with severe learning difficulties, which may include additional physical disabilities, autism or complex health needs. The home is owned by a charitable organisation and provides overnight short breaks on a planned or occasional basis.

The manager has been registered with Ofsted since 2016. The manager is also registered with the Care Quality Commission (CQC) and manages care and accommodation for adults with similar needs in a separate part of the building. Care staff work across both adult and children's services. A separate report by the CQC is available for the adult service.

**Inspection date:** 21 March 2019

**Judgement at last inspection:** Requires improvement to be good

**Date of last inspection:** 20 August 2018

**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 improved effectiveness.

Senior leaders are unreservedly committed to meeting the requirement made at the last inspection on delegated healthcare tasks. They have been systematic in their approach

to comply with the Care Quality Commission/Ofsted guidance to the letter. They have employed and worked with health professionals to agree best practice. Qualified nurses train staff and observe them working with each individual child with complex health needs. Nurses are thorough in assessing that staff are competent to undertake specific healthcare tasks for a named child, as required by the guidance. The registered manager keeps a detailed record, so she can match the trained staff to the correct child accessing the short break. She challenges health professionals when they request staff perform tasks outside the guidance that is agreed with the Royal College of Nursing. She requests a multi-disciplinary meeting when she considers children with life-limiting conditions have deteriorated to an extent that their primary need is now nursing care.

The registered manager has formed links with other charitable organisations to share good practice. She has been instrumental in raising the issue of delegated healthcare tasks and the challenge faced by providers in the voluntary sector.

Placement plans are an exemplar. They clearly state the individual needs of each child and how staff support them. Staff are now clear about protocols to follow in the event of an emergency. They can clearly describe what to do in a given scenario. In one case, a placement plan was not sufficiently detailed, but the child was not deemed to be at risk because of this shortfall.

Parents are positive about the services. One parent said that her child can access activities that would not be available in the family environment. Another parent said, 'My child smiles when she knows she is at the short break. I know she is happy and well cared for.'

One parent made a complaint. Senior leaders investigated thoroughly, and accepted mistakes were made. They were swift and decisive in adjusting procedures, providing additional training to staff and making spot checks on practice, to prevent recurrence.

Since the last inspection, monitoring and auditing have been excellent. Senior leaders have employed specialists to assess, for example, infection control and medication procedures. Such professionals were extremely positive about the way in which the senior management has been proactive in addressing their recommendations. Consequently, practice has improved. The risk of infection or a medication error has significantly diminished. In addition, the handling of milk feeds and supplements has improved as required at the last inspection. Staff demonstrate a full understanding of the new procedures.

The registered manager has carried out a trial evacuation. She recognised a weakness in the system and made sure that staff were suitably trained. She carried out a second trial to ensure that the training was applied in practice. Children are safe in the event that the building needs to be evacuated.

The responsible individual has introduced a near-miss reporting system. Staff report untoward events that have not evolved into accidents or injury. The opportunity to review and reflect on potential incidents that could cause distress or injury is maximised.

The responsible individual has employed a chaplain to come into the home on a regular basis. He provides support for staff, who said that they value this, especially when dealing with their emotions about the children they care for.

Senior leaders have invested in the environment. There has been considerable improvement, such as refurbishment to a bathroom and new bedroom furniture. Plans, requiring capital expenditure, are well advanced to improve the dining facilities as recommended at the last inspection.

### Recent inspection history

Inspection date	Inspection type	Inspection judgement
20/08/2018	Full	Requires improvement to be good
31/01/2018	Interim	Improved effectiveness
31/07/2017	Full	Requires improvement to be good
07/11/2016	Interim	Sustained effectiveness

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

### Recommendations

- The specific responsibilities of the home towards supporting the health and well-being of each child should be agreed with the placing authority and recorded in the child's placement plan. It is the joint responsibility of the registered person and the placing authority that this is agreed at the time of placement. ('Guide to the children's homes regulations including the quality standards', paragraph 7.7, page 34)

## 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:** SC042446

**Provision sub-type:** Children's home

**Registered provider:** The Rose Road Association

**Registered provider address:** 300 Aldermoor Road, Southampton, Hampshire SO16 5NA

**Responsible individual:** Juno Hollyhock

**Registered manager:** Tina Fullbrook

## Inspector

Keith Riley, social care inspector

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