

SC035409

Registered provider: Northumberland County Council

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This secure children's home is operated by a local authority and is approved by the Department for Education to restrict children's and young people's liberty. The children's home can accommodate up to 15 children who are aged between 10 and 17 years. It provides care for children accommodated under section 25 of the Children Act 1989 who are placed by local authorities. Admission of any child under section 25 of the Children Act 1989 who is under 13 years of age requires the approval of the Secretary of State.

The commissioning of health services in this home is the statutory responsibility of NHS England under the Health and Social Care Act 2012. Education is provided on site in dedicated facilities.

The manager registered with Ofsted on 30 September 2014.

Inspection dates: 26 to 27 November 2019

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

How well children and young people are helped and protected	good
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Health	good
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The effectiveness of leaders and managers	requires improvement to be good
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Outcomes in education and related learning activities	good
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The children's home provides effective services that meet the requirements for good.

Date of last inspection: 4 July 2019

Overall judgement at last inspection: improved effectiveness

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
04/07/2019	Interim	Improved effectiveness
11/12/2018	Interim	Improved effectiveness
03/07/2018	Full	Good
13/02/2018	Interim	Improved 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, the 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
The protection of children standard is that children are protected from harm and enabled to keep themselves safe. In particular, the standard in paragraph (1) requires the registered person to ensure— that staff— understand the roles and responsibilities in relation to protecting children that are assigned to them by the registered person. (Regulation 12(1), (2)(a)(v))	20/12/2019
The leadership and management standard is that the registered person enables, inspires and leads a culture in relation to the children's home that— helps children aspire to fulfil their potential; and promotes their welfare. In particular, the standard in paragraph (1) requires the registered person to— use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13(1)(a)(b)(2)(h))	30/01/2020
The registered person must— ensure that each employee completes an appropriate induction and ensure that all employees— receive practice-related supervision by a person with appropriate experience. (Regulation 33(1)(a), (4)(b))	20/12/2019
The registered person must— supply to HMCI a copy of the quality of care review report	20/12/2019

within 28 days of the date on which the quality of care review is completed. (Regulation 45(4)(a))	
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Recommendations

- Children should be able to see the results of their views being listened to and acted upon. ('Guide to the children's home regulations including the quality standards', page 22, paragraph 4.11)

Specifically, ensure that the children are updated about the action that the staff have taken in response to their requests and that a record is maintained in this respect.

- Ensure that the ethos of the home supports each child to learn. ('Guide to the children's homes regulations including the quality standards', page 29, paragraph 5.18)

In particular, ensure that the planned recruitment to vacancies is actioned urgently so that the school can make further improvements to the quality of provision and the children can benefit from access to the full range of vocational training options.

- The registered person is responsible for ensuring that each child's day to day health and well-being are met. ('Guide to the children's homes regulations including the quality standards', page 33, paragraph 7.3)

In particular, undertake an infection control audit of the clinical treatment room without delay. Regular infection control checks must be undertaken regularly.

Inspection judgements

Overall experiences and progress of children and young people: good

Care practice is based on the principles of assessment, planning and review. This concept is embraced by the care, education and health staff, who take a whole-centre approach to caring for the children.

All the team members work collaboratively and are effective in implementing individually tailored support plans and interventions. This helps the children to understand how to keep themselves safe when they return to the community. One social worker said: 'I have been nothing but impressed, having had a number of children placed at this home. Staff drive plans forward and take every opportunity to educate the children and help them to make better choices when they leave.'

The staff demonstrate a good awareness of each child's specific care and support needs. They work hard to develop and maintain trusting relationships with the children, which are generally positive. The children were particularly complimentary about their link workers, whom they identify as their 'trusted go-to person'. The children spoke about how their behaviour has improved, how much healthier they are and how well they are doing in their education. One child said: 'The staff are "mint" and have helped me loads. I am in a much better place because of being here.'

The arrangements for transition are excellent. From admission, the staff work tirelessly with other professionals to prepare children for their return to the community. The staff advocate strongly on behalf of the children and confidently challenge other professionals, for example when there is a delay in identifying suitable accommodation. Staff encourage and support the children to develop the skills that they need for when they leave. Some children spend time in the step-down unit as part of their transition. This provides the opportunity for them to live independently from the general cohort and be self-sufficient in preparation for their return to the community.

The children confidently express their views and preferences. Children's meetings are held weekly and records of these meetings are kept. However, the meeting minutes are of poor quality and make it difficult to identify what actions the staff have taken in response to the children's suggestions. Although most children are satisfied that they are listened to, some children do not feel that this is always the case. One child expressed a wish to eat halal meat, but this request had not been considered until the day of the inspection.

The children know how to raise a formal complaint. This can be done using a confidential reporting system or through an independent advocate, who visits weekly. This helps the children to feel listened to. A small sample of complaint records were found to be incomplete. This had not been identified during the manager's quality assurance checks.

The staff make a great deal of effort to make the environment homely. Communal areas are brightly decorated. The children are encouraged to personalise their bedrooms with

photographs, artwork and posters. When talking about the environment and their care experiences, one child said, 'This is a good children's home that just happens to lock the doors.'

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

The children said that they feel safe. High staffing levels support the children to form close and supportive relationships with the staff and enjoy positive interactions with their peers. One child recognised their improved emotional and physical health. They said, 'I feel so much better since I came here.'

The staff manage the children's behaviour well and ensure that there are consistent expectations. The children are motivated to improve their behaviours and can earn extra privileges, such as extended access to evening television. There are some behavioural expectations, such as restrictions on access to toiletries and eating sweets in bedrooms, that are overly punitive.

Good risk assessments are in place, and these also provide a method of carefully tracking and monitoring the progress of the children. Assessments incorporate all known and potential risks. When possible, the children contribute towards these assessments and learn to understand the importance of them. Effective key-work sessions with children feed into the risk assessments. The staff understand the children's vulnerabilities and focus on specific areas of risk, such as substance misuse or managing emotions. The children learn about things that trigger any of their negative behaviours and work with the staff to seek alternative strategies, such as removing themselves from potential confrontation.

Staff use single separation, managing away and physical restraint only when necessary and in line with regulations. Staff use their knowledge and relationships to support the children when they are struggling, and this limits the use of restraint. This is evidenced by the 75% reduction in the use of physical restraint over the last two months in comparison with the preceding two months. Effective debriefings enable children to think through the incident with staff's support. Lessons are learned by both the staff and the children, and this reflection is incorporated into behaviour management plans to better support children, going forward.

Safeguarding concerns are managed well, and staff seek to learn any lessons to inform future practice. The manager notified Ofsted of a concern that was raised by a placing authority. A thorough investigation was undertaken, staff practice was fully evaluated, and the learning was implemented. However, on one occasion a senior member of staff failed to take the required action following concerns raised by a member of staff. Although the impact on children is minimal, this lack of timely action hinders potential improvements to the quality of care that children receive and could compromise an investigation.

The staff undertake appropriate personal searches of children. However, several written entries failed to evidence the reason for, or level of, these individual searches. This offers

insufficient protection for the staff and the children.

The home environment is well maintained. Health and safety risk assessments are conducted regularly by a relevant manager. Any repairs are carried out quickly, ensuring that the children are kept safe.

Health services: good

The children's health and well-being improve through well-coordinated care from the multidisciplinary healthcare team and the care staff. This partnership working is good at all levels. The children are extremely positive about the care and the support that they receive.

The healthcare team promptly assesses the children's physical and emotional support needs through the children's health assessment tool process. This assessment informs the children's ongoing care.

The children's health benefits from a school nurse who visits the home twice a week and a local general practitioner attends once a month. This helps the children's immediate physical health needs and provides health promotion and support to the children and the care staff. Physical care provision is currently being reviewed to make sure that it meets the children's needs.

The children have prompt access to a range of local secondary services, including a dietician and a sexual health clinic. Substance misuse practitioners have recently started to work closely with the care staff to provide harm-reduction support for the children.

The children receive excellent mental health support. The multidisciplinary team provides a wide range of appropriate assessments and individual interventions, with a focus on stabilisation. The children benefit from improved mental, emotional and psychological health. The healthcare professionals regularly engage in social activities with children, supporting them to have positive experiences and to increase their engagement.

The staff understand the ethos of 'secure stairs', the integrated care framework that addresses the needs of children and young people in secure settings. Formulation meetings are embedded and are starting to involve the children in planning their care. The healthcare professionals and the care staff work closely to monitor and report on outcomes for children.

The healthcare professionals are well supported in their role. They receive regular supervision and have excellent access to training and development opportunities. This ensures they can provide high-quality care to children.

Despite the use of separate recording systems by the healthcare professionals and the care staff, the staff all communicate well and record information appropriately. Clinical records are detailed, and core care records contain up-to-date health information. The staff and healthcare professionals work closely with the children and external partners to

improve the support available to the children when they leave the home.

The care staff manage and administer the children's medicines safely. Medicines, including controlled drugs, are stored securely. Healthcare is delivered confidentially, either in children's bedrooms or in a dedicated clinical room. The clinical room is visibly clean and tidy. However, there are no formal infection prevention control measures currently in place to ensure that the clinical area meets the required standards.

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

The manager has a wealth of experience and is well qualified for the role. However, her capacity to undertake some of the management tasks has been hindered by some recent challenges. This includes the time consumed by responses to external concerns.

One new member of staff has not received an induction, specialist training or regular supervision since starting in their role in August 2019. This had not been identified by the manager and it has presented a possible risk to the staff and the children.

The staff do not all receive regular, good-quality supervision. Some staff have not had reflective supervision for up to three months. Supervisors, therefore, do not consistently ensure that the staff's performance objectives have been met. The lack of regular supervision fails to provide an opportunity for the staff to discuss their practice and the care of children.

The management team has failed to provide enough monitoring and oversight of some records. Ineffective record-keeping is therefore not always addressed. There are shortfalls in the records of personal searches and children's complaints, and behaviour management records. The staff are experienced and knowledgeable. However, the records of staff qualifications are not up to date, and it is unclear how many staff have a relevant level 3 diploma.

The manager's internal monitoring review has identified areas in which to improve the quality of the care provided. However, the manager has not sent the report to Ofsted in the required timescales. This prevents Ofsted from having a current overview of the performance of the home.

The staff team provides a holistic approach to the children's care. Effective partnership working with multidisciplinary professionals ensures that all aspects of children's care are carefully considered. A social worker said: 'The staff are helpful, efficient and have a great relationship with [the child]. They communicate well with other agencies and are very accommodating during visits. In my view, the staff go above and beyond to help [the child] to feel included.'

The staff show genuine enthusiasm in their work and demonstrate a good understanding of the children's needs. They provide the children with stability and continuity of care. Despite recent challenges, the staff remain focused and resilient.

The manager is committed to making improvements and addressing the shortfalls identified. She leads an enthusiastic and dedicated team. The staff spoke highly of her informal and accessible management style.

The manager notifies all the appropriate agencies of significant events that have occurred. Transparency and open sharing of information enable Ofsted to monitor the action taken to keep the children safe.

Outcomes in education and related learning activities: good

The staff establish children's starting points and support needs quickly and accurately at admission. Staff use this and other information from the children's previous schools and local authorities to develop personalised education and support arrangements for each child. Most teachers use this information to set clear learning objectives and individual targets for children.

The acting headteacher manages the education provision well and maintains an accurate understanding of the quality of provision. She is aware of the progress that the children make and the actions required to improve education further. The senior leaders recognise that the recommendation from the previous inspection continues to be unresolved. This has hindered further improvements to the quality of the education.

The education and care staff work very effectively together. They work highly flexibly to ensure that the children experience good-quality education. The care staff support the education provision particularly well, providing cover for higher-level teaching assistant vacancies. This provides good support and helps the children to engage in education. The children make good progress, based on their starting points, in English, mathematics and information communication technology (ICT). Almost all the children achieve a functional skills qualification one level higher than their starting point in all three subjects, with a few achieving two levels higher.

In addition to the core curriculum of English, mathematics, ICT and science, the children participate in a broad practical curriculum, which they enjoy. This enables them to achieve vocational qualifications. They benefit from excellent accommodation and learning resources in subjects such as catering, design technology and sports and fitness. However, due to the lack of specialist staff, the children could not participate in the hair and beauty salon or in the high-quality music and recording studio.

The children enjoy education and their attendance is high. The staff use well-planned activities and topics to raise the children's understanding about equality and the need to respect differences. Children respect each other and the staff.

The children's views about education are collected effectively using a variety of forums, such as the recently established student council. Children are confident that staff listen to them and consider their views when making further changes to the education provision.

The children receive helpful independent advice and regular guidance from a specialist about their next steps in education, training or employment. The staff provide good support to help the children to progress to their next steps. One child joined a health and social care course at a further education college when she left the home. Another child, who hopes to gain employment in the construction industry, is receiving help as part of his mobility plan to gain the construction skills certification scheme's site-safety card.

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: SC035409

Provision sub-type: Secure unit

Registered provider: Northumberland County Council

Registered provider address: County Hall, Morpeth, Northumberland NE61 2EF

Responsible individual: Karen MacDonald

Registered manager: Julie Tinkler

Inspectors

Natalie Burton: lead social care inspector

Shaun Common: senior officer, secure estate

Barnaby Dowell: social care inspector

Paul Scott: social care inspector

Malcolm Fraser: HMI further education and skills

Tim Byrom: health and justice inspector, Care Quality Commission (CQC)

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