

1243962

Registered provider: North Staffordshire Combined Healthcare NHS Trust

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home provides short-break provision for children who have severe learning disabilities and associated complex needs. The service provides overnight short-break care for up to six children at a time.

The home is operated by a combined health care NHS trust. The manager registered with Ofsted in November 2017 and has a Level 5 Diploma in Leadership and Management for Residential Childcare.

Due to COVID-19, at the request of the Secretary of State, we suspended all routine inspections of social care providers carried out under the social care common inspection framework (SCCIF) on 17 March 2020. We returned to routine SCCIF inspections on 12 April 2021.

Inspection dates: 29 and 30 November 2021

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	good

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

Date of last inspection: 4 March 2020

Overall judgement at last inspection: improved effectiveness

Enforcement action since last inspection: none



Recent inspection history

Inspection date

Inspection type

04/03/2020 24/06/2019 28/02/2019 15/05/2018 Interim Full Interim Full

Inspection judgement

Improved effectiveness Good Improved effectiveness Requires improvement to be good



Inspection judgements

Overall experiences and progress of children and young people: good

The service currently supports 43 children. During the inspection, four children were enjoying their short break. Referrals to the service are well considered through a multi-disciplinary forum. Children have positive experiences of accessing the service. Parents stay with their children for the first two visits. Staff support children to increase time without parents in the home and work towards overnight stays. This careful planning and preparation help children to settle and reassure parents.

Children enjoy positive relationships with managers and staff who know them well. Staff's interactions with children are exceptional. Staff prepare activities they know the children like, and children have fun and really enjoy their short breaks.

Good use of Picture Exchange Communication System and Makaton means that children who cannot communicate verbally can make their needs and wishes known to staff. Staff respond appropriately and are able to use different communication tools to ensure that children understand daily routines and boundaries.

Parents speak positively about the care children receive. They feel that staff communicate well and they feel involved in plans for their child. One parent enjoys receiving pictures of their child doing activities and told the inspector, 'There is nothing I would change; it is just outstanding in my opinion.'

Staff support children to attend school; they ensure that suitable transport arrangements are in place and children are always dressed smartly. Staff maintain good communication with children's teachers when needed and occasionally visit schools to complete observations of children in their learning environments. Information gathered contributes to formulating the child's care plan; this ensures that children receive consistent approaches across services.

Care provided by staff is individual to the child and considers and incorporates the routines each child has at home. This helps to provide children with consistency and lessens their anxieties because it reduces the number of changes children experience.

Staff ensure that children receive support to develop their independence skills in line with their age and development. For example, children are encouraged to use cutlery at mealtimes. This practice supports children to develop confidence and selfesteem as they feel a sense of achievement.

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

Some children display behaviours that have the potential to cause themselves or others harm. The manager carefully assesses the compatibility of children who access the service at any one time. The manager adapts the environment when



needed to reduce overstimulating children, and they increase staffing levels when necessary. This promotes children's safety and well-being, and enables them to enjoy their short break.

Staff can recognise possible triggers and early warning signs of children becoming anxious or distressed. This helps staff to redirect behaviours and prevent potentially challenging situations from escalating. This good practice reduces the number of incidents and helps to keep children safe.

Managers respond well to safeguarding concerns. On two occasions, the manager identified external factors that had the potential to have a negative impact on a child's health. Concerns were promptly shared with parents and professionals, and investigations were undertaken. Being alert to potential risks and acting swiftly protect children from the risk of harm.

Medication is managed well. Staff ensure that medication is stored securely and at the correct temperature. Qualified nurses always administer medication to children and this is done safely.

The manager has carefully considered the environment and has used evidencebased research to consider the location of the furniture, lighting and visual stimuli within the home. This is particularly effective in supporting children with autism spectrum disorder.

On most occasions, health and safety is taken seriously. The home is kept clean and tidy, and specialist equipment used by children is serviced by a skilled engineer regularly. Health and safety and fire risk assessments are up to date. There have been two fire evacuation drills since the last inspection. Records of fire evacuation drills do not always detail who have participated. As a result, it is not clear if all staff and children who access the service have participated in a fire drill and know what to expect if the fire alarm goes off. While children have personal emergency evacuation plans, it is not clear that these have been practised.

On the rare occasions that physical intervention has been used by staff, it has been done so to prevent harm to the child. However, records do not contain all the information required by regulation, including the location where the physical intervention took place, a clear description of the hold used and a clear record of debriefs with children and staff. In addition, reflective practice with staff, specific to physical interventions does take place, but is not clearly recorded.

The effectiveness of leaders and managers: good

The manager knows the home's strengths and areas for development. She has plans in place to purchase specialist equipment to benefit children and increase opportunities for children to participate in activities within the community.

There is a very stable staff team; most staff have worked in the home for many years and have well-established relationships with children and their families. As a



result, children benefit from consistent care from staff who know them well. Staff are passionate about the children they care for and work hard to achieve the best for them.

Staff feel well supported in their role. Managers ensure that staff receive regular supervision and that their performance is reviewed in line with the organisation's expectations. Staff feel able to speak openly to managers about topics that are important to them. This creates a culture of openness and supports staff to develop their practice and keep children safe.

Team meetings take place regularly and provide staff with the opportunity to reflect on practice and children's progress. Managers keep staff informed of developments and this enables staff to invest and adapt well to changes that will benefit children.

Each year the staff attend a training week, where mandatory training is refreshed, but this was not possible this year due to the COVID-19 pandemic. Alternative arrangements were put into place and face-to-face training was replaced with e-learning. As restrictions have eased, some staff have been able to attend training courses in person. Managers have put reasonable measures in place to ensure that staff knowledge and skills remain current. As a result, children are cared for by qualified staff who are suitably skilled.

Largely effective monitoring systems are in place. Managers use reports completed by an independent visitor to support the home's development, reports are shared with staff and recommendations are discussed in team meetings. Internal monitoring systems also enable the manager to continually evaluate the standards of care at the home.

However, management monitoring has not identified shortfalls in safer recruitment practice. A member of staff has not provided a full employment history, and managers do not always verify the reasons why an individual has left previous roles involving work with children or vulnerable adults. In addition, the manager has also provided several student nurses with the opportunity to work in the home to support them to achieve their nursing qualification. Checks are undertaken by the university however, the manager has not satisfied herself that these are sufficient. These shortfalls have the potential for children to be cared for by unsuitable adults.

The manager does not escalate concerns when children's local authority care plans are requested and not received within a reasonable timescale. This means that staff do not always have access to up-to-date information about children. To date, this has not had an impact on children but, if unaddressed, has the potential to do so.



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
In meeting the quality standards, the registered person must, and must ensure that staff—	11 January 2022
if the registered person considers, or staff consider, a placing authority's or a relevant person's performance or response to be inadequate in relation to their role, challenge the placing authority or the relevant person to seek to ensure that each child's needs are met in accordance with the child's relevant plans. (Regulation 5(c))	
In particular, ensure that managers escalate concerns about delays in receiving children's care plans from placing authorities.	
After consultation with the fire and rescue authority, the registered person must—	11 January 2022
ensure, by means of fire drills and practices at suitable intervals, that persons working at the home and, so far as reasonably practicable, children are aware of the procedure to be followed in case of fire. (Regulations 25(d))	
The registered person must recruit staff using recruitment procedures that are designed to ensure children's safety.	11 January 2022
The registered person may only—	
employ an individual to work at the children's home; or	
if an individual is employed by a person other than the registered person to work at the home in a position in which the individual may have regular contact with children, allow that individual to work at the home,	
if the individual satisfies the requirements in paragraph (3).	
The requirements are that—	



full and satisfactory information is available in relation to the individual in respect of each of the matters in Schedule 2. (Regulation 32 (1) (2)(a)(b) (3)(d))	
The registered person must ensure that—	11 January 2022
within 24 hours of the use of a measure of control, discipline or restraint in relation to a child in the home, a record is made which includes—	
the date, time and location of the use of the measure;	
a description of the measure and its duration;	
the effectiveness and any consequences of the use of the measure; and	
within 48 hours of the use of the measure, the registered person, or a person who is authorised by the registered person to do so ("the authorised person")—	
has spoken to the user about the measure; and	
has signed the record to confirm it is accurate; and	
within 5 days of the use of the measure, the registered person or the authorised person adds to the record confirmation that they have spoken to the child about the measure. (Regulation 35 (3)(a)(iii)(iv)(vii)(b)(i)(ii)(c))	
In particular, ensure that staff record the location of the hold and a clear description of the restraint technique used. In addition, ensure that managers review the effectiveness of restraint incidents and a clear record must be kept of debriefs had with staff and children.	

Information about this inspection

Inspectors have looked closely at the experiences and progress of children and young people, 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: 1243962

Provision sub-type: Children's home

Registered provider name: North Staffordshire Combined Health Care and NHS Trust

Registered provider address: Lawton House, Bellringer Road, Stoke-on-Trent ST4 8HH

Responsible individual: Sharon Parke

Registered manager: Tracey Flanagan

Inspector

Helen Malanaphy, Social Care Inspector



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