

SC066565

Registered provider: New Options Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This privately owned children's home is registered to provide care and accommodation for up to 26 children and young people for between 38 and 52 weeks per year. The home provides a specialist service for children and young people with an autism spectrum disorder (ASD) and associated learning disabilities. There is a school on-site that the majority of children and young people use, and it also caters for day pupils. There are 11 flats on-site, of various sizes, in which the children and young people live. The home's manager has been registered since 2015.

Inspection dates: 8 to 9 January 2020

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: 22 January 2019

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Recent inspection history

| Inspection date | Inspection type | Inspection judgement |
|-----------------|-----------------|-------------------------|
| 22/01/2019 | Full | Good |
| 03/07/2017 | Full | Good |
| 19/01/2017 | Interim | Sustained effectiveness |
| 05/07/2016 | Full | Good |

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 |
|--|------------|
| <p>The leadership and management standard is that the registered person enables, inspires and leads a culture in relation to the children's home that—</p> <p>helps children aspire to fulfil their potential; and</p> <p>promotes their welfare.</p> <p>In particular, the standard in paragraph (1) requires the registered person to—</p> <p>use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13 (1)(a)(b) and (2)(h))</p> <p>Specifically:</p> <ul style="list-style-type: none"> ■ ensure that team meeting minutes are of a consistently good standard ■ ensure that staff supervision records reflect practice-related supervision ■ ensure that the records of achievements of the children and young people's 'Goal Attainment Scaling (GAS) goals' are all of good quality, signed and dated, kept up to date and clearly evidence which goals are achieved when ■ add dates to the photographic evidence of achievements. | 31/03/2020 |

Recommendations

- The behaviour management strategy should be understood and applied at all times by staff, and must be kept under review and revised where appropriate. ('Guide to the children's homes regulations including the quality standards', page 46, paragraph 9.34)

In particular, continue to implement the new positive behaviour support process – including an in-depth analysis of behavioural incidents with the aim to improve the quality of life and behaviour of children and reduce the use of restrictive strategies. Include an analysis of trends regarding staff involvement in restrictive strategies.

Inspection judgements

Overall experiences and progress of children and young people: good

The children and young people enjoy good relationships with the staff. This helps them to feel safe and secure. The staff are sensitive to the individual needs of the children and young people and provide good levels of care and attention. Care practice is child-centred, for example staff sometimes dance with a young person in the courtyard immediately after school.

In line with the home's statement of purpose, the children and young people develop their resilience, such as being able to wait in queues, coping with new situations and tolerating more crowded places. They grow in confidence and maturity and, when they are able, they attend their own reviews and speak up for themselves. Their self-care skills improve, and they become more independent. Consequently, the care that they receive contributes to improved life chances as the children and young people develop into adulthood.

The bespoke care packages include the children and young people having access to their own sensory rooms and cars to go out in and experience more of the outside world. The staff promote new experiences for all the children and young people. There is a wide range of activities, including an on-site sensory garden and adventure playground. The children and young people enjoy their hobbies, such as dance classes, and frequently go to local restaurants and go shopping.

The children and young people's attendance levels at school are high and they make good progress with their education. Outside of school, they learn to develop their social skills. The children and young people's progress and their enjoyment in social activities are captured in photos displayed alongside written records. The photos are a good visual reminder for the children and young people of what they have achieved. It is not clear when all these achievements are made, as some photos are not dated.

There are good records kept of the children and young people's health needs. The staff ensure that the children and young people receive the support that they need. Partnership work with a local health surgery has improved the way that healthcare is provided. For example, children and young people receive good support to keep their immunisations up to date, and there are individual plans that reduce anxiety about needles. The children and young people's health checks are maintained and there is specialist support to assist with epilepsy. The emotional well-being of the children and young people is prioritised. There is good input from the clinical team, and external psychiatric services are commissioned when needed.

The staff help the children and young people to see their relatives. In one case, a young person's progress is so good that instead of supervised family time, he now stays overnight at his parent's house without any staff support. Parents of the children and young people are unanimously positive about the quality of care and the benefits this has.

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

There are good risk management arrangements, which start from the point of referral. Detailed, individual risk assessments are based on relevant information about children and young people's needs and their individual vulnerabilities. The risks to the children and young people mainly arise from their ASDs, associated anxiety and need for consistent routines and having staff that they are familiar with. The levels of risk and the care practices in place to reduce risk are reviewed regularly.

The staff understand the children and young people's individual needs. They implement risk management strategies in a way that the children and young people benefit from predictable responses. Coupled with high staffing levels, this keeps the children and young people safe.

There is a safe recruitment process, followed by thorough induction and training programmes. The clinical team contributes to staff training and their understanding of the children and young people's needs. Consequently, the staff respond positively to the children and young people, even under challenging circumstances.

The children and young people do not go missing. The staff are aware of the potential risks for this, especially when taking the children and young people out into the community. The children and young people's social and leisure activities are risk-assessed and staff know what action to take in the event that anyone is missing.

The staff monitor the children and young people's internet use and provide them and their parents with appropriate advice and guidance about safe internet use. The staff help the children and young people to resolve any relationship difficulties with each other. There is plenty of space and the children and young people share living accommodation or have their own, according to their individual needs. This helps keep the home environment safe for the children and young people.

Complaints and concerns are robustly responded to. This keeps the children and young people safe from poor practice. The actions taken by the manager and the provider have helped generate a positive, open and transparent culture in which concerns are shared.

The clinical team, together with the staff, is revamping the 'positive behaviour support' plans and the monitoring of incidents. Care strategies and the physical environment are regularly reviewed to reduce the children and young people's anxiety and improve their behaviour. The use of physical intervention by staff is a last resort to keep the children and young people safe. For some children and young people, the amount this is used has reduced. Proactive analysis of behavioural incidents has not yet started, including on

whether there are any trends relating to specific staff that may be involved. More in-depth analysis is planned, with the aim of improving the quality of life for children and young people by reducing incidents of disruptive behaviour and consequently reducing the use of restrictive strategies.

The effectiveness of leaders and managers: good

There is an experienced and suitably qualified manager in post. She is supported by a senior team of deputies, house managers and team leaders. There are good standards of individualised care for the children and young people that are encouraged and maintained by the leadership team.

Leaders have a good understanding of the progress and experiences of the children and young people and, where necessary, will take action if their needs are not met. As a result, the children and young people have benefited from: extensive transition planning to other services; moving flats to improve their living space; adapted environments to reduce the risks of self-harm.

The children and young people have detailed care plans and individualised goals, and they benefit from the bespoke care programmes that the staff consistently implement. Staff training is focused on the specific needs of the children and young people, such as use of emergency epilepsy medication. The training programme is enhanced by the input of the clinical team, which contributes towards staff development.

There is regular staff supervision and the staff report that morale is high and that there are good levels of support from the leadership team. The records of staff supervision are mainly focused on completion of tasks and lack evidence that professional practice is reflected on and discussed. The impact of this is mitigated by meetings with the clinical team to discuss care practice in relation to the individual needs of the children and young people.

The care staff, clinical team and school staff have developed an integrated approach to the care and education of the children and young people. This partnership contributes to the children and young people's positive experiences and progress and helps keep them safe. Social workers and independent reviewing officers report that there is good partnership work and that they are pleased with the outcomes that the children and young people are supported to achieve.

There is inconsistency in the recording of team meetings and in the quality of children and young people's records, particularly in the way staff review and record progress made in achieving goals. These are recording issues that have not impacted on the overall outcomes for children and young people.

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.

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: SC066565

Provision sub-type: Residential special school

Registered provider: New Options Limited

Registered provider address: Turnpike Gate House, Alcester Heath, Alcester,
Warwickshire B49 5JG

Responsible individual: Graham Norris

Registered manager: Joanne Carter

Inspectors

Simon Morley: lead social care inspector

Tina Ruffles: social care inspector

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