

# **Care and Social Services Inspectorate Wales**

**Care Standards Act 2000**

**Inspection report  
Children`s Residential Care**

**Aran Hall School**

**Dolgellau**

**Date of publication - 20-11-2011**

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**Care and Social Services Inspectorate Wales**

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Name of children`s home:	Aran Hall School
Contact telephone number:	01341 450641(S)
Registered provider:	Aran Hall School Ltd
Registered manager:	Andy Pryer-Smith
Number of places:	20
Dates of this inspection episode from:	25 May 2011 to: 20 November 2011
Dates of other relevant contact since last report:	
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Inspected by:	Alison Burley
Lay assessor:	
Other regions contributing to this report:	

## Introduction

Aran Hall children's home is run by Aran Hall School Ltd, which is part of the Senad Group, a company with homes and schools in Wales and England. The responsible individual is Brian Jones, Chief Executive of The SENAD Group. The registered manager is Andy Pryer-Smith, head of care at the Aran Hall children's home.

The home is registered to provide care for a maximum of 20 children and young people between 11 and 19 years of age. The young people have severe learning disabilities and severely challenging behaviour. Some of the young people may have sexually harmful behaviour. The home operates on a 52 week a year basis. Education is provided in a school on site or older young people may attend a local college.

## Summary of inspection findings:

### What does the home do well?

- the risk assessment and management programme documents (RAMPS) for the individual children and young people
- the compatibility assessments with other children and young people
- the monitoring, review and analysis of the operation of the service through in built quality assurance systems
- maintaining a focus on the positives and achievements of the children and young people and the service as a whole
- the use of the skills and experience of house managers as a resource to support and develop staff
- the robust management of the service supported by systems, monitoring and good administrative support.

### What has improved since the last inspection?

- the management of the home by the employment of a deputy head of care
- the refurbishments of independent living units (ILU)
- the admissions process by more staff visits to young people pre-admission.
- the universal file structure for the case records of children and young people.
- the specific training and development programmes for house managers
- the form for the recording of staff supervision.
- the consideration of and the arrangements for food provided.
- the active support approach being employed in all units.

### What needs to be done to improve the service?

#### a.) priorities

No regulatory requirements have been made at this inspection.

#### b.) other areas for improvement

It is recommended :

- that Aran Hall should ensure that any child placed and funded by education should have Social Services overview and input from their placing authority. This should be with the aim of ensuring that the pathway planning for the long term needs of the young person are assessed and met before they are due to leave Aran Hall.

- that the format of the SENAD restrictive physical intervention log book be reviewed and improved.
- that consideration be given to ensuring that the naming of ILUs and spaces within the premises does not hamper complete and accurate record keeping and that records will not be compromised over time by name changes made.
- that reference is made to National Minimum Standards 4.1 and 21.11 in relation to the purpose of both children and young people's community meetings and the purpose and content of staff team meetings.

### **Inspection methods**

The inspection was planned on the basis of contact with the home during the year and information contained in the Self Assessment of Service (SAS) and Annual Data Collection (ADC) forms. These were completed by the provider in June 2011.

The inspection was undertaken by one inspector and took place over three days: the first being an unannounced visit of two days. A third one day visit took place one month later. Further time was spent reading information provided during the inspection visits and questionnaires which were received in October 2011.

During the inspection two young people's records were case tracked, time was spent with children and young people. CSSIW questionnaires were sent to parents, staff and placing authority social workers. Staff views were obtained from conversation, interviews and questionnaires. A parent questionnaire was also received. No questionnaires were returned by placing authority social workers. Discussions were held with the registered manager and three house managers. Observations were made of interactions between the children and young people and staff. It was not possible to meet the deputy head of care due to her personal circumstances but it was agreed that a meeting would take place outside of the inspection and after the publication of this report.

During this inspection year a CSSIW North Wales regional focus on the quality of care within the home considered the provision of food to the children and young people and arrangements for their activities.

Verbal feedback was provided to the principal and the registered manager on the last afternoon of the inspection visits.

## Section one choice of home

### Inspector's findings:

Aran Hall is a children's home currently registered for 20 children and young people. The most recent certificate provided to the home shows however that the registration is for 26. Some of the conditions of registration are regarded by the CSSIW as being redundant and it has been discussed with the service in the past that the conditions should be amended. This was not however followed through by CSSIW and an updated certificate has not been issued. At this inspection it was confirmed with the registered manager that action will be undertaken to vary and remove conditions of registration and to ensure that the conditions are appropriate for the service as it operates currently. The inspector will be responsible for ensuring that this is done.

The statement of purpose for Aran Hall has been reviewed and updated twice since the last inspection. It is comprehensive and includes all the matters specified in Schedule 1 of the Children's Homes (Wales) Regulations 2002.

The statement of purpose is provided to children and young people in a child friendly format and included with this and the children's guide is a similarly child friendly version of the complaints policy for the home. The children's guide was last updated in October 2010. The home's website also provides information about the home.

The policies and procedures for the home are reviewed on a regular basis and since the last inspection CSSIW have been informed of changes made to a number of policies and procedures as a result of events or changes in the service.

When an enquiry is received about a possible admission the referrals and transitions manager liaises with the placing authority and consideration is given as to the suitability of the placement at Aran Hall. Planning for a possible admission takes place over an extended period and since the last inspection care staff have been more directly involved with the admissions of children. In addition to the work undertaken by senior managers in assessing the suitability for placement and visits made by a child, their family and their social worker to Aran Hall, care staff have visited young people in their home or placement. Staff said that this had been valuable for the admission of the child and provided good knowledge and understanding of their needs.

At the time that the ADC was completed there were 13 children and young people in the home. Seven of whom were placed by English local authorities. At the time of the inspection some young people had left and others were not present as they were at home or transition visits.

Since the last inspection two young people had returned home from their placements at Aran Hall on an unplanned basis after nine and four months respectively. Five other young people had had planned discharges since May 2011. By September 2011 two children had been admitted and there were then ten children and young people living in the home.

Aran Hall has independent living units (ILU) which accommodate groups of children and young people who are assessed as being compatible to live together. There were five ILUs in use at the first inspection visits but at the time of the visit a month later there were four. These were named Eagle, Dove, Buzzard, and Raven.

During the inspection there were changes to which children and young people were in which ILU and there had been some movement of groups of children and young people to make better use of the accommodation and to allow for work on the premises to be undertaken. The young people and staff of one ILU were still to be moved, on a temporary basis, to allow for refurbishment of their unit. The issue of the naming of units and spaces within the home will be discussed later in this report.

There was evidence in records and from speaking to staff that they had been very involved with support to the families of children and young people in transitions in and out of the home.

A recommendation will be made in respect of ensuring that every child in placement has some input from the Social Services Department within their placing authority. A young person, whose placement had been funded wholly by education and who was due to leave Aran Hall had had no pathway plan drawn up and his long term care needs had not been considered adequately by his placing authority prior to the planned date of his discharge. The registered manager was able to negotiate with the placing authority education department but the service to the young person could have been improved by the local authority having a more insight into the need to plan for their care after Aran Hall.

**Requirements made since the last inspection report which have been met:**

Action required	When completed	Regulation number

**Requirements which remain outstanding:**

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

**New requirements from this inspection:**

Action required	Timescale for completion	Regulation number

**Good practice recommendations:**

- It is recommended that Aran Hall should ensure that any child placed and funded by education should have Social Services overview and input from their placing authority. This should be with the aim of ensuring that the pathway planning for the long term needs of the young person are assessed and met before they are due to leave Aran Hall.

## **Section two - Planning individual needs and preferences**

### **Inspector's findings:**

Record keeping was assessed by examination of two young peoples' files in detail and by reading parts of other young peoples' case files. The files were well ordered and contained the required information which was up to date. All young people are admitted to Aran Hall on a planned basis and the home has a good record of obtaining information prior to placement. The registered manager discussed the fact that lessons had been learned from admissions where information such as a past school report had not been received prior to admission and that this may with hindsight have had an impact on the assessment of the suitability of the child for admission. An aim of the home is to help children and young people to succeed and work has increased to promote this in all aspects of care. Placement plans were on file and there were records of the young person's needs, contact arrangements, health care and education. Plans were being reviewed and updated regularly by key workers and house managers.

'Pen portraits' of each child or young person were on file. These were written from the child or young person's point of view and with their input. They serve to inform the staff, or visitors of key information on each individual.

The home operates a system of both generic and activity specific risk assessments for the young people and their care and activities are planned in line with these. The risk assessment and management programme documents (RAMPS) for each young person were clearly written, well evidenced and followed a standardised process. Review dates of RAMPS were shown and use of different print colour alerted staff to additions or updated information. Risk assessments are kept under review in light of events and the behaviour of the young people and are reviewed not less than termly as part of Core Planning meetings.

Children and young people are encouraged to give their views and to make choices wherever possible. Each child or young person has a key worker and they have regular sessions which include asking the child or young person about their life in Aran Hall and what they would like in various aspects of their life.

Active Support (AS) and Person Centred Planning (PCP) were being used in all the ILUs and there was more evidence of these being central to the care of all of the children and young people. Children and young people have been given opportunities to contribute to their own plans and a person centred approach, together with the improvements in the premises, have given more opportunities for the children and young people to take part in daily activities in a less institutionalised way. In one unit where Active Support had most recently been introduced staff said that it was noticeable how the young people demonstrated more awareness of their environment. The young people took a more active part in daily tasks, such as meal preparation and by having their own ILU kitchen their activities were not constrained by fixed mealtimes.

Children and young people are encouraged and supported by staff on a daily basis to make their views known and to express their preferences. Community meetings were held in each ILU although the recorded frequency varied. Staff and children and young

people attend the community meetings and talk about choices to be made for example, about menu planning and activities, as well as for less frequent decisions such as new furnishings in the ILU.

It was noted that the minutes reflected some differences in function and content of community meetings and it was evident that there had been occasions in an ILU where some comments had been recorded that would have been better made in a staff team meeting. For example it is not appropriate to criticise care practice with staff in a community meeting in front of the young people. It is also important that when issues are discussed and children and young people are told that the house manager will talk to the registered manager then the minutes of next meeting should show that this has taken place and record the outcome. These matters were discussed with the registered manager during the inspection.

The Tros Gynnal advocacy service visit the home regularly to meet the young people and when necessary additional visits are made to respond to the needs of the young people.

Aran Hall contributes to statutory reviews and monitors that reviews take place to appropriate timescales. Records showed that effort and commitment was made to ensure that family and multi-professional input was provided for reviews, that children and young people were able to give their views, and / or were supported to attend all or part of their review.

Children and young people's case files were securely stored, well ordered and positively written. It was possible in most cases to identify the author of each entry and staff should be reminded of the need to put their name so that it is legible and will support record keeping in the long term. Records showed that there were effective systems in place to make sure that the needs of the young person were assessed, known to the staff in the home and that work was being undertaken to meet their needs.

The filing systems for records had been reviewed and all the ILU had the same file structure. A central child or young person's file was kept in the administrator's office as were financial records and copies of all incidents. It was recommended at the last inspection that the addition of a basic timeline chronology of a young person's care in Aran Hall would illustrate when they may have moved between house units, had a change of key worker or been part of a different care or education group. Chronologies were not seen on the files examined.

The format of the sheet used for the detailed daily social record for each young person had been revised and was fit for purpose and being used effectively. Copies of incident reports regarding the young people were on file as were records of sanctions and restrictive physical intervention. Where applicable bound book records were maintained in each ILU, being easily accessible for completion and review. Record keeping was judged to have been further improved and was of a good standard. There was evidence of monitoring and oversight by house managers, the deputy head of care and the registered manager.

The restrictive physical intervention log book was read and there are aspects in its format that the inspector feels are not fit for purpose. There is no column for the name of the child or young person involved to be recorded. There was inconsistent use of 12 or 24 hour clock. The heading which asks if any injury has been caused does not suggest if the written record is to be for a child or young person or an adult or both. The record asks for

the signature of the person completing the record. Not all of the signatures were legible and no printing of the author's name was required. The record should include a first and surname. A final column asked for a reference number to be filled in. It was not clear if this was to be a reference number for the entry in this log, in which case a log number in a first column would promote systematic numbering, and /or if there was an expectation for cross referencing to any other bound book log.

For Aran Hall the recording of the location of restrictive physical intervention raises a particular problem. Within the home the names of the different spaces have not remained constant. When children and young people move from one ILU to another they may take the name of the ILU with them, or they may not. A recent record referred to an event in the 'Magpie play area'. There is no longer an ILU names Magpie. Restrictive physical interventions were recorded as having taken place in 'Robin houseroom', 'the old Robin' and 'the activity room'. The inspector was aware that these are all the same room in the building. Records have to stand test of time for understanding and scrutiny in the future. Each entry must be clear in respect of the area which the log refers to. Recommendations will be made in respect of these matters.

Ten young people were resident in the home at the time of this inspection. Six were seen and all were spoken to during time that the inspector spent in ILU. The inspector was shown around the home and one of young people showed the inspector their bedroom. Other bedrooms were also seen. The bedrooms had been personalised by the young people to the extent that they wanted or were able to cope with and all contained suitable and appropriate furniture and the young person's personal belongings.

During a visit to one of the ILUs a young person asked about the paperwork for himself that the inspector was looking at. He looked at his file and the forms ready for completion including forms to record an accident, an incident, the sexual behaviour monitoring form, a sanction, a restrictive physical intervention, and daily health and well being. The food chart led to a discussion about some recent food safety and nutrition training that staff had done and menus within the ILU. The young person said that he liked the food in Aran Hall and did not want his menus 'changed to 'posh food''. He was very positive about a member of staff baking cakes and talked about cooking in the home and in school and sharing the food he brought home with his staff. The conversation revealed a pleasant focus on his pleasure and increased confidence in aspects of learning, sharing, and social interaction.

In questionnaires from staff they stated that care to children and young people was provided in line with care plans and that they felt children and young people had opportunities to make choices.

A parent responded to questions saying that they felt their child's individual needs were being met and that he was well cared for at the home, including that he 'has fun with staff'. They also wrote 'Aran Hall has worked wonders with (child's name)' and 'Well done Aran Hall'.

**Requirements made since the last inspection report which have been met:**

Action required	When completed	Regulation number

**Requirements which remain outstanding:**

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

**New requirements from this inspection:**

Action required	Timescale for completion	Regulation number

**Good practice recommendations:**

- It is recommended that the format of the restrictive physical intervention log book be reviewed and improved.
  
- It is recommended that consideration be given to ensuring that the naming of ILUs and spaces within the premises does not hamper complete and accurate record keeping and that records will not be compromised over time by any descriptive changes made.

### **Section three – Quality of life**

#### **Inspector's findings:**

Each child or young person has their own bedroom and this is personalised by their choices. They have a key to their own room and with the completion of the ILUs all children and young people can go to their bedrooms easily if they want to spend time there. The home has worked to increase the individual identity of each ILU and to make more of each unit being the home of the children and young people living there. The concept of each ILU having its own front door was being promoted. The front doors and other specific doors are kept locked but young people can ask for doors to be unlocked and the home's policy for the locking of doors is clear, it is kept under review and is designed to keep all the children and young people in the home safe and secure.

Records are kept of weekly pocket money allowances and of movements of money from the administrator to the care staff who take responsibility for the wallets of the young people in the ILUs. Records confirmed the transactions of money in and out of individual accounts but the inspector felt that some of the headings for the records were not sufficiently clear to allow tracking of monies held in cash and monies put in savings accounts. Following discussion with the school's administrator and a house manager immediate changes were made to record sheets with the intention of making the tracking of monies clearer to show savings and cash in hand balances and where each child or young person's money actually was, and where it is held (for example in the home's office or in the ILU.)

Young people are able, with support and guidance from staff where appropriate, to choose how to spend their pocket money. Clothing needs are kept under review and records showed that there were regular purchases both from catalogues with children and young people making choices and where possible on shopping trips that take place with staff. The young people seen were dressed in suitable and age-appropriate casual clothing.

Within the limits set by the individual young person's care plan and risk assessments, records showed that the staff work to promote contact between the young people, their relatives and other significant people. Children and young people are accompanied by staff on journeys or contact visits as required and one young person had been able to travel alone with staff keeping a watching brief and in contact by phone. Staff record significant observations regarding contact and any issues arising as a result. Telephone contact is included in contact arrangements and records show when telephone contact has taken place. When young people have mobile telephones their use is considered as part of the planning of their care and staff discuss the use of telephones and the internet with placing authorities and with the young people on an individual basis.

A development since the last inspection has been that there are more defined 'communication protocols' in place and each week parents are sent copies of the daily social reports for their child. Parents had commented that they received notifications of incidents or accidents but did not routinely have good news or information about the daily life and activities of their child. Parents are reported to appreciate the weekly information and in a CSSIW questionnaire a parent commented that they would also like some

weekly information from the school about their child's education. House managers each have work laptops and house manager's email addresses support contact with parents and families.

The education provision at Aran Hall is registered with Estyn as an independent school. Care staff work in school with the young people during the day. It is planned that one day a week the staff from an ILU do not go into school and this time is intended for them to complete other tasks in relation to the young people or their personal development or supervision. Where possible and appropriate and with staff support to varying degrees, young people have attended a local college and also undertaken work experience. The children and young people had produced a variety of artwork which had been presented as an art exhibition in Dolgellau. This was reported to have generated interest within the local community and understandable pride amongst the young people. One young person told the inspector that one of his paintings had been sold and was clearly very happy about this.

Aran Hall increasingly offers a nurturing environment for the young people. Wherever possible this is in terms of homely comforts but also in attention to the needs of the young people to be kept safe, to feel positive about themselves, to have opportunities to make choices and to be helped to succeed and take pride in their achievements.

As part of the inspection of children's homes in North Wales for the inspection year April 2011 to March 2012 inspectors are considering the arrangements made for leisure activities of the young people in children's homes. The young people at Aran Hall continue to be well supported in pursuing a range of leisure activities being physically active through sport and outdoor activities. In addition for quieter times and relaxation records showed that young people played board games with staff, made models, played Xbox games, listened to music and watched television and DVDs.

Activities are recorded on daily reports and if appropriate risk assessments were in place. The children and young people are encouraged, in line with their care plans to have regular 'community visits'. Records showed that these had included a wide range of activities including skateboarding, wakeboarding, fishing, visits to Bala lake railway, squash, visiting the local library, an internet café and going shopping.

Within the Aran Hall grounds there are outside play areas for all of the ILUs and the home had obtained some sturdy go-karts which were proving very popular with the children and young people who demonstrated varying degrees of skill in the play areas and in the bike track area. Within the bike track area of rougher ground the young people could also use large foam darts, and various rackets and balls.

The budget for activities is £5 per week for each young person and can be decided upon and allocated in a way that meets the needs and supports the interests of the young people, and promotes a healthy lifestyle. Memberships of some local facilities allows for some activities without additional cost and where less frequent but more expensive activities are requested staff reported a good record of additional funding being granted.

Some of the children and young people had had holidays away with staff and had been able to be part of the choosing of both destinations and activities. Staff reported that young people had enjoyed their holidays and had benefitted from trying new experiences and staying in a different environment.

**Requirements made since the last inspection report which have been met:**

Action required	When completed	Regulation number

**Requirements which remain outstanding:**

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

**New requirements from this inspection:**

Action required	Timescale for completion	Regulation number

**Good practice recommendations:**

## **Section four- Quality of care and treatment**

### **Inspector`s findings:**

All of the children and young people live in an ILU and during the inspection the last ILU was introducing the active support approach to the care of the young people. Active support means that children and young people have more opportunities to make choices about day to day events and this reduces the need for adults to tell them what to do. Staff spoke about the differences that they had seen in the levels of interest of the young people in the environment with more facilities, more choice and the emerging abilities in some aspects of daily life.

As a result of some young people having left the home to move to adult services and the progress made by some of the young people there had been movement of young people between the ILUs. Such moves had been prepared for and supported by thorough planning and preparation for the transition. Young people have both benefitted from and been pleased about the opportunity to move, particularly where it was recognition of progress made and gave opportunities for more independence.

The majority of the children and young people were seen in their ILUs and /or outside play areas and the inspector observed that the conversations between staff and young people were relaxed and that children and young people were taking more initiative in day to day activities. Staff were calm and thoughtful in their interactions and were alert and busy with the young people. The atmosphere in each house unit was pleasant and calm. There had been times for all the young people when they have struggled with their behaviour and the boundaries set for them but staff were evidently proud of the young people and cared about them and how they could be helped to achieve in the future.

Progress was reported to have been made by each of the young people and staff were recognising and talking to the children and young people with praise for their good behaviour and achievements. When necessary staff have not however shied away from addressing the need for clear boundaries to be in place, together with being sensitive to the young people's needs, feelings and mood. Staff listened to the young people and where necessary negotiated with them regarding priorities and goals to be agreed, particularly around behaviour. Appropriate and meaningful incentive schemes were in place for some young people and one young person was keen to tell the inspector how well he was doing. He said that he had an agreement with staff that he could have an outing, possibly further from the home than had been possible if he managed an incident free period.

Staff are provided with training and guidance in relation to the management of behaviour, discipline and restrictive physical intervention including restraint. Staff receive training in the RESPECT approach to behaviour management and support. Training is provided as part of their induction training, a further day's training takes place within three months and then at no more than yearly intervals. Positive behaviour is encouraged and young people have behaviour management strategies included in their individual placement plans and RAMPS. There was evidence that these plans were being reviewed on a regular basis and that staff responded to the changing needs of the young people over time.

It was observed that staff managed the demands of the young people well and were

consistent and supportive of one another. There has been a reduction in incidents of challenging behaviour which in turn has allowed for children and young people to have more individual opportunities and this contributes to an improved quality of life. It is the deliberate practice of the senior managers to see the young people at home in their ILUs to reinforce the positives in their life and behaviour so that situations are minimised when children and young people see the senior managers only because they are experiencing difficulties or are exhibiting challenging behaviour. It was reported that the benefits of doing this were positive for all concerned.

As part of the monitoring of the care of the young people the senior managers review incidents which have occurred in the previous 24 hours. This is intended to also support the care of the young people and the staff by providing feedback and opportunities for reflection and identifying if practice coaching for staff is required. The transitions manager for Aran Hall is a RESPECT trainer and has a role in reviewing incidents and interventions together with the manager, deputy head of care and principal. The monitoring by house managers and senior managers has continued and in the manager's monthly reporting there has been analysis of patterns and trends for incidents. These have become both a clear record and a useful tool for both monitoring and reflection. This represents good practice within the home.

In the records of restrictive physical interventions since the last inspection it was evident that the measures used had been in circumstances to prevent a young person from causing harm to themselves, a member of staff or potentially serious damage to property. The manager monitors the logs of restrictive physical intervention and consequences (sanctions) that have been imposed on young people when they had repeatedly challenged the boundaries set for them. From the records kept of each event, sanctions applied were considered reasonable and based on individual circumstances.

An assistance alert system had been installed in the home since the last inspection. In some ILUs this allows a member of staff to press a silent alarm within the ILU as a means of alerting other staff to the need for assistance or support. Staff were still getting used to the alarm system but said that it had allowed for a 'new face' member of staff to assist and had contributed to situations being defused and not escalated. The use and value of the system was being kept under review.

As part of the inspection of children's homes in North Wales for the inspection year April 2011 to March 2012 inspectors are considering the arrangements made for healthy eating by children and young people. The arrangements for the provision of food for the children and young people in Aran Hall have changed considerably since the last inspection. The use of the central kitchen has been reduced and the meals for children and young people are cooked within their ILU. The reduced hours for central catering have contributed to a redistribution of the budget for food for the children and young people. As a result of meals no longer being supplied from the central kitchen the ILUs have freedom in setting their own mealtimes and choices, both of which contribute to more natural and homely routines.

An external catering services company was employed to audit the catering arrangements within the home and subsequently provided advice and training to staff in respect of both food safety and nutrition. House managers are responsible for the monitoring of the implementation of the food safety policy and food safety is to be part of staff induction training.

A budget per child which has been incorporated into the individual budgets for each ILU and the focus on food is more homely and staff are better informed. Staff have been

encouraged to buy better quality produce make more home cooked meals and place less reliance on convenience foods.

All of the children and young people now take part in the planning, shopping and cooking for their meals. Some of the young people have specific dietary needs and others have limited preferences for foods that they will eat. Young people are helped to make choices as to their preferred meals and staff encourage the young people to eat fruit and vegetables and healthy snacks. The expectation is that a key worker should maintain an overview of what and how healthily a young person is eating.

One young person told the inspector that he liked the food and he did want his menus changed to 'posh food'. A member of staff talked with him about examples of some of the new meals he had tried and liked but it was clear that he would be able to also have his favourites. The young person was very positive about a member of staff baking cakes, his own cooking in school and what food he brought home to share with staff.

All of the children and young people are registered with a local GP, dentist and optician. The health and wellbeing of the children and young people is kept under review and relevant health professionals are consulted wherever necessary. A child and adolescent psychiatrist visits the home each month and is contacted between visits as necessary. Within the home counselling and specific work in relation to for example sexually harmful behaviour or anger management is available from qualified staff.

The arrangements of the storage and administration of medication were not examined at this inspection. Staff reported that all but two young people go to the medication room to collect their medication and that the arrangements for medication may be reviewed as part of the processes of having moved all the children and young people to ILUs.

**Requirements made since the last inspection report which have been met:**

Action required	When completed	Regulation number

**Requirements which remain outstanding:**

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

**New requirements from this inspection:**

Action required	Timescale for completion	Regulation number

**Good practice recommendations:**

## **Section five – Staffing**

### **Inspector's findings:**

The staff team at Aran Hall is large and when the ADC form was completed in June 2011 there were 64 care staff employed. The operation of the home and school is overseen by the principal. The registered manager is the head of care for the children's home. Since the last inspection a deputy head of care has been employed and they have taken a key responsibility for overseeing the competency based training of staff which has been given an increased focus since her appointment.

A referrals and transitions manager is employed, as is a training coordinator. At the time of the inspection there were five house managers one of whom was on maternity leave. The longer term arrangements for the house manager arrangements were to be kept under review as there had been a reduction to four ILUs.

Residential support workers are employed on day and night shifts and there is a pool of relief staff. Senior residential staff who work days are appointed to house room leader posts and are effectively shift leaders in each house unit. Two teams of night staff are employed all of whom work waking nights and each team has a night shift leader. House managers are responsible for their ILU and the individual shift in the home while they work. The decision has been taken that house managers would not be supernumerary but that they would have time in the ILUs to undertake direct work with the children and young people and time for staff supervision/staff training, team meetings and management and administrative tasks. The house managers are experienced residential practitioners and the intention is that they work along side and model good practice for staff.

Human resources (HR), administrative, maintenance, catering, domestic and gardening staff are also employed. Teachers and classroom assistant are employed in the school but were not the subject of this inspection.

There are fewer children and young people in the home than at the time of the last inspection and the registered manager has reported that although some staff have left it has not been necessary to recruit additional staff in recent months. All staff have a CRB enhanced disclosure certificate and there is a robust system for making sure that renewals take place in a timely way.

When new staff are to be appointed they are offered taster shifts to give them insight into the work and also to allow consideration of their approach to working with the children and young people. Once employed they receive planned and specific induction training. The induction processes and training have been better focused and evidenced since the home started working to the Care Council for Wales induction framework. The framework provides a structured start for workers in the first 12 weeks of employment and is a means for managers to audit the skills, knowledge and experience of new staff, and will help identify their development needs. Each outcome within the framework is closely linked with core units of the required qualification and the framework is also mapped to the Care Council for Wales' code of practice which explains what is considered acceptable behaviour for social care workers and what people receiving services should expect. All Aran Hall care staff have completed the framework and registered with the

Care Council for Wales as required by Children's Homes (Wales) Regulations 2002. The middle management structure for the home has improved since the last inspection. The registered manager meets with house manager or managers on duty each morning and there was evidence that the house managers were more proactive in planning for the deployment of staff and the outline of the activities and events for the day.

The registered manager determines the minimum number of staff required on any shift in each independent living unit and alongside this indicates the number of planned staff to be on rota which often exceeds the minimum. The house managers know key issues such as a child or young person going out with particular staff. As some staff have been off work relief pool staff have been used but the manager said that no agency staff had been employed.

A training officer is employed and is active in coordinating training to meet the identified needs of staff. There has been increased training for house managers and their better defined role. For example higher level child protection training has been provided. Care staff attend a 'training shift' once every 3 weeks as part of the rolling rota and this has continued to support good training outcomes. Both internal and external trainers are used and additional training attended by staff has been linked to the needs of the children and young people they care for, for example staff attending PECS or epilepsy training where the additional knowledge will support the care they provide. During the inspection staff attended training on professional boundaries. A number of staff are also working towards NVQs in management and in team leading.

In September 2011 the home met the requirement of 80% of care staff having the qualification required by regulation 25(1A) of the Children's Homes (Wales) Regulations 2002.

With the appointment of a deputy head of care the home is developing a clearer approach to competency based training for staff. There is a clearer expectation that house managers will observe and monitor the performance of staff to ensure that they are following policies and procedures and working in line with the risk assessments for children and young people. It was discussed with the registered manager that consideration should be given to the function and value of these observations and how they can be best used with staff as part of supervision. The inspector saw that some of the observation records were kept on a central file which did not support them being used for individual consideration or discussion with the member of staff concerned as part of their professional development.

Staff team meetings are held regularly and three examples of minutes were examined. There were some differences in content of staff meetings and in one ILU the content of the staff and community meetings, which each have a different function, seem to have at times been merged. House managers must be clear regarding the context and function of each kind of meeting and should consider the differences that would be expected in the agendas. Reference should be made to the National Minimum Standards in relation to this. Community meetings when children and young people meet with staff to discuss life in the ILU should not include a manager discussing with staff if they have not performed as expected. Staff meetings should include a discussion of each child or young person in the ILU. A recommendation will be made in respect of these matters.

The frequency of staff supervision has been improved and staff reported that they do receive regular supervision. The format for recording supervision has been revised and

improved. To support the aim of staff being increasingly reflective of their own work there is a higher expectation that this will be discussed in supervision. It was written in the SAS that there are still improvements to be made in the quality of some supervision and that both coaching and training for supervisors are to be developed in relation to this.

There have been some issues, for a small number of staff with respect to their suitability and performance since the last inspection. When staff have been suspended and are to return to work the inspector was informed that specific plans were being drawn up to re-induct, support and monitor the work of the individuals. It has been acknowledged that staff have not always been ready or confident to speak up about issues of poor practice or have not appreciated the extent to which complete and accurate recording and accountability must be ensured. Staff are now being supported and reminded in a more proactive way of their responsibilities as social care professionals.

CSSIW questionnaires were sent to staff, parents and placing authority social workers. Replies were received from three staff and one parent. Staff were also spoken to during the inspection. Comments made by staff indicated that the level of staff satisfaction was good within the home. They said that they felt valued and supported and that the staff worked well together as a team. They said that the young people were receiving good quality of care and that the atmosphere and environment in the home was safe and caring and getting increasingly homely. Comments also included that staff management was good and one said 'you get noticed /praised for doing good work'. In relation to the quality of life staff said that the children and young people get good opportunities to do a variety of activities within and outside the home. Where staff did raise issues they were about a need for more equipment in the outdoor area, wanting to have more activity money and wanting staff lockers in the ILUs for their personal possessions.

**Requirements made since the last inspection report which have been met:**

Action required	When completed	Regulation number

**Requirements which remain outstanding:**

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

**New requirements from this inspection:**

Action required	Timescale for completion	Regulation number

**Good practice recommendations:**

- It is recommended that reference is made to National Minimum Standards 4.1 and 21.11 in relation to the purpose of children's or house meetings and the purpose and content of staff meetings.

## **Section six – Conduct and management of the service**

### **Inspector's findings:**

Aran Hall is managed by an experienced and effective registered manager who has been the manager at the service for five years. Information and views gathered at this inspection evidence that the manager continues to be an effective leader and that he is active in day to day management tasks and in promoting good care practice amongst the staff.

The ADC and SAS for this inspection were completed to an excellent standard and the information provided highlighted what the service has done well with direction to where this could be evidenced. Where the manager had identified that further improvements could be made these were identified in the SAS with indicators for how improvements would be achieved. For the areas examined at this inspection the self assessment of the service was found to be accurate.

The comprehensive completion of the ADC and SAS with input from the whole management group and staff responsible for aspects of the service was an example of good practice. At the inspection a file of evidence had been collated to assist the inspector and this reflected the home's ability to provide evidence of the clarity of reasoning, planning, monitoring, and the current initiatives within the home. The inclusion of management and senior management meeting minutes gave a perspective of the home within the wider organisation and how organisational decisions impact on the home.

A conclusion of this inspection is that the management of the home was further improved and more robust than at the last inspection. The appointment of a deputy head of care and the work done to develop and support the house managers has strengthened the levels and performance of management.

The monitoring by managers was more effective and monthly reporting was clearly linked to a quality assurance function. The layers of responsibility and accountability appeared to be more reliable and well defined.

Management have kept the protocols, policies and procedures for the home under review and they have been amended as a result of events and / or changes made within the home. Aran Hall is a service that identifies and responds well to issues that arise, seeks and accepts expert opinion and professional advice to improve the service and care of the children and young people. In reflecting on the current service their own view has been that the smaller number of children and young people in their care has allowed for a better service and quality of life for the children and young people. Staff being better trained and equipped for their roles, the improved monitoring and use of the information gained from the active management have also strengthened the service.

The home is visited each month by a nominated visitor, who visits on behalf of the Registered Persons in accordance with Regulation 32 of the Children's Homes (Wales) Regulations 2002. It is evident from the Regulation 32 reports that the visitor makes unannounced visits, spends a significant period of the day in the home and where possible speaks to staff and young people during the visits. The use of photographs to

support reporting on issues raised, particularly in relation to health and safety concerns, is a positive tool. Each Regulation 32 report has details of any action required and records the manager's response and action taken. The reporting format for each visit is extensive and suitable for the purpose of providing the Registered Persons with a perspective of the day to day operation of the home and the quality of care provided.

As required by Regulation 33, the registered persons produced an annual review of the quality of care in the home. This was dated August 2011. The report was comprehensive, reflective of the home and quality of care provided and met the requirements of the Regulation.

No issues arose at the inspection in relation to the business management of the service.

**Requirements made since the last inspection report which have been met:**

Action required	When completed	Regulation number

**Requirements which remain outstanding:**

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

**New requirements from this inspection:**

Action required	Timescale for completion	Regulation number

**Good practice recommendations:**

## **Section seven – Concerns, complaints and protection**

### **Inspector's findings:**

The home has a suitable complaint policy and procedure and information regarding how to complain, and to whom, is provided for the children and young people within the home's children's guide. The children and young people's sessions with their key workers provide opportunities for them to raise any concerns that they may have and they are encouraged to talk to staff about how they feel or what they like or do not like. It was evident from records that where children and young people or others have raised issues about life in the home or community the complaints had been recorded, investigated and resolved at an early stage. The recording of complaints had improved since the last inspection.

Between July 2010 and 2011 eleven complaints had been received. All but two were resolved by investigation and resolution within the home. On an occasion when a young person had complained about a member of staff appropriate action had been taken by the management in relation to this and a referral made to the local authority safeguarding team. On investigation no external action was required and the member of staff and the young person were kept informed and the matter was resolved within the home.

The other complaint was investigated by the quality assurance manager for the SENAD organisation of which Aran Hall is a part. The registered manager is aware of the timescales within which complaints are to be investigated and with all the complaint records seen a written response to the complaint was provided.

The organisation has comprehensive child protection policies and procedures and a copy of the current All Wales Child Protection Procedures was kept in the home. Staff receive training in the child protection at the start of their employment and thereafter by refresher courses.

In the period since the last inspection there have been fewer allegations of inappropriate behaviour or abuse by staff within the home. However in May 2011 following concerns being reported by care staff, four notifications were made about staff practice in respect of the care provided to two young people within one ILU. The home has worked cooperatively with the safeguarding service and no external action has been taken following the findings of the investigations. Where staff have or were about to return to work the manager said that programmes for return had been set up to provide for a suitable re-induction, monitoring and support to ensure future good practice.

Other concerns had been brought to the attention of the home where partners of staff at Aran Hall were being investigated for inappropriate computer activity. One matter has been resolved and the member of staff has returned to work. The other investigation is ongoing but the member of staff has chosen to resign from their job.

Aran Hall has responded positively by reviewing procedures for computer, media and internet use within the home and additional safeguarding training has also been provided to staff. The new staff supervision form now includes a section to prompt supervisors to consider with staff if they have any issues or concerns about the care practice or conduct of colleagues or management. Work has also been undertaken to ensure that staff

understand the need for clear and complete information and prompt and complete reporting. Where any individual issues have arisen these were being addressed with the staff concerned.

Aran Hall has had few unauthorised absences since the last inspection and there are clear guidelines for staff to follow in the event of an unauthorised absence of a young person from the home. Each ILU has an appropriate log to record any absence and these records are monitored by the manager together with other bound book records.

Clear procedures are in place for the notification of significant events, as identified within Schedule 5 of the Children's Homes Regulations 2002. 33 notifications were made to CSSIW between June 2010 and the completion of the SAS in June 2011. Records showed that the registered manager had notified the appropriate parties and agencies on each occasion. Three further notifications were received between June and the completion of the inspection activity in September 2011. A summary record of Regulation 29 notifications is kept by the manager allowing for an overview and analysis of any issues or trends.

**Requirements made since the last inspection report which have been met:**

Action required	When completed	Regulation number

**Requirements which remain outstanding:**

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

**New requirements from this inspection:**

Action required	Timescale for completion	Regulation number

**Good practice recommendations:**

## **Section eight – Physical environment**

### **Inspector's findings:**

Aran Hall is a large and old detached building with a modern extension. The main building contains all but one of the ILUs. Buzzard unit is on the ground floor of the modern extension which on the first floor has office, meeting and staff room facilities.

At the start of the inspection there were five ILUs in use. At the end of the inspection there were four in use. This was as a result of some young people leaving the home and others being able to move within the home to live in a different group. Each ILU had an enclosed play area and good use was being made of these during the inspection.

As a result of continued improvements and developments in the buildings all of the children and young people were living in ILUs with living rooms, bedrooms, kitchens and bathrooms all contained within the units. This gives all the children and young people more choice and having access to their bedrooms during the day (outside of school hours) adds to the homely feel of the ILUs. The young people's bedrooms were suitably furnished and the arrangements for each room reflected the needs and wishes of the child or young person. The bedrooms allowed for plenty of space for personal belongings. Further work was planned to improve one unit which would result in the temporary relocation of two young people while the work was done. All of the units in use had suitable equipment and where further non-urgent work had been identified as being necessary it had been added to the planned programme of work.

The hallways and stairs in parts of the home had been re-carpeted. New doors had also been fitted which were lighter in colour and had panels of (safety) glass so they added brightness and more natural light to various areas. The inspection was unannounced and the home was clean and bright. Where any damage has been caused by young people the in-house maintenance staff are reported to have acted promptly to make repairs. As at the last inspection some issues were raised about the system for reporting faults or make maintenance request but there was said to be some improvement in this by night team leaders having a laptop. Nonetheless the manager was aware of some continuing issues and the situation was being monitored with a view to finding a solution to suit all parties. The in-house maintenance team have undertaken the improvement work to the building and this has had a significant positive impact on the environment of the children and young people.

There are extensive grounds at Aran Hall. The property has a private driveway and the gardens and parking areas were well maintained. The rural location remains suitable for the service provided. There had been no issues reported in relation to the location of the property and its position in relation to the local community.

There is no staff sleeping accommodation as all night staff work waking nights. The night staff are deployed according to the needs of the children and young people and at least one member of staff is on each ILU at any time. There are no surveillance cameras used within the home.

The manager is aware of the home's obligations in relation to the safety and maintenance of the premises. Internal health and safety audits are undertaken each month in each ILU

and house managers are responsible for ensuring compliance with health and safety requirements. The home as a whole had an external audit by the British Safety Council in October 2010 and achieved a continued 5-star rating with a score of 99.5%.

Regulation 32 visitors also monitor health and safety and where issues have been identified within organisational monitoring the use of photographs to support the judgements made was very positive.

As was referred to earlier in this report attention should be given to how the naming of ILUs and the movements of those names to different areas in the building, can be done in a way that does not compromise any aspect of fire safety or other risk assessments or in record keeping. The inspector appreciates that the names of the ILU are an important factor in the home life of the children and young people but the periodic renaming of an area or retaining the name of part of a past ILU is increasingly likely to give rise to difficulties and these issues should be addressed.

**Requirements made since the last inspection report which have been met:**

Action required	When completed	Regulation number

**Requirements which remain outstanding:**

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

**New requirements from this inspection:**

Action required	Timescale for completion	Regulation number

**Good practice recommendations:**

**Section nine – Specialist provisions**

**Inspector's findings:**

**Requirements made since the last inspection report which have been met:**

Action required	When completed	Regulation number

**Requirements which remain outstanding:**

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

**New requirements from this inspection:**

Action required	Timescale for completion	Regulation number

**Good practice recommendations:**

**A note on CSSIW's inspection and report process:**

This report has been compiled following an inspection of the home undertaken by Care and Social Services Inspectorate Wales (CSSIW) under the provisions of the Care Standards Act 2000 and associated regulations.

The primary focus of the report is to comment on the quality of life and quality of care experienced by service users.

The report contains information on how we inspect and what we find. The report is divided into distinct parts reflecting the broad areas of the National Minimum Standards.

CSSIW's inspectors are authorised to enter and inspect children's homes at any time. Inspection enables CSSIW to satisfy itself that continued registration is justified. It also ensures compliance with:

- The Care Standards Act 2000 and associated regulations, whilst taking into account The National Minimum Standards for Children's Homes.
- The home's own statement of purpose.

Children's homes are inspected annually by CSSIW. At each inspection episode there are visit/s to the service during which CSSIW may adopt a range of different methods in its attempt to capture service users' and their relatives'/representatives' experiences. Such methods may for example include self-assessment, discussion groups, case tracking and the use of questionnaires. At any other time throughout the year visits may also be made to the service to investigate complaints and to respond to any changes in the service.

Readers must be aware that a CSSIW report is intended to reflect the findings of the inspector at a specific period in time. Readers should not conclude that the circumstances of the service will be the same at all times.

The registered persons are responsible for ensuring that the home operates in a way which complies with the service specific regulations. CSSIW will comment in the general text of the inspection report on their compliance. For those regulations which CSSIW believes to be key in bringing about change in the particular service, they will be separately and clearly identified in the requirement section.

As well as listing these key requirements from the current inspection, requirements made by CSSIW since the last inspection, which have been met and those which remain outstanding are included in this report. The reader should note that requirements made in last year's report which are not listed as outstanding have been appropriately complied with.

Where key requirements have been identified, the provider is required under Regulation 33B (Compliance Notification) to advise CSSIW of the completion of any action that they have been required to take in order to remedy a breach of the regulations.

The regulated service is also responsible for having in place a clear, effective and fair complaints procedure which promotes local resolution between the parties in a swift and satisfactory manner, wherever possible. The annual inspection report will include a summary of the numbers of complaints dealt with locally and their outcome.

CSSIW may also be involved in the investigation of a complaint. Where this is the case, CSSIW writes a summary of that complaint. CSSIW will also include within the annual inspection report a summary of any matters it has been involved in together with any action taken by CSSIW.

Should you have concerns about anything arising from the inspector's findings, you may discuss these with CSSIW or with the registered persons.

Care and Social Services Inspectorate Wales is required to make reports on registered facilities available to the public. Most reports are public documents and will be available on the CSSIW web site: [www.cssiw.org.uk](http://www.cssiw.org.uk). However, in order to protect the interests of children the reports on children's homes will not be available on the web site. Persons requiring a copy of a children's home inspection/complaint report should contact the regional office for the area within which the home is located.