



*Making Social Care
Better for People*

inspection report

RESIDENTIAL FAMILY CENTRE

Browning House Family Assessment Centre

**Browning House
126 Chapeltown Road
Chapeltown
Leeds
West Yorkshire
LS7 4DP**

Lead Inspector
Frances Shillito

Unannounced Inspection
20th November 2006 10:00 am

The Commission for Social Care Inspection aims to:

- Put the people who use social care first
- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

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This is a report of an inspection to assess whether services are meeting the needs of people who use them. The legal basis for conducting inspections is the Care Standards Act 2000 and the relevant National Minimum Standards for this establishment are those for *Residential Family Centres*. They can be found at www.dh.gov.uk or obtained from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering: www.tso.co.uk/bookshop

Every Child Matters, outlined the government's vision for children's services and formed the basis of the Children Act 2004. It provides a framework for inspection so that children's services should be judged on their contribution to the outcomes considered essential to wellbeing in childhood and later life. Those outcomes are:

- Being healthy
- Staying safe
- Enjoying and achieving
- Making a contribution; and
- Achieving economic wellbeing.

In response, the Commission for Social Care Inspection has re-ordered the national minimum standards for children's services under the five outcomes, for reporting purposes. A further section has been created under 'Management' to cover those issues that will potentially impact on all the outcomes above.

Copies of *Every Child Matters* and *The Children Act 2004* are available from The Stationery Office as above.

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SERVICE INFORMATION

Name of service Browning House Family Assessment Centre

Address Browning House
126 Chapeltown Road
Chapeltown
Leeds
West Yorkshire
LS7 4DP

Telephone number 0113 2621110

Fax number 0113 2392169

Email address

Provider Web address

Name of registered provider(s)/company (if applicable) Browning House Family Assessment Centre

Name of registered manager (if applicable) Mrs Karen Lee Keenan

Type of registration Residential Family Centre

No. of places registered (if applicable) 13

Category(ies) of registration, with number of places

SERVICE INFORMATION

Conditions of registration:

Date of last inspection 28th November 2005

Brief Description of the Service:

Browning House Family Assessment Centre is registered as a charity and is located in Leeds. It has existed for over fifty years initially providing services to mothers and babies and developing into providing services for families. The centre offers accommodation over a twelve-week programme of assessment based on 'The Framework for Assessment of Children in Need and their Families,' which was introduced in the year 2000. Work with families can also be offered on a day attendance or outreach basis. The main objective is to assist parents to develop the necessary skills they will require to successfully parent and safeguard their children. Referrals are made via the courts and/or local authorities.

The centre is a large detached property and access to the building is through electronically controlled access arrangements. There are eleven bedrooms consisting of 7 single rooms, 4 family rooms and 2 self-contained flats, which are monitored through a scanning audio system. There is a range of facilities available to parents and their children, including 4 first floor bathrooms, 2 downstairs toilets, communal lounge, dining room and kitchen, laundry, nursery and a large garden with safe play area. There is also a newly built conservatory that is popular with parents. There are no facilities at the centre to accommodate parents with a physical disability.

SUMMARY

This is an overview of what the inspector found during the inspection.

The site visit for this annual unannounced inspection took place between the 20th November and 22nd November 2006 for a total of seventeen hours. Time was also spent preparing for the inspection before the visit took place. This was a key inspection when all of the key standards, as well as the remaining National Minimum Standards for Residential Family Centres were looked at. Feedback was shared during a meeting with the manager on the third day of the inspection visit.

Time was spent talking to the manager, the staff and most of the families. There was an opportunity to look around the centre with the manager. Various records at the centre were read during the inspection visit as well as the documentation that the manager had sent to the Commission before the inspection visit took place.

What the service does well:

The centre is managed appropriately and staffed by a well qualified, experienced and dedicated team who work closely with a range of professionals, to make sure that the needs of both children and parents are met.

Many of the staff have worked at the centre for a long time. One staff member said, "Browning House is a community. You live your life with them (the residents) and support them through their ups and downs."

Where it is identified in the Placement Plans, parents are encouraged and supported to continue with their education and training provisions. This is good practice and shows the flexibility of the service.

Parents said that they know how to complain and that any concerns will be dealt with properly by staff. One parent said, "Staff are approachable, there's always someone we can talk to." Another parent said, "I love it here, staff help me and there's always someone to talk to if I need to talk."

The views of parents are listened to and this shapes the service where possible. Parents are clear on the progress of their assessments and they have positive relationships with staff.

Staff are skilled in working with parents with learning difficulties. They produce resources in a pictorial format to remove any barriers that parents may face. Interpreters are arranged for parents from BME (Black and Minority Ethnic) communities where this is needed.

Residents said that the centre is a nice place to be and that the refurbishment works are improving it. They said that they really like the nursery and that it is good to spend time with their children there.

What has improved since the last inspection?

The recording of the administration of medications has improved and a new system has been established which staff have been consulted on. The manager monitors these records. Case files now have a front sheet, which details the staff members who are working with the family and making entries in the records.

Training in behaviour management is taking place and all the team will have completed this within a fortnight of the inspection visit. Physical intervention training is not felt to be needed at this time, however if circumstances change then the manager said this will be reviewed. Since the last inspection the Restraint Policy has been revised to include an explanation of what unacceptable behaviour means and the action staff are allowed to take in response to challenging behaviour from residents.

There is now a better system in place to alert parents to telephone calls received. Privacy has been improved by a private telephone room being provided. Parents have always been able to use the telephone in the office with staff present. As a result of requests and consultation with parents in residents' meetings, a tannoy is also in operation to alert parents that they have a telephone call.

The record of complaints now includes the outcome of each complaint. The Statement of Purpose now includes the contact details of the Commission for Social Care Inspection, in the event that the person making a complaint decides to involve the Commission. As a result of a recommendation following the last inspection, the centre now records whether or not parents are satisfied with the outcome of the complaints made by them.

As a result of the previous inspection the manager has ensured that accident records are now completed differently. Copies of well kept accident records were seen on case files and an electronic copy is also kept.

Fire records were seen and they were in good order. They showed that there had been monthly emergency lighting tests, weekly fire alarm tests and regular fire drills. The registered manager must continue to ensure that these checks are made and recorded regularly.

The manager said that an audit of staff files had taken place. Six files were seen which were clear that they were well kept. There was clear evidence on file that the recruitment and selection policy is followed in practice.

What they could do better:

It was noted that for one new member of staff a CRB check (Criminal Records Bureau) had not yet been received. However records showed that staff had chased the CRB by telephone, and that they were making every effort to obtain it. In the meantime the member of staff concerned works under the supervision of more experienced and senior staff. The registered manager must continue to make every effort to obtain a satisfactory CRB (Criminal Records Bureau) check for the recently appointed member of staff identified during the inspection.

Health and safety is made a priority at the centre and staff are always vigilant in making sure that the environment is free from hazards. The registered manager must make this a formal arrangement and ensure that risk assessments are undertaken to ensure the safety of people within the centre during this period of refurbishment. The environmental risk assessment was undertaken in 2000 and must also be reviewed.

At the point of inspection it was noted that the registered manager was mindful of the needs to ensure that 80% of care staff achieve an NVQ (National Vocational Qualification) Level 3 in Caring for Children & Young People. Following the inspection visit evidence was seen that the centre had reached it's target of having 80% of it's staff qualified.

Please contact the provider for advice of actions taken in response to this inspection.

The report of this inspection is available from enquiries@csci.gsi.gov.uk or by contacting your local CSCI office. The summary of this inspection report can be made available in other formats on request.

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Being Healthy

The intended outcomes for these standards are:

- Families have access to health care, education, employment and leisure activities which promote their good health and well being, including their mental health, in a safe environment.(NMS 4)

The Commission considers Standard 4 the key standard to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

4

Quality in this outcome area is good.

This judgement has been made using available evidence including a visit to this service.

The centre works closely with a range of professionals to make sure that the health needs of both children and parents are met.

EVIDENCE:

On admission parents and children are registered with the local medical practice to ensure that they have access to a GP. A health visitor visits the centre once a week to meet with parents, to offer advice and support on child development and to provide medical oversight to babies and children. The manager said that the team have a positive working relationship with the Community Paediatric Service, where advice and information can be sought. This was confirmed by recording on case files which were read. These files contained detailed child development plans, which set out in clear terms the health needs of the child and how they are to be met. A review takes place on a monthly basis and is informed by observations from all involved staff.

There was also evidence that arrangements are made for other routine medical appointments to be made, such as those with the optician and the dentist. Staff said that they accompany families to appointments where this is asked for. It was noted that for parents from BME communities (black and minority ethnic) who have recently had their babies and who need to take their child

out into the community to see a GP, a taxi is provided by the centre to make sure that their cultural needs are met.

Staff said that a worker from a local treatment agency has done direct work with parents on substance misuse. They have also undertaken a training needs analysis with staff and developed a training plan to be delivered over time. Both staff and a number of parents said that staff offer support on sexual health matters and provide leaflets and information where this is needed.

At the centre the care of the children remains the responsibility of their parents. However there are times when parents have free time and are allowed to leave the centre for a break and to socialise. In such cases the care of the children is transferred to staff for a short period. The "Children in Staff Care" forms allow for parents to give consent to staff where necessary, to administer medication or to access medical treatment for the child.

The centre has a medication policy. Parents are responsible for administering medication to themselves and their children, but medications are stored in a secure room under staff supervision. Since the last inspection the manager has made significant improvements to the way in which the administration of medication is recorded and monitored. It was noted from staff team meeting minutes that the manager has also invited staff to comment on the new system. A new system has been set up and implemented which is clear and well kept. Medications were stored appropriately in a locked facility. Parents are not permitted to take responsibility for storing medications. Staff demonstrated how medications are stored and administered during the site visit. They said that they prompt and support parents to manage their medication and any that their child is taking. Then staff "take a step back to allow them space to do it for themselves". A number of key staff are qualified health professionals and as such are able to offer good support on general health care issues.

The manager said that where parents with mental health needs are admitted to the centre and the need is identified, a referral is made to a counsellor for sessions to take place directly with the parent. This ensures that the parent has every opportunity to be supported through the assessment process and is an example of good practice. Records seen at the centre confirmed this.

As a result of the previous inspection the manager has ensured that accident records are now completed differently. Copies of well kept accident records were seen on case files and an electronic copy is also kept.

Where it is identified in their Placement Plans, parents are encouraged and supported to continue with their education and training provisions. For example staff said that a parent had been supported to continue with their studies towards their GCSE examinations and to sit the examinations

themselves. A tutor visited to teach the parents and they also had computer-based access to distance learning resources.

Parents are equally encouraged to be involved in activities and leisure interests such as baby massage; painting; cookery; cross-stitch and in the development of independent living skills. In addition two members of staff are involved in consulting with parents and planning themed events and activities, such as "Pizza Nights" and "Film Nights". In the summer there was a "Fun Day", with raffles and stalls, which was a successful event. Staff said "it was nice to see parents winning a prize on the raffle". Other visits have included a visit to "Sundown Park" and the Leeds Donkey Sanctuary for the children. A Christmas Service to be led by the local vicar in December was also being planned.

Staying Safe

The intended outcomes for these standards are:

- Parents and children enjoy a level of comfort and security within the centre based on mutual respect and an understanding of what may have an adverse effect on other residents.(NMS 8)
- The privacy of parents and children is respected and information about them is handled with appropriate confidentiality.(NMS 9)
- Parents and children are able to complain if they are unhappy with any aspect of the centre. They are confident that any complaint will be taken seriously, investigated and addressed without delay and they will be kept informed of the progress.(NMS 10)
- The welfare of children is promoted, children are protected from abuse, and an appropriate response is made to any allegation or suspicion of abuse.(NMS 11)
- Families are protected from abuse, neglect and self-harm.(NMS 12)
- All significant events relating to the protection of children or vulnerable adults within the centre are notified by the registered person to the appropriate authorities.(NMS 13)
- There is careful selection and vetting of all staff and anyone else resident on the premises.(NMS 15)
- Parents and children stay in accommodation that provides physical safety and security.(NMS 22)

JUDGEMENT – we looked at outcomes for the following standard(s):

8, 9,10, 11, 12, 13,15 & 22

Quality in this outcome area is good.

This judgement has been made using available evidence including a visit to this service.

Staff work well to ensure that families are safe and protected. Risk assessments must be undertaken and recorded, which reflect the centre's clear commitment to health and safety.

EVIDENCE:

The centre has an equal opportunities policy and an acceptable behaviour policy, which is made clear to parents at a planning meeting, which is arranged

before families are admitted for assessment. In addition parents are given a copy of the "Parents' Handbook" which makes clear the responsibilities of parents to "show the respect to residents, and to staff, that you would like to be shown yourself." The manager said that there are plans to reproduce the Parents' Handbook in a pictorial format for people with learning difficulties. Records confirmed the centre's expectations of the behaviour of parents during their period of assessment. Minutes of residents' meetings show that staff are clear and open with residents about acceptable behaviour.

Since the last inspection the Restraint Policy has been revised to include an explanation of what unacceptable behaviour means and the action staff are allowed to take in response to challenging behaviour from residents. The manager and the staff said that half of the staff team had recently received training in challenging behaviour and the remaining staff will have their training in a month's time. This includes training on de-escalation techniques. The manager said that at this point physical intervention training is not required. However should circumstances change, this training would be arranged.

The manager said that the centre has positive links with the local police who are very supportive and who occasionally place student police officers on placement at the centre.

The centre is very secure and is fitted with electronic gates and window grilles. The manager said that new security arrangements were going to be put in place within the next week following the visit. This will include putting up CCTV (closed circuit television) and a DVD recorder to the exterior of the building; installing an extra monitor in the staff room; installing split screen monitors; enhanced external lighting; the cutting down of trees where necessary and installing a perimeter fence. The minutes of staff team meetings confirmed this. In addition parents said that the building is secure and that the children are safe.

On arrival visitors to the centre are asked to sign the visitors' book and wear a visitors' badge. The manager said that their presence is monitored within the centre by staff, and visitors are asked to stay in communal areas only. Checks are made before parents' visitors are approved by the centre and where necessary a CRB (Criminal records Bureau) check will be made. Observations during the site visit and records at the home confirmed this.

The centre has clear policies and procedures on privacy and confidentiality. During the site visit staff showed that they respect the privacy of the residents. They were seen knocking on residents' bedroom doors before going into their bedrooms. One staff member said that they try very hard to observe from a distance, to allow parents their space to care for their children as naturally as possible, given the circumstances and the nature of the assessment process. One resident said that there is "not enough privacy" and another said they

would like "more privacy". The manager said that parents are made aware of the scanning audio system and the nightly checks that staff make at the centre. Parents confirmed this.

The manager reported in the pre inspection questionnaire (PIQ) that residents have keys to their own rooms and cupboards in which to store their belongings. It is made clear to residents that where necessary, staff at the centre have the right to search these areas.

Confidential information, including residents' files are stored in the "kardex room", in line with the Data Protection Act (1998). The manager said that sometimes parents and their children go into the kardex room, which means that staff have to continually remind them that staff only are allowed into this room, in order to make sure that the confidentiality of all families is protected. To prevent issues in the future a small lobby will be built leading to the current door, with a counter. The manager said that this will enable parents to talk to staff when they need to, but prevents them going into a room where confidential information is stored. Detailed evidence of these plans were seen in the staff team meeting minutes.

Staff and residents said that residents have access on a regular basis to what is written about them and are able to challenge any aspect of the record keeping that they believe to be unfair or incorrect.

There is now a better system in place to alert parents to telephone calls received. Privacy has been improved by a private telephone room being provided. Parents have always been able to use the telephone in the office with staff present. As a result of requests and consultation with parents in residents' meetings, a tannoy is also in operation to alert parents that they have a telephone call.

Parents said that they know how to complain and that any concerns will be dealt with properly by the staff. One parent said, "Staff are approachable, there's always someone we can talk to." Another parent said, "I love it here, staff help me and there's always someone to talk to if I need to talk."

The record of complaints was in good order and now includes the outcome of each complaint. The Commission has been kept informed of the complaints that have been received at the centre. The Statement of Purpose now includes the contact details of the Commission for Social Care Inspection, in the event that the person making a complaint decides to involve the Commission. Information on notice boards within the centre also lets families know that they can contact the Commission if they want to share concerns about the service they receive. As a result of a recommendation following the last inspection, the centre now records whether or not parents are satisfied with the outcome of the complaints made by them.

The centre has a child protection policy that is followed in practice by staff. Discussions with staff showed their knowledge of their responsibilities in relation to child protection, including the reporting of concerns. Safeguarding and keeping families safe is central to the work that takes place at Browning House, particularly in terms of the assessment of parents and their ability to care for their children. Staff regularly listen to the scanning audio system, observe parents interacting with children and observe parents during individual and group sessions. There was evidence that staff work well with parents with a learning difficulty, in tailoring their assessments to meet their individual needs and taking into account their level of vulnerability.

Staff receive child protection training and this is updated on an ongoing basis. The manager makes the Commission aware of any significant incident or occurrence in writing and also on occasions by telephone.

The centre has a recruitment and selection policy. The manager said that an audit of staff files had taken place. Six files were seen which were clear that they were well kept. There was clear evidence on file that the recruitment and selection policy is followed in practice. Clear records had been kept of the interview process, in particular for the three new members of staff who had recently started work at the centre. Satisfactory references had been obtained for all staff. It was noted that for one new member of staff a CRB check (Criminal Records Bureau) had not yet been received. However records showed that staff had chased the CRB by telephone, and that they were making every effort to obtain it. In the meantime the member of staff concerned works under the supervision of more experienced and senior staff.

The centre's Fire policy was seen. A visit had been made by the Fire Officers the week before the inspection. The fire appliances had been checked. The fire records were seen and they were in good order. They showed that there had been monthly emergency lighting tests, weekly fire alarm tests and regular fire drills. The registered manager must continue to ensure that these checks are made and recorded regularly. Residents said that they know what to do when the fire alarm sounds and that fire drills take place regularly.

All the interior doors had been fitted with devices to make them close in the event of the fire alarm sounding. There was evidence that all the portable electrical appliances at the centre had been checked in the week before the inspection visit. Records showed that an engineer had visited to check the fire alarm system within five months of the inspection. There was also evidence that the gas installation had been checked within eight months of the site visit.

The manager said that Fire Safety Training was planned and Fire Officers were delivering this training within a fortnight of the inspection visit. Records confirmed this.

The centre's Health & Safety policy was seen. The manager and the staff said that health and safety is everyone's responsibility. They said that staff are encouraged to report any health and safety hazard to the management promptly, so that they can be addressed without delay. This is particularly important when building works are ongoing and the centre is being refurbished. The registered manager must ensure that risk assessments are undertaken to ensure the safety of people within the centre during this period of refurbishment. The environmental risk assessment was undertaken in 2000 and must also be reviewed. During the inspection visit it was noted that in the areas where building works were in progress, that this caused minimal disruption to residents and there were no health and safety risks noted. Residents said that they had not been disturbed by the ongoing works and that staff reinforce the need for safety at all times.

Making a Positive Contribution

The intended outcomes for these standards are:

- Parents and children are admitted to and leave the centre in a planned and sensitive manner.(NMS 2)
- Children and their parents have their needs assessed and written plans outline how the assessment will be undertaken.(NMS 3)
- Parents and children using the centre feel well-informed and party to decisions made.(NMS 6)
- Parents and children enjoy sound relationships with staff based on honesty and mutual respect(NMS 7)

The Commission considers Standards 3 and 6 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

2,3, 6 & 7

Quality in this outcome area is good.

This judgement has been made using available evidence including a visit to this service.

The views of parents are listened to and this shapes the service where possible. Parents are clear on the progress of their assessments and they have positive relationships with staff.

EVIDENCE:

The centre has a clear admissions procedure which is followed in practice by staff. The manager said that once a referral is received from a local authority social service department, staff at the centre carefully consider whether the centre can meet the family's needs. An interview is arranged and is attended by the parents and their social worker. This offers an opportunity for a tour of the centre, for the purpose of the assessment and the centre's expectations of the parents to be discussed and for the parents to have any of their questions answered. The case files of three families were seen. They contained detailed information from the social worker, a placement plan for the parent and a child development plan for the child, which is agreed as the basis for the assessment. Placements are reviewed regularly and parents contribute to

these reviews. A case manager and a key worker are identified to support the family at the outset of the placement.

During the inspection visit staff were preparing for a family who were going to be admitted to the centre with specialist needs. It was clear from discussion with the manager and the staff that there had been careful consideration of how much support key workers would need to offer in order for the placement to work. The family's room had been recently decorated and staff had bought some bright and colourful bed and cot linen to welcome the family into such a lovely, attractive and comfortable room.

Staff said that where placements break down, the privacy of the family is respected and their departure from the centre is planned as sensitively as possible. Residents spoken with confirmed this.

Residents are consulted in a variety of ways. The minutes of residents' meetings were seen, which reflected the views of residents and staff and the reason for decision making. For example, residents had raised concerns that they had missed telephone calls whilst they were in the kitchen. In response a tannoy system has been installed so that parents can be alerted that there is a telephone call for them. In addition staff who organise events and activities seek the views of the residents to inform the planning of future events.

Residents said that they are kept informed about how their assessments are progressing and that they are invited to read the records that are written about them on a weekly basis. If they disagree with what is written about them they are able to challenge this in the regular meetings that they have with their key workers and case managers.

Staff are skilled in working with parents with learning difficulties. They produce resources in a pictorial format to remove any barriers that parents may face. Interpreters are arranged for parents from BME (black and minority ethnic) communities where this is needed.

Currently the centre sends out questionnaires at the end of the assessment to be completed by parents and placing officers. The manager said that there are plans to send out survey forms at different stages of the assessment in order to obtain more focused feedback on how the service can be improved.

Positive relationships were observed between residents and staff during the inspection visit. Both staff and residents said that the relationship between them is based on honesty and clear boundaries. One resident said, "I'm so happy at Browning House, I want to stay."

Achieving Economic Wellbeing

The intended outcomes for these standards are:

- Parents and children live in pleasant, well designed and maintained surroundings providing sufficient space and adequate facilities to meet their needs.(NMS 19)
- Parents and children enjoy homely accommodation, decorated, furnished and maintained to a high standard, providing adequate facilities for their use.(NMS 20)
- Shared spaces complement and supplement residents' private rooms.(NMS 21)

JUDGEMENT – we looked at outcomes for the following standard(s):

19, 20 & 21.

Quality in this outcome area is good.

This judgement has been made using available evidence including a visit to this service.

The centre provides spacious and pleasant accommodation for families for the duration of their stay.

EVIDENCE:

The centre is situated in a convenient location near to bus stops with easy access to the city centre. Nearby there are shops, leisure facilities and a medical practice, within easy reach. During the inspection visit the centre was clean, tidy and well organised. Administrative staff spoken with confirmed that maintenance works are promptly attended to and are budgeted for. Minutes of staff team meetings confirmed this.

The environment is child friendly and a conservatory has recently been built which is now used as a nursery/play area for parents and children to spend time in. In addition the nursery at the centre is a resource where parents and children can engage in more focused and structured sessions, such as messy play and baby massage.

Residents said that the centre is a nice place to be and that the refurbishment works are improving it. They said that they really like the nursery and that it is good to spend time with their children there.

The manager said that a programme of refurbishment is ongoing and this is improving the centre's facilities greatly. This was seen during a tour of the centre with the manager and further confirmed in minutes of staff team meetings. A number of en suite bedrooms have been established, single rooms have been decorated and flats have been refurbished to a high standard. A toilet with easy access for disabled people is to be established on the ground floor. There are also plans to refurbish the bathrooms as part of the refurbishment programme. Carpets are being replaced in a number of areas and attractive IKEA furniture is being ordered to make the place feel modern and comfortable.

As explained earlier in this report there are plans to improve the security arrangements in this already secure environment. This will include an extension to the perimeter fence to be started shortly.

Residents have plenty of communal space, including a lounge, smoke room and a pleasant seated area in the garden, which is surrounded by plants, for when the weather is pleasant.

Management

The intended outcomes for these standards are:

- Parents and children who use the centre know what they can expect, how they will be treated, how the centre operates, and have had this information in written form prior to admission.(NMS 1)
- Parents' progress is recorded to reflect their ability to care for the children in a safe manner, promoting their welfare.(NMS 5)
- Parents and children receive the care and services they need from competent staff.(NMS 14)
- Staff are sufficient in number, experience and qualification to understand the needs of parents and children and who are able to respond appropriately when required.(NMS 16)
- Parents and children receive a service from staff who are themselves supported and guided in safeguarding and promoting the children's welfare.(NMS 17)
- Staff are trained and enabled to carry out the role to which they are appointed.(NMS 18)
- Parents and children enjoy the stability of an efficiently run service and purchasers have confidence that they are getting value for money.(NMS 23)
- The service's work with parents and children is continually adapted in the light of information about how it is operating.(NMS 24)
- There are adequate records of both the staff and families using the service.(NMS 25)

The Commission considers Standards 1, 14 and 24 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

1, 5, 14, 16, 17, 18, 23, 24 & 25.

Quality in this outcome area is good.

This judgement has been made using available evidence including a visit to this service.

The centre is well managed and staffed by an experienced and dedicated team.

EVIDENCE:

The centre's Statement of purpose was revised in October 2006 and now includes the contact details of the Commission for Social Care Inspection, for people who have made complaints. It sets out how the centre operates and what residents should expect from it. There is also a "Parents' Handbook", which also offers useful local information for residents. The manager said that there are plans to reproduce it in a pictorial format for people with learning difficulties.

Case files were stored securely in line with the Data Protection Act (1998). The case files of three families were seen. They were clear, well organised and up to date. There was a front sheet which identified the names of the staff who had made entries within the file. Residents said that they see their "kardex" files on a weekly basis and read what has been written about them. They said they can challenge things if they want to and that they sign the records if they agree with them. The manager said that a lobby with a counter is to be fitted to the door of the "kardex" room, so that residents can speak to staff, but there will be a barrier to the room where confidential information is stored.

The centre is managed appropriately and staffed by a well qualified, experienced and dedicated team. Qualifications range from degree awards; nursing, midwifery and health visiting awards to national vocational qualifications. The administrative staff are also well qualified in their own field. The manager said that all efforts are being made to support staff to achieve their NVQ's (National Vocational Qualifications), in order to meet the centre's target of 80% of care staff having the qualification. At the point of inspection of the sixteen staff six had an NVQ or equivalent and nine were working towards the qualification. Following the inspection visit all staff had completed their NVQ training and the centre had met it's target.

The manager is now registered with the Commission for Social Care Inspection and the deputy manager is well qualified and experienced to manage the centre in the manager's absence.

Many of the staff have worked at the centre for a long time. One staff member said, "Browning House is a community. You live your life with them (the residents) and support them through their ups and downs." Discussion with staff and observations of their professional and respectful approach to residents was positive.

The team has recently benefited from three recently appointed members of staff. The induction package was seen and staff said they had found it very useful when they started their new jobs. One staff member said, "The manager spent a lot of time with me." Another staff member said, "Staff have been supported, the managers do a lot of work with the new staff."

Discussions with managers showed that there is a real commitment to staff training and development at the centre. This was confirmed by staff who said, "The management are good at ensuring we get the training we need." A Staff Survey has recently been analysed and the manager is keen to listen to the views of staff and to take action where this is the best way forward.

Browning House has the "Investors in People" accreditation. The staff member responsible for co-ordinating training said that the training planned for staff and set out in their Personal Development Plans, is directly linked to their appraisals. In addition, the manager said that staff are encouraged to look out for training courses that they think will benefit them. A budget is allocated for this purpose so that training courses can be sourced when they are needed.

Training planned includes HIV and Hepatitis Awareness, Diversity and Learning Disability Awareness. The centre is creative and has arranged a session with a social worker who works with people with a learning disability. In addition a session is planned with a parent with a learning disability, who left Browning House with their child following a successful placement, and who will share their experiences with staff to help inform their work with other parents, as well as to encourage other parents who are undergoing assessments themselves.

Training has recently taken place in Behaviour Management and Physical Intervention training will be arranged as soon as possible. Fire Safety Training had been arranged to be delivered within the next fortnight by the Fire Officers and the centre also has a training DVD, which leads to a certificate and is updated every six months and approved by the Fire Service. In addition First Aid Training and Baby & Infant Resuscitation training is regularly updated for staff. Staff have also benefited from Mental Health Awareness Training and Child Protection Training.

The staff rotas were seen and it was noted that the rotas are planned around the needs of the families living at the centre. A detailed handover was taking place during the first day of the inspection visit. It is an expectation at the centre, that a handover takes place before staff leave the building at the end of their shift.

Staff said that supervision takes place regularly with an external consultant and group supervision is led by a counsellor. Staff appraisal records and Personal Development Plans were seen on the personnel files. Staff said that team meetings are useful and that they receive good support from their managers and their colleagues. Minutes of staff team meetings were seen.

Staff confirmed that they are aware of the policies and procedures of the organisation, which are held electronically. There was clear evidence that the manager monitors the records kept at the centre on a regular basis.

SCORING OF OUTCOMES

This page summarises the assessment of the extent to which the National Minimum Standards for Residential Family Centres have been met and uses the following scale.

- 4** Standard Exceeded (Commendable) **3** Standard Met (No Shortfalls)
2 Standard Almost Met (Minor Shortfalls) **1** Standard Not Met (Major Shortfalls)

"X" in the standard met box denotes standard not assessed on this occasion

"N/A" in the standard met box denotes standard not applicable

BEING HEALTHY	
Standard No	Score
4	3

STAYING SAFE	
Standard No	Score
8	3
9	3
10	3
11	3
12	3
13	3
15	2
22	2

ACHIEVING ECONOMIC WELLBEING	
Standard No	Score
19	3
20	3
21	3

ENJOYING & ACHIEVING	
Standard No	Score
No NMS are mapped to this outcome	

MANAGEMENT	
Standard No	Score
1	3
5	3
14	3
16	3
17	3
18	3
23	3
24	3
25	3

MAKING A POSITIVE CONTRIBUTION	
Standard No	Score
2	3
3	3
6	3
7	3

Are there any outstanding requirements from the last inspection? No

STATUTORY REQUIREMENTS

This section sets out the actions, which must be taken so that the registered person/s meets the Care Standards Act 2000, Residential Family Centres Regulations 2002 and the National Minimum Standards. The Registered Provider(s) must comply with the given timescales.

No.	Standard	Regulation	Requirement	Timescale for action
1.	RFC15	16 (1) (a)	The registered manager must continue to make every effort to obtain a satisfactory CRB (Criminal Records Bureau) check for the recently appointed member of staff identified during the inspection.	31/03/07
2.	RFC22	22(1) (a)	The environmental risk assessment at the centre must be reviewed. A written risk assessment of the ongoing building works must be carried out for the duration of the refurbishment programme.	15/03/07

RECOMMENDATIONS

These recommendations relate to National Minimum Standards and are seen as good practice for the Registered Provider/s to consider carrying out.

No.	Refer to Standard	Good Practice Recommendations

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