

# Muswell House

Inspection report for Children's Home

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<b>Unique reference number</b>	SC035277
<b>Inspection date</b>	23/06/2009
<b>Inspector</b>	Sandra Jacobs-Walls
<b>Type of inspection</b>	Key

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<b>Setting address</b>	9-11 Coppetts Road, London, N10 1HR
<b>Telephone number</b>	020 8883 7157
<b>Email</b>	
<b>Registered person</b>	London Borough of Haringey
<b>Registered manager</b>	Margaret Ann Lucy Nelson-Cole
<b>Responsible individual</b>	
<b>Date of last inspection</b>	10/12/2008

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## About this inspection

The purpose of this inspection is to assure children and young people, parents, the public, local authorities and government of the quality and standard of the service provided. The inspection was carried out under the Care Standards Act 2000.

This report details the main strengths and any areas for improvement identified during the inspection. The judgements included in the report are made in relation to the outcomes for children set out in the Children Act 2004 and the relevant National Minimum Standards for the service.

## The inspection judgements and what they mean

- Outstanding: this aspect of the provision is of exceptionally high quality
- Good: this aspect of the provision is strong
- Satisfactory: this aspect of the provision is sound
- Inadequate: this aspect of the provision is not good enough

## **Service information**

### **Brief description of the service**

This children's home is a short stay residential service registered for six young people aged 12 to 16 years. The home aims to work with young people who are in crisis situations for a period of up to three months. Staff support young people to return to their family or to a previous placement or to move to appropriate alternative accommodation. The home is owned and managed by the host local authority. There is 24 hour staff support, including two waking night staff. The home is a double fronted house close to local amenities. Young people have their own single bedrooms on the first floor. The ground floor has a lounge, dining room and kitchen. There is an office and a separate room used for meetings and for young people to receive visitors. At the rear of the house is a well maintained garden and a hard surface area suitable for ball games.

At the time of the inspection three young people were in placement at the home. Two inspectors conducted the inspection.

### **Summary**

The overall quality rating is inadequate - enforcement action.

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

The purpose of this unannounced key inspection was to gauge the home's success in addressing weaknesses highlighted at the previous inspection and assess the service against key National Minimum Standards. All six outcome areas were assessed.

The previous inspection highlighted weaknesses in the staff's documentation of information, the home's statement of purpose, relevant qualifications of the manager, staff supervision and the home's quality assurance measures. Most of these requirements have been repeated at this inspection.

In addition, weaknesses are identified in missing or incomplete files, inadequate written policies, inadequate disposal of young people's medication, inappropriate use of locks on the premises and poor ventilation in some areas of the home. The service does not appropriately log all complaints and issues of equality and diversity are not addressed well.

The inspection highlights that young people benefit from a well established and committed staff group who are supported by line managers. The home's is well maintained and the service has comprehensive health and safety measures in place. Staff keep undesired incidents to a minimum and there have been no child protection allegations. Incidents of bullying and accidents have not occurred in the home for a significant length of time. Young people indicate that they feel safe in the home and that generally staff treat them with respect.

## Improvements since the last inspection

The previous inspection resulted in six requirements; all but one has been repeated at this inspection. The service has successfully resolved issues highlighted in the monthly monitoring visits, however actions relating to staff's documentation of information in a number of areas, the frequency of staff supervision and appraisals, the revision of the home's statement of purpose and the manager achieving a relevant management qualification still remain outstanding.

## Helping children to be healthy

The provision is inadequate.

Staff of the home encourage young people to live healthy lives. Young people's files contain a dedicated health care section and staff encourage young people to register with key health care services and attend appointments. Staff are available to accompany young people to health care appointments if they so wish; young people confirm that this is the case.

The Looked After Children's (LAC) nurse visits the home regularly and meets with all newly admitted residents soon after placement start. The home provides young people with a range of literature pertaining to health care issues and these are freely available in the home's communal areas. The home has good links with the local children and adolescent mental health service and the Tavistock Centre to help address young people's mental health support needs. Most staff are first aid trained and managers ensure that on each shift at least one member of staff has completed first aid training. There have been no accidents in the home since the last inspection.

The previous inspection highlighted that young people's documented care plans did not address their health care needs. This is also noted at this inspection. One young person has a known medical condition that is documented on file, however there was no mention of this in the young person's care/placement plan. It is important for plans to outline all young people's key needs in order to ensure that services provided address identified needs adequately. This is therefore a repeat requirement.

The service employs a cook who is responsible for providing young people's meals during the mid week. Over the weekend young people have a takeaway and prepare a Sunday lunch with staff. Staff encourage young people to participate in making decisions about meal choices. Young people comment that meals provided by the home are satisfactory.

The service has a medication policy in place that offers staff written guidance about the management of young people's medication. Staff receive training in medication practices. All medicines are kept locked in the home's medication cabinet, which is located in the staff office. Staff maintain accurate records of young people's medication regimes and Medication Administration Records are complete. However, staff do not promptly dispose of unused medication. Two differing medications were

present in the home's medication cabinet that had been prescribed for young people who have since left the home.

### **Protecting children from harm or neglect and helping them stay safe**

The provision is inadequate.

Staff make attempts to keep young people safe while in placement at the home. Young people's information is kept secure in individual files locked in the staff office; young people have limited access to this area of the home. Young people's information is shared with other professionals on a 'need to know' basis and staff know not to talk openly about young people's information with other residents. Young people have access to information written about them and files contain a confidential section which is restricted. Private and highly sensitive information about a young person is kept elsewhere and not on general case files. Notwithstanding this, the home's resident meeting book contains documentation that pertain to the personal information of some young people shared in residents' meetings where they were the only ones in attendance.

Young people's privacy is respected when washing. The home has a sufficient number of washing and bathing facilities in the home; all young people's bedrooms are fitted with wash basins.

The service provides young people with a range of information about the local authorities general complaints procedure. This does not provide young people with specific information about the process of making a complaint or expressing dissatisfaction with staff or about the service. The home's children's guide and leaflets on display does contain general information about making complaints. These also provide the contact details of key advocacy services.

The home's complaint log contains information about a complaint made by a resident since the last inspection. However the home's residents book and young people themselves indicate that other complaints have been made during this time. The home's complaints log is not reflective of all complaints made about the service and does not encourage young people to express dissatisfaction with the service. This is contrary to the requirements of the regulations.

There have been no allegations or incidents of a child protection nature since the last inspection. Staff receive child protection training facilitated by the borough's child protection team. Staff have access to written guidance on the safeguarding of young people in placement. Staff team meetings regularly address issues of child protection. The home does not maintain centralised records of significant incidents that occur in the home; these are kept on young people's individual files.

Young people comment that bullying is not an issue in the home and are aware of the service's 'zero tolerance' stance with regard to bullying. Young people receive information that explain the expectation of staff in relation to bullying and this is discussed at residents' meetings.

Young people are aware of the home's protocols if they are absent from the home without permission. Staff have access to relevant written policies on site that outline action to be taken if young people are deemed 'missing'. Staff maintain good records of instances where young people are absent and action taken is consistent with policy guidance.

With regard to behaviour management, staff have access to comprehensive written guidance. Staff encourage young people to display acceptable behaviour by making use of the home's reward system. Files contain good records of where young people have received rewards. Where young people's behaviour is not acceptable, staff attempt to address this through discussion and if necessary will impose sanctions. Staff are familiar with permissible and non permissible sanctions and these are displayed on the sanctions log book. Staff impose sanctions that are fair and relate to the presented behaviour. Staff's appropriate use of sanctions is monitored via monthly monitoring visits. No young person has been restrained by staff; the staff group have received training in physical intervention and demonstrate an understanding that these techniques are used only in extreme situations and as a last resort.

The premises generally provides young people with physical safety and security. Young people comment that they feel safe in the building. Staff have access to health and safety policies that address building risk assessment, the testing of fire equipment, alarm and emergency systems. Staff maintain good records of equipment checks and fire drills. Staff conduct evacuation procedures regularly and ensure all new residents have an opportunity to participate while in placement at the home. The night staff are responsible for checking the entire building on a daily basis. The home makes use of alarmed exit doors, fire doors and smoke alarms. However, fire extinguishers are not evident around the building; this is due to young people's past inappropriate use of the extinguishers. This is not safe fire prevention and the absence of readily accessible fire extinguishers puts both young people and staff at risk.

The local authority's human resources department is responsible for staff recruitment and personnel records are maintained off site. Standards relating to staff vetting is therefore not assessed on this occasion.

### **Helping children achieve well and enjoy what they do**

The provision is satisfactory.

Staff demonstrate an effort to meet the individual needs of young people in placement and are able to give verbal illustration of how this is achieved. Key work sessions for example, indicate staff's attempts to address young people's individual needs. However, documented care and placement plans do not support this ethos. The placing authority's care plans are not consistently evident on file. Young people indicate limited understanding about their placement objectives.

Staff indicate the educational achievement of young people living at the home is a high priority and young people confirm that staff make keen efforts to encourage young people to view their education as being valuable. Staff admit that many of the young people show little interest in their education and indicate it is challenging to persuade them to view their education as being important.

Case files demonstrate the close working relationship between staff of the home and educational professionals to assist young people make educational progress. Staff attend Personal Educational Planning meetings, educational open evenings and are present for other key educational forums. Staff consistently speak with young people about the value and importance of education both on an individual level and in residents' meetings and LAC reviews. Files contain key documentation relating to young people's educational progress such as school reports, attendance and performance evaluations and exclusion notices. Staff support young people's learning by providing each young person with a desk to complete work and young people have access to the home's computer room for this purpose.

### **Helping children make a positive contribution**

The provision is inadequate.

Young people's placement plans do not address their individual needs and the local authority care and placement plans are not always present on file or are incomplete. Two young people's documented placement/care plans are almost identical in content and do not adequately address young people's individual needs. This is despite the two young people in question having very differing needs. Care plans do not address issues of identity, diversity and equality. Individual care plans are similar in content as the care planning tool is generic in its format.

Staff complete risk assessments and these are evident on file. However, some of these are incomplete while others identify the risk, but do not offer staff strategies to minimise or eliminate the risk. There is some evidence on file of young people's needs and development being reviewed; this is primarily achieved via the statutory LAC reviewing process. Staff of the home also complete monthly summary reports that highlight placement progress and issues.

Young people confirm that they maintain contact with family members and friends while living at the home. Staff encourage young people's significant others to visit the home although this rarely occurs. Young people indicate they prefer to meet with friends away from the home. Staff encourage family members to attend key meetings held at the home and this does happen. The home has flexible visitation rules and staff discuss these with young people upon admission to the home. Young people also receive literature about this.

Staff encourage young people to make decisions about their lives and how the home is run. The home's residents' meeting is regularly convened and young people have the opportunity to share their views about the running of the home and the service in general. Young people do not consistently attend residents meetings and on some



occasions these meetings are held with only one participant. Records of these meetings indicate that a range of topics are presented for discussion, such as meal planning, the completion of chores, recreational activities etc. Young people indicate that they feel they have some input into the manner in which services at the home are provided, but do not feel that the home's residents' meetings are effective as staff largely facilitate and manage these meetings.

### **Achieving economic wellbeing**

The provision is inadequate.

Staff keep most communal areas of the home locked during school hours. This is to deter young people from staying home when they should be engaged in educational activities, either at school or on site. Staff confirm that all communal areas of the home are kept locked during the day, including the lounge, dining area and especially the kitchen. The kitchen area especially is always kept locked, even when the cook is present. This is due to the inappropriate behaviour of former residents. There are no risk assessments in place to support the need for the continuation of this practice.

Young people complain that they do not have access to drinking water as there is no ready access to cups at the dining room water cooler. Again, staff comment that this is due to young people's challenging behaviour at times. This practice is not conducive with providing an environment that supports young people's development and independence. These restrictions impinge negatively on young people and restrict their movement and accessibility to the full range of facilities while in the home.

Young people generally feel that the home's environment is good and they enjoy their surroundings. The home is well maintained, decorated and furnished. It is suitably equipped and there is a good programme of maintenance repair. However, young people complain that ventilation in some bedrooms are poor and their requests for ventilation fans remain outstanding. Staff confirm this to be the case as the fans are currently on order. The poor ventilation in young people's bedrooms impinge on young people's comfort while in placement at the home.

### **Organisation**

The organisation is inadequate.

The previous inspection highlighted that the home's statement of purpose required further revision. During this inspection it is noted that the document is not a fully accurate reflection of services offered by the home. For example, staff confirm that clinical consultancy is not offered to the service by the Tavistock Centre as stated. The document states that care plans, risk assessments and local authority assessment are completed, however this is found not to be the case. There is little evidence of the service meeting young people's 'diverse needs' and some staff supervision and appraisals are not completed at appropriate intervals. The statement

of purpose document does not include the relevant qualification and experience of staff working in the home.

The home's children's guide is yet to be issued by the service and remains in draft form. The document is lengthy, with sometimes vague information; this is particularly true of information outlining the home's complaints procedure. Staff comment that creative graphics are yet to be added to the document and that the home's accompanying 'welcome pack' is in need of further development.

The promotion of equality and diversity is poor. Staff and case files do not demonstrate that adequate attention is paid to the diverse needs of young people. Individual care and placement plans do not proactively identify or address issues of identity, equality or diversity which is a key component of young people's development.

Many of the staff group have completed or are in the process of completing NVQ3 training. Staff have access to training facilitated by the council, managers of the team and some external training. Support and informal supervision via line managers is good, but the frequency of formal supervision and appraisals for some staff members is irregular. This is particularly the case for waking night staff. This issue was highlighted as a weakness at the previous inspection and is important to ensure staff competencies are of an acceptable standard. The requirement is repeated.

The staff group are sufficient in number, qualifications and experience. However the service lacks robust monitoring systems and strong leadership to improve service provision. The borough has recently recruited an independent consultant to assist reviewing and improve the home's current functioning levels. The home's registered manager is yet to identify and complete a management course in accordance with the National Minimum Standards. This was highlighted at the previous inspection and is recommended as good practice to help develop strong leadership and enhance service improvement.

Young people's care is monitored in the home via monthly monitoring visits. Independent individuals conduct these visits consistently and subsequent reports are detailed. Staff anticipate that the borough's recent recruitment of an independent consultant will assist the service to explore service provision and development within a wider context of residential care.

## **What must be done to secure future improvement?**

### **Statutory Requirements**

This section sets out the actions, which must be taken so that the registered person/s meets the Care Standards Act 2000, Children's Homes Regulations 2001 and the National Minimum Standards. The Registered Provider(s) must comply with the given timescales.

Std.	Action	Due date
12	ensure the health of young people is promoted and protected and adequate information about their health needs is available on care plans. Regulation 20 (1)	01/10/2009
13	ensure there are suitable arrangements in place for the disposal of unused medication (Regulation 21)	03/08/2009
9	ensure that there are suitable arrangements in place so that young people's private information is respected (Regulation 11)	03/08/2009
16	ensure that young people have comprehensive written information that outline the home's complaints procedure (Regulation 24)	01/10/2009
16	ensure that a written record is made of any complaint, the action taken in response, and the outcome of the investigation. (Regulation 24)	03/08/2009
26	ensure that unnecessary (fire) risks to the health or safety of young people are identified and eliminated. (Regulation 23)	01/10/2009
7	ensure that the service promotes and make proper provision for the welfare of young people by devising placement plans that address their specific and individual needs. (Regulation 12)	01/10/2009
2	ensure that the welfare of young people is safeguarded and promoted through the comprehensive completion of risk assessments (Regulation 12)	01/10/2009
23	ensure that the conduct of the home promotes and makes proper provision for the welfare of young people, particularly in relation to their freedom of movement within the home. (Regulation 11)	03/08/2009
24	ensure that young people's bedrooms are adequately ventilated. (Regulation 31)	03/08/2009
1	keep under review and revise where appropriate the statement of purpose and the children's guide (Regulation 5)	01/10/2009
29	ensure staff receive regular supervision and appraisals which are reviewed regularly. Regulation 27(4)(a)	01/10/2009
33	establish and maintain a system for improving the quality of care provided in the home (Regulation 34)	01/10/2009

## Recommendations

To improve the quality and standards of care further the registered person should take account of the following recommendation(s):

- consider maintaining centralised records of undesired incidents that occur in the home (National Minimum Standard 17)
- consider the manager's enrolment onto a suitable management course (National Minimum Standard 34)

**Notice of requirement to improve – reply form**

For the attention of James Bridges, Inspection Support Team.

<b>Action required</b>	<b>Action taken</b>	<b>Date completed</b>
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ensure that young people have comprehensive written information that outline the home's complaints procedure (Regulation 24)		
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ensure that a written record is made of any complaint, the action taken in response, and the outcome of the investigation. (Regulation 24)		
--	--	--

establish and maintain a system for improving the quality of care provided in the home (Regulation 34)*		
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ensure that the welfare of young people is safeguarded and promoted through the comprehensive completion of risk assessments (Regulation 12)		
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ensure that the conduct of the home promotes and makes proper provision for the welfare of young people, particularly in relation to their freedom of movement within the home. (Regulation 11)

ensure that unnecessary (fire) risks to the health or safety of young people are identified and eliminated. (Regulation 23)

ensure that the service promotes and make proper provision for the welfare of young people by devising placement plans that address their specific and individual needs. (Regulation 12)\*

keep under review and revise where appropriate the statement of purpose and the children's guide (Regulation 5)\*

ensure staff receive regular supervision and appraisals which are reviewed regularly. Regulation 27(4)(a)\*

ensure that there are suitable arrangements in place so that young people's private information is respected (Regulation 11)

ensure the health of young people is promoted and protected and adequate information about their health needs is available on care plans. Regulation 20 (1)\*

ensure there are suitable arrangements in place for the disposal of unused medication (Regulation 21)

ensure that young people's bedrooms are adequately ventilated. (Regulation 31)

**Signed:**

**Print name:**

**Job title:**

**Date:**

## Notice of requirement to improve

Ofsted has judged your Children's Home provision as not meeting a regulation. This notice contains details of actions you need to take to bring about the necessary improvement by the dates given. Those actions marked with a \* are also subject to a Statutory Requirement Notice.

Action	Date
ensure that young people have comprehensive written information that outline the home's complaints procedure (Regulation 24)	01/10/2009
ensure that a written record is made of any complaint, the action taken in response, and the outcome of the investigation. (Regulation 24)	03/08/2009
establish and maintain a system for improving the quality of care provided in the home (Regulation 34)*	01/10/2009
ensure that the welfare of young people is safeguarded and promoted through the comprehensive completion of risk assessments (Regulation 12)	01/10/2009
ensure that the conduct of the home promotes and makes proper provision for the welfare of young people, particularly in relation to their freedom of movement within the home. (Regulation 11)	03/08/2009
ensure that unnecessary (fire) risks to the health or safety of young people are identified and eliminated. (Regulation 23)	01/10/2009
ensure that the service promotes and make proper provision for the welfare of young people by devising placement plans that address their specific and individual needs. (Regulation 12)*	01/10/2009
keep under review and revise where appropriate the statement of purpose and the children's guide (Regulation 5)*	01/10/2009
ensure staff receive regular supervision and appraisals which are reviewed regularly. Regulation 27(4)(a)*	01/10/2009
ensure that there are suitable arrangements in place so that young people's private information is respected (Regulation 11)	03/08/2009

ensure the health of young people is promoted and protected and adequate information about their health needs is available on care plans. Regulation 20 (1)*	01/10/2009
ensure there are suitable arrangements in place for the disposal of unused medication (Regulation 21)	03/08/2009
ensure that young people's bedrooms are adequately ventilated. (Regulation 31)	03/08/2009

You should have completed those actions with dates that have already passed.

An inspector may carry out an announced or unannounced visit to check that the necessary improvements have been made. If you have not carried out the required action or what you have done has had little impact, we may take further enforcement measures.

You must carry out these actions by the date(s) given otherwise Ofsted may take further action.

You will need to let us know when you have carried out all of the actions, by completing the attached reply form and returning it to Ofsted at the above address. If we have not heard from you by the date given, we will contact you again.



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Bristol  
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**Web:** www.ofsted.gov.uk



22 July 2009

Mrs Margaret Ann Lucy Nelson-Cole  
Muswell House  
London Borough Of Haringey:  
Department Of Social Services  
9-11 Coppetts Road  
London  
N10 1HR

Our Reference SC035277\C111440

Dear Mrs Nelson-Cole

### **Statutory requirement notice**

You are currently registered by Ofsted to manage a children's home. This notice is in relation to your provision registered at:

9-11 Coppetts Road  
London  
N10 1HR

In order to remain fit for registration you must comply with the requirements of the Care Standards Act 2000 and the Children's Homes Regulations 2001 made under that Act.

You are in breach of regulation 20 of the Children's Homes Regulations 2001 which states:

### **Health needs of children**

**20.** - (1) The registered person shall promote and protect the health of the children accommodated in a children's home.

Ofsted is of the opinion that you have failed to comply with the requirements of the law for the following reasons:

An inspection was undertaken on 9 July 2008 and during this inspection, the Ofsted inspector noted that there was limited information available on the placement plan regarding children's health. The specific health section was not completed on either file with regard to dietary and health needs, immunisation records, and the details of the doctor. Particular health needs

which may impact on future outcomes for children and young people were not clearly recorded.

As a result of this inspection, the following action was set with a completion date of 29 August 2008:

*ensure that each child has a health plan on file. Health records for each child must be complete and signed at the beginning of each placement.*

During an inspection on 10 December 2008, the inspector noted that placement information records and the home's care plans were in place; however information regarding health was limited. For example one file did not include the name and address of the doctor. Other files identified needs related to diet and allergies. However, information was not available to say how these needs were being addressed or how the problems identified were being monitored.

As a result of this visit, the following action was set with a completion date of 16 January 2009:

*ensure the health of children and young people is promoted and protected and adequate information about their health needs is available on care plans.*

At the most recent inspection on 23 June 2009, the inspector noted that the previous inspection had highlighted that young people's documented care plans did not address their health care needs. This was also noted at this inspection as one young person has a known medical condition that was documented on file. There was no mention of this in the young person's care plan. The inspector noted that it was important for care plans to outline all young people's key needs in order to ensure that services provided address identified needs adequately.

Ofsted requires you to take the following action in order to comply with the legislation.

The following actions are to be completed by the date shown	Date
Ensure the health of young people is promoted and protected and adequate information about their health care needs is available on care plans. Regulation 20 (1).	01/10/2009

If you do not take the action required by the date shown you will be guilty of an offence and we may prosecute you.

You have the right to make a written representation to Ofsted about any matter you wish to dispute. You must do this by 31 August 2009. Please contact the CIE Helpline on 08456 40 40 40 for further details.

We will monitor your compliance with this notice.

If you have any questions please call the telephone number at the top of this notice.

Yours sincerely

A handwritten signature in black ink that reads "R Shippam". The signature is written in a cursive style with a long horizontal stroke at the end.

Roger Shippam  
Director, Children

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Redcliffe Way  
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22/07/2009

Mrs Margaret Ann Lucy Nelson-Cole  
Muswell House  
London Borough Of Haringey:  
Department Of Social Services  
9-11 Coppetts Road  
London  
N10 1HR

Our Reference SC035277

Dear Mrs Nelson-Cole

### **Inspection report**

An Ofsted inspector inspected your Children's Home provision on 23/06/2009.

Please find enclosed:

- a copy of your inspection report
- 6 copies of the children's summary
- Statutory requirements notices
- a notice of requirement to improve your Children's Home provision

### **The inspection report**

The inspection report sets out Ofsted's judgements about the quality of the provision you offer. Please make the report available to children and young people and relevant stakeholders. We normally publish your report on the internet in 15 working days.

If you have any queries about your report or inspection judgements, please contact our helpline on 08456 404040 within 15 working days of receiving your report.

### **Children's Summary**

The children's summary informs children and young people about the inspection outcomes. Copies of the children's summary have been sent separately to the Registered Individual.

### **Recommendations**

The report contains some recommendations to improve your provision further. We will check whether you have acted on these recommendations when you are next inspected.

**Statutory requirements**

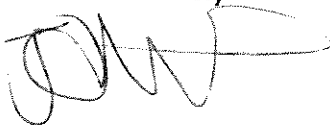
Please read the requirements carefully as you must complete these in order to meet the Care Standards Act 2000, Children's Homes Regulations 2001 and the National Minimum Standards.

You may find it useful to keep this notice handy, as you may need to refer to it in the future.

**Notice of requirement to improve**

We enclose a notice of requirement to improve. Please read this carefully as it sets out what you must do to improve your Children's Home provision. We will check whether you have taken suitable action at our next visit.

Yours sincerely

A handwritten signature in black ink, appearing to be "James Bridges".

**James Bridges**

Compliance Investigation and Enforcement Team

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22/07/2009

Mrs Margaret Ann Lucy Nelson-Cole  
Muswell House  
London Borough Of Haringey:  
Department Of Social Services  
9-11 Coppetts Road  
London  
N10 1HR

Our Reference SC035277\C111440

Dear Mrs Nelson-Cole

### **Statutory requirement notice**

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9-11 Coppetts Road  
London  
N10 1HR

In order to remain fit for registration you must comply with the requirements of the Care Standards Act 2000 and the Children's Homes Regulations 2001 made under that Act.

You are in breach of regulation 34 of the Children's Homes Regulations 2001 which states:

### **Review of quality of care**

34. - (1) The registered person shall establish and maintain a system for-
- (a) monitoring the matters set out in Schedule 6 at appropriate intervals; and
  - (b) improving the quality of care provided in the children's home.
- (2) The registered person shall supply to the Commission a report in respect of any review conducted by him for the purposes of paragraph (1), and make a copy of the report available on

request to children accommodated in the home, their parents and placing authorities.

- (3) The system referred to in paragraph (1) shall provide for consultation with children accommodated in the home, their parents and placing authorities.

## SCHEDULE 6

### Regulation 34(1)

#### MATTERS TO BE MONITORED BY THE REGISTERED PERSON

1. In respect of each child accommodated in the children's home, compliance with the placing authority's plan for the care of the child (where applicable) and the placement plan.
2. The deposit and issue of money and other valuables handed in for safekeeping.
3. Daily menus.
4. All accidents and injuries sustained in the home or by children accommodated there.
5. Any illnesses of children accommodated in the home.
6. Complaints in relation to children accommodated in the home and their outcomes.
7. Any allegations or suspicions of abuse in respect of children accommodated in the home and the outcome of any investigation.
8. Staff recruitment records and conduct of required checks for new workers in the home.
9. Visitors to the home and to children in the home.
10. Notifications of the events listed in Schedule 5.

11. Any unauthorised absence from the home of a child accommodated there.
12. The use of measures of control, restraint and discipline in respect of children accommodated in the home.
13. Risk assessments for health and safety purposes and subsequent action taken.
14. Medicines, medical treatment and first aid administered to any child accommodated in the home.
15. In the case of a qualifying school, the standards of educational provision.
16. Duty rosters of persons working at the home, and the rosters actually worked.
17. The home's daily log of events.
18. Fire drills and tests of alarms and of fire equipment.
19. Records of appraisals of employees.
20. Minutes of staff meetings.

Ofsted is of the opinion that you have failed to comply with the requirements of the law for the following reasons:

During an inspection on 9 July 2008, the inspector noted that there was no evidence to suggest children's files were audited regularly and several files needed to be reviewed as a matter of urgency as some of the important information such as medical information, review minutes and dates were not available. It was also noted that the matters identified in Schedule 6 had not been monitored since the last inspection. As a result of this inspection, the following action was set with a completion date of 14 August 2008:

*establish and maintain a system to monitor at appropriate intervals the matters set out in Schedule 6 and to ensure appropriate care is provided in the children's home. (Regulation 34)*



A further inspection took place on 10 December 2008, and the inspector noted that the home did not have a system in place for auditing the home's records and children's files and there were some gaps in the information available. This would therefore impact on the registered persons ability to monitor the matters set out in schedule 6 to the regulations and therefore improve the quality of care within the home. As a result of this inspection, the following action was set with a completion date of 16 January 2009:

*establish and maintain a system to monitor at appropriate intervals the matters set out in Schedule 6 and to ensure appropriate care is provided in the children's home. Regulation 34(1)(a)(b)*

At the most recent inspection, the inspector found that the service lacked robust monitoring systems and strong leadership to improve service provision.

It was noted that the borough had recently recruited an independent consultant to assist, review and improve the home's current functioning levels, however the current systems in place were not allowing the service to meet the individual children's needs or secure improvement in the service provided.

Ofsted requires you to take the following actions in order to comply with the legislation.

The following actions are to be completed by the date shown	Date
Establish and maintain a system for improving the quality of care provided in the home. Regulation 34	01/10/2009

If you do not take the action required by the date shown you will be guilty of an offence and we may prosecute you.

You have the right to make a written representation to Ofsted about any matter you wish to dispute. You must do this by 31 August 2009. Please contact the Compliance Investigation and Enforcement Team on 08456 40 40 40 for further details.

We will monitor your compliance with this notice.

If you have any questions please call the telephone number at the top of this notice.

South  
Freshford House  
Redcliffe Way  
Bristol  
BS1 6NL

**Telephone:** 08456 404040  
**Fax:** 08456 40 40 49  
**Email:** enquiries@ofsted.gov.uk  
**Web:** www.ofsted.gov.uk



22 July 2009

Mrs Margaret Ann Lucy Nelson-Cole  
Muswell House  
London Borough Of Haringey:  
Department Of Social Services  
9-11 Coppetts Road  
London  
N10 1HR

Our Reference SC035277\C111440

Dear Mrs Nelson-Cole

### **Statutory requirement notice**

You are currently registered by Ofsted to manage a children's home. This notice is in relation to your provision registered at:

9-11 Coppetts Road  
London  
N10 1HR

In order to remain fit for registration you must comply with the requirements of the Care Standards Act 2000 and the Children's Homes Regulations 2001 made under that Act.

You are in breach of regulation 5 of the Children's Homes Regulations 2001 which states:

### **Review of the statement of purpose and children's guide**

5. The registered person shall -

- (a) keep under review and, where appropriate, revise the statement of purpose and the children's guide;
- (b) notify the Commission of any such revision within 28 days; and
- (c) if the children's guide is revised, supply a copy to each child accommodated in the home.

Ofsted is of the opinion that you have failed to comply with the requirements of the law for the following reasons:

During an inspection on 10 December 2008, it was noted by the inspector that although the home's Statement of Purpose had been reviewed in April 2008, it still did not make reference to Ofsted as the regulatory body. As a result of this inspection, the following action was set with a completion date of 16 January 2009:

*ensure the homes Statement of Purpose is reviewed regularly and includes up to date information. Regulation 5(a)*

At the most recent inspection on 23 June 2009, the inspector noted that the previous inspection had highlighted that the home's statement of purpose required further revision. During this inspection it was noted that the document was not a fully accurate reflection of services offered by the home. For example, staff confirmed that clinical consultancy is not offered to the service by the Tavistock Centre as stated. The document states that care plans, risk assessments and local authority assessments are completed, however this is not the case. There is little evidence of the service meeting young people's 'diverse needs' and some staff supervision and appraisals are not completed at appropriate intervals. The statement of purpose document also did not include the relevant qualifications and experience of staff working in the home.

The inspector also found during this inspection that the home's children's guide had yet to be issued by the service and that it remained in draft form. The document was lengthy, with sometimes vague information, particularly in relation to the information regarding the home's complaints procedure. Staff commented that creative graphics were yet to be added to the document and that the home's accompanying 'welcome pack' was in need of further development.

Ofsted requires you to take the following action in order to comply with the legislation.

The following actions are to be completed by the date shown	Date
Keep under review and revise where appropriate the statement of purpose and the children's guide (Regulation 5)	01/10/2009

South  
 Freshford House  
 Redcliffe Way  
 Bristol  
 BS1 6NL

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22/07/2009

Mrs Margaret Ann Lucy Nelson-Cole  
 Muswell House  
 London Borough Of Haringey:  
 Department Of Social Services  
 9-11 Coppetts Road  
 London  
 N10 1HR

Our Reference SC035277\C111440

Dear Mrs Nelson-Cole

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 London  
 N10 1HR

In order to remain fit for registration you must comply with the requirements of the Care Standards Act 2000 and the Children's Homes Regulations 2001 made under that Act.

You are in breach of regulation 12 of the Children's Homes Regulations 2001 which states:

### **Child's placement plan**

- 12.** - (1) The registered person shall, before providing accommodation for a child in a children's home, or if that is not reasonably practicable, as soon as possible thereafter, prepare in consultation with the child's placing authority a written plan (in these Regulations referred to as the "placement plan") for the child setting out, in particular –
- (a) how, on a day to day basis, he will be cared for, and his welfare safeguarded and promoted by the home;
  - (b) the arrangements made for his health care and education; and
  - (c) any arrangements made for contact with his parents, relatives and friends.

Ofsted is of the opinion that you have failed to comply with the requirements of the law for the following reasons:

During an inspection on 9 July 2008, the inspector noted that not all children and young people had a placement plan. The plans that were available were based on a limited assessment and did not give full details about how children's needs would be addressed. None of the files seen included completed Looked After Children documents as described on the file index.

As a result of this inspection, the following action was set with a completion date of 29 August 2008:

*ensure that each child has a placement plan on file which includes full details of the child's need and how the home will meet them. Regulation 12 (1)(a)(b)[c]*

A further inspection was undertaken on 10 December 2008 and the inspector noted that the placement plans addressed how basic support would be provided to individual children. Children were aware of the plans for them but did not think they had participated in developing them. It was found that not all of the looked after children's documents were fully completed and placement information records were limited in content. There were no records to suggest that staff have contacted the relevant social workers for missing information.

As a result of this inspection, the following action was set with a completion date of 16 January 2009:

*ensure that placement plans include information regarding the overall needs of children placed and how these will be met. The registered manager shall seek and take account of the views of children when developing the plan. Regulation 12(1)(3)*

At the most recent inspection on 23 June 2009, the inspector noted that young people's placement plans did not address their individual needs and the local authority care and placement plans were not always present on file or were incomplete. Two young people's documented placement/care plans were almost identical in content and did not adequately address young people's individual needs. This was despite the two young people in question having very differing needs. Care plans also did not address issues of identity, diversity and equality and were similar in content as the care planning tool was generic in its format.


If you do not take the action required by the date shown you will be guilty of an offence and we may prosecute you.

You have the right to make a written representation to Ofsted about any matter you wish to dispute. You must do this by 31 August 2009. Please contact the Compliance Investigation and Enforcement Team on 08456 40 40 40 for further details.

We will monitor your compliance with this notice.

If you have any questions please call the telephone number at the top of this notice.

Yours sincerely

A handwritten signature in black ink that reads "R Shippam". The signature is written in a cursive style with a long horizontal stroke at the end.

Roger Shippam  
Director, Children

South  
Freshford House  
Redcliffe Way  
Bristol  
BS1 6NL

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Our Reference SC035277\C111440

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London  
N10 1HR

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You are in breach of regulation 27 of the Children's Homes Regulations 2001 which states:

### **Employment of staff**

- 4) The registered person shall ensure that all persons employed by him -
- (a) receive appropriate training, supervision and appraisal;

Ofsted is of the opinion that you have failed to comply with the requirements of the law for the following reasons:

During an inspection on 10 December 2008, the inspector examined two staff files and found that neither included details of supervision since the last inspection. One file included details of a recent appraisal the other file showed the last appraisal was over a year ago.

As a result of this inspection, the following action was set with a completion date of 16 January 2009:

*ensure staff receive regular supervision and yearly appraisals which are reviewed regularly. Regulation 27(4)(a)*

At the most recent inspection on 23 June 2009, the inspector noted that support and informal supervision via line managers was good, but the frequency of formal supervision and appraisals for some staff members was irregular. This was particularly the case for waking night staff. This issue was highlighted as a weakness at the previous inspection as it is important to ensure staff competencies are of an acceptable standard.

Ofsted requires you to take the following actions in order to comply with the legislation.

The following actions are to be completed by the date shown	Date
Ensure staff receive regular supervision and appraisals which are reviewed regularly. Regulation 27(4)(a)	01/10/2009

If you do not take the action required by the date shown you will be guilty of an offence and we may prosecute you.

You have the right to make a written representation to Ofsted about any matter you wish to dispute. You must do this by 31 August 2009. Please contact the Compliance Investigation and Enforcement Team on 08456 40 40 40 for further details.

We will monitor your compliance with this notice.

If you have any questions please call the telephone number at the top of this notice.



Yours sincerely

A handwritten signature in black ink that reads "R Shippam". The signature is written in a cursive style with a long horizontal stroke at the end.

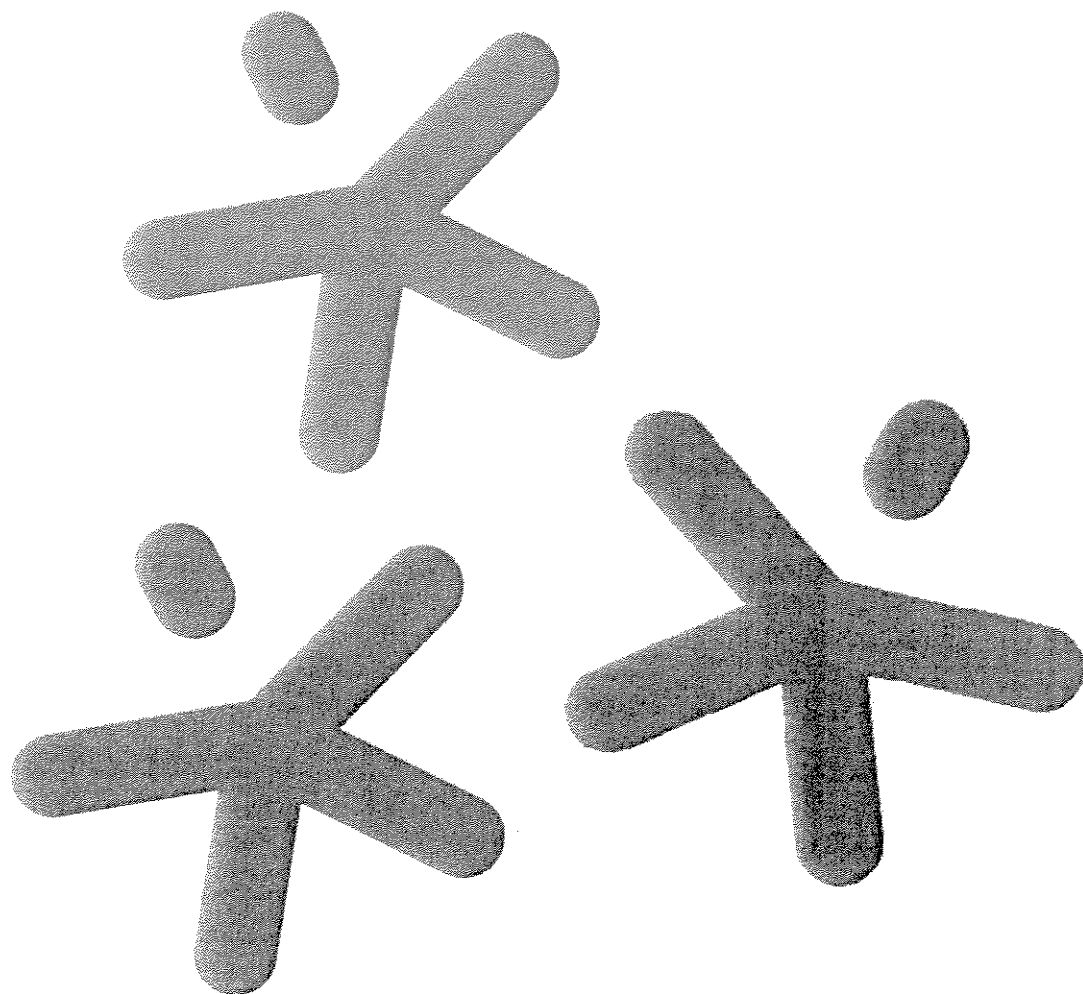
Roger Shippam  
Director, Children

# Ofsted's visit to your home

Muswell House

23/06/2009

Sandra Jacobs-Walls



## Introduction

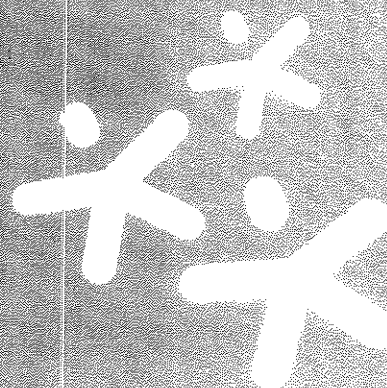
Ofsted is a government department that inspects many places including children's homes.

An Ofsted inspector visited your home to see how well you are looked after and whether the home is run properly. This is a summary for you about what the inspector found. Thank you for helping with the inspection and telling us your views.

This summary explains what the inspector found, what your home does well and what it could do better. The inspector then makes judgements, such as outstanding; good or satisfactory. The lowest judgement is inadequate which means changes need to happen quickly. The inspector also looks at how well your home supports differences and how fair things are for everyone living in the home.

### Do you want to read the full report?

When you have read the summary you may want to read the full report. If you want to read the full report please call 08456 404040 and tell us the number of your home which is SC035277. You can also email us on [enquiries@ofsted.gov.uk](mailto:enquiries@ofsted.gov.uk) to ask for a copy to be emailed to you: please include your home's number (SC035277) and name (Muswell House).



## Summary: what the inspector found

Staff encourage young people to live healthy lifestyles even when young people are reluctant to keep health care appointments. A nurse visits the home regularly to check that young people's health is good and to offer them advice. Young people's care plans do not always state their health care needs. Staff keep very good records of young people's medicines but sometimes to do return unused medicines back to the pharmacy.

Young say they feel quite safe in the home's building and there are good health and safety systems in place. Incidents of bullying, accidents, allegations against staff and extreme behaviour hardly ever occur and everyone is aware of what action is taken when young people go missing. The home keeps a record of complaints made but not all young people's complaints are recorded in the complaints log. Young people would find it useful if the home's complaints procedure is written in more detail so it is clear exactly what happens when complaints are made about the home or staff. Young people's information is largely kept confidential. The home has good facilities for washing and bathing.

Key workers discuss with young people their individual needs and staff feel that young people's education should be taken very seriously. Friends and family are free to visit the home and young people have an opportunity to share their views about the home.

Staff keep some rooms in the home locked during the daytime, young people do not like this. The home is generally well decorated and furnished but some rooms get too hot in warm weather.

Staff provide information to young people and others about the purpose of the home; some of this information require some changes. Staff care about young people and receive training and support. They have good qualifications and experience of working with young people. Staff is working other professionals to improve the quality of care provided by the home.

**The overall judgement for your home is inadequate -  
enforcement action**

Thank you for your help with the inspection