

# 1246331

Registered provider: My3 Limited

Interim inspection

Inspected under the social care common inspection framework

## Information about this children's home

A registered company owns and manages the children's home. The home provides care and support for up to four young people who may have emotional and/or behavioural difficulties and/or a learning disability.

**Inspection date:** 1 to 2 February 2018

**Judgement at last inspection:** good

**Date of last inspection:** 17 May 2017

**Enforcement action since last inspection:** none

## This inspection

### The effectiveness of the home and the progress and experiences of children and young people since the most recent full inspection

This home was judged good at the last full inspection. At the interim inspection, Ofsted judges that it has declined in effectiveness.

There has been a lack of managerial oversight at the home since the registered manager left on 17 September 2017. A senior member of staff oversaw the home until the appointment of a deputy manager at the end of November 2017. A new manager then took up their post at the beginning of December 2017, but they left on 31 January 2018. The former manager returned on 1 February 2018. As a result of the inconsistent management and leadership of the home, significant shortfalls were identified at this inspection. These are primarily in relation to record-keeping and keeping young people safe.

Following an incident at the home and information provided from the independent person's monitoring of the home, the responsible individual commissioned a consultant to conduct an in-depth audit of the home's records and documentation. This identified

numerous shortfalls. As a result, the responsible individual initiated a plan to rectify the situation. However, at the time of inspection, insufficient progress had been made to address the shortfalls. The new manager is committed to turning the service around and is currently submitting an application to become the registered manager.

Staff report that this unsettled period has meant that they have not felt sufficiently supported by the organisation. As a result, staff morale is low. However, the staff are relieved that the previous manager has returned. This is a sentiment echoed by the young people.

Young people said that the home, in their words, 'has not been right' since the current manager left in September 2017. The young people said that they are pleased that she is back and during the inspection, they were very eager to talk to her about what had been happening in their lives. Young people said that they did not feel that they could talk to the other managers.

One young person said that they did not feel that all the young people had been treated fairly. This was in response to another young person receiving a reward after an incident of poor behaviour. This is compounded by the lack of direction for staff to follow in the records and behaviour management plans so that staff can respond to and reduce young people's anxieties. The responsible individual acknowledged this and that action has been taken to address this with staff.

Record-keeping is chaotic. Numerous records, including risk assessments, care plans and healthcare plans, have not been reviewed for some time. In some cases, they have not been updated since September 2017, despite a number of significant incidents occurring, such as young people being missing from care and incidents of sexting and self-harm. Consequently, there are inconsistencies in the support provided to young people. This does not help to safeguard young people.

Staff have failed to record accurately the medical advice, support and interventions that young people have received. For example, following a strategy meeting, staff were asked to source sexual health support for a young person. Initially, staff could not locate any information to say that this had taken place. However, they located a second healthcare plan that indicated that the young person had been to the doctors on the date in question, but this record did not provide any further information as to the treatment provided. In contrast, in January 2018, the records provide better insight into the support and guidance that a young person received in relation to their health. The inconsistencies in recording do not demonstrate how young people's healthcare needs are being consistently met and how staff are working to promote each young person's well-being.

Similarly, the medication record checklists are not always correct. Some checklists do not reflect the correct dosage of medication, which can potentially lead to errors in the administration of medication. Staff have also wrongly tallied the medication that is in stock. The current approach fails to provide an accurate medication audit and exposes young people to unnecessary risk of maladministration of medication.

Young people are not safeguarded effectively. This is because staff do not always follow the home's policy and procedures concerning allegations of abuse against staff. Poor record-keeping concerning an incident in January 2018 leaves the action taken by the home open to interpretation. This is because of the discrepancies in staff's recollection of the events as to whom the concern was reported to, and who contacted the complainant. Ultimately, there was poor decision making by the management as to whether this concern was satisfactorily investigated and resolved. Action began during the inspection to rectify this.

Staff said that they have not been able to complete some records, such as the sanctions record, the young people's meeting book and the room searches logbook because the records could not be located. This means that some records have not been completed since November 2017. Overall, records and documentation are not routinely completed to the same high standard. This does not provide young people with a clear understanding of their time at the home should they wish to access their records now or in the future. It also does not promote transparency in record-keeping.

Monitoring by the manager of the home is not robust. This is because they have failed to swiftly identify the shortfalls or to take action to address these. The manager's monitoring reports are not evaluative and fail to identify any areas of concern, patterns and trends, or the action required to address these. Managers have not ensured that all staff have the training and skills to meet the needs of young people. For example, some staff have not attended physical intervention training. Therefore, not all staff are trained to de-escalate situations and if necessary to physically intervene in a way that provides reassurances for the young people and that allows them to calm sufficiently to be able to talk things through with staff. Some staff did attend training on physical interventions on the first day of the inspection. Other staff have not yet completed all of their online training. The manager had not identified this.

The home's management has not kept Ofsted informed of all significant events at the home. This is because they have not sent in the required notification. In particular, this is with regard to potential safeguarding issues such as incidents of sexting and young people going missing from care. This does not promote transparency or help to keep young people safe.

In addition, the home has not provided an updated statement of purpose since February 2017. There have been a number of revisions since then. Consequently, Ofsted is not kept informed of the home's arrangements for providing young people with individualised care to meet the quality standards.

Young people continue to make steady progress in regards to their education. One young person is extremely proud that she is the owner of a horse named 'Smithy'. She enthusiastically explained how she cares for him at the stables and that she has taken the staff to meet him. The care of her horse is interwoven into her education timetable. This was something that the young person was aspiring to achieve at the last inspection. This has improved her confidence and self-esteem. Young people new to the home said

that they are settling in well. They enjoy spending time with staff and throughout the inspection it was apparent that there was a positive relationship between the staff and young people. Young people are confident to talk to a wide range of staff about their day and anything that is bothering them.

## Recent inspection history

| Inspection date | Inspection type | Inspection judgement |
|-----------------|-----------------|----------------------|
| 17/05/2017      | Full            | Good                 |

## What does the children's home need to do to improve?

### Statutory requirements

This section sets out the actions that the registered person(s) must take to meet the Care Standards Act 2000, Children's Homes (England) Regulations 2015 and the 'Guide to the children's homes regulations including the quality standards'. The registered person(s) must comply within the given timescales.

| Requirement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Due date   |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|
| <p>The health and well-being standard is that—</p> <p>the health and well-being needs of children are met;</p> <p>children receive advice, services and support in relation to their health and well-being; and</p> <p>children are helped to lead healthy lifestyles.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure—</p> <p>that staff help children to achieve the health and well-being outcomes that are recorded in the child's relevant plans.</p> <p>(Regulation 10 (1)(a)(b)(c)(2)(a)(i))</p> <p>In particular, ensure that young people's healthcare plans are up to date and records clearly demonstrate the medical support provided to young people.</p> | 16/03/2018 |
| <p>The protection of children standard is that children are protected from harm and enabled to keep themselves safe.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure—</p> <p>that staff—</p> <p>assess whether each child is at risk of harm, taking into account information in the child's relevant plans, and, if necessary, make</p>                                                                                                                                                                                                                                                                                                                               | 16/03/2018 |

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|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|
| <p>arrangements to reduce the risk of any harm to the child;<br/>understand the roles and responsibilities in relation to protecting children that are assigned to them by the registered provider;<br/>and<br/>take effective action whenever there is a serious concern about a child's welfare. (Regulation 12 (2)(a)(i)(v)(vi))*</p> <p>In particular, ensure that young people's risk assessments are up to date and reflect the current concerns. This includes information about any court orders that are imposed upon young people.</p>                                                                                                                                                                                                                                                                                                                                      |            |
| <p>The leadership and management standard is that the registered person enables, inspires and leads a culture in relation to the children's home that helps children to aspire to their full potential and promotes their welfare.</p> <p>In particular, the standard in paragraph (1) requires the registered person to—</p> <p>lead and manage the home in a way that is consistent with the approach and ethos, and delivers the outcomes, set out in the home's statement of purpose;</p> <p>ensure that staff have the experience, qualifications and skills to meet the needs of each child; and</p> <p>use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13 (1)(a)(b)(2)(a)(c)(h))</p> <p>In particular, ensure that all staff complete the necessary training to meet the needs of young people.</p> | 16/03/2018 |
| <p>The registered person must keep the statement of purpose under review and, where appropriate, revise it and notify the HMCI of any revisions and send HMCI a copy of the revised statement within 28 days of the revision. (Regulation 16 (3)(a)(b))</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 16/03/2018 |
| <p>The registered person must ensure that each employee completes an appropriate induction. (Regulation 33 (1)(a))</p> <p>In particular, this is with regard to all agency staff, the deputy manager and manager having appropriate induction.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 16/03/2018 |
| <p>Ensure that the procedure to be followed in the event of an allegation of abuse or neglect must, in particular—</p> <p>provide for records to be kept of an allegation of abuse or neglect and the action taken in response. (Regulation 34 (2)(d))</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 16/03/2018 |
| <p>The registered person must maintain records ("case records") for each child which—</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 16/03/2018 |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |            |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|
| <p>include the information and documents listed in schedule 3 in relation to each child;</p> <p>are kept up to date; and</p> <p>are signed and dated by the author of each entry. (Regulation 36 (1)(a)(b)(c))</p> <p>In particular, ensure that placement plans, healthcare plans and risk assessments reflect the current needs of the young people. The medication records, sanction records, room searches logbook and the young people's meeting book are accessible and are completed by staff.</p>                 |            |
| <p>The registered person must notify HMCI and each other relevant person without delay if—</p> <p>a child is involved in, or is suspected of being involved in or subject to sexual exploitation;</p> <p>an incident requiring police involvement occurs in relation to a child which the registered person considers to be serious; or</p> <p>there is an allegation of abuse against the home or a person working there. (Regulation 40 (4)(a)(b)(c))</p>                                                               | 16/03/2018 |
| <p>In order to complete a quality care review the registered person must establish and maintain a system for monitoring, reviewing and evaluating—</p> <p>the quality of care provided for children;</p> <p>the feedback and opinions of children about the children's home, its facilities and the quality of care they receive in it; and</p> <p>any actions that the registered person considers necessary in order to improve or maintain the quality of care provided for children. (Regulation 45 (2)(a)(b)(c))</p> | 16/03/2018 |

\* These requirements are subject to a compliance notice.

## Information about this inspection

Inspectors have looked closely at the experiences and progress of children and young people. Inspectors considered the quality of work and the differences made to the lives of children and young people. They watched how professional staff work with children and young people and each other and discussed the effectiveness of help and care provided. Wherever possible, they talked to children and young people and their families. In addition, the inspectors have tried to understand what the children's home knows about how well it is performing, how well it is doing and what difference it is making for the children and young people whom it is trying to help, protect and look after.

This inspection focused on the effectiveness of the home and the progress and experiences of children and young people since the most recent full inspection.

Using the 'Social care common inspection framework', this inspection was carried out under the Care Standards Act 2000 to assess the effectiveness of the service, how it meets the core functions of the service as set out in legislation, and to consider how well it complies with the Children's Homes (England) Regulations 2015 and the 'Guide to the children's homes regulations including the quality standards'.

## **Children's home details**

**Unique reference number:** 1246331

**Provision sub-type:** Children's home

**Registered provider:** My3 Limited

**Registered provider address:** West House, King Cross Road, West Yorkshire HX1 1EB

**Responsible individual:** Louise Tierney

**Registered manager:** Post vacant

## **Inspector**

Chris Scully, social care inspector

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