

1253711

Registered provider: Beacon Child Care Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

The home is registered to provide care for three young people. The home offers care for young people who have social and emotional difficulties. The home is privately owned.

There is a manager in post. This manager is not yet registered with Ofsted.

Inspection dates: 12 to 13 September 2018

Overall experiences and progress of children and young people, taking into account	requires improvement to be good
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How well children and young people are helped and protected	requires improvement to be good
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The effectiveness of leaders and managers	inadequate
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The children's home is not yet delivering good help and care for children and young people. However, there are no serious or widespread failures that result in their welfare not being safeguarded or promoted.

Date of last inspection: 7 June 2018

Overall judgement at last inspection: declined in effectiveness

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
07/06/2018	Interim	Declined in effectiveness
12/03/2018	Full	Requires improvement to be 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
The children's views, wishes and feelings standard is that the registered person ensures that staff keep the children's guide and the home's complaints procedure under review and seek children's comments before revising either document. (Regulation 7(2)(c))	02/11/2018
The protection of children standard is that children are protected from harm and enabled to keep themselves safe. In particular, the standard in paragraph (1) requires the registered person to ensure that staff assess whether each child is at risk of harm, taking into account information in the child's relevant plans, and, if necessary, make arrangements to reduce the risk of any harm to the child. (Regulation 12(1) and (2)(a)(i))	02/11/2018
The protection of children standard is that the registered person must ensure that staff understand their roles and responsibilities in relation to protecting children that are assigned to them by the registered person. (Regulation 12(2)(a)(v))	02/11/2018
The protection of children standard is that the registered person must ensure that the premises used for the purpose of the home are designed, furnished and maintained so as to protect each child from avoidable hazards to the child's health. (Regulation 12(2)(d))	02/11/2018
The leadership and management standard requires the registered person to ensure that staff have the experience, qualifications and skills to meet the needs of each child and ensure that the home's workforce provides continuity of care to each child. (Regulation 13(2)(c)(e))	02/11/2018
The registered person must compile in relation to the children's home a statement ("the statement of purpose") which covers the matters listed in Schedule 1. (Regulation 16(1))	02/11/2018
The registered person must make arrangements for the handling, recording, safekeeping, safe administration and disposal of medicines received into the home. (Regulation 23(1))	02/11/2018
If the registered provider is an organisation, the organisation must ensure that the responsible individual undertakes such continuing professional development as is necessary to ensure	02/11/2018

that the responsible individual has the skills needed for supervising the management of the home. (Regulation 29(2))	
The registered person must recruit staff using recruitment procedures that are designed to ensure children's safety. (Regulation 32(1)(3))	02/11/2018
The registered person must ensure that all employees undertake appropriate continuing professional development. This is in relation to training to raise awareness of the 'Prevent' duty, online safety, safeguarding, self-harm and child sexual exploitation. (Regulation 33(4)(a))	02/11/2018
The registered person must ensure that all employees receive practice-related supervision by a person with appropriate experience. (Regulation 33(4)(b))	02/11/2018
The registered person must ensure that within 24 hours of the use of a measure of discipline in relation to a child in the home, a record is made which includes the name of the child, the effectiveness and any consequences of the use of the measure; and within 48 hours of the use of the measure, the registered person, or a person who is authorised by the registered person to do so ("the authorised person") has spoken to the user about the measure and has signed the record to confirm it is accurate. Within 5 days of the use of the measure, the registered person or the authorised person adds to the record confirmation that they have spoken to the child about the measure. (Regulation 35 (3)(a)(i)(vii)(viii)(b)(i)(ii)(c))	02/11/2018
The registered person must maintain in the home the records in schedule 4. (Regulation 37(2)(a))	02/11/2018
This includes a copy of the staff duty roster of persons working at the home, and a record of the actual rosters worked.	
The registered person must complete a quality of care review by establishing and maintaining a system for monitoring, reviewing and evaluating the feedback and opinions of children about the children's home, its facilities and the quality of care they receive in it. In particular, the system referred to in paragraph (2) must provide for ascertaining and considering the opinions of children, their parents, placing authorities and staff. (Regulation 45(2)(b)(5))	02/11/2018

Recommendations

To improve the quality and standards of care further the service should take account of the following recommendations:

- The home's policies and procedures around the protection of children should reflect any requirements of other relevant legislation. ('Guide to the children's homes regulations including the quality standards', page 44, paragraph 9.22)
- Contingency plans should be prepared in the event of a shortfall in staffing levels. If it is likely that there might only be one member of staff on duty at any time the manager should make a formal assessment of the implications for children's care, including any likely risks. This assessment should be recorded and available for inspection by Ofsted and placing authorities. ('Guide to the children's homes regulations including the quality standards', page 54, paragraph 10.18)
- Any registered manager placed in charge of a children's home or staff member in a deputy or supervisory role such as 'shift leader' should have substantial relevant experience of working in a children's home and have successfully completed their induction for the home in which they are employed. ('Guide to the children's homes regulations including the quality standards', page 54, paragraph 10.21)

Inspection judgements

Young people have made some progress since the last inspection. For example, one young person with the support of staff has finished their first year at college and has felt confident enough to return for a second year. Encouragement from staff has helped another young person with a challenging educational history to receive tutoring away from the home. This helped the young person secure a college placement for the autumn term.

Communication between the home and external agencies, including the placing authority and colleges, is positive. One college tutor told the inspector, 'I can't fault them in terms of help, support and guidance.' This helps young people to have access to the help and support they need.

Young people attend routine appointments with their dentist, doctor and optician. When young people take medication, they know the reasons why. When needed, arrangements are in place for young people to have access to specialist health and support services. This supports young people to keep good physical and emotional health.

Young people receive good help when planning their moves to independent living. Tailored support helps young people to know what they do well and where they need more help to ensure a successful transition into adult life. One young person told the inspector, 'Money management needs more work but I'm confident that I'll be OK.'

Staff support young people to stay in touch with their family and friends. For one young person, this has involved a visit overseas.

Young people's records now hold all the necessary plans from the local authority.

The manager has reviewed the young people's welcome guide. However, the review did not involve any consultation with young people. This is a missed opportunity to hear from young people about how they feel information and the home can be developed.

How well children and young people are helped and protected: requires improvement to be good

There have been no incidents of physical restraint since the last inspection. Staff use individualised reward schemes, praise and consequences to encourage young people to behave responsibly. Negative consequences are rare. However, when staff use negative consequences, the records are not detailed. The oversight of these records is also weak. For example, two records did not include the name of the child or the effectiveness of the consequence. One record had no managerial oversight. This means that it is unclear if behaviour management is effective in changing young people's behaviour for the better.

Young people's plans and risk assessments are individualised. However, young people's risk assessments are still not correct, current, or clear about the risks posed to young people and the actions needed to safeguard them. For example, one young person is at risk of self-harm, but there continues to be no detail about how the young person self-harms. For another young person, there is no consideration of any risks posed as a result of him having a front door key to the house. This continued shortfall means that staff do not have current information to enable them to safeguard the young people who live at the home effectively.

The manager has improved the receipt, administration and storage of medication. Arrangements have been made for staff to receive face-to-face medication training and for independent quality assurance checks to assess the safety of medication arrangements. However, the preparation for one young person to administer his own medication is not considered in organisational policy about self-administration. Consequently, the risk assessment is weak. Staff are not clear about their responsibility to hold account for medication held on the premises or how often they should be reviewing if the young person has been taking their medication. This means it is unclear if the young person's is successful at meeting his own medication needs.

The provider has a range of policies and procedures to support staff in safeguarding young people. However, managers have not brought the safeguarding policy up to date to reflect changes in statutory guidance, in particular 'Working together to safeguard children 2018'.

Managers have acted to resolve the maintenance issues found at the last full inspection. Other improvements have also been made that enhance the physical conditions of the premises. For example, the hallway has been repainted, tables have been painted and pictures of the young people now decorate the lounge. This has given the house a

homely and comfortable feel. However, an outside punchbag is not adequately secured to the ground and the boiler cupboard and kitchen draws are dirty. In addition, staff do not make sure that food is stored safely. These shortfalls place young people's health at risk.

Staff are aware of the action to take when a young person goes missing from the home and follow the guidance set out in young people's risk assessments. For one young person, their episodes of going missing have significantly decreased since they began living at the home.

Weekly young people's meetings help to give young people the opportunity to plan their week, including making choices about meals and leisure activities. Young people know how to complain. When they have complained, young people have been satisfied that this has been dealt with promptly and to their satisfaction.

Managers have updated the fire risk assessment and regular checks of fire safety equipment ensures that it is well maintained.

The effectiveness of leaders and managers: inadequate

The registered manager left post in August 2018. The responsible individual was proactive in making sure that arrangements were in place to take account of this change. A new manager started in post prior to the registered manager leaving and benefited from a period of handover.

Since the last inspection, staff turnover has continued to be high, with seven staff leaving the home and six new staff joining. Two new staff have no prior experience of working with children and young people. Managers have tried to manage this change considerably, by covering gaps in the rota with regular bank staff. However, frequent changes to the staff team have affected young people's plans and their willingness to build relationships. One young person told the inspector, 'It's hard to trust. Always having new staff means we have to restart everything, which is a pain.'

Staff speak positively about the new manager and the changes she has made since starting at the home. However, staff, including the manager, do not receive supervision at the frequency set out in organisational policy. A lack of regular supervision means that staff are not provided with enough opportunity to review and develop their practice.

The manager has acted to ensure that there is a workforce development plan. Staff who are new to the home now receive an induction prior to starting work with young people. However, progress in staff undertaking the core training necessary for their role is slow. For example, some staff have not completed the online training that has been allocated to them by managers. This means that some staff continue to lack awareness in key areas such as the 'Prevent' duty, online safety, self-harm, safeguarding and child sexual exploitation. Furthermore, the responsible individual is unable to show his own ongoing professional development. This compromises the responsible individual's ability to oversee the management of the home and the welfare and safety of young people effectively.

When planning the rota, the manager has not assessed any risks arising from individual members of staff lone working with young people. Some staff rotas note staff only by their initials. This means it is not always clear who is working with young people. In addition, rota planning does not adequately account for shortfalls in the experience, training and skills of staff. These shortfalls leave young people vulnerable.

Progress in safe recruitment has not been sufficiently prompt to ensure that practice safeguards young people. For example, managers do not give sufficient oversight of the vetting of bank staff working in the home. For two permanent members of staff, the reasons for gaps in their employment history are not clear. For another, managerial scrutiny of the employment history is insufficient. Consequently, managers have not satisfied themselves that the staff that they employ are suitable to work with children.

The manager has updated the statement of purpose to show changes to the staff team but has not ensured that the document is up to date in other areas. For example, the document still contains the name of the previous manager. It has no explanation of children's rights and lacks information about how young people's linguistic needs will be met. It also refers to progress monitoring tools that are not being used. This means that full and correct information about the service is not available to parents and placing authorities.

Managers have not completed a review of the quality of care that considers the views of young people and other key stakeholders. Consequently, this limits the manager's understanding of the home's strengths and areas for development.

Information about this inspection

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

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

Children's home details

Unique reference number: 1253711

Provision sub-type: Children's home

Registered provider: Beacon Child Care Limited

Registered provider address: Hazlewoods, Windsor House, Bayshill Road,
Cheltenham GL50 3AT

Responsible individual: Rikesh Asthana

Registered manager: post vacant

Inspector

Alison Cooper, social care inspector

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