

1256660

Registered provider: Pathways Care Group

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

The home provides care and support for up to five children who may have learning disabilities and emotional and behavioural needs. This is one of several children's homes operated by this private provider.

The manager registered for this home in March 2020.

Due to COVID-19 (coronavirus), at the request of the Secretary of State, we suspended all routine inspections of social care providers on 17 March 2020.

Inspection dates: 21 to 22 April 2021

Overall experiences and progress of children and young people, taking into account	inadequate
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How well children and young people are helped and protected	inadequate
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The effectiveness of leaders and managers	inadequate
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There are serious and widespread failures that mean children and young people are not protected or their welfare is not promoted or safeguarded.

Date of last inspection: 27 February 2020

Overall judgement at last inspection: improved effectiveness

Enforcement action since last inspection: not applicable

Recent inspection history

Inspection date	Inspection type	Inspection judgement
27/02/2020	Interim	Improved effectiveness
08/04/2019	Full	Good
01/11/2018	Full	Requires improvement to be good

Inspection judgements

Overall experiences and progress of children and young people: inadequate

This inspection identified shortfalls in safeguarding and leadership and management which place children at risk. The overall judgement of the home reflects the concerns identified.

The staff were not aware of written protocols for giving as and when required (PRN) medication. PRN medication is not given without the authorisation of a manager. However, medication records do not consistently clearly detail when and why PRN medication has been given. Behaviour management plans do not outline how PRN medication can be appropriately used to help manage violent or aggressive behaviour. Consequently, there is lack of clarity on thresholds for the use of PRN medication and why it has been given on every occasion.

The home environment feels welcoming and the children have good access to books and games in the lounge. However, some areas of the home require repair. The kitchen floor has some holes in it, the kitchen ceiling has marks from flood damage, the hallway has been half painted and some bedroom doors have damaged paintwork.

The manager and staff are committed to the children and want them to do well. The children receive individualised care and support and have made significant progress from their starting points. The children have developed strong relationships with the staff and manager. Despite this, the children do not always feel safe at the home due to the impact of the group dynamics. The manager has failed to address these concerns effectively.

During the COVID-19 pandemic, the staff helped children with their learning and development. The staff have worked with children to increase their life skills, access online education packages and to help them undertake work set by their school. One child is proud of their new recycling role at the home. The child is benefiting from the opportunity to have face-to-face guitar lessons, having recently begun to learn basic guitar skills online. Other children enjoy spending time exploring sensory equipment, going to the park or searching for their favourite songs on the internet and singing these with staff.

The staff continue to ensure that children's physical and emotional health needs are addressed. The staff are in the process of catching up with the preventative health appointments for children that could not be booked previously due to the pandemic.

One child has recently moved into the home. The manager ensured that this child's needs are appropriately matched to the knowledge of the staff team and the needs of the other children.

How well children and young people are helped and protected: inadequate

Risk and behaviour management are inadequate. On one occasion, a young adult displaying heightened behaviour became locked in the kitchen because the manager had removed a door handle to prevent access to the kitchen. This approach to behaviour management put children, young people and staff at risk of harm. On another occasion, a child was able to obtain scissors because they were not securely stored and threw these at a staff member's head.

Some children and young adults have complex behavioural and communication needs. The staff receive suitable training in de-escalation and physical intervention strategies. They understand behaviour as a means of communication. However, there have been a significant number of serious incidents in which the staff and children have had to quickly seek safe refuge to protect themselves. The staff have experienced a number of assaults and sustained serious injuries. The staff have protected the children from physical harm in these serious incidents. However, staff, and records, describe children running and locking themselves in their rooms. One child has written a letter to say that they do not like it when these incidents happen. Some of these vulnerable disabled children are unable to articulate their feelings but their actions show that they do not always feel safe at the home.

The manager has not ensured that the impact on the children of a young adult living at the home has been effectively assessed and any risks minimised. Consequently, two children do not feel safe.

Written risk assessments are not consistently developed and are sometimes not relevant to the risk identified. The stated risk-reduction measure for a child who may become upset by the fire alarm is for the child to have their dinner in a separate room. Children's files do not always contain copies of the written risk assessments that have been developed. The lack of clearly communicated and effective risk-reduction strategies means that children and staff are at risk of harm.

Sleep-in staff are the only staff on site at night. However, most of these staff have not had the opportunity to practise, or receive, suitable guidance on how they would safely evacuate the home at night. Furthermore, children's personal emergency evacuation plans were not known and accessible to all staff.

Some staff were not aware of the procedures for reporting concerns to senior managers in the organisation or to professionals outside of the home. The staff do not feel able to raise concerns safe in the knowledge that they will be listened to, and appropriate actions taken, without fear of reprisal.

The effectiveness of leaders and managers: inadequate

The staff are not consistently supported through good-quality induction and training. Induction processes do not always equip new staff with the knowledge, skills and

confidence necessary to carry out their roles effectively. Probationary reviews of new staff have not been undertaken in accordance with the organisation's policy. New staff have not received suitable guidance in relation to fire evacuation, safeguarding and whistle blowing. The organisation has, therefore, not assured itself of the capacity of these staff members to meet the highly complex needs of the children.

The staff receive a range of suitable training. However, not all staff have undertaken training in preventing radicalisation and two staff have not achieved the required level 3 residential childcare qualification within the specified time frame.

Staffing arrangements do not consistently meet the needs of the children. Each of the children and young adults has complex needs which require a minimum of one-to-one staffing. At times, staff who have not completed their probationary period are deployed to work together without a senior staff member on duty. On occasion, staffing arrangements have not been sufficient to meet the minimum safe staffing levels. On one occasion, the manager left a very new and inexperienced member of staff, who had not yet completed their induction, at the home alone with two children. This put the children and the staff member at risk.

Recruitment processes do not demonstrate that all necessary checks are undertaken. One staff recruitment file lacked clarity on employment dates and did not include a copy of the staff member's relevant qualification.

There is not a clear and effectively communicated approach to records management. Staff were unaware of the existence of important records, such as the guidance for when PRN medication is required and the location and content of risk assessments. Neither were staff aware of the location of some records such as incident reports. The details of how to contact Ofsted stated in the home's children questionnaire are incorrect.

Internal and external monitoring arrangements are poor. The manager has not maintained sufficient professional monitoring of the home. Therefore, the manager has not got an understanding of the shortfalls and the strengths of the home. The independent visitor has not visited the home in person since October 2020. This undermines the effectiveness of the visits and the ability of the visitor to have a full understanding of the quality of care and safeguarding at the home. Consequently, there has not been a sufficiently robust and challenging review of the home. The home is not operating in accordance with the statement of purpose.

The manager has established effective partnership working with parents and professionals. These partner professionals speak highly of the home and the manager.

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 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; manage relationships between children to prevent them from harming each other; understand the roles and responsibilities in relation to protecting children that are assigned to them by the registered person; and are familiar with, and act in accordance with, the home's child protection policies; that the home's day-to-day care is arranged and delivered so as to keep each child safe and to protect each child effectively from harm; that the effectiveness of the home's child protection policies is monitored regularly. (Regulation 12 (1) (2)(a)(i)(iv)(v)(vii)(b)(e))	28 May 2021
*The leadership and management standard is that the registered person enables, inspires and leads a culture in relation to the children's home that— promotes their [childrens] welfare.	28 May 2021

In particular, the standard in paragraph (1) requires the registered person to— 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; ensure that staff have the experience, qualifications and skills to meet the needs of each child; ensure that the home has sufficient staff to provide care for each child; understand the impact that the quality of care provided in the home is having on the progress and experiences of each child and use this understanding to inform the development of the quality of care provided in the home; use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13 (1)(b) (2)(a)(c)(d)(f)(h))	
If the Regulatory Reform (Fire Safety) Order 2005(1) applies to the home— the registered person must ensure that the requirements of that Order and any regulations made under it, except for article 23 (duties of employees), are complied with in respect of the home. (Regulation 25 (2) (b)) In particular, ensure that children’s personal evacuation plans are accessible and known to staff and that staff practise day and night emergency evacuations.	14 May 2021
For the purposes of paragraph (3)(b), an individual who works in the home in a care role has the appropriate qualification if, by the relevant date, the individual has attained— the Level 3 Diploma for Residential Childcare (England) (“the Level 3 Diploma”); or a qualification which the registered person considers to be equivalent to the Level 3 Diploma. The relevant date is—	30 July 2021

in the case of an individual who starts working in a care role in a home after 1st April 2014, the date which falls 2 years after the date on which the individual started working in a care role in a home. (Regulation 32 (4)(a)(b) (5)(a)) In particular, ensure that all staff who have worked in a children's home for more than two years achieve a suitable level 3 qualification.	
The registered person must ensure that an independent person visits the children's home at least once each month. The independent person must produce a report about a visit ("the independent person's report") which sets out, in particular, the independent person's opinion as to whether— children are effectively safeguarded; and the conduct of the home promotes children's well-being. The independent person's report may recommend actions that the registered person may take in relation to the home and timescales within which the registered person must consider whether or not to take those actions. The independent person must provide a copy of the independent person's report to— HMCI. (Regulation 44 (1) (4)(a)(b) (5) (7)(a))	28 May 2021

*These requirements are subject to a compliance notice.

Recommendations

- The registered person should ensure that the children's home is a well-maintained, homely and domestic environment. ('Guide to the children's homes regulations including the quality standards', page 15, paragraph 3.9)
- The registered person should ensure that there are suitable arrangements to administer PRN medication. Good-quality records should be kept of the administration of all medication, including PRN medication. ('Guide to the children's homes regulations including the quality standards', page 35, paragraph 7.15)
- The registered person should ensure that all staff complete suitable and relevant training in the wider safeguarding remit, such as preventing radicalisation. ('Guide

to the children's homes regulations including the quality standards', page 53, paragraph 10.11)

- The registered person should ensure that all recruitment checks, as set out in regulation 32, are completed. ('Guide to the children's homes regulations including the quality standards', page 61, paragraph 13.1)
- The registered person should ensure that staff understand the importance of careful, objective and clear recording and that records management systems are effective. ('Guide to the children's homes regulations including the quality standards', page 62, paragraph 14.4)

Information about this inspection

Inspectors have looked closely at the experiences and progress of children and young people, 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: 1256660

Provision sub-type: Children's home

Registered provider: Pathways Care Group

Registered provider address: Minton Place, Victoria Street, Windsor SL4 1EG

Responsible individual: Olubunmi Fabusuyi

Registered manager: Sally-Anne Slade-Watts

Inspector

Joanna Heller, Social Care Inspector

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