

1263270

Registered provider: Priory Education Services Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This children's home is situated in a rural and isolated location. Children and young people who live here can enjoy a peaceful and tranquil setting.

The children's home is registered to look after up to five children and young people and is part of a large national organisation.

Inspection dates: 8 to 9 May 2018

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 and the care and experiences of children and young people are poor and they are not all making progress.

Date of last inspection: 20 November 2017

Overall judgement at last inspection: requires improvement to be good

Enforcement action since last inspection:

The three requirements and one recommendation that were made at the last inspection have not been met.

Recent inspection history

Inspection date	Inspection type	Inspection judgement
20/11/2017	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
6: The quality and purpose of care standard (1) The quality and purpose of care standard is that children receive care from staff who— (a) understand the children's home's overall aims and the outcomes it seeks to achieve for children; (b) use this understanding to deliver care that meets children's needs and supports them to fulfil their potential. (2) In particular, the standard in paragraph (1) requires the registered person to— (ii) protect and promote each child's welfare; (iv) provide personalised care that meets each child's needs, as recorded in the child's relevant plans, taking account of the child's background; (ix) make decisions about the day-to-day arrangements for each child, in accordance with the child's relevant plans, which give the child an appropriate degree of freedom and choice; (3)(c) the care is delivered by a person who— (i) has the experience, knowledge and skills to deliver that care; and (ii) is under the supervision of a person who is appropriately skilled and qualified to supervise that care. In particular, careful and considered assessment and decision-making must take place in respect of the mix and compatibility of the group. Due regard must be given to the needs and vulnerabilities of existing children and the impact a new child may have on them.	08/06/2018
11: The positive relationships standard (1) The positive relationships standard is that children are helped to develop and to benefit from relationships based on— (a) mutual respect and trust; (b) an understanding about acceptable behaviour and positive responses to other children and adults;	08/06/2018

In particular, children's safety and well-being should not be compromised by placing them in situations within their home that exposes them to hurtful and worrying experiences.	
12: The protection of children standard* (1) The protection of children standard is that children are protected from harm and enabled to keep themselves safe. (2) In particular, the standard in paragraph (1) requires the registered person to ensure— (a) that staff— (i) 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; (ii) help each child to understand how to keep safe; (iii) have the skills to identify and act upon signs that a child is at risk of harm; (iv) manage relationships between children to prevent them from harming each other; (v) understand the roles and responsibilities in relation to protecting children that are assigned to them by the registered person; (vi) take effective action whenever there is a serious concern about a child's welfare; and (vii) are familiar with, and act in accordance with, the home's child protection policies; (b) 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; (e) that the effectiveness of the home's child protection policies is monitored regularly.	08/06/18
13: The leadership and management standard* 1) The leadership and management standard is that the registered person enables, inspires and leads a culture in relation to the children's home that— (a) helps children aspire to their full potential; and (b) promotes their welfare. (2) In particular, the standard in paragraph (1) requires the registered person to— (a) lead and manage the home in a way that is consistent with the approach and ethos, and delivers the outcomes, set out in the homes statement of purpose; (c) ensure that staff have the experience, qualifications and skills to meet the needs of each child;	08/06/2018

(d) ensure that the home has sufficient staff to provide care for each child; (e) ensure that the home's workforce provides continuity of care for each child; (f) 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; (g) demonstrate that practice in the home is informed and improved by taking into account and acting on— (i) research and developments in relations to the ways in which the needs of the children are best met; and (ii) feedback on the experiences of children, including complaints received; and (h) the use of monitoring and review systems that make continuous improvements in the quality of care provided in the home. In particular, management oversight should promote a reflective ethos, seeking to learn lessons from serious incidents.	
22: Contact and access to communications (3) Subject to paragraph (5), the registered person must ensure that children are provided at all reasonable times with access to the following facilities which they may use without reference to persons working in the home— (a) a telephone on which to make and receive telephone calls in private.	08/06/2018
23: Medicines * 1) The registered person must make arrangements for the handling, recording, safekeeping, safe administration and disposal of medicines received into the children's home. (2) In particular the registered person must ensure that— (c) a record is kept of the administration of medicine to each child. In particular, the administration of all medication including PRN medication must be clear and directive to staff. It should be clear when medication should be administered and who should authorise and PRN medication. Care planning documents should leave no room for confusion. The oversight and review of medication including records should be robust and any shortfalls or concerns should be acted upon and investigated effectively.	08/06/2018

37: Other records	08/06/2018
(1) Schedule 4 sets out the other information that the registered person must keep in relation to a children's home. (2) The registered person must— (a) maintain in the home the records in Schedule 4; (b) ensure that the records are kept up to date.	

* These requirements are subject to a compliance notice.

Inspection judgements

Overall experiences and progress of children and young people: inadequate

Children who live at this home have complex and conflicting needs. Staff are not provided with clear and succinct direction in respect of the expectations on them when caring for children. Some direction in documents is conflicting and confusing; this results in inconsistent approaches to care for children. Incidents take place on an almost daily basis. These incidents are often difficult to manage and have resulted in injuries to the staff and one of the children.

Physical intervention is used on a regular basis. Not all physical interventions are recorded as such. Too many restraint records do not provide enough information to be able to understand what has happened for children. Too often, children are not always offered a meaningful debrief following incidents, including those of physical intervention. This hampers the manager in understanding triggers and learning to ensure that improvements are made to children's experiences.

Children who live at this home also attend an education provision that is managed by the same organisation and leadership team. The academic progress that children make is too variable. For a small number of children, significant concerns emerged with regard to the progress they are making. For example, one child has not attended school for some time and there was little evidence of any planning between the school and the manager to address this. Another child regularly arrives at school late, resulting in almost half of their educational day being missed. Worryingly, another child was not allowed to attend school on one day without them been formally excluded. Managers failed to demonstrate that they had suitably challenged this decision.

Generally, the home is clean and tidy but some areas lack a homely feel. For example, hospital-grade radiator covers and industrial-type lighting detract from a homely feel. One of the children's bathrooms was found to be in an unacceptable state. As well as significant issues with damp in the room inspectors found that the toilet, floor, shower and door were dirty. There was no hand gel, hand towel or toilet paper in this bathroom. Inspectors were significantly concerned, as this child had been ill in the days leading up to and during the inspection.

Children do not have access to a telephone without having to ask staff. There is only one landline and the telephone is kept in the office, separate to the accommodation. Children are unable to have free access to their family, friends or professionals or call for help if they need to. One social worker reported difficulties phoning the home, due to the line being engaged a lot of the time.

Some children have made personal progress since coming to live at this home. For example, children are able to access activities in the community. One child goes swimming every week and this is a really enjoyable part of their day and a new opportunity for them.

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

The arrangements in place to safeguard children are not effective. There have been two allegations made in respect of staff. In both cases, the manager provided some detail to the designated officer, but the information was not fully accurate. Following one allegation, there was a delay in management oversight and decision-making for a number of days. During this period, no safeguarding strategies were implemented. When the manager reviewed the incident, a decision was reached that the member of staff should remain office based. The office is fully accessible to children, and therefore this decision failed to safeguard children.

Known risks and concerns for children are not managed or risk assessed. One child's social worker, the manager and a number of staff identified concerns with regard to personal relationships between the male and female children. These concerns have not been explored and therefore staff and managers are not clear about any associated risks for children. There are no strategies in place to ensure that the children concerned are fully supervised. There has been a failure to consider how best to keep children safe.

Poor practice is not always identified by the manager. For example, the manager did not recognise the seriousness of an incident log which recorded injuries to a child. As a result, the manager did not review the incident, placing the child at risk. Consequently, the manager did not implement strategies to prevent future incidents from occurring.

Physical intervention is used on a regular basis. There is a failure to comprehensively record all incidents of physical intervention, including a failure to always provide enough information about what has happened to the child during the incident. The independent visitor highlighted this shortfall in November 2017, but leaders and managers have failed to rectify this issue. Inspectors were unable to clearly establish how frequently and to what extent physical intervention is being used by staff. Too often, children are not offered a meaningful debrief following incidents, including those where physical intervention has been used. As a result, children cannot provide feedback on their views and feelings and the manager cannot identify learning points to ensure that improvements are made to children's experiences.

The arrangements in place to ensure the safe-keeping and safe and effective administration of medication are inadequate. There is a lack of robust and safe management oversight of the administration of medication. The manager and the staff do not demonstrate that they understand the arrangements for the administration of medication. Inspectors found discrepancies in the medication records and care planning documentation is confusing and lacks clear direction for staff. Inspectors found errors in the dates recorded in the medication administration records; therefore, the records did not provide an accurate record of how and when medication is given to children.

Leaders and managers do not assess the compatibility of the children who live together, before a new child moves in to the home. Leaders do not consider the negative impact of placing children together who have conflicting and complex needs. This was highlighted as a concern at the last inspection and there is no evidence that any improvement or progress has been made. This has resulted in the needs of the children becoming increasingly difficult to manage and, at times, results in a chaotic and volatile home life for the children.

Too many children reported feeling unsafe and not well cared for at this home. There was evidence that relationships between some children and staff were difficult. Conversely, inspectors noted some positive interaction between some children and some staff.

The effectiveness of leaders and managers: inadequate

There has been no registered manager in consistent day-to-day charge of this home since this home was registered. The current manager has been in post since January 2018 and has not yet made an application to Ofsted. Over time leaders and managers have failed to ensure that the requirements made at the previous inspection have been met. Significant shortfalls have been identified in respect of the current management of this home. For example, placements continue to be offered to children without rigorous assessment of need and compatibility with the children already living in the home. Consequently, children have moved into the home without the numbers of staff required to safely and effectively care for them.

Leaders and managers do not demonstrate that they have the skills and knowledge required to lead this service in a safe and positive way. Too often or on too many occasions' shortfalls in practice are not identified or addressed with staff. Management oversight of practice and care within this home is inadequate and fails to promote a reflective ethos that seeks to learn lessons from serious incidents. For example, one obvious trigger for anxiety and incidents with one child was identified by the manager. However, leaders failed to consider changing practice to avoid further incidents.

Leaders and managers do not ensure that the home is adequately staffed. High levels of overtime have been in place for staff over a number of months. Despite this situation, new placements have been accepted. Inspectors noted that arrangements were being made for staff to work in the home on the day that they were required, rather than

planned in advance.

Leaders and managers have failed to ensure that staff working at this home have been provided with the training they require to safely care for the children. Not all staff can demonstrate that they would know what to do if a child makes a disclosure to them, and not all staff have been trained to intervene safely when children place themselves or others at risk.

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: 1263270

Provision sub-type: Children's home

Registered provider: Priory Education Services Limited

Registered provider address: Priory Group, 80 Hammersmith Road, London, Middlesex W14 8UD

Responsible individual: Clive Coombs

Registered manager: Post vacant

Inspector(s)

Tracey Ledder, social care inspector
Sarah Canto, social care inspector

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