

1263977

Registered provider: Care Perspectives Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home provides specialist care for up to eight children with mental health difficulties and/or associated complex needs. The home was registered in December 2017.

There were six children living in the home at the time of the inspection.

The current manager was appointed in December 2021. She has submitted her application to register with Ofsted.

Inspection dates: 6 and 7 June 2022

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: 29 March 2022

Overall judgement at last inspection: sustained effectiveness

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
29/03/2022	Interim	Sustained effectiveness
23/06/2021	Full	Requires improvement to be good
11/03/2020	Interim	Sustained effectiveness
10/09/2019	Full	Good

Inspection judgements

Overall experiences and progress of children and young people: requires improvement to be good

The experiences of children living in this home are mixed. Staff are supporting some children to make progress and become safer. When needed, staff take quick and effective action to safeguard children. Overall, managers and staff work well with other professionals and will advocate strongly to ensure that children's needs are met and their welfare promoted. However, one child's experience in this home has been poor. This is the result of inadequate care planning by all professionals involved in the child's care, lack of escalation and challenge by this home's leaders and managers and poor decision-making by the home's leaders, managers and staff.

The quality of relationships between children and staff varies. During the inspection, inspectors observed positive relationships between staff and children. However, some children told the inspector that they do not feel that staff listen to them or take the time to speak to them. On one occasion, staff did not act with sufficient care or skill and incorrectly informed a child that they were under a deprivation of liberty order when they were not. This had a detrimental impact on this child. As a result, not all children feel that they can trust staff or feel supported by them.

Staff do not support all children to achieve positive educational outcomes. Some children do not have education placements and, as a result, these children have not made progress with their learning. In contrast, staff are supporting some children who are in the process of completing their exams and have a college placement for the next academic year. In addition, staff have supported another child to undertake voluntary work.

Children have mixed day-to-day experiences. They have some positive opportunities, such as trips to the beach, barbecues at the home and other activities in the local community. However, there are times when staff do not encourage children to have a clear routine in place, despite the fact that this helps them. This does not support children to feel motivated to achieve and progress.

Staff understand the physical health conditions of children and any risks associated with these conditions. Staff help children to attend their medical appointments and in the majority of cases will advocate on children's behalf to ensure that they get the health services they require. However, records do not always show the reasons when medication is administered late. This is a missed opportunity to learn from and to minimise medication errors.

The manager has begun involving children in their care plans and has started to consult children on a regular basis. This approach encourages the children to share their views and supports the staff to understand how children perceive risks.

Staff help children to develop age-appropriate independence skills, so that they are more prepared for adult life. The children are proud of themselves and staff are proud of them too. This kind of affirmation is helping children to recognise their successes and want to build on them further.

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

Staff do not always supervise children as set out in their plans of care. For example, on one occasion, staff should have kept a child in sight due to their presenting risks. However, staff did not do this and were not aware that the child had left the home. The manager has since put strategies in place to prevent this from happening again. However, records still do not demonstrate that staff carry out the required observations of children. Therefore, it is not known whether staff are caring for children as stipulated in their individual plans. This poor practice leaves children vulnerable to harm.

Managers do not always demonstrate professional curiosity when responding to allegations raised by children. On one occasion, managers did not act or challenge relevant professionals when it was not clear whether appropriate action had been taken in relation to a child's allegations. The delay and lack of a thorough response has meant that the child remains unclear of the outcome. This has impacted negatively on their well-being. Children's concerns are not always acted on or escalated appropriately.

The quality of risk assessments is inconsistent. For most children, risk assessments are detailed and contain information as well as strategies to support them. However, for one child, the impact risk assessment did not consider an incident when the child threatened to jump from a bridge. There were also subsequent incidents similar to this threat. Managers did not complete a thorough analysis of this risk when making the decision as to whether the home could safely meet the child's needs. As a result, staff were not given sufficient guidance on how to keep the child safe.

Overall, staff have a good understanding of why children self-harm and what to do to minimise this happening. When children do self-harm, staff take effective action to increase children's safety and obtain medical advice. However, on one occasion, a child was given a razor for personal care, which led to the child harming themselves. The manager has taken action to address this shortfall in practice to minimise the risk of this happening again.

The manager regularly reviews the use of physical intervention in the home to ensure that it is used only as a last resort. When a concern about the use of physical intervention was identified, the manager addressed this with the staff involved to develop their practice. However, staff and children are not always spoken to following each physical intervention. This hinders the learning for the staff and the support for children.

The effectiveness of leaders and managers: inadequate

Leaders and managers have not consistently led the home with sufficient care or skill to ensure that all children receive care that promotes their welfare. Following concerns raised by one child, leaders and managers, with agreement from the placing authority, placed the child in unsuitable temporary accommodation. Leaders and managers did not fully consider the child's risks, the location of the accommodation or the quality of the environment when placing the child. This poor practice does not promote children's welfare.

Leaders and managers have not always demonstrated a good understanding of children's experiences or the impact of the quality of care children receive. This is because they do not always seek to establish all the necessary information relating to children's care. This includes information relating to allegations made by children or what has occurred during incidents. In addition, leaders and managers have failed to identify that staff's recording of incidents is poor and does not provide a coherent account of what has occurred. These factors limit leaders and managers' understanding of what has happened. This prevents them from making improvements to the areas of children's care they are responsible for or advocating on children's behalf in other areas.

Leaders and managers do not consistently challenge other professionals and agencies involved in the children's care or escalate concerns when needed. This has contributed to the systemic failure in the care provided for one child by various agencies, including children's services and the child and adolescent mental health services. These failures led to the child being without crucial healthcare or educational opportunities.

Leaders and managers' monitoring of the home is insufficient. They have failed to consistently identify shortfalls in practice and in the quality of care delivered to children. This means there are missed opportunities to develop practice and improve the care children receive.

The manager has been in post since December 2021. Overall, parents and professionals were positive about the communication and support provided by the manager. To support the development of the service, there have been recent changes to the management structure to improve the oversight at the home. These changes are in their infancy and therefore their effectiveness is not yet clear.

Staff receive regular supervision. However, while individual supervision takes place, it does not always consider the needs of the children. This is another missed opportunity to develop staff practice.

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
In meeting the quality standards, the registered person must, and must ensure that staff— seek to secure the input and services required to meet each child's needs; if the registered person considers, or staff consider, a placing authority's or a relevant person's performance or response to be inadequate in relation to their role, challenge the placing authority or the relevant person to seek to ensure that each child's needs are met in accordance with the child's relevant plans. (Regulation 5 (b)(c)) In particular, the registered person should ensure that when the needs of children are not met by other agencies that they escalate their concerns effectively.	11 August 2022
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; have the skills to identify and act upon signs that a child is at risk of harm; take effective action whenever there is a serious concern about a child's welfare; and	11 August 2022

are familiar with, and act in accordance with, the home's child protection policies; that the premises used for the purposes of the home are located so that children are effectively safeguarded. (Regulation 12 (1) (2)(a)(i)(iii)(vi)(vii)(c)) In particular, the manager must ensure that when there are concerns about the safety and welfare of children that child protection policies are adhered to and that effective action is taken. The manager must ensure that staff have the necessary skills to consider risks to children and take appropriate action in response. When a child is not at the home, thorough risk assessments that consider the locations where they are staying or visiting should be in place.	
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 aspire to fulfil their potential; and promotes their welfare. In particular, the standard in paragraph (1) requires the registered person to— ensure that staff have the experience, qualifications and skills to meet the needs of each child; demonstrate that practice in the home is informed and improved by taking into account and acting on— feedback on the experiences of children, including complaints received; and use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13 (1)(a)(b) (2)(c)(g)(ii)(h)) In particular, the manager should ensure that staff have the experience and skills to make decisions that consider the needs of the children, taking into account all known and predictable risks. The manager should ensure that feedback provided to children on their experiences is given in a child-centred way and is clear on any findings.	11 August 2022

The manager must also ensure that monitoring systems are effective and that shortfalls are recognised and responded to effectively. This requirement was made at the last inspection and is restated.	
The care planning standard is that children— receive effectively planned care in or through the children's home; In particular, the standard in paragraph (1) requires the registered person to ensure— that each child's relevant plans are followed. (Regulation 14 (1)(a) (2)(c)) In particular, the manager should ensure that children receive care and support as directed in their care plans to meet their individual needs.	11 August 2022
The registered person must— ensure that the records are kept up to date. (Regulation 37 (2)(b)) In particular, the manager should ensure that all case records are up to date and recording is clear and objective.	11 August 2022
The registered person must ensure that— 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; and 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)(b)(i)(ii)(c)) In particular, the manager should ensure that staff involved in physical interventions are spoken to about the	11 August 2022

intervention. The manager should also ensure that records evidence reflective challenge to staff practice with the aim of learning and developing the staff approach. In addition, the manager or an authorised person should confirm they have spoken to the child within five days and make their views clear in children's records.

Recommendation

- The registered person should ensure that supervision includes discussions about children's needs, to aid staff development. ('Guide to the Children's Homes Regulations, including the quality standards', page 39, paragraph 8.15)

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: 1263977

Provision sub-type: Children's home

Registered provider: Care Perspectives Limited

Registered provider address: 36 Frederick Street, Loughborough LE11 3BJ

Responsible individual: Rodrigo Ferreira

Registered manager: Post vacant

Inspectors

Melanie Griffin, Social Care Inspector

Sarah Berry, Social Care Inspector

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