2510847

Registered provider: Hopscotch Care Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This children's home is operated by a private organisation and is registered to provide care for up to one child. The home provides care to children who have social, emotional and mental health needs.

The manager has been registered with Ofsted since December 2021.

Due to COVID-19, at the request of the Secretary of State, we suspended all routine inspections of social care providers carried out under the social care common inspection framework (SCCIF) on 17 March 2020. We returned to routine SCCIF inspections on 12 April 2021.

We last visited this setting on 4 March 2020 to carry out an assurance visit. The report is published on the Ofsted website.

Inspection dates: 2 and 3 February 2022

Overall experiences and progress of children and young people, taking into account	**inadequate**
How well children and young people are helped and protected	inadequate
The effectiveness of leaders and managers	inadequate

There are serious and/or widespread failures that mean children and young people are not protected or their welfare is not promoted or safeguarded and/or the care and experiences of children and young people are poor and they are not making progress.

Date of last inspection: 4 March 2020

Overall judgement at last inspection: sustained effectiveness

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
04/03/2020	Interim	Sustained effectiveness
17/09/2019	Full	Good

Inspection judgements

Overall experiences and progress of children and young people: inadequate

The adults caring for children do not have an understanding of their individual needs. External assessments from specialist services are not utilised to ensure that children's care is individualised. This reduces the opportunity for children to achieve their full potential because the adults caring for them do not understand how to meet their needs.

Children do not know which adults are caring for them on a day-to-day basis. Children do not have a core group of adults providing them with consistent care. One child did not know why specific adults had not returned to the home. This shortfall creates a world full of uncertainty for children and does not provide children with the basic need to build trusting, loving relationships.

One child is making progress with her education, and the child has aspirations for the future. However, the adults do not have an understanding of her special educational needs and how to support her. The staff and manager also do not have an understanding of the local offer that outlines the support available to children with special educational needs and/or disabilities (SEND). This is a missed opportunity for children to access resources to support their individual needs.

Children are supported to develop some life skills such as cooking. However, there is no assessment or framework to analyse progress in this area. Plans are put in place for children to live more independently without an assessment to establish if they are ready for this milestone. This could result in children who require a high level of care not receiving the planned care that they need.

Children do not receive therapeutic support to meet their emotional needs. Children are not supported to develop healthy coping strategies. Managers and adults caring for children do not always seek out advice from external services to support children when they are emotionally struggling. Children are, therefore, not supported through multi-agency therapeutic plans to further develop their resilience.

One child is awaiting health support and, in the interim, significant adaptations have been made to the child's self-care needs. There is no curiosity about children's health needs and adults do not challenge health services to ensure that children receive conclusions about their health needs.

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

There is a poor response to keeping children safe from complex safeguarding issues. There is not always a record to highlight when children go missing from their home and there is no analysis of intelligence to inform safety plans. Child protection procedures are not followed to ensure that children are safe from perpetrators of

abuse. This shortfall reduces the opportunity for multi-agency plans to be put in place to keep children safe.

When children require urgent health treatment, they do not always receive it. Additionally, adults are sometimes delayed in their actions, which causes delays when children need health treatment. This shortfall could result in a health deterioration for children who are already unwell.

Medication practice is poor. Children are regularly not receiving the correct doses of their medication. There is no record of administration for specific medicines that are being given to one child. Health advice is not sought to establish if it is safe for children to be reintroduced to their medication; specifically, this refers to when children have had a period of time without their prescribed medication, or when they have illicit substances in their system. The manager has not identified medication errors and audits are not taking place. These shortfalls could have serious implications for children's health.

Child protection procedures are not followed when there are allegations of abuse against children. Following significant events in children's lives, the manager does not identify poor practice and/or safeguarding issues. This results in poor practice being unaddressed and cultures developing which are underpinned by unsafe practice. The disregard for following procedures does not allow for external organisations such as the designated officer for safeguarding and Ofsted to have oversight of safeguarding practice.

The assessments that highlight risks in children's lives and the plans that are put in place to reduce risks are not robust. Significant information about how to keep children safe is not included, which results in the adults caring for children being unclear about strategies to keep children safe. The risks in children's lives are high, and without strategies this could result in children being seriously hurt.

There has been no assessment of the environmental risks near the home, including train tracks, canals, bridges and areas involving crime. The absence of this assessment does not inform the adults about how they need to keep children safe outside of their home.

The effectiveness of leaders and managers: inadequate

The adults caring for children do not have the knowledge and skills to meet children's individual needs. The lack of training for adults limits their knowledge base about how to care for the children in their care or safeguard them from risks in their lives.

New members of the team do not receive an induction or supervision in line with the provider's policy. This minimises the opportunity for consistent care and team members being aware of their roles and responsibilities to keep children safe and support them to thrive.

The manager does not have any management systems in place to evaluate the quality of care to children. The manager does not identify poor practice and does not address this within supervision sessions. The six-monthly quality of care review has taken place; however, it lacks evaluation and does not include feedback from children or people in children's lives. The manager does not set specific and measurable goals for team members or children. The lack of leadership and management skills results in children not receiving the good-quality care that they deserve.

The manager does not assess if the adults can meet a child's needs before they move into the home. The manager does not consider if the adults have received training to meet children's needs and there is no consideration about the location of the home. These shortfalls result in uninformed decisions about children moving into the home and could lead to further disruption for children.

As a result of the serious and widespread failures identified during the inspection, enforcement action has been put in place in regulation 12, 13 and 23. The provider has put together an action plan to address the outlined shortfalls and Ofsted will be monitoring the provider's progress.

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 health and well-being standard is that— the health and well-being needs of children are met; children receive advice, services and support in relation to their health and well-being; and children are helped to lead healthy lifestyles. In particular, the standard in paragraph (1) requires the registered person to ensure— that staff help each child to— achieve the health and well-being outcomes that are recorded in the child's relevant plans; understand the child's health and well-being needs and the options that are available in relation to the child's health and well-being, in a way that is appropriate to the child's age and understanding; understand and develop skills to promote the child's well-being; that each child has access to such dental, medical, nursing, psychiatric and psychological advice, treatment and other services as the child may require. (Regulation 10 (a)(b)(c) (2)(a)(i)(ii)(iv)(c)) This specifically relates to children receiving timely health support when it is required following significant events. This also relates to health plans being put in place to support children with their emotional health and physical health.	10 April 2022
*The protection of children standard is that children are protected from harm and enabled to keep themselves safe.	10 April 2022

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; help each child to understand how to keep safe; have the skills to identify and act upon signs that a child is at risk of harm; 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; take effective action whenever there is a serious concern about a child's welfare; 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 premises used for the purposes of the home are located so that children are effectively safeguarded; that the premises used for the purposes of the home are designed, furnished and maintained so as to protect each child from avoidable hazards to the child's health; and that the effectiveness of the home's child protection policies is monitored regularly. (Regulation 12 (1) (2)(a)(i)(ii)(iii)(iv)(v)(vii)(b)(c)(d)(e)) This specifically relates to children's risk assessments containing all risks in their lives and safety plans having clear directions to the adults caring for children.	

It relates to external risks being analysed within the location risk assessment to inform children's safety plans. It also relates to staff and the manager being aware of their roles and responsibilities to safeguard children. The manager must ensure that child protection procedures are followed when there is an allegation of abuse against a child.	
*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— 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 work as a team where appropriate; ensure that staff have the experience, qualifications and skills to meet the needs of each child; ensure that the home's workforce provides continuity of care to 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; demonstrate that practice in the home is informed and improved by taking into account and acting on— research and developments in relation to the ways in which the needs of children are best met; 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)(a)(b)(c)(e)(f)(g)(i)(h))	10 April 2022

This relates to ensuring that there are monitoring and review systems to make improvements in the quality of care provided in the home. This includes ensuring management oversight and evaluation identifies poor practice and is addressed. This relates to ensuring that there is a consistent staff team in place who understand the child's needs. This also relates to the staff team understanding its role in working together to provide a consistent level of care. Also, that the team has the necessary skills and experience to meet the needs of children.	
The care planning standard is that children— receive effectively planned care in or through the children's home; and have a positive experience of arriving at or moving on from the home. In particular, the standard in paragraph (1) requires the registered person to ensure— that children are admitted to the home only if their needs are within the range of needs of children for whom it is intended that the home is to provide care and accommodation, as set out in the home's statement of purpose; that arrangements are in place to— ensure the effective induction of each child into the home; manage and review the placement of each child in the home; and plan for, and help, each child to prepare to leave the home or to move into adult care in a way that is consistent with arrangements agreed with the child's placing authority; that each child's relevant plans are followed; that staff help each child to access and contribute to the records kept by the registered person in relation to the child. (Regulation 14 (1)(a)(b) (2)(a)(b)(i)(ii)(iii)(c)(f))	10 April 2022

This relates to ensuring that children's care is informed by specialist assessments that have been completed. Also, that they have relevant plans that have common, specific and measurable goals. It relates to an assessment taking place to establish if the adults caring for the child can meet their needs before they move into the home. This assessment should consider the skills of the adults and also the location of the home. This also relates to plans not being put in place for children's futures without an assessment.	
No measure of control or discipline which is excessive, unreasonable or contrary to paragraph (2) may be used in relation to any child. (Regulation 19 (1)) This specifically relates to the police not being used routinely to support children when they are struggling.	10 April 2022
The registered person must make arrangements for the handling, recording, safekeeping, safe administration and disposal of medicines received into the children's home. In particular the registered person must ensure that— medicines kept in the home are stored in a secure place so as to prevent any child from having unsupervised access to them; medicine which is prescribed for a child is administered as prescribed to the child for whom it is prescribed and to no other child; and a record is kept of the administration of medicine to each child. (Regulation 23 (1) (2)(a)(b)(c)) This relates to ensuring that medication policies and procedures are robust for the handling, recording, safekeeping and safe administration of medicines. It also relates to ensuring that a record is kept of the administration of medicine to each child, and management audits take place to identify any medication errors.	10 April 2022

The registered person must— ensure that each employee completes an appropriate induction. The registered person must ensure that all employees— undertake appropriate continuing professional development; receive practice-related supervision by a person with appropriate experience. (Regulation 33 (1)(a) (4)(a)(b)) This relates to new team members receiving an induction and supervision in line with the provider's policy. Supervision should be reflective with specific and measurable actions. It also relates to team members having the skills to meet children's individual needs and their knowledge base following training being evaluated by the manager.	10 April 2022
The registered person must maintain records ("case records") for each child which— include the information and documents listed in Schedule 3 in relation to each child; are kept up to date; and are signed and dated by the author of each entry. (Regulation 36 (1)(a)(b)(c))	10 April 2022
The registered person must notify HMCI and each other relevant person without delay if— a child is involved in or subject to, or is suspected of being involved in or subject to, sexual exploitation; an incident requiring police involvement occurs in relation to a child which the registered person considers to be serious; there is an allegation of abuse against the home or a person working there; a child protection enquiry involving a child — is instigated; or	10 April 2022

concludes (in which case, the notification must include the outcome of the child protection enquiry); or there is any other incident relating to a child which the registered person considers to be serious. (Regulation 40 (4)(a)(b)(c)(d)(i)(ii)(e))	
The registered person must complete a review of the quality of care provided for children ("a quality of care review") at least once every 6 months. In order to complete a quality of care review the registered person must establish and maintain a system for monitoring, reviewing and evaluating— the quality of care provided for children; the feedback and opinions of children about the children's home, its facilities and the quality of care they receive in it; and any actions that the registered person considers necessary in order to improve or maintain the quality of care provided for children. After completing a quality of care review, the registered person must produce a written report about the quality of care review and the actions which the registered person intends to take as a result of the quality of care review ("the quality of care review report"). 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 (1) (2)(a)(b)(c) (3) (5))	10 April 2022

* These requirements are subject to a compliance notice.

Recommendations

- The registered person should ensure that staff have knowledge of children's EHC plans and the resources available to them through the (SEND) local offer. ('Guide to the children's homes regulations, including the quality standards', page 26, paragraph 5.4)

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: 2510847

Provision sub-type: Children's home

Registered provider: Hopscotch Care Limited

Registered provider address: 19 Lancaster Road, Carnforth LA5 9LD

Responsible individual: Richard Witt

Registered manager: Keri Alston

Inspector

Carly Quinn, Social Care Inspector

The Office for Standards in Education, Children's Services and Skills (Ofsted) regulates and inspects to achieve excellence in the care of children and young people, and in education and skills for learners of all ages. It regulates and inspects childcare and children's social care, and inspects the Children and Family Court Advisory and Support Service (Cafcass), schools, colleges, initial teacher training, further education and skills, adult and community learning, and education and training in prisons and other secure establishments. It assesses council children's services, and inspects services for children looked after, safeguarding and child protection.

If you would like a copy of this document in a different format, such as large print or Braille, please telephone 0300 123 1231, or email enquiries@ofsted.gov.uk.

This publication is available at http://reports.ofsted.gov.uk/.

Interested in our work? You can subscribe to our monthly newsletter for more information and updates: http://eepurl.com/iTrDn.

Piccadilly Gate
Store Street
Manchester
M1 2WD

T: 0300 123 1231
Textphone: 0161 618 8524
E: enquiries@ofsted.gov.uk
W: www.gov.uk/ofsted