

2523027

Registered provider: Kennet Care Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

The home is privately owned and provides care for one child. The home aims to create a warm, caring, safe and supportive environment which enables children to recover from past life experiences and grow to achieve their full potential.

There has been no registered manager since 28 September 2020.

The home was judged inadequate at the first full inspection on 11 and 12 May 2021. The registration of the children's home was suspended on 13 May 2021. A monitoring visit took place on 16 June 2021. The suspension of registration was lifted following the monitoring visit and Ofsted imposed a condition of registration that the home can provide care and accommodation for one child. This was reviewed at this inspection.

Inspection dates: 31 August to 1 September 2021

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	requires improvement to be good
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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: 11 May 2021

Overall judgement at last inspection: Inadequate

Enforcement action since last inspection: A condition of registration was imposed to reduce the number of children who can be accommodated from six children to one.

Recent inspection history

Inspection date	Inspection type	Inspection judgement
11/05/2021	Full	Inadequate

Inspection judgements

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

Since the previous inspection, staff have sensitively supported one child to move in from another of the provider's homes. Leaders made thoughtful decisions to ensure that staff already known to the child continued to support her until she became settled.

Good planning demonstrates that leaders thought carefully about the child's education after the summer holidays. They have ensured that the child can access the same education provision in the new academic year, therefore providing the child with continuity in her learning.

Staff pay close attention to the child's health needs. Targeted support, focused on the child's specific dietary needs, is delivered with sensitivity and encouragement from staff. This approach increases the likelihood of success. Similarly, great effort is placed by leaders on the provision of, and access to, external therapy. For this child, art and equine therapy are highly valued and help her to deal with difficult emotions and feelings.

Staff have a shared aim to promote the well-being of the child, who is able to identify people she can go to with any worries or concerns. The staff are aspirational for the child and are keen to increase their skills, to ensure that they meet this child's needs and the needs of other children who may come to live here. The child said she feels happy, safe and like living here.

Staff support the child to see individuals who are important to her, such as family members. Staff provide reflective accounts of these events. This approach helps the child to build and maintain positive contact with significant people in her life.

Staff are encouraging the child to explore hobbies and interests that include individual activities, such as going to the trampoline park. They also work well with other agencies to make sure that the child is safe to use various structured activities in the community where she can meet other children.

The environment has significantly improved, especially children's bedrooms. The home is warm and comfortable, with a 'family feel' to it.

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

The written risk management guidance for staff is not always helpful. For example, one measure advises the staff to call the police, even though the presence of the police is known to escalate the child's anxieties. The police have advised senior staff on previous occasions about the limitations of their powers. Documents do not guide

staff on their specific roles and responsibilities as trained professionals working with vulnerable children. Further shortfalls in risk management are that senior leaders have not adequately assessed all the risks of staff working alone.

Other aspects of risks are better managed. For example, the staff are working with the child's social worker to continually review the current plan that prevents the child's use of a smart phone and electronic devices. This is with a view to reintroducing such devices in a safe way when it is safe to do so.

Agency staff have not been subject to the same rigorous recruitment process as permanent staff. Consequently, leaders are not assured of the safety of all adults working in the home. Leaders have identified this shortfall, with imminent plans to meet with the agency and improve the process.

Staff are proactive in their response to missing-from-home episodes. They follow a clear and timely process, with an urgency to support the child to come home. Staff liaise effectively with the local police and partner agencies, for example to arrange a meaningful return home interview. Early signs are that missing-from-home episodes for the child are decreasing.

Staff are aware that physical intervention is only used as a last resort to manage unsafe situations. Although trained in the use of restraint, staff have not used physical intervention, favouring the positive relationships they have built with the child to calm situations instead.

The effectiveness of leaders and managers: requires improvement to be good

Senior leaders have a process in place to review incidents, but this does not encompass missing-from-care episodes. This means that there is no debriefing and therefore no learning from such occurrences. This limits the potential for staff to explain and explore their practice, such as why they called the police.

Although senior leaders reviewed the specific safeguarding responsibilities of staff in job descriptions, it is not evident that staff are aware of this detail. Senior leaders have implemented cyclical safeguarding training, but it is unclear how they intend to ensure that this becomes embedded in practice and part of the new culture in the home. Staff spoken with did demonstrate that they know the process to follow in the event of a safeguarding concern.

The training programme for staff contains some gaps. Staff are not trained in the therapeutic intervention that is known to benefit the child. Senior leaders have the necessary training rescheduled, following events beyond their control due to COVID-19. Although staff provide the required supervision when the child sees their family, as guided by the placing social worker, they are not formally trained in this role. Following a recommendation by the independent visitor, senior leaders reviewed and individualised the workforce development plan. However, this does not include the

progress and timescale toward the level three qualification that staff are required to achieve.

Senior leaders have improved the staff induction process. This now includes a formal mid-probation review as well as an assessment of learning and practice. The assistant manager now has a personal development plan that includes obtaining management qualifications.

Although there is currently no manager registered with Ofsted, senior leaders have made considerable effort to recruit to the post. The responsible individual provides support and oversight of the home daily, which includes mentoring the assistant manager. The absence of a registered manager for a considerable period has had an impact on the provider's ability to scrutinise and monitor all aspects of the quality of care being provided. For example, care planning is reviewed effectively to ensure the child's needs are being identified. However, the staff's understanding and ability to meet all of these needs are not being thoroughly checked, such as the child's communication and language needs. It is therefore unclear how senior leaders have assured themselves that the standards of care are sufficient.

External monitoring by the independent visitor does provide an additional layer of monitoring. Senior leaders take the recommendations seriously and ensure the necessary changes are made.

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— understand the roles and responsibilities in relation to protecting children that are assigned to them by the registered person. (Regulation 12 (1) (2)(a)(v))	31 October 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— 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; 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)(h))	31 October 2021
The registered person must recruit staff using recruitment procedures that are designed to ensure children's safety. The registered person may only— employ an individual to work at the children's home;	31 October 2021

if the individual satisfies the requirements in paragraph (3). The requirements are that— full and satisfactory information is available in relation to the individual in respect of each of the matters in Schedule 2. (Regulation 32 (1) (2)(a) (3)(d)) In particular, ensure that sufficient checks are completed for agency staff.	
The registered provider must appoint a person to manage the children's home if— there is no registered manager in respect of the home: and the registered provider— is an organisation or a partnership. (Regulation 27 (1)(a)(b)(i)) In particular, appoint and register a suitable manager.	31 October 2021

Recommendation

- The registered person should ensure that the workforce development plan is updated to include any new training and qualifications completed by staff while working at the home and used to record the ongoing training and continuing professional development needs of staff. ('Guide to the children's homes regulations including the quality standards', page 53, paragraph 10.8)

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: 2523027

Provision sub-type: Children's home

Registered provider: Kennet Care Limited

Registered provider address: C/O Stan Colaco & Co, Regus Business Centre, Centurion House, London Road, Staines Upon Thames TW18 4AX

Responsible individual: Dennis Austin-Visser

Registered manager: Post vacant

Inspectors

Keith Riley, Social Care Inspector

Paul Thomas, Social Care Inspector

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