

2527654

Registered provider: Above and Beyond Residential Care Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

The home provides care for up to two children who experience social or emotional difficulties or learning disabilities.

The manager registered with Ofsted in July 2021.

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

We last visited this setting on 2 and 3 September 2020 to carry out an assurance visit. The report is published on the Ofsted website.

Inspection dates: 17 and 18 August 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: 5 February 2020

Overall judgement at last inspection: requires improvement to be good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
05/02/2020	Full	Requires improvement to be good

Inspection judgements

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

Children say that they like living at the home. They talk about the staff who help them. One said, '[name of member of staff] is like family to me. She gives me hugs when I am upset.'

Care plans for children lack important and relevant information from assessments, including psychological reports. The care plans contain a lot of information. Although they are written to the children, they are not accessible for them to read. Plans do not always provide enough guidance for the staff to follow to help the children make measurable progress.

There are no plans to record how the staff support children who are moving on from the home. Children's views about moving are not recorded.

The therapist provides little information to guide the staff about how to support children's emotional needs. There are no records about what work she does to meet expectations of placing authorities. The provider's training manager has taken children out on activities and to meet their families. He has not recorded what happens during these outings. This indicates a closed culture of working that does not help the staff to support children's well-being and progress.

The staff seek advice from external health professionals. However, records show that they do not always promote a healthy lifestyle by providing a balanced diet for children. The manager and staff do not seek advice from a medical professional to ensure that they can safely administer medication after children have not taken it for some time.

Children have not attended school and college consistently. The staff did help a child to re-engage and complete GCSE coursework. The manager is working with the virtual school to identify a suitable provision for a child who recently moved to the home. Plans are in place for another child if their move back to their home area is delayed.

The staff use incentives to promote positive behaviour. They offer the children free activities regularly. Children can work towards paid activities. As paid activities are usually behaviour-dependent, children potentially miss out on new life experiences.

Children share their views individually and in children's meetings. However, the manager does not always provide feedback to them about what action she is taking in response. Independent advocates are not arranged promptly to ensure that children's voices are heard.

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

Children are kept safe by the staff team when safeguarding issues arise. The staff have a good understanding of the pull factors when children do not always come home on time. However, records do not show whether independent return home interviews are completed if children do go missing from the home.

Risk management plans do not reflect how children's additional needs might mean that they are more vulnerable. Plans do not provide enough detailed guidance to respond to risks. This hinders the ability of the staff team to protect children effectively.

There is a lack of management evaluation to identify whether the staff need to change their practice in response to incidents. The manager does not consistently monitor whether sanctions are effective. This means that the staff lack insight into whether their actions help children to become safer.

The staff refer children to external agencies if there are concerns such as alcohol or substance misuse. However, there is a limited response by the staff team if children do not engage with the support offered. Risk management plans do not include children's underlying emotional needs that may affect their physical well-being and behaviours. Therefore, they do not guide the staff in how to help children's experiences improve.

The manager seeks advice from external safeguarding agencies to inform the report of the home's location. However, the report does not fully record how the staff should minimise the identified risks to safeguard children living at the home.

The provider has removed a lock on the kitchen door. This allows children access to all areas of their home and to the rear fire exit.

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

The current manager has led the home since May 2021. With the help of her deputy, organisation in the home and management oversight have generally improved. The staff say that they feel more supported under the new leadership arrangements and that communication is better.

The staff receive supervision sessions and appraisals in accordance with the company's policy, and team meetings are held regularly. However, records lack reflection on practice. Objectives are not captured to support professional development or improve practice.

Records frequently contain jargon and judgemental language, which is not helpful to children. This does not promote a culture of child-centred practice.

Most of the staff are unqualified. There has been a delay in enrolling some of them onto a suitable residential childcare qualification. Some of the staff have not undertaken specific training to meet children's additional needs. This affects their ability to provide good-quality care.

The home's statement of purpose does not include all of the information required, including the arrangements for the therapist's supervision.

The independent person visiting the home has not consistently requested feedback from children or external stakeholders. Their report lacks evaluation of practice and a clear opinion about the quality of care being provided. The previous manager did not always act in response to recommendations to improve practice.

A lack of feedback and analysis in the review of the quality of care means that the previous manager was unable to identify areas for development that would enhance children's experiences of living in the home. The manager's report was not sent to Ofsted.

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, the 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; help each child to understand how to keep safe. (Regulation 12 (1) (2)(a)(i)(ii)) In particular, that risk management plans are updated and provide the staff with clear strategies to keep children safe, taking into account children's individual needs.	3 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— 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;	3 October 2021

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)(a)(b) (2)(a)(c)(f)(h)) Specifically, that the staff are trained to meet the specific needs of children. Managers should robustly evaluate incidents and children's progress and the quality of care delivered by the staff.	
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 arrangements are in place to— 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. (Regulation 14 (1)(a)(b) (2)(b)(ii)(iii)) In particular, that children's emerging needs, including those about their identity, are incorporated into their care plans and that transition plans are in place for children moving on from the home.	3 October 2021
The children's views, wishes and feelings standard is that children receive care from staff who— develop positive relationships with them; engage with them; and	3 October 2021

take their views, wishes and feelings into account in relation to matters affecting the children's care and welfare and their lives. In particular, the standard in paragraph (1) requires the registered person to— ensure that staff— ascertain and consider each child's views, wishes and feelings, and balance these against what they judge to be in the child's best interests when making decisions about the child's care and welfare; help each child to understand how the child's views, wishes and feelings have been taken into account and give the child reasons for decisions in relation to the child; ensure that each child— is given appropriate advocacy support. (Regulation 7 (1)(a)(b)(c) (2)(a)(i)(iii)(b)(iii)) Specifically, that children receive feedback about their views and that independent advocacy is sought for children.	
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 and develop skills to promote the child's well-being. (Regulation 10 (1)(a)(b)(c) (2)(a)(i)(iv))	3 October 2021

This relates specifically to ensuring that children's needs are captured from their relevant plans and any assessments completed to inform practice and therapeutic input. The manager should monitor children's health records to ensure that the staff are promoting healthy lifestyles for children, including a balanced diet. The manager should ensure that advice is taken from a medical professional with regard to resuming medication safely.	
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. (Regulation 44 (4)(a)(b) (5)) In particular, the report should provide a clear statement of opinion and robust evaluation of practice in the home. Where action is not taken by the manager to meet recommendations, this should be escalated to the responsible individual.	3 October 2021
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. The registered person must— supply to HMCI a copy of the quality of care review report within 28 days of the date on which the quality of care review is completed;	3 October 2021

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 (2)(a)(b)(c) (4)(a) (5))	
The registered person must ensure that all employees— undertake appropriate continuing professional development; receive practice-related supervision by a person with appropriate experience; and have their performance and fitness to perform their roles appraised at least once every year. (Regulation 33 (4)(a)(b)(c)) Specifically, supervision and appraisal should be reflective and provide clear objectives for professional development.	3 October 2021

Recommendations

- The registered provider should ensure that records reflect whether children are offered independent return home interviews if they go missing from the home. Records should also capture any information from interviews to assess risks. ('Guide to the children's homes regulations including the quality standards', page 45, paragraph 9.30)
- The registered provider should ensure that the review of the location of the home identifies how any risks are to be managed to safeguard children living there. ('Guide to the children's homes regulations including the quality standards', page 64, paragraph 15.1)
- The registered provider should ensure that the home's statement of purpose includes all information required under Schedule 1, including arrangements for the supervision of therapists. ('Guide to the children's homes regulations including the quality standards', page 14, paragraph 3.5)
- The registered provider should ensure that records do not contain judgemental and unhelpful language about children. ('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: 2527654

Provision sub-type: Children's home

Registered provider: Above and Beyond Residential Care Limited

Registered provider address: Suite 14 Foundry House, Waterside Lane, Widnes
WA8 8GT

Responsible individual: Paul Clarke

Registered manager: Rachel Hughes

Inspectors

Karen Willson, Social Care Inspector
Carly Quinn, Social Care Inspector

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