

2527654

Registered provider: Hapin Care Limited

Monitoring visit

Inspected under the social care common inspection framework

Information about this children's home

This privately owned home provides care for up to two children who experience social and emotional difficulties and/or learning disabilities.

The provider recently changed its company name from Above and Beyond Residential Care Limited to Hapin Care Limited.

Inspection date: 28 February 2022

This monitoring visit

Serious and widespread shortfalls were identified at this home during an interim inspection on 19 and 24 January 2022. As a result, compliance notices were issued under regulations 12, the help and protection standard; 13, the leadership and management standard; and 10, the health and well-being standard.

On 1 March 2022, a monitoring visit was undertaken to assess the actions taken by the provider to address the compliance notices. A case review was held on 7 March 2022 and it was concluded that the compliance notices under regulations 12 and 13 had not been met.

Since the last inspection, the manager has served notice on a child's placement. This was due to staff not being able to safeguard the children and prevent them from causing harm to each other. Staff's ineffective safeguarding and behaviour management practices are hindering children's stability, as well as their positive experiences of living at and moving on from the home.

Some risk assessments do not provide clear strategies or guidance for staff to follow, for example how to respond when children are under the influence of a substance.

The continued lack of clear and effective guidance in risk assessments undermines consistent safeguarding practice.

Staff do not consistently follow children's risk assessments. For example, children's risk assessments clearly state that all aerosols should be locked away to prevent children from misusing substances. During the visit, inspectors found three aerosols that had not been locked away. One was found in a child's bedroom. Staff's failure to follow risk assessments is compromising children's welfare and safety.

The manager has forged links with external agencies who provide support and guidance to children, such as the youth offending service and knife crime projects. These services help children to understand risk and their own vulnerabilities. However, staff are still not undertaking any meaningful direct work with children. This is largely due to staff not having the knowledge and skills to undertake purposeful direct work and build positive relationships with children. Consequently, staff are not supporting children to take responsibility for their behaviour and understand how their actions can negatively impact on themselves and others.

Incident reports continue to omit important information. In particular, details of who the incident was reported to and when. This makes it difficult to establish if all relevant stakeholders are being informed of serious incidents in a timely way.

Some areas of safeguarding practice have improved. When children are out in the community, robust safety plans ensure that staff know where they are and check that they are safe. Although children find staff's frequent welfare checks intrusive, the manager has assessed this to be necessary due to the high level of risk presented to children when out in the community, such as gangs, substance misuse and knife crime.

The manager's monitoring of the home is still not robust. For example, she does not evaluate all serious incidents that occur in the home. As a result, staff's weak practice is left unchecked. Shortfalls in the manager's monitoring of the home are compromising children's welfare and safety and hindering the home's improvement journey.

Some areas of children's health and well-being are improving. All children are now registered with a dentist. Children's engagement with health services has increased. For example, children have attended optician and hospital appointments when necessary. When children do not attend, staff ensure that they obtain information from relevant health professionals to help them promote the children's health needs competently.

The company's therapeutic input has improved. For example, the therapist's visits to the home have increased and the children are starting to engage with her. This is enabling the therapist to assess children's emotional needs and determine the type of support that they need. The notice issued under regulation 10, the health and

well-being standard, has been met. However, children's health plans continue to be an area for development. They fail to identify all health needs and how they will be met, for example how children will be supported around sexual health and smoking. Furthermore, the strategies identified by the company therapist to promote children's emotional well-being are not reflected in the children's plans.

Recent inspection history

Inspection date	Inspection type	Inspection judgement
24/01/2022	Interim	Declined in effectiveness
17/08/2021	Full	Requires improvement to be good
05/02/2020	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
The children's views, wishes and feelings standard is that children receive care from staff who— 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— 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. (Regulation 7 (1)(c) (2)(a)(iii)) This relates to ensuring that the children are informed of the outcomes of their complaints and the decisions made about their care. This requirement was made at the last inspection and is restated.	17 April 2022
The education standard is that children make measurable progress towards achieving their educational potential and are helped to do so. In particular, the standard in paragraph (1) requires the registered person to ensure— that staff— help each child to understand the importance and value of education, learning, training and employment; promote opportunities for each child to learn informally;	17 April 2022

help a child who is excluded from school, or who is of compulsory school age but not attending school, to access educational and training support throughout the period of exclusion or non-attendance and to return to school as soon as possible; help each child to attend education or training in accordance with the expectations in the child's relevant plans. (Regulation 8 (1) (2)(a)(iv)(v)(viii)(x)) This relates to ensuring that staff encourage children to attend school and engage with their education through regular and meaningful direct work. When children refuse to attend school or engage in home tuition, staff should provide them with structured educational activities.	
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; take part in activities, and attend any appointments, for the purpose of meeting the child's health and well-being needs; and that each child is registered as a patient with a general medical practitioner and a registered dental practitioner; and 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 (1)(a)(b)(c) (2)(a)(i)(iii)(b)(c)) This relates to ensuring that the home's care plans thoroughly detail the children's health needs and how staff	17 April 2022

intend to meet them. Each child must have access to a dentist. Therapy should be provided in line with the children's care plans. Children should be supported to overcome any barriers that prevent them from attending health appointments. The children's healthy eating plans should be monitored. This requirement was made at the last inspection and is restated.	
The positive relationships standard is that children are helped to develop, and to benefit from, relationships based on— mutual respect and trust; an understanding about acceptable behaviour; and positive responses to other children and adults. In particular, the standard in paragraph (1) requires the registered person to ensure— that staff— help each child to develop and practise skills to resolve conflicts positively and without harm to anyone; strive to gain each child's respect and trust; de-escalate confrontations with or between children, or potentially violent behaviour by children. (Regulation 11 (1)(a)(b)(c) (2)(a)(iv)(viii)(xi)) This relates to ensuring that staff develop and sustain positive relationships with children. These relationships should help staff to engage with children successfully, teaching them to manage their emotions and conflicts without causing harm to themselves and others.	17 April 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—	17 April 2022

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

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.

(Regulation 12 (1) (2)(a)(i)(ii)(iii)(iv)(v)(vi)(b))

This relates to ensuring that staff thoroughly assess whether children are safe in the community. Robust strategies should be in place when they are not. Staff should ensure that children are safe when they suspect that they have misused substances. Staff should do regular and meaningful direct work with children about risks, such as gangs. Children's risk assessments should be regularly updated to reflect new concerns and serious incidents.

This requirement was made at the last inspection and is restated.

*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—

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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; 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)) This relates to weaknesses in the manager's monitoring and evaluation of serious incidents, children's progress and the quality of the home's records. 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 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 each child's relevant plans are followed; that, subject to regulation 22 (contact and access to communications), contact between each child and the child's parents, relatives and friends, is promoted in accordance with the child's relevant plans. (Regulation 14 (1)(a) (2)(a)(c)(d)) This relates to ensuring that rigorous impact assessments are undertaken before children move into the home, that	17 April 2022

children's care plans are kept up to date and that the registered person obtains the local authority's plans for promoting the children's contact with friends and family. This requirement was made at the last inspection and is restated.	
The registered person must compile in relation to the children's home a statement ("the statement of purpose") which covers the matters listed in Schedule 1. (Regulation 16 (1)) This relates to ensuring that the information provided in the statement of purpose accurately reflects the staff's qualifications and includes details of the company therapist's supervision arrangements.	17 April 2022
The registered person must notify HMCI and each other relevant person without delay if — an incident requiring police involvement occurs in relation to a child which the registered person considers to be serious. (Regulation 40 (4)(b)) This relates to ensuring that Ofsted and the children's social workers are informed of all serious concerns in relation to the children.	17 April 2022
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. 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. (Regulation 45 (1) (4)(a)) This requirement was made at the last inspection and is restated.	17 April 2022

*These requirements are subject to a compliance notice.

Recommendation

- The registered person should ensure that staff's supervision records, including for the manager, are detailed and reflect the objectives set for professional

development. ('Guide to the Children's Homes Regulations, including the quality standards', page 61, paragraph 13.3)

Information about this inspection

The purpose of this visit was to monitor the action taken and the progress made by the children's home since its last Ofsted inspection.

This inspection was carried out under the Care Standards Act 2000.

Children's home details

Unique reference number: 2527654

Provision sub-type: Children's home

Registered provider: Hapin Care Limited

Registered provider address: Suite 14 Foundry House, Waterside Lane, Widnes
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Responsible individual: Nicola Reilly

Registered manager: Rachel Hughes

Inspectors

Marina Tully, Social Care Inspector
Genevieve O'Reilly, Social Care Inspector

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