

2529667

Registered provider: Devon County Council

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This children's home provides short break stays for children who have disabilities. It is owned and operated by the local authority.

Inspection dates: 12 June 2019

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 widespread failures that mean children and young people are not protected or their welfare is not promoted or safeguarded, and the care and experiences of children and young people are poor.

Date of last inspection: this is the first inspection since this home was re-registered in March 2019.

Overall judgement at last inspection: not applicable

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
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This is the first inspection since the home was re-registered.

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
10. The health and well-being standard (1) The health and well-being standard is that— (a) the health and well-being needs of children are met; (b) children receive advice, services and support in relation to their health and well-being; and (c) children are helped to lead healthy lifestyles. (2) In particular, the standard in paragraph (1) requires the registered person to ensure— (a) that staff help each child to— (i) achieve the health and well-being outcomes that are recorded in the child's relevant plans; (ii) 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; (c) that each child has access to such dental, medical, nursing, psychiatric and psychological advice, treatment and other services as the child may require.	30/07/2019
*12: The protection of children standard (1) The protection of children standard is that children are protected from harm and enabled to keep themselves safe. (2) In particular, the standard in paragraph (1) requires the registered person to ensure— (a) that staff— (i) 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; (iii) have the skills to identify and act upon signs that a child is at risk of harm; (v) understand the roles and responsibilities in relation to protecting children that are assigned to them by the registered person; (vi) take effective action whenever there is a serious concern	10/07/2019

about a child's welfare; and (vii) are familiar with, and act in accordance with, the home's child protection policies; (b) 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; (c) that the premises used for the purposes of the home are located so that children are effectively safeguarded; (e) that the effectiveness of the home's child protection policies is monitored regularly. In particular, make sure that effective action is taken when children present with worrying injuries and ensure that child protection policy and processes are adhered to.	
13: The leadership and management standard (1) The leadership and management standard is that the registered person enables, inspires and leads a culture in relation to the children's home that— (a) helps children aspire to fulfil their potential; and (b) promotes their welfare. (2) In particular, the standard in paragraph (1) requires the registered person to— (a) 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; (b) ensure that staff work as a team where appropriate; (c) ensure that staff have the experience, qualifications and skills to meet the needs of each child; (d) ensure that the home has sufficient staff to provide care for each child; (e) ensure that the home's workforce provides continuity of care to each child; (f) 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; (g) demonstrate that practice in the home is informed and improved by taking into account and acting on— (i) research and developments in relation to the ways in which the needs of children are best met; and (ii) feedback on the experiences of children, including complaints received; and (h) use monitoring and review systems to make continuous improvements in the quality of care provided in the home.	10/07/2019
14: The care planning standard (1) The care planning standard is that children—	30/07/2019

(a) receive effectively planned care in or through the children's home. (2) In particular, the standard in paragraph (1) requires the registered person to ensure— (c) that each child's relevant plans are followed.	
23: Medicines (1) The registered person must make arrangements for the handling, recording, safekeeping, safe administration and disposal of medicines received into the children's home. (2) In particular the registered person must ensure that— (a) medicines kept in the home are stored in a secure place so as to prevent any child from having unsupervised access to them; (b) 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 (c) a record is kept of the administration of medicine to each child.	10/07/2019
25: Fire precautions (1) After consultation with the fire and rescue authority, the registered person must— (c) make arrangements for persons working at the home to receive suitable training in fire prevention; and (d) ensure, by means of fire drills and practices at suitable intervals, that persons working at the home and, so far as reasonably practicable, children are aware of the procedure to be followed in case of fire.	30/07/2019
34: Policies for the protection of children (1) The registered person must prepare and implement a policy which— (a) is intended to safeguard children accommodated in the children's home from abuse or neglect; and (b) sets out the procedure to be followed in the event of an allegation of abuse or neglect. (6) The registered person must keep under review and, as necessary, revise the home's child protection policies.	10/07/2019
40: Notification of a serious event (4) The registered person must notify HMCI and each other relevant person without delay if— (a) a child is involved in or subject to, or is suspected of being involved in or subject to, sexual exploitation; (b) an incident requiring police involvement occurs in relation to a child which the registered person considers to be serious;	30/07/2019

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| <p>(c) there is an allegation of abuse against the home or a person working there;</p> <p>(d) a child protection enquiry involving a child—</p> <p>(i) is instigated; or</p> <p>(ii) concludes (in which case, the notification must include the outcome of the child protection enquiry); or</p> <p>(e) there is any other incident relating to a child which the registered person considers to be serious.</p> | |
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* These requirements are subject to a compliance notice.

Inspection judgements

Overall experiences and progress of children and young people: inadequate

The progress and experiences of children is inadequate because the home is not well led, safeguarding arrangements are weak and children are not wholly protected.

Staff are not promoting the health and wellbeing of children effectively. They do not take swift action to reassess children's medical and personal care needs when concerns are identified.

Relationships between staff and children are positive. Staff are warm, responsive and natural in their interactions with children. Staff support children to attend school. Children enjoy a variety of activities and spend time socialising together. This provides them with positive opportunities they would not otherwise experience.

The home that children live in is impressive and well thought through. Adjustments to the environment meet children's physical and sensory needs well and mean that children can access all areas of their house and garden. They enjoy joining in with activities such as gardening.

There has been a reduction in restrictive practice. This is because managers have focused on this area. The recent reinstatement of a 'good practice committee' has resulted in a notable reduction of picture and sound monitoring.

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

Too often, bruising and marks found on children are not managed in accordance with child protection procedures. There is a failure to act to prevent the persistent re-occurrence of marks on children. As a result, children are not protected from harm.

Risk assessments do not provide staff with clear direction regarding children's care. Documents are not updated to reflect known concerns or when incidents occur. For example, staff were unaware of the protective equipment they should use for one child.

This resulted in an avoidable injury.

The arrangements for medication are not safe because auditing of medication records is not robust. As a result, it is difficult to understand what medication is being held in the home. In addition, on one occasion, staff shared the wrong information about a child's prescription with a school.

Fire evacuation arrangements are not adequate. Not all children and staff have completed a fire evacuation drill as required. Records are confusing and staff lack creativity in ensuring that all of the children are involved in fire drills.

The effectiveness of leaders and managers: inadequate

Leaders have not ensured that children's healthcare needs and safeguarding matters are always met effectively. Leadership in these specific areas is weak.

Managers oversight about injuries and marks on children is poor. Records about these marks are kept. However, these records are not used to best effect because leaders and managers fail to identify re-occurring marks and do not implement protective strategies to prevent them from happening again.

The registered manager has been absent during recent weeks. The deputy manager is currently taking on responsibility for the day-to-day running of the home. During this inspection, the deputy manager demonstrated motivation, determination and a willingness to learn.

Staff stated that they feel supported and valued. Managers provide staff with regular supervision and team meetings. However, attendance at team meetings is poor. This obstructs clear communication and discussion about important issues and ensuing progress. Extensive training is available for staff. This includes safeguarding training. The effectiveness of this training is not evident in practice.

Information about this inspection

Inspectors have looked closely at the experiences and progress of children and young people. Inspectors considered the quality of work and the differences made to the lives of children and young people. They watched how professional staff work with children and young people and each other and discussed the effectiveness of help and care provided. Wherever possible, they talked to children and young people and their families. In addition, the inspectors have tried to understand what the children's home knows about how well it is performing, how well it is doing and what difference it is making for the children and young people whom it is trying to help, protect and look after.

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: 2529667

Provision sub-type: Children's home

Registered provider address: Devon County Council, Chief Executive's Directorate, County Hall, Topsham Road, Exeter, Devon EX2 4QD

Responsible individual: Glenn Lobb

Registered manager: Andrew Levett

Inspectors

Tracey Ledder, social care inspector
Michelle Oxley, regulatory inspection manager

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