2580303

Registered provider: Reflexion Care Group Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

The home is owned by a private company and is registered to provide care for two children who have experienced adverse childhood experiences that have led to associated trauma and presenting complex behaviours.

The home registered with Ofsted in April 2020. The registered manager is on maternity leave. An interim manager has been appointed and is applying to register. She started work at the home three weeks before the inspection. The interim manager has a level 5 qualification in leadership and management. One child lives in the home.

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

Inspection dates: 7 to 8 July 2021

Overall experiences and progress of children and young people, taking into account	**requires improvement to be good**
How well children and young people are helped and protected	requires improvement to be good
The effectiveness of leaders and managers	requires improvement to be good

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: not applicable

Overall judgement at last inspection: not applicable

Enforcement action since last inspection: not applicable

Recent inspection history

Not previously inspected

Inspection judgements

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

Unclear care planning and risk assessments mean that the overall experience and progress for the child living at the home is not yet good. For example, managers and staff recognise that there are concerns for the child around self-harm. However, planning to support the child with this issue and management of this risk is not robust. As a result, the child's health and welfare is not being fully promoted.

The home environment is generally well maintained and provides a homely place for the child to live. The communal areas are inviting and the child has input into the decoration of the home. An unused outbuilding is being converted into a cinema room and the child is looking forward to inviting friends to use it with her. However, an unused bedroom has suffered damage from a leak during recent bad weather. This was not picked up during routine checks. The manager took immediate action to have it repaired.

Staff support the child to maintain those relationships which matter to her. For example, staff enable her to keep in touch with a former foster carer who she enjoys going to stay with. Staff sensitively manage issues relating to family relationships when these are difficult.

Sensitive engagement with the child around her wishes, feelings and the future has helped her to overcome unsettled periods. This demonstrates that staff understand the importance of listening and responding to the child's voice.

The inspector observed warm and friendly relationships between the child and staff. Staff have targeted discussions with the child and is encourage her to achieve positive outcomes.

The child is being supported to undertake voluntary work at nearby stables. This is a positive experience for her and may lead to further opportunities for employment and experience. The child has made good progress with her education. Staff supported her through final year assessments following disruption to exams because of the COVID-19 pandemic. Staff have helped the child enrol onto a college course for September.

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

The child displays behaviours which challenge staff, including self-harm. When self-harm incidents have occurred, staff have lacked the professional curiosity to assess and inform future risk management plans. As a result, the child has had access to objects which she may use to injure herself with. For example, staff told the inspector that the child should not have access to razors. However, information in

the child's plans does not make this clear. Furthermore, during a tour of the home, the inspector noticed a razor in the child's bathroom. Staff were not aware that the child had this. The manager took immediate action to ensure that there were no other razors for the child to access and plans to issue further guidance for staff.

Staff have received specialised training to help them to know how to respond to incidents of self-harm. They were able to explain to the inspector how to use this training, should the need arise. When incidents have happened, they have accessed medical treatment for the child and managers have increased staffing levels. This has helped to keep the child safe overall.

Staff receive some good training to raise their knowledge and awareness of how best to safeguard children in response to different risks. They use this learning in their day-to-day practice. This helps promote the child's safety. For example, staff use planned and ad hoc key-work sessions to talk through topics that are relevant to the child's care and safety. Staff discuss with the child the risks associated with the internet and how she can stay safe online. They have talked through issues about sexual orientation, as well as plans for the future. These discussions reiterate key messages to the child to help her keep safe, feel safe and be able to adapt to changes.

Leaders and managers have not ensured fire safety precautions in the home are fully assessed and adhered to. For example, the inspector noted that fire extinguishers are being kept in a locked spare bedroom. This had not been recorded on the fire risk assessment and no signage was evident to direct staff and the child to where they were in the event of an emergency. Additionally, weekly tests of the carbon monoxide alarm system had not been undertaken and the inspector found the alarm to be faulty. The manager took immediate action to rectify this during the inspection. However, this highlights shortfalls in monitoring at the home.

Managers have investigated, responded and reported an allegation made by the child. Safeguarding procedures were appropriately followed. The child was supported well throughout this process. This demonstrates that managers take appropriate action when children raise complaints.

Managers have safely recruited additional staff. Staff undergo thorough checks before they are recruited. This helps to ensure that staff are safe to work with vulnerable children.

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

Increased staff turnover and recent changes in leadership and management mean the child has not always had a consistent team caring for her. Three staff have left and two new staff have been recruited. The new interim manager has been in post for three weeks and is getting to know the strengths and needs of the service.

A lack of consistent oversight of the management of key issues, such as self-harm, means that not enough is being done to support the child's health and progress. This does not fully promote the child's welfare in line with the aims and objectives set out in the home's statement of purpose.

Leaders and managers have not ensured that controlled medication is safely stored in the medication cabinet. Although it was locked away, managers were unclear about where it was being kept. These arrangements do not give confidence in the safe handling and storage of medication, despite the child previously gaining access to medication. The manager took immediate action to address this concern during the inspection. She stored the medication in the medication cabinet and ensured that staff had guidance about maintaining this arrangement.

The manager uses some monitoring to oversee the service and to review the child's care and progress. However, there is no clear system in place to undertake this routinely. This is a missed opportunity to review the day-to-day quality of care and ensure agreed outcomes are being met.

Monitoring by the independent visitor also lacks rigour. The visitor has not identified shortfalls identified during this inspection, including concerns around fire safety and medication. This means that independent scrutiny is not helping managers and staff to achieve and maintain good-quality care.

Relationships between the manager and external professionals are generally positive. Professionals mostly speak well of the good communication and information-sharing between staff, the manager and themselves. However, a young offending worker said that the staff do not always prioritise the child's attendance at meetings and this delays the child completing important court-ordered work.

The interim manager has, in a short time, developed a relatively good understanding of the child's needs, progress and potential. She is identifying priority actions and is in the process of taking these forward.

Staff benefit from regular team meetings and supervision. Supervision records are reflective, detailed and support staff to progress. Children and staff speak positively about the support they receive from the manager.

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— 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; have the skills to identify and act upon signs that a child is at risk of harm; take effective action whenever there is a serious concern about a child's welfare; 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)(iii)(vi)(b)) This is in relation to ensuring that risk assessments relating to self-harming behaviour are clear and staff understand their responsibilities to check that children do not have access to objects that they may use to hurt themselves.	10 August 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.	30 September 2021

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; 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)(h)) This specifically refers to the objectives detailed in the home's statement of purpose regarding health, well-being and safety and ensuring these are consistently delivered, and ensuring a system for reviewing the quality of care is in use and effective.	
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. (Regulation 23 (1) (2)(a)) This specifically relates to the safe storage of controlled medicines and that this system is maintained.	10 August 2021
If the Regulatory Reform (Fire Safety) Order 2005(a) applies to the home— the registered person must ensure that the requirements of that Order and any regulations made under it, except for article 23 (duties of employees), are complied with in respect of the home. (Regulation 25 (2)(b)) This is in relation to ensuring the fire risk assessment, including location and access to firefighting equipment, is fully implemented and that required checks on alarm systems are undertaken.	9 July 2021
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—	30 September 2021

children are effectively safeguarded; and the conduct of the home promotes children's well-being. (Regulation 44 (4)(a)(b))	

Recommendation

- The registered person should ensure that children's homes are nurturing and supportive environments that meet the needs of their children. In most cases, they will be homely, domestic environments. Children's homes must comply with relevant health and safety legislations. This relates to ensuring that regular checks of the home are undertaken to note damage and repairs needed. ('Guide to the children's homes regulations including the quality standards', page 15, paragraph 3.9)

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: 2580303

Provision sub-type: Children's home

Registered provider: Reflexion Care Group Limited

Registered provider address: Reflexion Care Group Ltd, Black Birches, Hadnall, Shrewsbury, Shropshire SY4 3DH

Responsible individual: Gregory Watson

Registered manager: Jeanna Trachonitis

Inspector

James Tallis, Social Care Inspector

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