

2611667

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 is run by a private provider. It is registered for up to three children who may experience social and emotional difficulties.

The home and the manager registered in December 2020.

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: 3 to 4 August 2021

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

Date of last inspection: Not applicable

Overall judgement at last inspection: Not applicable

Enforcement action since last inspection: Not applicable

Recent inspection history

Inspection date	Inspection type	Inspection judgement
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Not previously inspected		
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Inspection judgements

Overall experiences and progress of children and young people: inadequate

Poor pre-admission care planning means that children are admitted to the home whose individual needs cannot be met safely. The home's location is not considered as part of the impact risk assessment. Leaders and managers fail to ensure that children are suitably placed and do not present a risk to one another.

Children's relevant plans from their placing authorities are missing or are significantly out of date. There is no evidence of challenge or escalation to ensure that current plans are in place. The manager and staff cannot demonstrate how they deliver children's care in accordance with local authorities' expectations.

Care plans for children provide insufficient direction for the staff to support children's progress and are not updated to reflect children's changing needs. Furthermore, records of planned transitions for children moving from the home lack detail about how the staff should work with children and their new care providers to facilitate this significant change.

Children's health is not promoted. The staff fail to support children to overcome barriers to attending health appointments when they feel unwell. Record keeping is also poor and the manager could not confirm whether a child met with a specialist nurse for children looked after, as the child had requested. The staff have not sought medical advice when children refuse to take prescribed medication for several days, to ensure that it is safe to administer. Staff also fail to seek medical advice about any contraindications with prescribed medication when children return home under the influence of alcohol or illegal substances.

Records do not indicate what information is shared with the staff team so that they can support children effectively after sessions with the counsellor. This indicates a closed culture of working within the company that does not support the staff team's understanding of children's needs and progress.

Children educational progress is poor. One child accessed a tutor for a short period, due to issues in accessing online education, but has missed most of the school year. Another child has refused to engage in education since March. The staff do not evidence how they help children to overcome barriers to attendance and learning. Children's personal education plans were not located in their files. This means that the staff lack understanding of children's educational goals and how to support children to achieve them.

A child spoke of being treated differently from other children and of being unhappy at the home. The child said that the staff are aware of this but do not put in the same effort compared to previous homes where the child has lived. This indicates that the child does not feel valued or cared for.

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

Leaders and staff lack the skills, knowledge and experience to keep children safe. They do not respond to safeguarding incidents or implement strategies to keep children who live in the home safe.

On several occasions, children have been known to return to the home under the influence of illegal substances and alcohol. Staff have not undertaken any welfare checks, monitored children throughout the night or sought medical advice. Furthermore, when staff have been aware that children are providing each other with illegal substances, no action has been taken to intervene or protect children from potential harm.

Staff have conducted room searches and identified illegal substances and drug paraphernalia in children's bedrooms. Work completed with children about the risks of using illegal substances is ineffective. Only one child is engaging with an external specialist support service.

Door alarms are used on children's bedrooms. Although consent is in place from social workers, the use of alarms is not assessed for individual children to justify their use to monitor children's movements.

Documents in the home do not record all significant safeguarding incidents that have occurred. Furthermore, there is limited oversight by leaders and managers to demonstrate that correct safeguarding procedures have been followed in a timely way. For example, staff failed to act without delay when a child had taken an overdose. Staff also failed to respond appropriately and swiftly when children made allegations about staff practices in the home. For example, when staff members supplied children with cannabis and alcohol. Delays in staff reporting safeguarding concerns are not considered as disciplinary matters in supervision, and there is no record of the additional information being shared with external safeguarding agencies.

There have been incidents of children harming each other in the home. On one occasion, a child threw a cup of hot coffee over another child. Medical attention was not offered or pursued for the victim. On another occasion, children became involved in a physical altercation and staff intervened to separate the children. One child displayed self-injurious behaviours following the incident. Risk assessments were not updated despite the significance of the incidents. Staff failed to complete direct work with children to address their behaviours or to complete restorative work.

When physical intervention has been required, paperwork is not completed in line with regulations. Debriefs are not undertaken with the children or staff. Furthermore, when the registered manager has been involved in an incident, he has signed the record as safe and appropriate. There has been no independent oversight of the management or appropriateness of the holds used.

The registered manager allowed a child to go away in a caravan for a holiday with the director's husband without understanding if any safer recruitment checks had been conducted. The registered manager did not provide any information to indicate that the holiday had been authorised by the placing authority.

Risk assessments and management strategies are ineffective and are not updated to reflect children's current risks. Plans for children who go missing from home do not include the names and addresses of known individuals that they visit, and the staff do not visit known addresses. Risk management plans are not in place when there are indicators of children being at risk of exploitation.

Staff have not had training in exploitation despite it being identified that the children living in the home are at risk of criminal and sexual exploitation. They lack awareness and curiosity to identify whether children are selling possessions, or when they returned in new clothes. No effective action is taken when children inform staff that they have significant drugs debts. Consequently, children are being placed at potential risk of harm.

Recording in the home is poor and lacks accountability. Management oversight and evaluation are limited about the effectiveness of action taken, for example when children receive sanctions. Children say that sanctions are not implemented after serious incidents such as assaults. This indicates that children do not feel that the staff take appropriate action to keep them safe from harm.

The effectiveness of leaders and managers: inadequate

The registered provider has failed to provide the registered manager with appropriate support and guidance to adequately manage and follow up safeguarding incidents. This has affected his ability to lead and manage the staff team effectively and develop a culture in the home that keeps children safe and promotes their welfare.

The management team is not leading and managing the home in a manner that is consistent with the aims outlined in the statement of purpose. The failure to address the risk-taking behaviours and safeguarding concerns serves to exacerbate the cycle of risk. Therefore, outcomes for children are compromised.

Training records do not show that individuals delivering supervision to staff have completed relevant training to do so. Leaders do not demonstrate that they have the skills to provide sufficient oversight of practice to ensure that the staff deliver consistent, good-quality care that promotes positive experiences and progress for children and that keeps them safe.

Two children should be supported on a one-to-one basis, in accordance with the provider's contractual obligation with placing local authorities. The rota showed that on some dates there were insufficient staff to meet these expectations. Insufficient

staff means that on at least one occasion a child was taken in the car to look for another child who was missing from the home.

Children receive mentoring from the provider's training manager and therapeutic support from the company's counsellor. There are no details about either of these individuals, or their supervision arrangements, in the statement of purpose dated February 2021.

The registered manager has not ensured that children's plans are developed, or that assurance processes are implemented to monitor and review children's progress. This means that the registered manager fails to understand how the quality of care in the home supports children's experiences in order to identify improvement.

Management oversight and evaluation are poor. The responsible individual's audit of children's records is not clearly documented. Despite his frequent presence in the home, the responsible individual has failed to identify the improvement that is required in care practices and management oversight in the home.

Internal and external monitoring and review of care in the home is not robust. Reports lack consultation with children and other stakeholders. There is no clear opinion from the independent person as to whether children are safeguarded effectively or if their well-being is promoted. The current systems do not identify shortfalls or identify actions required to improve the quality of care delivered in the home.

Ofsted is of the view that the registered manager and staff are unable to reduce risks to children and an emergency suspension notice was issued on the provider. Three compliance notices have been served under regulation 12, the protection of children standard, under regulation 13, the leadership and management standard, and regulation 14, the care planning standard. These notices will be monitored.

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; 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 are familiar with, and act in accordance with, the home's child protection policies; 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)(vii)(b)) In particular, the registered provider must ensure that all staff are familiar with and have the skills to develop and	12 September 2021

review robust risk assessments and management plans to keep children safe. Plans must demonstrate how the staff will implement strategies to keep children safe and help children to understand how to keep safe. The registered provider must ensure that all staff have the skills to manage relationships between children and to intervene to prevent them from harming each other. They must ensure that all staff understand their roles and responsibilities in safeguarding children and take effective action to notify external safeguarding agencies immediately if concerns are identified. The registered provider must ensure that effective oversight and evaluation systems are in place after any incidents take place to inform practice.	
*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 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. (Regulation 14 (1)(a)(b)(2)(a)) Specifically, the registered provider must ensure that a robust impact risk assessment process is in place to consider the suitability of any new admission and that the process includes consideration of the location of the premises as part of the impact risk assessment. In doing so, the registered provider must ensure that the needs of existing and new children are fully considered.	12 September 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.	12 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;

ensure that staff work as a team where appropriate;

ensure that staff have the experience, qualifications and skills to meet the needs of each child;

ensure that the home has sufficient staff to provide care for each child;

ensure that the home's workforce provides continuity of care to 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)(b)(c)(d)(e)(f)(h))

In particular, the registered provider must develop children's individual plans and assurance methods to ensure that the registered person understands their role in leading a culture in relation to the children's home, that helps children aspire to their full potential and is consistent with the statement of purpose. They must develop a staff team that has the necessary skills, qualifications, and skills to meet the needs of each child consistently in line with the statement of purpose. The registered provider must ensure internal and external monitoring systems are in place to identify the impact of how the quality of care provided supports children's progress and identifies continuous improvement to care children receive. All persons working in the home should be clear in the statement of purpose and have been recruited in line with safer recruitment processes. The registered person must ensure that any learning, development and outcomes of work undertaken by the company's therapist and mentor is shared with the staff team.

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 achieve the child's education and training targets, as recorded in the child's relevant plans; understand the barriers to learning that each child may face and take appropriate action to help the child to overcome any such barriers; help each child to understand the importance and value of education, learning, training and employment; maintain regular contact with each child's education and training provider, including engaging with the provider and the placing authority to support the child's education and training and to maximise the child's achievement; help each child to attend education or training in accordance with the expectations in the child's relevant plans; (Regulation 8 (1)(2)(a)(i)(iii)(iv)(vi)(x)) In particular, the registered provider must ensure that the staff actively support children to attend and engage with education, and help them to overcome barriers to learn. They must ensure that children's personal education plans are obtained and challenge appropriately when children's educational needs are not met.	01 October 2021
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—	01 October 2021

that staff help each child to— achieve the health and well-being outcomes that are recorded in the child's relevant plans; 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; take part in activities, and attend any appointments, for the purpose of meeting the child's health and well-being needs; and understand and develop skills to promote the child's well-being. (Regulation 10 (1)(a)(b)(c)(2)(a)(i)(ii)(iii)(iv)) Specifically, the registered provider must ensure that children are helped to overcome barriers to accessing health provision and specialist services and that requests made by children are acted upon.	
In meeting the quality standards, the registered person must, and must ensure that staff— if the registered person considers, or staff consider, a placing authority's or a relevant person's performance or response to be inadequate in relation to their role, challenge the placing authority or the relevant person to seek to ensure that each child's needs are met in accordance with the child's relevant plans. (Regulation 5 (c)) In particular, the registered provider must ensure that any challenge is escalated when children's relevant plans and minutes from meetings are not provided.	01 October 2021
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.	01 October 2021

In particular, the standard in paragraph (1) requires the registered person to ensure—

that staff—

meet each child's behavioural and emotional needs, as set out in the child's relevant plans;

help each child to develop socially aware behaviour;

encourage each child to take responsibility for the child's behaviour, in accordance with the child's age and understanding;

help each child to develop and practise skills to resolve conflicts positively and without harm to anyone;

help each child to understand, in a way that is appropriate according to the child's age and understanding, personal, sexual and social relationships, and how those relationships can be supportive or harmful;

help each child to develop the understanding and skills to recognise or withdraw from a damaging, exploitative or harmful relationship;

strive to gain each child's respect and trust;

understand how children's previous experiences and present emotions can be communicated through behaviour and have the competence and skills to interpret these and develop positive relationships with children;

de-escalate confrontations with or between children, or potentially violent behaviour by children;

that each child is encouraged to build and maintain positive relationships with others.

(Regulation 11

(1)(a)(b)(c)(2)(a)(i)(ii)(iii)(iv)(v)(vi)(vii)(ix)(xi)(xii)(b))

In particular, the registered provider must ensure that the staff build positive relationships with children so that they feel they are treated equally. The staff should ensure that any conflicts between children are managed and addressed so that they understand and take responsibility for their

actions. Children should be supported to recognise harmful relationships.	
The registered person may only use devices for the monitoring or surveillance of children if— the monitoring or surveillance is for the purpose of safeguarding and promoting the welfare of the child concerned, or other children; the monitoring or surveillance is no more intrusive than necessary, having regard to the child's need for privacy. (Regulation 24 (a)(d)) Specifically, the registered provider must ensure that risk assessments for individual children are completed to demonstrate why door alarms are required to safeguard children.	01 October 2021
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— 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 a record is kept of the administration of medicine to each child. (Regulation 23 (1)(2)(b)(c)) In particular, the registered provider must ensure that the staff seek professional medical advice regarding the administration of medicines after a child refuses to take it for a period of time or following incidents when its administration may be contraindicated.	01 October 2021
The registered person must ensure that— within 24 hours of the use of a measure of control, discipline or restraint in relation to a child in the home, a record is made which includes— the name of the child;	01 October 2021

details of the child's behaviour leading to the use of the measure; the date, time and location of the use of the measure; a description of the measure and its duration; details of any methods used or steps taken to avoid the need to use the measure; the name of the person who used the measure ("the user"), and of any other person present when the measure was used; the effectiveness and any consequences of the use of the measure; and a description of any injury to the child or any other person, and any medical treatment administered, as a result of the measure; within 48 hours of the use of the measure, the registered person, or a person who is authorised by the registered person to do so ("the authorised person")— has spoken to the user about the measure; and has signed the record to confirm it is accurate; and within 5 days of the use of the measure, the registered person or the authorised person adds to the record confirmation that they have spoken to the child about the measure. (Regulation 35 (3)(a)(i)(ii)(iii)(iv)(v)(vi)(vii)(viii)(b))(i)(ii)(c))	
When the independent person is carrying out a visit, the registered person must help the independent person— if they consent, to interview in private such of the children, their parents, relatives and persons working at the home as the independent person requires; 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—	01 October 2021

children are effectively safeguarded; and the conduct of the home promotes children's well-being. (Regulation 44 (2)(a)(4)(a)(b)) In particular, the independent person must consult with stakeholders, including children living in the home. There should be a clear opinion in the report about the safeguarding of children and whether their well-being is promoted.	
The registered person must notify HMCI and each other relevant person without delay if— a child is involved in or subject to, or is suspected of being involved in or subject to, sexual exploitation; there is an allegation of abuse against the home or a person working there (Regulation 40 (4)(a)(c)) Specifically, the registered provider must ensure there is no delay in notifying safeguarding agencies, including any subsequent information that is reported.	01 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— (a)the quality of care provided for children; (b)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;	01 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)) In particular, the review must focus on the quality of care provided and include the views of stakeholders. The report should be sent to Ofsted in a timely manner.	
A person may only manage a children's home if— having regard to the size of the home, its statement of purpose, and the number and needs (including any needs arising from any disability) of the children— the person has the appropriate experience, qualification and skills to manage the home effectively and lead the care of children. (Regulation 28(1)(b)(i))	01 October 2021
A responsible individual must— have the capacity, experience and skills to supervise the management of the home, or the homes, in respect of which the responsible individual is nominated. (Regulation 26 (7)(b))	01 October 2021
The registered person must operate a disciplinary procedure which, in particular— provides that the failure on the part of an employee to report an incident of abuse, or suspected abuse, whether past or present, in relation to a child to the appropriate person is a ground on which disciplinary proceedings may be instituted. The registered person must ensure that all employees—receive practice-related supervision by a person with appropriate experience. (Regulation 33 (2)(b)(4)(b))	01 October 2021

* These requirements are subject to a compliance notice.

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: 2611667

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: Philip Slavin

Inspectors

Karen Willson, Social Care Inspector

Carly Quinn, Social Care Inspector

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