

2772598

Registered provider: My Life - My Choice Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home provides care for up to four children with physical disabilities, learning disabilities and/or sensory impairment. At the time of the inspection, two children were living in the home.

The home registered with Ofsted in April 2024. This is the home's first inspection. The manager is registered with Ofsted. She is suitably qualified.

Inspection dates: 7 and 8 August 2024

Overall experiences and progress of children and young people, taking into account	inadequate
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How well children and young people are helped and protected	inadequate
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The effectiveness of leaders and managers	inadequate
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There are serious and/or 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, and they are not making progress.

Date of last inspection: not previously inspected

Overall judgement at last inspection: not applicable

Enforcement action since last inspection: none

Inspection judgements

Overall experiences and progress of children and young people: inadequate

Children's care is compromised by poor safeguarding practice and ineffective management oversight. These shortfalls have affected children's overall safety and progress.

Children receive support to maintain relationships with their families, who are welcomed into the home. Staff provide hands-on assistance during these visits, contributing to positive and enjoyable interactions. Feedback from the children's social workers indicates that both children are making progress. However, records in the home do not capture this progress or children's experiences.

Children do not have access to all areas of their home. All doors are locked, including to the kitchen area. This is used as a restrictive measure to manage behaviours and not to ensure the safety of children. One child has a court directed order in place. However, managers and staff have not considered how the restrictions they have imposed in the home have impacted on the privacy and liberties of the other child. CCTV and door locks are used as part of day-to-day care practice, without an understanding that the court directed order is a permissible order, when the child is in crisis.

Children's plans are not consistently up to date and lack clear guidance for staff on how to meet the children's specific needs. Staff do not have access to some care documents to help them support each child's individual needs. This lack of clarity can make it difficult for staff to support the children effectively, potentially hindering their progress in key areas of their lives.

Staff are not clear about the health needs of each child and health assessments and plans are not robust. Not all staff take action to ensure that children use daily aids, including glasses and hearing aids. This does not ensure that children are supported with their visual development or have an opportunity to develop good speech and language.

The home is decorated well and personalised in line with children's needs. However, attention is required in some communal areas of the home. For example, the laundry room is not accessible for children and has a strong and unpleasant smell and two of the fire doors require further repair as they are no longer self-closing.

Despite the shortfalls identified, children have developed positive relationships with the staff caring for them. Children enjoy a range of activities and new experiences which promote their self-esteem and confidence.

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

Safeguarding practices in the home are inadequate, compromising children's safety. Staff are not given appropriate risk management strategies, leading to inconsistent and unsafe care. For instance, on occasions, staff have prevented a child who was in crisis from leaving a room, locking them in. There is no record to demonstrate why this action was taken or the rationale for it. The registered manager was unaware of this practice, which is unsafe and fails to consider the child's mental health and well-being.

Due to the special educational needs of children, restrictive equipment is used to keep them safe and promote their welfare. For example, a specialised harness is used in the home's vehicle to keep children safe and locks are used on external doors. However, the use of the restrictions is not clearly recorded, and staff practice is inconsistent in the way that restrictions are implemented. This leads to confusion. It is unclear if a restriction was necessary and proportionate and in line with the level of risk.

The approach used by staff to protect children is reactive and ineffective. There are no clear strategies to prevent harm, such as when an older child has repeatedly targeted a younger child. Risk management plans are inconsistent and lack critical information, such as guidelines for managing high-risk behaviours and an understanding of what the purpose of a deprivation of liberty (DoL) order is and when this can be used.

Staff use consequences to manage behaviours. However, records do not include the rationale for the measure used or how long the consequence will be imposed for. Furthermore, the registered manager has not reviewed or evaluated the effectiveness or appropriateness of the actions taken. This does not demonstrate good safeguarding practice.

During the home's registration process, clear guidance was provided about the presence and purpose of CCTV cameras in the home. The provider initially removed the CCTV. However, they have since reinstated monitoring and surveillance devices. Although there is a policy in place regarding the use of CCTV, risk assessments fail to identify how this high level of surveillance meets the individual needs of all children and promotes their privacy and safety.

A night staff member was not aware that fire equipment was not available, and they did not have adequate oversight of the children. Records show that, on one occasion, night staff struggled to manage both children's behaviour and did not seek additional support. This did not ensure that children were appropriately safeguarded and protected from harm.

Staff have not recorded all physical interventions used in the home. When interventions are documented, records lack detail and do not present a full and accurate account of all action taken to maintain children's safety. Staff debriefs are conducted in groups rather than individually and when the registered manager is involved in an intervention, it is not independently reviewed. This means that unsafe care practices continue unchecked, which can create a closed culture with no independent oversight.

A missing-from-home incident was poorly managed. Care records do not provide a detailed account of the incident and also did not identify any learning to prevent this occurring again. Care records for this and other incidents do not demonstrate how staff keep children safe. This is a safeguarding concern.

The effectiveness of leaders and managers: inadequate

Leaders and managers are not leading and managing the home in a manner that is consistent with the aims outlined in the statement of purpose. They do not ensure that staff understand their roles and responsibilities in keeping children safe. This has had an adverse impact on children's safety and overall experiences.

Leaders and managers have not ensured that staff are adequately trained to support children's complex health needs. This includes training to enable staff to support children during fire evacuations. Some staff lack training in key areas, such as respiratory care for one child and seizure management for another, despite these being known risks. Consequently, staff do not always have the necessary skills to keep the children safe.

Staff are positive about the manager, although they acknowledge that she is not in the home on a regular basis. Staff care about the children and have tried to manage many incidents using what they understand to be appropriate action. However, as the manager has not been readily available to review care practices, this has led to inconsistent and poor staff practice remaining unchallenged. The registered manager accepted that she has been working across the organisation, which has limited her oversight of this home. However, she had already spoken to the responsible individual and devised a management plan to improve her oversight of care practices and presence in the home.

There are missed opportunities to understand the impact that the quality of care is having on children. For example, the children's plans and behaviour support plans contain no management oversight. Consequently, shortfalls in the care and protection of children are not identified. This places children at risk of harm.

Managers have not ensured that there is a record of the actual hours that staff and managers work in the home. The current rota is confusing as it is for the provider's two homes rather than each individual setting. This is a potential safeguarding concern and does not demonstrate who is working with the children or that there are sufficient staff.

There are no records to show that staff receive regular supervision and attend team meetings. This does not provide staff with opportunities to reflect on their learning and development needs and to discuss care practices. This is a missed opportunity to develop staff and monitor poor staff practice.

Leaders addressed some of the immediate shortfalls in relation to staff practice and management oversight of the home during the inspection. However, the shortfalls

highlighted poor leadership and management practice that has compromised the experiences and progress of the children living in this home.

Despite the shortfalls identified, the manager and staff team maintain effective partnerships with external professionals to ensure that children benefit from all-round support. Staff advocate strongly for children and seek independent support for those who feel they are not being heard, to ensure they are taken seriously and that their rights are respected.

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; 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)) Leaders and managers must ensure that all staff are supported to understand how to meet children's individual daily needs. Staff need to be able to identify and respond appropriately to all known risks, keeping children safe from harm without restricting them unnecessarily.	16 August 2024

In particular, leaders and managers must ensure updates are added to children's risk management plans after incidents, and that staff consistently implement the necessary actions to prevent similar incidents from happening again. This includes ensuring incidents are accurately recorded and children's personal fire evacuation plans reflect the child's needs.

Leaders and managers must ensure that care records provide detailed accounts when there have been safeguarding incidents, identify any learning to prevent reoccurrence and must be stored safely and be accessible to staff.

Leaders and managers must ensure that staff obtain medical advice for any injury to a child, specifically if the child has been injured during a seizure, and that an accurate record of the incident is recorded and evaluated by the manager.

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 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;

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demonstrate that practice in the home is informed and improved by taking into account and acting on— research and developments in relation to the ways in which the needs of children are best met; and feedback on the experiences of children, including complaints received; and 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)(g)(i)(ii)(h)) Leaders and managers must ensure that the staff have the necessary skills, knowledge, expertise, training and confidence to meet the assessed needs and risks of each child. This includes understanding the purpose of a DoL order. The registered person must have effective oversight of the quality of care provided to children so that they can identify and address areas of concern. Managers must ensure that restrictions used, including locking internal doors, are not custom and practice. The provider must ensure that there are effective monitoring and review systems in place to identify and address weaknesses in staff practice, including recording in children's case records, reporting incidents and mistakes in administering medication. The manager must ensure that all staff have regular team meetings and practice-related supervision and have their performance monitored and reviewed in line with the home's policies.	
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—	13 September 2024

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; understand and develop skills to promote the child's well-being. (Regulation 10 (1)(a)(b)(c) (2)(a)(i)(ii)(iv)) In particular, the registered person must ensure that staff understand and have sufficient oversight of children's specific health needs. When advice is given in relation to meeting children's needs, the registered provider must ensure that this advice is implemented. This includes staff being supported to understand the importance of children wearing their glasses and hearing aids.	
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— 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;	13 September 2024

communicate to each child expectations about the child's behaviour and ensure that the child understands those expectations in accordance with the child's age and understanding; are provided with supervision and support to enable them to understand and manage their own feelings and responses to the behaviour and emotions of children, and to help children to do the same; de-escalate confrontations with or between children, or potentially violent behaviour by children; understand and communicate to children that bullying is unacceptable; and have the skills to recognise incidents or indications of bullying and how to deal with them; and 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)(x)(xi)(xii)(xiii)(b)) In particular, the registered person should ensure that each child is provided with proactive one-to-one support sessions that are planned based on children's presenting needs and feelings. Ensure that any incidents of bullying are followed up with consistent and targeted direct work.	
The registered person must ensure that— the privacy of children is appropriately protected; children can access all appropriate areas of the children's home's premises; and any limitation placed on a child's privacy or access to any area of the home's premises— is intended to safeguard each child accommodated in the home; is necessary and proportionate; is kept under review and, if necessary, revised; and allows children as much freedom as is possible when balanced against the need to protect them and keep them safe. (Regulation 21 (a)(b)(c)(i)(ii)(iii)(iv)) Leaders and managers must ensure that children have access to all areas of their home. Restrictions should only be used to	16 August 2024

protect children and keep them safe. CCTV and door locks must not be used as part of day-to-day practice. In particular, the registered person must ensure that when restrictions are used, there is a clear identified risk, and that restrictions are kept under review. In particular, the registered person must ensure that night-time monitoring of children while they are asleep is only undertaken when there is a need or risk identified for each individual child, and when there are no other suitable options. And ensure that CCTV is only used for the purpose of safeguarding and promoting the welfare of children.	
The care planning standard is that children receive effectively planned care in or through the children's home. In particular, the registered person to ensure— that each child's relevant plans are followed; that staff help each child to access and contribute to the records kept by the registered person in relation to the child. (Regulation 14 (1)(a) (2)(c)(f)) In particular, the manager must ensure that children's care plans include information about their education targets and achievements, including overall progress. Leaders and managers must ensure that missing-from-home plans, care plans and risk assessments support staff to keep children safe. These plans need to provide detailed strategies and preventive measures for staff to follow to protect children from harm.	13 September 2024
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; details of the child's behaviour leading to the use of the measure;	13 September 2024

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)(iv)) In particular, leaders and managers must ensure that accurate records are made of all incidents of restraint in the home. Furthermore, records must be evaluated and demonstrate that all staff involved have been spoken to about the measure used and that they are appropriately trained. All children involved must also be spoken to after incident. Leaders and managers must ensure that consequences and rewards are appropriate and are evaluated for their effectiveness. Leaders and managers must support children to understand acceptable and appropriate behaviour.	
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—	13 September 2024

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, ensure that staff safely administer medication in accordance with administration guidance. Specifically, ensure that medication records are completed when there has been a medication error and that the manager reviews the error, sharing the learning to prevent reoccurrence.	
After consultation with the fire and rescue authority, the registered person must— take adequate precautions against the risk of fire, including the provision of suitable fire equipment in the children's home; make arrangements for persons working at the home to receive suitable training in fire prevention; and 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. (Regulation 25 (1)(a)(c)(d)) In particular, the registered person must ensure that all staff have taken part in a fire evacuation, and when fire extinguishers are moved, all staff know their locations in case of an emergency. Leaders and managers must ensure that fire doors are repaired in a timely manner.	13 September 2024
Schedule 4 sets out the other information that the registered person must keep in relation to a children's home. maintain in the home the records in Schedule 4; (Regulation 37 (1) (2)(a)) This specifically relates to the manager ensuring that the staff roster only includes those staff who support this children's home, not the sister home, and their actual hours worked each week.	13 September 2024

The registered person must ensure that an independent person visits the children's home at least once each month. The independent person must provide a copy of the independent person's report to— HMCI; upon request, the local authority for the area in which the home is located; the placing authorities of children; the registered provider and, if applicable, the registered manager; and the responsible individual (if one is nominated). (Regulation 44 (1) (7)(a)(b)(c)(d)(e))	13 September 2024
The registered person must maintain records ("case records") for each child which— include the information and documents listed in Schedule 3 in relation to each child; are kept up to date; and are signed and dated by the author of each entry. (Regulation 36 (1)(a)(b)(c)) The registered person must ensure that children's case records contain up-to-date plans from the local authority relating to each child, and that staff have access to these plans. The registered person must ensure that children's case records contain up-to-date information about the child and the support offered by staff. This supports management of concerns. The provider must ensure that the language used in children's records is not stigmatising and does not blame or judge a child.	13 September 2024

Recommendations

- The registered person should ensure that children are supported in a planned way, to support them to meet the objectives in their plans. ('Guide to the Children's Homes Regulations, including the quality standards', page 43, paragraph 9.10)
- The registered person should ensure that when the statement of purpose has been reviewed, it contains all relevant information and has all staff listed, and that a copy of this is shared with the regulating body. ('Guide to the Children's Homes Regulations, including the quality standards', page 14, paragraph 3.5)
- The registered person should ensure that the home is maintained and that any hazards identified are quickly repaired, such as the damage in the laundry room and the smell coming from the drains. ('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: 2772598

Provision sub-type: Children's home

Registered provider: My Life - My Choice Limited

Registered provider address: 22a Albert Street, Oswaldtwistle, Accrington BB5 3NB

Responsible individual: Andrea Brighouse

Registered manager: Kerry Hursey

Inspectors

Jennifer Quest, Social Care Inspector

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