

SC006017

Registered provider: Care Afloat Ltd

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

The home provides care for one young person who has emotional and/or behavioural difficulties. The home is operated by a private company.

Inspection dates: 31 August to 1 September 2017

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 inadequate

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: 6 March 2017

Overall judgement at last inspection: sustained effectiveness

Enforcement action since last inspection:

None.

Key findings from this inspection

This children's home requires improvement to be good because:

- There has been no registered manager for more than 26 weeks and, as a result, the impact and effectiveness of leaders and managers are inadequate. This leads to an overall 'experiences and progress' judgement that cannot exceed 'requires improvement'.
- Staff do not always listen to young people or act on their wishes and feelings. Young people's plans do not contain their views. They lack personalisation.
- When young people raise concerns the manager does not keep young people informed of the outcomes of their concerns that they raise.
- Key-working sessions are poor. They do not robustly document the work that staff complete with young people to help them feel safe.
- Important statutory documents are missing from young people's case files. The manager has failed to challenge placing authorities in order to obtain them.
- Some care practice is dated, and is undertaken 'because that's how we've always done it'. It fails to integrate a modern approach to care.
- Daily fire checks have not always been completed.
- There has been a considerable delay in the quality review of the home report being sent to Ofsted. A report due in March 2017 was sent in July 2017.

The children's home's strengths:

- Young people and staff maintain trusting relationships which enable young people to express their emotions and adapt their behaviours.
- Educational needs are supported and met. Young people, who often have a history of non-attendance at school, achieve good attendance.

Recent inspection history

Inspection date	Inspection type	Inspection judgement
06/03/2017	Interim	Sustained effectiveness
30/11/2016	Full	Good
11/02/2016	Interim	Sustained effectiveness
02/07/2015	Full	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
5: Engaging with the wider system to ensure children's needs are met In order to meet the engaging with the wider system standard, the registered person must ensure: (a) that staff seek to involve each child's placing authority effectively in the child's care, in accordance with the child's relevant plans.	07/10/2017
6: The quality and purpose of care standard In order to meet the quality and purpose of care standard, the registered person must ensure that staff: (2)(b)(ii) protect and promote each child's welfare; (iii) treat each child with dignity and respect; (iv) provide personalised care that meets each child's needs, as recorded in the child's relevant plans, taking account of the child's background.	07/10/2017
7: The children's views, wishes and feelings standard In order to meet the children's views, wishes and feelings standard, the registered person must ensure that staff: (1)(b) engage with them; and (c) take their views, wishes and feelings into account in relation to matters affecting the children's care and welfare and their lives.	07/10/2017
8: The education standard In order to meet the education standard, the registered person must ensure that: (b) each child has access to appropriate equipment, facilities and resources to support the child's learning; with particular regard to Wi-Fi in the home.	31/12/2017

11: The positive relationships standard In order to meet the positive relationships standard, the registered person must ensure: (1) that children are helped to develop, and to benefit from, relationships based on (a) mutual respect and trust; (b) an understanding about acceptable behaviour; and (c) positive responses to other children and adults; and (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.	07/10/2017
13: The leadership and management standard In order to meet the leadership and management standard, the registered person must ensure that: (2) there is a 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.	07/10/2017
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))	07/10/2017
Ensure that the registered person takes adequate precautions against the risk of fire; with particular regard to daily fire checks. (Regulation 25(1)(a))	
Ensure that all employees have their performance and fitness to perform their roles appraised at least once every year. (Regulation 33(4)(c))	31/12/2017
Ensure the registered person completes a review of the quality of care provided for children at least once every 6 months and 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))	30/10/2017

* These requirements are subject to a compliance notice.

Recommendations

- Regulation 29(3) requires that a manager must have the capacity to be in full-time day-to-day charge of each children's home that they manage. If an individual is manager for more than one home, the registered person must ensure that the individual has the skills and experience to manage all of the homes effectively. There need to be appropriate delegation structures and staff being delegated to need to have sufficient skills, experience and capacity to take on managerial and leadership roles. When a new person (who is not the registered provider) is appointed as manager for a home, the registered provider should support them to become registered with Ofsted without delay. ('Guide to the children's homes regulations including the quality standards', page 51, paragraph 12.3)
- A high proportion of children in children's homes have special educational needs (SEN) (a recent research study found 38% to have a statement of special educational needs) and staff need to understand the specialist support they may need to be able to engage positively and achieve in education.⁷ Staff must be aware of whether a child has a statement of SEN or an Education, Health and Care (EHC) plan and the information in it. An EHC plan details the education, health and social care support that is to be provided to a child or young person who has SEN or a disability. ('Guide to the children's homes regulations including the quality standards', page 22, paragraph 5.5)

Inspection judgements

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

Staff do not provide care that is good enough or that is individualised according to the requirements of each young people. The care plan, health plan and behaviour management plan lack individualisation and do not give clear guidance to staff on how to provide good-quality personalised care to the young people. Young people are not involved in their plans. This means that staff lose sight of the young people that they care for. On occasions, staff do not follow the young person's behaviour management plans in respect of behaviours such as explicit language and verbal threats. For example, the young person used racist language towards staff, but there has been little consistency from staff in managing the behaviour. Staff do not always document whether or how they intervene and de-escalate situations. As a result, staff do not learn from incidents in order to prevent future occurrences and the young person does not learn about acceptable, appropriate and safe behaviours.

Due to poor record-keeping, the progress that young people make from their starting points is not always evident. The young people's files do not contain important statutory documents, such as care documentation and their education and healthcare plans from the local authority. This demonstrates that young people's progress is not adequately monitored.

Young people attend education regularly. Since their admission, the young person has achieved an attendance of 76%. However, their attainment is much lower, at 14%. Although the focus of the placement is on young people achieving greater stability during times of crisis, they are missing vital stages of their educational development by not contributing to their school work. The young person does have an individual education plan in place. However, the home and school have not had sight of the local authority's education and health care plan. As a result, it is not always clear whether staff are meeting these plans and ensuring that young people are receiving sufficient opportunities to learn, as they have not been reviewed since the young person was admitted in June 2017.

The young people say that they have good relationships with staff. Staff say that they are committed to the young people in their care. However, staff have failed to consistently listen to the current young person. For example, when a young person requested to have a larger bed, because they were falling out of their bed due to their size, staff failed to purchase this. Furthermore, the young person spoke about the psychological impact of not being able to communicate with friends via social media, as the home does not supply wi-fi. They feel excluded and isolated from their social network. When the young person raises these concerns, staff do not always keep them informed about what actions they are taking. This contributes to young people not being involved in their care.

Key-working sessions are poor, as they do not link with the aims and objectives of the placement. They are reactive and do not support young people's understanding of risk-taking behaviours, keeping safe or relationships. For example, the care plan states that the young person will have weekly sessions around bullying, but these have never taken place. For the 12 weeks that the young person has been in placement, only six recorded key-worker sessions were available.

Recently the young person stated at school that they had tried to put their hands around their throat to harm themselves. This was passed by the education staff to the children's home. The manager reported that she had conducted a key-worker session during which the young person declared they had made the incident up. However, the session was not recorded by the manager, nor was the incident record updated to reflect this new information. This demonstrates not only a poor response to safeguarding concerns, but also poor managerial oversight.

Practice in the children's home is dated and the dignity of young people is compromised. The home 'locks down' the building of an evening, locking both the kitchen and lounge to prevent the young person having access. The young person was observed to enter the staff office and lift their shirt, so that the young person could spray deodorant on themselves, as they are not allowed deodorant in their bedroom. The home does not have wi-fi, so young people have to go to the library. These practices are not in line with the experiences or opportunities of other young people living in the same community. It demonstrates a lack of insight by the manager into new and effective ways of working with young people.

Leaders and managers have started to make changes to the condition of the home. They have replaced the kitchen doors to give the kitchen a more modern feel, and are waiting for new flooring to be laid. There are plans in place to further improve the personalisation and warmth of the home; for example, the young person would like outdoor seating so that they can enjoy the garden.

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

The young person's risk management plans are inconsistent. As a result, staff do not identify risky situations and, consequently, do not take preventative measures to keep young people safe and prevent incidents from happening. Risk assessments are not routinely updated following an incident, for example after a young person spoke about their low mood and a wish to die. The manager explained that the care practice delivered by staff is intended to accommodate the risks presented by the young person. For example, young people are unable to have deodorants in their room due to the fire risk. However, this is not recorded as an identified risk in the young person's risk assessment, and does not explain why two other canisters of deodorant were observed in the young person's bedroom.

The young person says that they feel safe in the home, and know that staff care about their welfare and well-being. They can identify staff in the home who they would go to if they were worried or upset, although they do not always manage to do this and consequently young people have been admitted to hospital. Staff understand each individual's vulnerabilities, and do all they can to keep them safe. They are confident in the processes that they need to follow should they be concerned for a young person's safety or welfare.

Behaviour management is well planned, but is not always consistently applied. Restraint is rarely used and if it is used it is usually to guide young people away from potentially disruptive situations. Some home rules need to be reviewed to determine whether they remain appropriate for the current young person living in the home, for example the routine locking of the lounge door and kitchen door at night.

Young people say that bullying is not happening at the home. Young people's meetings are used to discuss how their week has gone and what activities they would like to do in the following week.

Young people are able to take age-appropriate risks in line with their abilities. This includes spending time in the community, using public transport and using the cooking facilities in the home to make meals and snacks. The home is physically safe and there are regular checks on fire detection equipment. Daily fire checks are not always completed, with checks last completed in the home eight days previously. Daily room searches, an area identified as a need in the care plan, had also not been completed for the previous eight days. This places young people and staff working and sleeping in the

home at risk.

Recruitment procedures are generally robust, including pre-employment checks. However, the references are not always on headed notepaper or marked with a company stamp, and have been emailed from personal accounts. This does not ensure that the references are from a company's HR department.

The effectiveness of leaders and managers: inadequate

The home has been without a registered manager for more than 26 weeks. The management arrangements in the home have been ineffective since the departure of the former manager on 2 December 2016. An application to register the manager of the home has not yet been received by Ofsted. Once an application has been received, it will be processed and references sought prior to the applicant being interviewed.

Attempts to register a manager have resulted in interim management arrangements over a substantial period. During this period, a manager has spent regular time in the home to monitor and oversee the running of the service. The manager has previously been registered with Ofsted, and has NVQ level 4 qualifications.

The manager is good at communicating and working with other professionals. She liaised effectively with the fire service to try to manage the young person's risks and behaviours. The manager identified when the home was no longer able to meet the previous young person's needs, and was supported to move them into another of the company's homes. Staff say that they feel well supported by the manager. Supervisions are good and allow staff time to reflect on young people's needs and their own emotions in relation to young people's behaviours. Very few staff appraisals have been completed. This does not allow staff the opportunity to consolidate their practice and identify any areas for improvement or goals for the following year that would aid their individual development.

Reports from independent monitoring visits in relation to regulation 44 are adequate, and provide a simple overview of the current service and young people's progress. Improvements could be made to this monitoring to provide a more critical and evaluative oversight of the service. The visitor does not record comments made by young people, staff and other professionals. It is unclear if this is because the visitor has not spoken to people about the home or because he doesn't have the time. Visits to the home have been noted to take as little as 40 minutes.

Regulation 45 reports are not always forwarded to Ofsted in a timely manner. For example, a report due at the end of March 2017 was not forwarded to Ofsted until July 2017. This delay fails to allow a timely scrutiny of the operation of the home by the regulator.

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: SC006017

Provision sub-type: Children's home

Registered provider: Care Afloat Ltd

Registered provider address: Care Afloat Ltd, 158 Birkrig, Skelmersdale, Lancashire
WN8 9HP

Responsible individual: Michael Fletcher

Registered manager: Post vacant

Inspector

Elaine Clare: social care inspector

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