SC008485

Registered provider: Choices Home for Children Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This children's home is privately owned. It is registered to provide care for up to five children who may have social and emotional difficulties. Four children were being cared for in the home at the time of the inspection.

The registered manager post has been vacant since September 2021. A new manager has been appointed. He has not yet taken up his role and has not applied to be registered with Ofsted.

Inspection dates: 20 and 21 September 2022

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 and 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: 8 and 9 September 2021

Overall judgement at last inspection: requires improvement to be good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
08/09/2021	Full	Requires improvement to be good
07/07/2021	Full	Inadequate
11/02/2020	Interim	Declined in effectiveness
09/07/2019	Full	Good

Inspection judgements

Overall experiences and progress of children and young people: inadequate

Despite measurable progress for some children, their overall experiences are inadequate. Shortfalls in leadership and management have resulted in some poor safeguarding practices and a lack of nurturing care for children. Failings in the management oversight of the quality of care experienced by children have led to inconsistent and sometimes poor practice by some staff. Leaders and managers have, for the most part, been unaware of these practice concerns.

The children's home environment is not of an acceptable standard. While some parts of the home are homely, this standard is not consistent throughout. Children's bedrooms are dirty. One child has no curtains at their window, and another child has curtains that are unable to open and are not of sufficient width to cover the whole window. Children do not always have bedding on their beds. Bedrooms do not have light shades and furniture for storage of clothes is not fit for purpose. The children's bathroom is unclean. Children who have experienced neglect and trauma within their own families are experiencing further neglect in this home.

Three children have been living at the home since before the last inspection. They appear settled and have a sense of belonging to the home. One child, who recently came to live at the home, is due to move out of the home. The provider has acknowledged that staff have been unable to meet the child's needs and prevent them from going missing from the home and keep them safe. This is the child's first experience of being cared for away from their family, and this adds further instability to their life at a time of uncertainty and change.

Children told inspectors they are cared for by a consistent staff team and have good relationships with most staff. The permanent staff work together to ensure that the use of non-permanent staff is kept to a minimum. As a result, children experience some stability.

All children are in education and attend regularly. Two children who left school this summer are now attending college. For one child, this is the first time in many years she has been in full-time education. She is able to pursue a course which addresses her interests. Children have a sense of achievement and aspirations for their future employment.

Children are supported to attend specialist services to meet their emotional health needs. Some children have well-established relationships with therapeutic services outside of the home. There is little evidence of the input and impact of the provider's commissioned in-house therapeutic service. It is unclear how this provision is being used, in line with the home's statement of purpose, to meet the emotional health needs of children.

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

Children are not safeguarded effectively by the staff team. Poor-quality risk assessments and risk-reduction plans prevent staff from safely caring for children. Current plans contain information which is out of date and not individual to each child. Some risk assessments contain information about the wrong child. Staff do not have clear actions to follow to prevent, reduce or respond effectively to risks to children. The plans do not evidence when staff have read the children's plans. A lack of individualised and up-to-date plans was identified at the last inspection as a shortfall, and this has not been adequately addressed by leaders and managers. This requirement is restated.

Staff practice in relation to physical intervention with children is variable and the quality of records of some interventions is poor. Although some incidences of physical intervention with children are appropriate to keep the children and those around them safe, there are other incidents of children being held that are inappropriate and unsafe. For example, a child was held by two members of staff for refusing to return a mobile phone he had taken from the office, despite the phone having been disabled. This was an unnecessary and inappropriate use of physical intervention with the child. It does not help children to feel safe and build trusting relationships with staff. The oversight of physical intervention is poor.

Children and staff are not always offered an opportunity to speak with leaders and managers after these incidents. There are delays in leaders and managers evaluating some incidents. As a result, learning from incidents is not completed in a timely way, children's experiences are not fully understood, and staff do not get the support they need to undertake their roles effectively.

Children are not supported to quickly return to the home when they go missing. Staff do not always actively search for them in the locality as there is an over-reliance on trying to locate children via phone calls. Information-sharing is not always swift. For example, on one occasion, staff did not share a potential address for a child with the police for two hours. Missing-from-care records indicate an inconsistency to the missing-from-home procedure and staff's understanding of risk. This practice potentially places children at additional risk in the community.

The reasons for children going missing are not sufficiently explored by staff. Staff do not seek the information gained from children's independent return home interviews to inform their care of children and gain an understanding of the reasons for why they go missing. This was raised at the last inspection. No progress has been made to improve this area of practice.

Children's needs are not being fully met as care records do not contain all the relevant information from their placing authorities. Some care plans, delegated authority permissions and court orders have not been obtained. There is a lack of escalation about these omissions with children's social workers. As a result, it is unclear how staff are aware of what decisions they are able to make on behalf of

children, or how they are supporting children in line with their care plan. A requirement was raised in relation to children's care records at the last inspection. This requirement is restated.

Staff's approach to managing children's behaviour is inconsistent. The rationale for some consequences is unclear. In one incident, staff gave a child his gaming equipment, even though this should have been removed as a consequence for poor behaviour the previous day. Staff removed the equipment from the child later in the day while he was using it. This resulted in further upset and distressed behaviours from the child.

When allegations are made against staff, the responsible individual acts quickly to safeguard children. There is good information-sharing with local authorities, the police and Ofsted. However, it is unclear if training identified as required for one staff member at the conclusion of an investigation has been undertaken. As a result, there is no evidence that the member of staff has been provided with the skills and knowledge needed to reduce the likelihood of this practice being repeated. This means that an opportunity to strengthen safeguarding practice has been missed by the provider.

Serious incidents involving children are not always notified to Ofsted, despite being required by regulation. This impacts on the regulator's oversight of safeguarding practice in the home. A requirement was raised in relation to notification of serious incidents at the last inspection. This requirement is restated.

The effectiveness of leaders and managers: inadequate

Leadership and management of the home is ineffective. The registered manager post has been vacant for 13 months. Staff placed in interim management positions do not have the skills and knowledge to undertake this role to an acceptable standard. A new manager has been appointed. He has not yet taken up his post or applied to register with Ofsted.

The responsible individual does not have effective oversight of the home. His assessment of the quality of care that children receive is overly optimistic. The responsible individual does not have a good understanding of the required experience, skills and knowledge staff need to take on interim leadership and management roles in the home. As a result, children are not receiving an acceptable standard of care and this is not recognised by leaders and managers.

Six-monthly quality of care reports are not fit for purpose. Reports contain lists of dates of incidents and actions with no reflection or learning. There is no input from staff, children, families or professionals. Action planning is weak. There is no oversight of these reports by the responsible individual in the absence of a registered manager. This means that the reports are not providing leaders, managers and staff with the information they need to identify strengths and weaknesses and drive practice improvement.

Monthly oversight of practice in the home from the independent person is not robust. A number of visits have been announced in advance and others have taken place virtually. The independent person is not always ensuring that children's bedrooms are seen. As a result, the feedback received from these visits is of limited value in assessing children's experiences of living in the home and ensuring that they are safeguarded effectively.

Staff are not receiving supervision at the frequency detailed in the provider's supervision policy, and the quality of supervision is variable. Two members of staff responsible for interim leadership and management oversight of the home are not being supervised regularly. Staff new to the home are not receiving the increased levels of supervision the policy states they will receive during their probationary period. No staff have had an annual appraisal of their practice. The lack of regular, good-quality supervision of practice leaves staff without the support they require to undertake their roles to a high standard. This means that leaders and managers do not have sufficient one-to-one time with staff to formally reflect on practice and address any areas which require support and improvement. A requirement was made at the last inspection in relation to supervision of staff. This requirement is restated.

Leaders and managers have not ensured that all staff have up-to-date training. In respect of physical intervention, one member of staff has had no training at all, and one member of staff has had no refresher training within expected timescales. This has not been identified as a shortfall, despite the staff member being involved in the inappropriate restraint of a child. Some staff are out of date with refresher training for safeguarding and first aid. This lack of training places children at risk of harm.

The bedrooms staff use when they are sleeping overnight at the home are cluttered and poorly furnished. This does not promote a positive environment for staff to work in, or help staff morale.

The statement of purpose for the home has not been updated to reflect changes to the staff team. This lack of information-sharing impacts on the regulators ability to understand current staffing arrangements for the home and evaluate the suitability of these arrangements.

Due to the serious concerns raised during this inspection, Ofsted has issued the provider with compliance notices in respect of regulation 12, the protection of children, and regulation 13, leadership and management. We will be undertaking regular monitoring of the home to ensure that these notices are met within timescales.

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— have the skills to identify and act upon signs that a child is at risk of harm; understand the roles and responsibilities in relation to protecting children that are assigned to them by the registered person; 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; and that the premises used for the purposes of the home are designed, furnished and maintained so as to protect each child from avoidable hazards to the child's health. (Regulation 12 (1) (2)(a)(iii)(v)(b)(d)) Specifically, that the responsible person should ensure that: ■ All staff should have up-to-date training in relation to physical intervention, first aid and safeguarding. ■ Children's risk assessments and risk-reduction plans are up to date and provide staff with the information they need to undertake their roles and responsibilities in protecting children. ■ Physical interventions with children are undertaken in line with regulation, and that there is timely and effective management oversight and evaluation of incidents which includes seeking the views of children.	26 October 2022

■ Mould is removed from the bath; the extractor fan is replaced, and the bathroom and toilets are clean. ■ Children's bedrooms are clean; children have bedding on their beds; windows have adequate coverings; and bedrooms have light shades. ■ Each child has adequate storage for clothes and personal belongings, and any damage is quickly repaired.	
* 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— use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13 (1)(a)(b)(2)(h))	26 October 2022
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))	20 December 2022
The registered person must ensure that all employees— receive practice-related supervision by a person with appropriate experience; and have their performance and fitness to perform their roles appraised at least once every year. (Regulation 33 (4)(b)(c)) This requirement was made at the last inspection and is restated.	26 October 2022
The registered person must complete a review of the quality of care provided for children ("a quality of care review") at least once every 6 months.	20 December 2022

In order to complete a quality of care review the registered person must establish and maintain a system for monitoring, reviewing and evaluating— the quality of care provided for children; 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. After completing a quality of care review, the registered person must produce a written report about the quality of care review and the actions which the registered person intends to take as a result of the quality of care review ("the quality of care review report"). 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; and make a copy of the quality of care review report available on request to a placing authority, if the placing authority is not the parent of a child accommodated in the home. 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 (1) (2)(a)(b)(c) (3) (4)(a)(b) (5))	
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; an incident requiring police involvement occurs in relation to a child which the registered person considers to be serious; there is an allegation of abuse against the home or a person working there; a child protection enquiry involving a child—	26 October 2022

is instigated; or concludes (in which case, the notification must include the outcome of the child protection enquiry); or there is any other incident relating to a child which the registered person considers to be serious. (Regulation 40 (4)(a)(b)(c)(d)(i)(ii)(e)) This requirement was made at the last inspection and is restated.	
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)) This requirement was made at the last inspection and is restated.	26 October 2022
In meeting the quality standards, the registered person must, and must ensure that staff— seek to secure the input and services required to meet each child's needs; seek to develop and maintain effective professional relationships with such persons, bodies or organisations as the registered person considers appropriate having regard to the range of needs of children for whom it is intended that the children's home is to provide care and accommodation. (Regulation 5 (b)(d)) Specifically, that the registered person should ensure that arrangements are in place with each placing local authority to receive information provided by return home interviews to assess risks and put arrangements in place to protect each child.	26 October 2022
The registered person must ensure that an independent person visits the children's home at least once each month.	20 December 2022

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; and to inspect the premises of the home and such of the home's records (except for a child's case records, unless the child and the child's placing authority consent) as the independent person requires. A visit by the independent person to the home may be unannounced. 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— children are effectively safeguarded; and the conduct of the home promotes children's well-being. The independent person's report may recommend actions that the registered person may take in relation to the home and timescales within which the registered person must consider whether or not to take those actions. (Regulation 44 (1) (2)(a)(b) (3) (4)(a)(b) (5)) Specifically, the registered person must ensure that the independent person conducts unannounced on-site visits to the home and provides effective challenge.	
The registered person must— keep the statement of purpose under review and, where appropriate, revise it; and notify HMCI of any revisions and send HMCI a copy of the revised statement within 28 days of the revision. (Regulation 16 (3)(a)(b))	20 December 2022
No measure of control or discipline which is excessive, unreasonable or contrary to paragraph (2) may be used in relation to any child. The following measures may not be used to discipline any child—	26 October 2022

any restriction, other than one imposed by a court or in accordance with regulation 22 (contact and access to communications), on— a child's contact with parents, relatives or friends. (Regulation 19 (1) (2)(c)(i))	

* These requirements are subject to a compliance notice.

Recommendation

- The registered person should ensure staff have sleeping-in rooms which are clean and well furnished with adequate window coverings. ('Guide to Children's Homes Regulations, including the quality standards', page 17, paragraph 3.26)

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: SC008485

Provision sub-type: Children's home

Registered provider: Choices Home for Children Limited

Registered provider address: 31 Wellington Road, Nantwich CW5 7ED

Responsible individual: Simon Haddrell

Registered manager: Post vacant

Inspectors

Dawn Parton, Social Care Inspector
Genevieve O'Reilly, Social Care Inspector

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