

SC021677

Registered provider: The Partnership of Care Today Children's Services

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home is run by a private organisation and is registered to provide care and accommodation for four children who may have emotional and/or behavioural difficulties and/or learning disabilities.

Inspection dates: 13 to 14 June 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

requires improvement to be good

The children's home is not yet delivering good help and care for children and young people. However, there are no serious or widespread failures that result in their welfare not being safeguarded or promoted.

Date of last inspection: 29 March 2017

Overall judgement at last inspection: Improved effectiveness

Enforcement action since last inspection:

None

Key findings from this inspection

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

- The arrangements for the induction, supervision and training of new staff are weak. Records of one-to-one supervision of staff show that these meetings are not always held in line with the home's policy. They do not demonstrate effective supervision of practice. This does not ensure that children are looked after by staff who are appropriately supervised, supported and challenged.
- The manager does not advocate vigorously for children in that he does not robustly and effectively challenge partner agencies when children's needs are not being met. This particularly relates to a child's educational needs.
- Children's views and those of their family are not routinely considered as part of the manager's review of the operation of the service and quality of care.
- Children's health and safety are compromised by the physical environment, including the inadequate arrangements for the storage of tools. Some floor coverings are particularly dirty.
- Impact risk assessments and children's individual risk assessments are not sufficiently robust and timely. They do not ensure rigorous assessment of a child's safety needs and the possible impact of a child's dangerous or challenging behaviour on that child and others in the home. This shortfall was identified at the full inspection in November 2016 and again at the interim inspection in March 2017. New staff are not well prepared for their work. Consequently, they do not know how to protect children in the event of a disclosure or allegation of abuse. Nor are they trained in restraint and behaviour management practices before they are expected to work alone with a child. This places the safety of children and the staff member at risk.
- Care practice includes locking internal doors and preventing access to communal areas during the school day. This constitutes a behaviour management strategy and is used inappropriately as neither children nor staff are at risk of serious harm. Practice also includes switching off children's access to electrical sockets in their bedrooms during the school day and during night-time hours. This is a blanket measure of control. Its use is not recorded as a measure of control and has not been assessed as an appropriate behaviour management strategy for individual children.
- The children's guide is lengthy and is not presented in a format suitable for the children who live in the home.
- Three children have been discharged from the home since the interim inspection in March 2017. In each case, the discharge has been with immediate effect because the home has been unable to keep the child safe. One child's clothes and possessions have not been returned to him two weeks after his discharge to a new placement. This does not demonstrate that the home places children's needs

at the centre of its transition arrangements.

The children's home's strengths:

- Some children make very good progress across most aspects of their development. Their health is particularly well supported.
- The home provides warm, nurturing care that promotes security, stability and emotional growth. Children develop and benefit from positive relationships with staff. They feel cared for, safe and relaxed in the home.
- Children enjoy a wide range of activities and develop confidence through having new experiences, which are well supported by staff.
- Children who are not in formal education benefit from good routines and appropriate enrichment activities provided by the staff team.
- Professionals report that the home is child-focused and that children's behaviour improves as a result of good, consistent care. They have no concerns about the quality of care.
- Professionals report that the home communicates with them well.

Recent inspection history

Inspection date	Inspection type	Inspection judgement
29/03/2017	Interim	Improved effectiveness
29/11/2016	Full	Requires improvement
22/03/2016	Interim	Sustained effectiveness
19/01/2016	Full	Outstanding

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	31/07/2017
12: The protection of children standard	31/07/2017
33: Employment of staff	31/07/2017
45: Review of quality of care	31/07/2017

Recommendations

- Ensure that the home meets each child's basic needs in the way that a good parent would and helps each child to prepare for leaving the home both practically and emotionally. In particular, support children who leave in an emergency situation by ensuring that there is no delay in forwarding their clothes and other possessions to the new placement. ('Guide to the children's homes regulations including the quality standards', page 15, paragraph 3.7 and page 57, paragraph 11.9)
- Plan staffing levels so that they meet the needs of children and can respond flexibly to unexpected events or opportunities and promote continuity of care from the child's perspective. Where it is likely that there might only be one member of staff on duty at any time, the manager should make a formal assessment of the implications for children's care, including any likely risks. The assessment should be recorded and available for inspection by Ofsted and placing authorities. ('Guide to the children's homes regulations including the quality standards', page 54, paragraphs 10.15 and 10.18)
- Ensure that supervision of staff practice ensures that individual adults in the home are engaged in the safeguarding culture of the home so they understand what they would need to do if they found other staff misusing or abusing their position to the detriment of the safety of a child. ('Guide to the children's homes regulations including the quality standards', page 43, paragraph 9.14)
- Ensure that the children's guide is provided in an age-appropriate, accessible format. ('Guide to the children's homes regulations including the quality standards', page 24, paragraph 4.21)
- Ensure that any restriction of a child's movement, including the temporary locking of internal doors to communal areas, is recorded as a restraint and that restraint is used only as a last resort to prevent serious harm. Ensure that any decisions to restrict a child's access to shared areas is based on a rigorous assessment of that

child's needs, is properly recorded and kept under regular review. ('Guide to the children's homes regulations including the quality standards', page 47, paragraph 9.42)

- Ensure that any measures of control, discipline and restraint are set in the context of building positive relationships with children and that the behaviour management strategies are kept under review and revised as necessary. Any sanctions used to address poor behaviour should be restorative in nature, to help children recognise the impact of their behaviour on themselves, other children, the staff caring for them and the wider community. This relates to the restriction on access to electrical sockets during school hours. ('Guide to the children's homes regulations including the quality standards', page 46, paragraphs 9.33 and 9.38)

Inspection judgements

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

The home provides children with individualised support which meets their needs to varying degrees. Some children make very good progress across most aspects of their development. They respond well to the clear boundaries, good routines and nurturing care provided. As a result, they grow in confidence and self-esteem and recognise that they are calmer, feel better in themselves and feel cared for. Placing social workers report that children thrive as a result of the good, nurturing care. One social worker said, 'After visiting him yesterday, I was beaming from ear to ear. He was chatty, more confident and he's got a personality. The change is amazing. He used to put a block in front of his face whenever he spoke but now he'll talk directly to me. He trusts staff. He has really good routines.'

Children enjoy and benefit from the many age-appropriate, engaging activities offered by the home. Over time, with encouragement from staff, they become more willing to try new experiences and become increasingly confident in their own abilities. For example, they enjoy engaging in community football games alongside staff and playing board and electronic games with staff. These activities help them to develop strong and meaningful relationships with staff so that they are more willing to listen to and follow advice. One child explained, 'It's 100% good here... much better than where I was before. The staff are really nice. No one shouts. I was naughty before but I'm good here. We do loads of things, like running, badminton, we play pool and FIFA. We went to Go Ape. That was good.'

Professionals report that the home communicates with them well and keeps them and parents up to date with children's progress. They are pleased with children's overall progress. For example, one professional said, 'The staff are responsive. They are good role models and engage children well. The child I support is more settled than he has been in a long time. He had a chaotic life. They listen to him and understand him and his behaviour has massively improved.'

The home supports children's health needs very well. Staff follow advice from health professionals, ensure that children receive prescribed medicines and help children to manage long-term health conditions well. This gives children confidence and shows them that they can improve the quality of their lives by attending to their health needs.

No children are currently receiving a service from the child and adolescent mental health service (CAMHS), nor from other specialist agencies, although one child has been referred to CAMHS. In the meantime, staff are successfully helping the child to build resilience and emotional stability through nurturing care and positive behaviour management strategies.

The home has taken some steps to improve children's educational outcomes. For example, it has raised concerns with a school when mixed messages from school were having an impact on a child's willingness to attend. This resulted in the child's re-engagement after a brief refusal to attend. The home participates fully in personal education planning and provides daily enrichment activities for those children not in school.

Staff have worked tirelessly to provide structured, meaningful activities and learning opportunities for one child who has had no more than two hours tuition each week over the four months that he has lived at the home. The child had missed extensive education prior to his admission to the home, so the local authority plan was to re-introduce him to education slowly. The child has engaged very well with tuition and with enrichment activities, and both the tutor and staff team believe that his education is being considerably and unnecessarily hindered because the arrangements for his education have not been reviewed in good time. For example, the tutor said, 'His progress is limited as he only has two hours of tuition per week. I strongly believe this limits what progress he will make with literacy and numeracy... While he does complete education with care staff, this has [a] limited impact on his progress. He needs guided tuition for both literacy and numeracy so that he can build on his learning. With two hours a week the topics are easily forgotten and there is no opportunity to build on learning... No one has asked me for a review on his progress, although I was invited to the recent meeting.'

The child has asked for more education several times. He said, 'I only get two hours a week tuition. That's not an education is it? Staff help me as well and I've done loads of work with them.' He was clearly proud of the impressively large folder of written work that he has completed during his time at the home.

The level of challenge from the home to those responsible for the child's education has been minimal and the lack of adequate response has not been followed through. This means that the home has not effectively championed the child's education needs and has allowed an unsatisfactory situation to continue when the child was ready and willing to engage in more education. The home has not acted as a good parent would.

Staff provide children with a lot of advice and guidance which are an ongoing part of their daily lives. Key worker sessions are held in relation to specific topics that are

important for individual children. In addition, staff meet with each child every week, enabling children to express their views and feelings. The records of these meetings are variable in quality so the impact of this work cannot be easily assessed by the manager.

Children play an active part in attending to their own personal care and take responsibility for tidying and cleaning their own bedrooms. The level of weekly pocket money is set very low at £2 per week but children are able to earn significantly more than this by carrying out their own chores, attending education and meeting individually-tailored targets. For example, a child who meets all his weekly targets can earn a further £18 each week. Children know and understand these positive behaviour management strategies, which, in some cases, lead to all-round improvement in behaviour and outcomes.

In the 11 weeks since the last inspection, four children have been admitted to the home and of these, two have been discharged, along with one other. All three were discharged when it became clear that the home could not keep them safe. One child's clothes have been bagged up and are being stored in the home while the home waits for the placing social worker to collect them. This means that the child has been without his clothes and possessions for two weeks. This does not demonstrate that the home is proactive in supporting the best possible transition for a child who left in an emergency.

The home sometimes admits children who need emergency placements. It does not always effectively assess the impact of the prospective child on those already in placement. For example, a child was admitted the day before this inspection. Even though the manager had several days' notice of this prospective placement, and written background information, no impact risk assessment had been completed. The child attended for a visit and was admitted with immediate effect. The behaviour management strategies for addressing potentially unsafe behaviour were not set out for staff at the start of his placement. This shows that the home does not always provide staff with appropriate advice and guidance about how to respond to a child's particular challenging behaviour. Nor does it empower staff to respond proactively so as to prevent children already in placement from being unduly negatively influenced by the newly admitted child.

There are some institutional practices which detract from the homeliness and domesticity of the home. For example, the lounge is usually kept locked during school hours. Staff report that this is to restrict children's access to the lounge and thereby prevent children from relaxing and lying on the sofa when they should be engaged in education. The practice was introduced to help staff manage the behaviour of a child who has since left the home, but it remains in place and is used as a blanket behaviour management strategy. It is not required as a safety measure and is not recorded as a restraint or a sanction. It is not restorative in nature and is an unnecessary and unrecorded restriction of children's liberty.

Electricity to sockets in bedrooms is switched off during school hours and after 11.30pm. Staff believe that the measure is effective in promoting engagement in education during the school day and in promoting a good night's sleep. This institutional practice is overly

reliant on using a blanket approach to managing children's behaviour, without assessing individual risks. As a measure of control, it is not restorative in nature and does not encourage children to learn to take responsibility for their own actions.

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

Children report that they feel safe in the home and that there is no bullying. Professionals say that they are satisfied with the way that the home protects children. Although there is much to commend the home's safeguarding practice, there are some shortfalls that jeopardise children's safety.

There are no children currently known to be at risk of child sexual exploitation, self-harm or radicalisation. Staff describe satisfactory practice around the use of social media and online safety. One child has significantly reduced his going missing behaviour since his admission to the home and is therefore safer. Appropriate missing from care protocols are in place for each child but are not always sufficiently tailored to the specific needs of each child.

Concerns about children's safety when they spend free time in the community had been raised at the last full inspection. Those concerns were addressed when the children involved were discharged from the home. However, two more children, admitted to the home since then, became unsafe in the community and both were discharged with immediate effect. This was because they became involved in conflict with local youths, placing their safety and that of others in the home at significant risk. The home's strategies for safeguarding them were not effective even though a requirement to improve practice related to children accessing the community had been raised in November 2016. On advice from the police, the children did not return to the home following a serious incident.

Another child, who was subject to a curfew, broke his curfew when he left the home without permission after being allowed to smoke, unsupervised in the back yard. He was later arrested and moved to live in a secure setting. The home was satisfied that it did everything possible to protect the child. It did not reflect on whether closer supervision of the child when he was smoking outside may have protected him better.

The quality of risk assessments does not indicate that the home makes proper arrangements for supervising children who are known to be at risk in the community. For example, the arrangements for protecting a child at significant risk of criminality, mixing with adult men and drug misuse, as well as a significant history of going missing behaviour, are not robust. Consequently, when the child leaves the home without permission and with no money, staff do not follow him to promote his safety and encourage him to return. The known risks have not informed a rigorous assessment and robust response to his dangerous behaviour. Similarly, the risks of allowing the same child to spend all evening and weekends away from the home, returning by public transport, late at night, have not been assessed. This means that the home cannot demonstrate it has considered and taken account of the child's known, unsafe

behaviours in its day-to-day care planning and management.

Children's physical safety is at risk because tools are not stored safely. Tools, including a hacksaw and garden shears, are on open display and easily accessible in the cellar. Although the cellar is normally kept locked, children who do their own washing go down with staff to access the washer and dryer. In addition, staff leave the cellar door open when they go down to access the fridge and freezer. This does not protect children from the possibility of obtaining and misusing dangerous tools.

Not all staff have been trained in restraint practice. This means that they would not know how to restrain a child safely, should the need arise. Not all staff know how to respond appropriately in the event of an allegation or disclosure of abuse. This could jeopardise an investigation into child abuse and could undermine children's safety.

A key strength of the home is the focus on building warm, nurturing relationships with children. Staff are, in many cases, able to successfully influence children to make good choices and to approach problems and challenges calmly. Consequently, some children learn, over time, that they can influence their lives and achieve their aims without resorting to anger, aggression and anti-social behaviour. Restraint is used as a last resort and only to prevent serious harm. There have been no restraints since the last inspection.

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

The experienced manager has been in post for three years and is suitably qualified. In addition to being the registered manager in day-to-day charge of the home, he has taken on a supervising social worker role in the organisation's fostering agency. Appropriate succession planning is taking place and to this end, the assistant manager and a senior member of the care team are being trained to take on more managerial tasks within the home. The impact of these changes is not yet evident.

Managers have a good understanding of children's needs and their progress. Despite this, their focus on driving improvement and achievement for some children is variable. For example, they have not provided effective and robust challenge to partner agencies when they considered that a child's education needs were not being fully met. They do not always ensure that children's plans, including individual risk assessments, comprehensively identify their needs and address how they are to be met.

The quality of staff supervision needs improvement. Supervision is not always held at a frequency in line with the home's policy. For example, one member of staff has had one-to-one supervision only three times since the start of 2017 instead of the expected four to six times. The actual date of these sessions is not specified on the record. The recorded content is minimal. It does not demonstrate a good focus on children's experiences, needs, plans and feedback. Nor does it demonstrate effective support and challenge or that professional development needs are routinely considered.

A new member of staff who is a relief worker at the home and has never previously

worked in children's social care has had no formal one-to-one supervision in the three weeks of his employment there. Nor has he had a formal induction to the home. The manager has not ensured that he has the basic knowledge and skills required to respond appropriately to a child protection matter, nor to manage challenging behaviour or implement a restraint, should that be required. This does not ensure that children are cared for by staff who are appropriately supervised, well supported and understand their role and responsibilities. New staff are not provided with shadow shifts but are expected to be full members of the staff team from taking up post. For example, a member of staff with no previous experience of children's social care was on duty alone with a child for part of his second day of work. This left both him and the child vulnerable.

While the home provides mostly comfortable accommodation, the physical environment is not always maintained to a high standard. Some shortfalls need attention as they reduce the homeliness and safety of the environment. For example, the casing has been damaged on the red electric wires running outside a child's bedroom so that lengths of wire are exposed and could be dangerously interfered with, rugs in both the dining room and lounge are stained and dirty and the stair carpet is dirty and emits an unpleasant odour on the landing. The carpet is puckered at the door to the staff bedroom and is a potential trip hazard. The manager acknowledges that some of the paintwork is in need of renovation but was surprised at some of the shortfalls identified. This indicates that the arrangements for checking and maintaining the cleanliness and safety of the premises require improvement.

The home has weekly one-to-one consultation meetings with children and regular house meetings. Evidence that children's views meaningfully inform the development and operation of the home is not strong. For example, the manager's recent report on the quality of care does not indicate that children and other stakeholders' views have been taken into account and used to inform the development of the service.

The manager acknowledges that the home needs to do more to improve the quality and recording of consultations so that the home can demonstrate children's views are at the heart of its practice. He recognises that the children's guide needs improvement to make it more child-friendly. Children said that they had not read it, although they all have a copy. Despite this, they know the rules of the home and are familiar with the routines and care practices because good systems are in place that ensure staff share this information with children in the early days of placement.

The manager leads a diverse team of staff members who demonstrate a strong commitment to the children they care for. Managers and staff have a clear focus on helping children to enjoy positive experiences which meet their own particular targets and needs. They work collaboratively and consistently, helping children to turn their lives around, and thereby improve their life chances.

The manager's strong focus on rebuilding relationships with families permeates throughout the staff team. Through an increased focus on developing relationships with parents, the home, where possible, supports parents to develop skills in caring for their children more appropriately. The staff team demonstrates a shared ownership about its

practice and a strong focus on collaborative, consistent working. This promotes good routines, security and stability.

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: SC021677

Provision sub-type: Children's home

Registered provider: The Partnership of Care Today Children's Services

Registered provider address: Lansdowne House, 85 Buxton Road, Stockport, Cheshire SK2 6LR

Responsible individual: Vivien Snape

Registered manager: Anthony Garmory

Inspector

Sharon Lloyd: social care regulatory inspector

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