

SC030439

Registered provider: Somerset County Council

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This local authority children's home provides short breaks, shared care and permanent accommodation for up to five children who have a learning disability and complex needs.

The registered manager resigned in February 2021. A new manager is in post and has applied to register with Ofsted.

Due to COVID-19 (coronavirus), at the request of the Secretary of State, we suspended all routine inspections of social care providers on 17 March 2020. We last visited this setting on 21 October 2020 to carry out an assurance visit. The report is published on the Ofsted website.

Inspection dates: 7 to 8 July 2021

Overall experiences and progress of children and young people, taking into account	requires improvement to be good
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How well children and young people are helped and protected	requires improvement to be good
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The effectiveness of leaders and managers	inadequate
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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: 25 November 2019

Overall judgement at last inspection: sustained effectiveness

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
25/11/2019	Interim	Sustained effectiveness
08/08/2019	Full	Requires improvement to be good
03/10/2018	Full	Requires improvement to be good
26/07/2018	Full	Inadequate

Inspection judgements

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

This year, leaders and managers decided appropriately to suspend short breaks for a period. Currently, only two children are living in the home. Inspectors found that staff work hard to give these children positive experiences and help them to make progress. Relationships between staff and children are positive, and interactions were seen to be caring and supportive. Staff like the children and they know them well.

Children are making progress towards their individual aims. For example, children are developing the skills to become more independent in personal care and to communicate their needs. Staff celebrate the children's achievements with them and share these important memories with the children's families.

Staff ensure that children go to school regularly, and that their health needs are met.

The quality of children's day-to-day experiences can be improved. The environment is not homely because staff carry lots of keys, use walkie talkies to communicate in front of children and take a short cut through a child's home to get to communal spaces. Bathrooms are institutional in appearance and in the choice of fixtures and fittings. Bathrooms for staff and visitors to use are better presented. Staff told the inspectors that they did not know why the same bathrooms could not be used by children, staff and visitors.

Children are helped to enjoy activities that they like and go into the community usually at weekends and holiday times if there are enough staff to meet the children's individual needs. However, activities in the home can be repetitive and lack creativity. Leaders and managers recognise this and are wanting to implement an activity-planning programme.

Staff help children to make choices and help them to understand how they are feeling. Staff use alternative communication systems and social stories to support children to communicate. Work is needed to include the children in consultations about their care plan and to seek their views about the quality of care.

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

Leaders and managers recognise that practice in relation to safely managing medication and adhering to child protection policies has not been what it should. Leaders took urgent action to reduce the risks and safeguard the children who live in the home by suspending short breaks and providing staff with refresher training.

Staff have completed additional child protection training, behaviour management training and the safe management and administration of medication training. Most staff have had their competency to administer medication assessed, but not all. Plans are in place to complete this.

Some parents and all professionals who contributed to this inspection feel that their children are kept safe. Inspectors found that staff are working hard to keep children safe, but this has led to staff being risk averse. Staff are not reviewing risk effectively because they are not using the current evidence to determine whether children are able to make progress. Despite direction from leaders and managers not to, staff often lock rooms and unnecessarily lock one child's clothing away. Staff do not record when they do this, so leaders and managers are not able to understand fully how often it happens nor monitor its appropriateness.

Staff recognise when children are feeling anxious and they do the right things to help them. Staff understand the triggers to children's behaviours and they work effectively to de-escalate situations. Physical intervention is used rarely. Incidents are recorded in detail, and managers have good oversight of them. They challenge practice where necessary and ensure that children are debriefed. This was a requirement from the previous inspection and is now complete.

Staff work appropriately when referring to external agencies and they have commissioned independent professionals to investigate concerns. Leaders and managers demonstrate learning from the investigations and are taking actions to address the investigator's recommendations.

The process to monitor injuries to children has been improved. Detailed records are now kept, and any concerns are shared appropriately to safeguard children. This was a requirement from the previous inspection.

The effectiveness of leaders and managers: inadequate

This home has not always been led and managed adeptly. Staff lack accountability; they have not always understood their responsibilities or implemented them effectively. Staff have failed to follow medication and child protection policies. Following serious incidents, leaders and managers made the decision to suspend short-break provision because they could not be assured that they had sufficient and competent staff to keep the children safe.

Children who would normally visit for short breaks have been unable to do so for the past 12 weeks. This provision is due to restart despite some concerns remaining. Leaders and managers understand the areas of concern and are implementing an action plan to address them. However, the actions taken so far have not been objectively scrutinised by leaders and managers to enable them to accurately understand the current performance of the home. For example, inspectors found that staff who lead shifts and manage medication continue to do so without having

their competency assessed or completing necessary refresher training. Plans are in place to provide this necessary training.

Several staff are not aware of what they and the team need to do to improve their practice because leaders and managers have not clearly and fully discussed the issues of concern with them. In addition, there is a lack of expectation for staff to attend team meetings. Consequently, several important meetings to help staff to understand what is happening in the home and to contribute to reviewing the action plan have been poorly attended. Current leaders and managers have not done enough to challenge this nor implemented opportunities to formally observe staff's practice and test out their understanding of policy changes.

The home has significant staff vacancies. Staff told the inspectors that, prior to the pause of the short-break provision, they worked excessive hours to ensure that children received continuity of care and that their needs were met. While short breaks have been suspended, leaders and managers have tried to recruit for these vacancies; however, the majority of them remain. Moving forward, this means that a reduced package of short-break provision will be provided.

Two requirements from a previous inspection have been appropriately addressed. However, a previous recommendation to seek the views of stakeholders about the quality of care has not been completed. Leaders and managers plan to obtain this feedback. The independent visitor regularly inspects the home and provides helpful challenge. However, they do not consistently spend time with children during their visits to observe interactions and staff practice.

A new manager has been appointed. She is committed to the service and has applied to register with Ofsted. Staff spoke positively about the support the manager gives. Staff are now receiving regular supervision and appraisals. Supervisions can be improved by ensuring that actions from previous meetings are consistently appraised at the next.

Leaders and managers understand that considerable improvements are required to improve the quality of the environment. They are seeking to modernise the bathrooms, and staff are helping to redecorate rooms. Wooden steps in one garden area present a potential hazard, and blocked guttering causes flooding to the outside area. Despite improvements in some areas, the home feels tired.

Overall, the home has sufficient fire exits, enabling children and staff to exit into the gardens. However, in order to reach the designated evacuation point, children and staff travel through several gates that are locked with keys. Although staff always carry the key to unlock the gates, they have not considered the additional hazards this may present if faced with a real fire.

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 quality and purpose of care standard is that children receive care from staff who— understand the children's home's overall aims and the outcomes it seeks to achieve for children; and use this understanding to deliver care that meets children's needs and supports them to fulfil their potential. In particular, the standard in paragraph (1) requires the registered person to— understand and apply the home's statement of purpose; ensure that staff— understand and apply the home's statement of purpose; protect and promote each child's welfare; make decisions about the day-to-day arrangements for each child, in accordance with the child's relevant plans, which give the child an appropriate degree of freedom and choice; ensure that the premises used for the purposes of the home are designed and furnished so as to— meet the needs of each child; and enable each child to participate in the daily life of the home. (Regulation 6 (1)(a)(b) (2)(a)(b)(i)(ii)(ix)(c)(i)(ii)) Ensure that staff do not unnecessarily restrict children's access to rooms and their belongings.	1 October 2021

Improve the homeliness of the environment taking into consideration the use of institutional style fixtures and fittings in bathrooms, tired décor throughout the home, use of walkie talkies, carrying of keys and travelling through one child's accommodation to access communal areas.	
The children's views, wishes and feelings standard is that children receive care from staff who— develop positive relationships with them; engage with them; and take their views, wishes and feelings into account in relation to matters affecting the children's care and welfare and their lives. In particular, the standard in paragraph (1) requires the registered person to— ensure that staff— ascertain and consider each child's views, wishes and feelings, and balance these against what they judge to be in the child's best interests when making decisions about the child's care and welfare; regularly consult children, and seek their feedback, about the quality of the home's care; and help each child to prepare for any review of the child's relevant plans and to make the child's views, wishes and feelings known for the purposes of that review. (Regulation 7 (1)(a)(b)(c) (2)(a)(iv)(vi)) Ensure that children are helped to contribute to their care plan and are helped to provide feedback on the quality of care they receive.	1 October 2021
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—	1 August 2021

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; 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 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)(i)(iii)(v)(vi)(vii)(d)) Assess the appropriate use of restrictive practices (for example, harnesses, clothes locked away, doors locked) based specifically on an objective review of children's needs and progress. Ensure that all aspects of the home are free from avoidable hazards. In particular, risk assess the use of keys to exit gates to the fire evacuation point, repair the wooden steps in the garden and ensure the guttering is unblocked.	
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—	1 September 2021

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 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; 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; 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)(c)(d)(f)(h)) In addition, ensure that staff responsible for managing medication and leading shifts have completed all the required training set by managers.	
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; 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	1 August 2021

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, ensure that a record is maintained of restrictive practices and that leaders and managers monitor the appropriateness of this.	
The registered person must ensure that an independent person visits the children's home at least once each month. 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. (Regulation 44 (1) (2)(a))	1 August 2021

Recommendations

- The registered person should ensure that they consult with children and other stakeholders to obtain their views about the quality of care provided by the home. ('Guide to the children's homes regulations including the quality standards', page 64, paragraph 15.2)
- The registered person should ensure that children are offered a wide range of activities both inside and outside of the home (where appropriate) and are encouraged to participate in those activities. ('Guide to the children's homes regulations including the quality standards', page 31, paragraph 6.5)
- The registered person should ensure that actions from previous supervision sessions are consistently reviewed at the next meeting. ('Guide to the children's homes regulations including the quality standards', page 61, paragraph 13.2)

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: SC030439

Provision sub-type: Children's home

Registered provider address: County Hall, Taunton, Somerset TA1 4DY

Responsible individual: Serena Pike

Registered manager: Post vacant

Inspectors

Paula Lahey, Social Care Inspector
Penelope Kutz, Social Care Inspector

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