

SC032439

Registered provider: Wiltshire Council

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This children's home is registered to provide a short-break service for up to seven children. Some children may have physical disabilities, learning disabilities and/or sensory impairment. The local authority operates the home.

The registered manager has been in post since August 2020 and registered with Ofsted since December 2020.

Due to COVID-19, at the request of the Secretary of State, we suspended all routine inspections of social care providers carried out under the social care common inspection framework (SCCIF) on 17 March 2020. We returned to routine SCCIF inspections on 12 April 2021.

We last visited this setting on 10 December 2020 to carry out an assurance visit. The report is published on the Ofsted website.

Inspection dates: 22 and 23 February 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 or their welfare is not promoted or safeguarded.

Date of last inspection: 28 October 2019

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
28/10/2019	Full	Good
02/01/2019	Interim	Sustained effectiveness
24/07/2018	Full	Good
28/02/2018	Interim	Sustained effectiveness

Inspection judgements

Overall experiences and progress of children and young people: inadequate

There are serious inadequacies in the leadership and management of the home which are having a negative impact on children's safety and on the quality of care they receive.

Leaders and managers do not thoroughly consider children's competing needs when planning their short-break stays. For example, the home only has one bathroom with a hoist, meaning that staff must arrange children's personal care accordingly. This could have an impact on their experiences if there are several children who use wheelchairs staying in the home at the same time.

While children's general health needs are supported, medical attention is not always sought appropriately when children have been injured or when they present as being in pain and discomfort. Leaders and managers have not ensured that staff have swiftly done all they can to keep children healthy and safe.

Following incidents, there is little meaningful effort made by staff to debrief with the child. The inspector found records which stated that the reason for this is that the child is 'non-verbal', despite having other methods of communication identified. Consequently, children are not helped to express how they feel about incidents, and staff are unable to learn lessons and apply new strategies of support.

Feedback from parents about the home is mostly positive. Parents describe their children's positive reaction on their arrival at the home and say that they feel confident that their children enjoy their stay. However, concerns raised by parents about the quality of their child's care are not always given appropriate consideration by leaders and managers. Parents are not provided with assurances about the actions that have been taken to improve the service or to ensure that the same concerns do not continue.

The manager and staff try to promote a child-led service. On arrival, children choose the bedroom they would like to stay in. Except for the main kitchen, children have access to all areas of the home and garden, with access to a variety of enriching toys and experiences in and around the home. For example, an interactive sensory mat is positioned so children can play with this if they choose to. The home also has a large garden with play equipment and a sensory garden. Outings and activities are decided by the children or by staff who know the children well.

Staff speak lovingly about the children they care for, and they work hard to help them to have an enjoyable stay. Staff have raised funds for the home to pay for trips during the summer for all of the children. During December 2020, the manager and

staff dressed up for Christmas and delivered presents to the children, including those who had not been able to visit due to COVID-19.

During the national lockdowns, staff made regular phone calls to families to offer support, and remained open throughout the pandemic.

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

Leaders and managers have not ensured that safeguarding practices are robust or implemented effectively in this home. Safeguarding processes are not always followed correctly by staff, leaders or managers when concerns are raised. Referrals to other agencies are sometimes made late and after internal investigations are started. These actions may not only add delay but may also compromise a subsequent external investigation.

In their investigations into incidents and safeguarding concerns, leaders and managers lack professional curiosity and robust scrutiny to identify the shortfalls of the service. Therefore, investigations do not lead to meaningful reflections and opportunities for learning lessons are missed.

Safe staffing ratios are not always followed. On occasions, leaders and managers have not ensured that children have the appropriate number of staff looking after them. At times, staff have made decisions to care for children on their own when these children should have two staff looking after them. On some of these occasions, significant incidents have occurred that resulted in injury to the child and staff member.

Leaders and managers do not ensure that children's records are of good quality, and they do not always provide staff with the necessary level of detail to care for the child. In addition, staff do not always follow the plans that are in place for the children. In one instance, this resulted in a child having a dressing applied, to which they are allergic.

Staff do not use restraint as part of their practice in caring for children.

The effectiveness of leaders and managers: inadequate

The home has had high levels of staff sickness, this is compounded by staff self-isolating due to COVID-19. Leaders and managers have tried to recruit permanent staff and have used agency and relief staff to maintain the provision. Where possible, managers have tried to use the same support staff to offer some consistency.

Despite these challenges, leaders and managers have continued to accept referrals and accommodate new children. Measures were put in place to try to balance demand for the service during the pandemic. However, staff are working excessive additional hours each week to continue to meet the demands of the service. This is compromising the quality of the care children receive as staff are tired and

overstretched. Staff report feeling pressure from senior leaders to continue to operate a service. Staff consistently told the inspector that morale is low.

Leaders and managers do not have good oversight of this home. Management reviews of the quality of care and of care records are largely absent. Team meetings and staff supervisions have not been happening routinely. When supervision has taken place, the records of the meetings indicate supervision is of poor quality, does not facilitate reflective practice or record agreed actions. Consequently, several staff report feeling unsupported by their managers. Staff say that they do not feel that managers fully understand the complexities and challenges they face while working.

The manager has recognised some of the concerns and made attempts to address these, for example having a diarised 'open door' each week for staff to come and talk to them. Staff who have returned from sickness spoke of feeling well supported in their return, and spoke specifically of the support of the manager and deputy manager in these circumstances. The manager has also raised their concerns in their own supervision. This led to the closure of the home one day per week in an attempt to alleviate some of the pressures.

Several breaches of regulation have been identified at this inspection and requirements set. Ofsted will continue to monitor this home closely and undertake additional inspections.

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; 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; treat each child with dignity and respect; provide personalised care that meets each child's needs, as recorded in the child's relevant plans, taking account of the child's background. (Regulation 6 (1)(a)(b) (2)(a)(b)(i)(ii)(iii)(iv)) In particular, ensure that children's care plans are followed and children are cared for by the appropriate number of staff as assessed and detailed in their plan. In addition, ensure that careful consideration is given to the matching of children to ensure that their competing needs can be met in the home.	31 March 2022
The health and well-being standard is that— the health and well-being needs of children are met;	31 March 2022

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— that each child has access to such dental, medical, nursing, psychiatric and psychological advice, treatment and other services as the child may require. (Regulation 10 (1)(a)(b)(c) (2)(c)) In particular, ensure that medical attention is sought for children when they are injured and/or showing signs of being in pain.	
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; are familiar with, and act in accordance with, the home's child protection policies;	31 March 2022

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 effectiveness of the home's child protection policies is monitored regularly. (Regulation 12 (1) (2)(a)(i)(ii)(iii)(iv)(v)(vi)(vii)(b)(e)) In particular, ensure that identified safeguarding concerns are recorded and reported fully and in a timely manner, and that investigations into concerns are rigorous and identify learning opportunities and improvements in the quality of care.	
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; demonstrate that practice in the home is informed and improved by taking into account and acting on—	30 April 2022

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)(ii)(h)) In particular, ensure that care notes are reviewed and that there is strong oversight and understanding of the experiences of children. There is sufficient staff to care for the children safely, and feedback is used to monitor and continually improve the service delivered.	
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)) In particular, ensure that staff and managers receive regular and effective supervision that encourages reflective practice, with agreed actions and is recorded fully and accurately.	31 March 2022
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;	31 March 2022

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)) In particular, ensure that when incidents have occurred these are recorded in detail and children given opportunities to communicate their feelings.	
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)) In particular, ensure that records accurately reflect the child's needs, are regularly reviewed, signed and dated.	31 March 2022

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: SC032439

Provision sub-type: Children's home

Registered provider: Wiltshire Council

Registered provider address: Director of Social Services, County Hall, Bythesea Road, Trowbridge, Wiltshire BA14 8LE

Responsible individual: Lucy Townsend

Registered manager: Kevin Derby

Inspectors

Katie Ratcliffe, Social Care Inspector

Wendy Anderson, Social Care Inspector

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