

SC035518

Registered provider: Seashell Trust

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

The home provides care for up to 24 children with physical disabilities, learning disabilities and/or sensory impairment. Children live in six houses on a site that includes a school and college. Most children attend the on-site school. The inspectors only inspected the social care provision at this school.

The registered manager's post is currently vacant. There is an acting manager in post who is due to register with Ofsted.

Inspection dates: 15 and 16 November 2022

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

The children's home provides effective services that meet the requirements for good.

Date of last inspection: 1 December 2021

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
01/12/2021	Full	Good
18/02/2020	Interim	Sustained effectiveness
07/08/2019	Full	Good
21/02/2019	Interim	Sustained effectiveness

Inspection judgements

Overall experiences and progress of children and young people: good

Thirteen children currently live across the different homes. Children live in warm, comfortable and personalised homes. Each child's bedroom is designed to meet their needs and is unique to the individual child, with family photos and personalised colour schemes. Children share positive relationships with each other. Each home has equipment to meet the children's sensory needs. One home has a messy playroom, which the children enjoy. Children access a range of community activities, including visiting the zoo, trampoline parks and trips to the Lake District.

Children share positive relationships with staff. Staff are passionate, committed and nurturing towards the children. Staff provide an enriching and nurturing environment for the children to live in. Each child has an individual communication plan, which staff follow. Staff support children to express their wishes and feelings by using a variety of specialised communication tools. Inspectors observed positive interactions between staff and children, and the children were relaxed in their homes.

Staff know the children well and understand their needs. Staff work effectively with on-site clinical professionals and external agencies to ensure that children's complex health needs are met. Some children require specialised equipment, and staff are trained in how to use it safely.

All children engage in education. The children's educational needs are fully assessed, and children are making progress. The home and school staff work well together to support children's educational achievements and engagement.

One child has moved in since the last inspection. Planning for the move was robust, which helped to ensure a smooth transition. Consideration was given to the compatibility of the children who would live together. Children were able to meet each other when visiting prior to the move. This helped to reduce the children's anxiety about the move.

Children's cultural and religious needs are promoted and met. Staff ensure that food is stored and prepared in line with children's religious requirements. For example, one child has an additional kitchen in the home to ensure that there is a separate space for crockery storage and for staff to prepare the food in line with the child's needs.

Children regularly spend time with their family. One parent said, 'My son now has a different and better future due to [name of home]. He has learnt about self-regulation and communication.'

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

Each child has a robust and detailed risk assessment and a risk management plan in place that contains all known risks. The plans provide clear strategies for staff to follow to ensure that children are safe. Staff understand and adhere to the plans.

One child is assessed as requiring some restrictions to keep him safe and to promote his welfare, for example the locking of a utility area, the use of a specialised harness when using a vehicle, and the use of a visual and audio monitoring camera in the child's bedroom. However, the use of these restrictions is not clearly recorded in the child's plans and risk assessments. Therefore, staff practice is inconsistent in the way the restrictions are implemented, and this lack of recording prevents the restrictions being regularly reviewed.

Staff have needed to physically hold children to keep them safe. Staff training and practice have focused on using de-escalation and the least restrictive methods. Detailed evaluation of the use of physical holds has led to a reduction in its use as triggers and patterns have been identified and strategies and communication methods adapted for each child. Only one child has approval for advanced techniques to be used in line with their need, and there has been only one incident. However, records do not consistently contain evidence that the person completing the hold has been spoken to by management about the measure. This limits the opportunity for learning and reflection. Additionally, children are not consistently given the opportunity to de-brief in a way that is appropriate to their communication needs. This is a repeat requirement from the previous inspection.

There are robust measures in place in relation to medication, including regular medication audits. Staff are trained to safely administer medication and have specialised training to meet children's complex health needs. When medication errors have been identified, they have been addressed in a timely and appropriate way, and medical assistance has been sought.

There has been one issue raised in relation to staff practice. This has been managed appropriately and included a consultation with the designated officer. The service has not received any formal complaints. However, there have been some informal complaints from parents, requesting more regular updates on the progress of their children. This issue was quickly resolved by managers, and parents reported they now receive regular updates and consistent communication.

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

The previous registered manager resigned from the post in June 2022, and there have been two changes in managers since this time. These changes have created a lack of clear leadership. Staff said that changes in senior management have contributed to some staff deciding to leave the organisation.

There is now an experienced, passionate and child-centred manager in post, who is in the process of applying to register with Ofsted. This manager has a clear vision and has a good understanding of the strengths and weaknesses of the service. Staff feedback about the manager has been extremely positive. The manager works alongside the responsible individual to have managerial oversight and lead a strong focus on improving the quality of care for children.

Several staff have left the organisation, and staff said this has been partly due to the instability in management. New staff have now been recruited. The organisation has used agency staff, and managers have ensured that the same consistent staff who know the children complete the shifts where possible. Agency staff are not used in the homes for children with complex health and physical disabilities due to the level of specialised training required. Staff and parents said that staff changes have impacted on the continuity of care for some children. Additionally, some children have not been supported by the correct staffing levels in line with their plans. Although there is no evidence of this having a detrimental impact on the child, the manager and responsible individual have plans in place to ensure that there are adequate staffing levels.

Staff practice-related supervision is not being completed consistently. This limits the opportunity for staff reflection and learning. This is a repeat requirement from the previous inspection. Additionally, yearly appraisals have not been completed. Therefore, staff have not had their performance fully assessed, and areas of development have not been identified.

Robust, safer recruitment checks are completed to ensure that only suitable people are caring for children. Newly recruited staff receive a thorough induction and have completed a range of mandatory training. All staff have completed safeguarding training. However, this training does not include information to enhance staff understanding of specific safeguarding risks and vulnerabilities for disabled children. Additionally, house managers report that there is a lack of further learning and development opportunities in leadership and management. The provider has plans in place to address this.

Rotas are in place; however, the current system of using both paper-based and electronic rotas has created some inconsistency in recording. Additionally, when managers complete additional management shifts, the rotas do not identify which house the manager worked in. This means it is not always clear who worked in each home, and there would not be a clear audit trail if a safeguarding concern was raised.

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, the 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 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— 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; 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)(d)(e)(h)) In particular, the registered person should ensure that staffing levels are in line with children's plans and that there is a consistent staff team to provide continuity of care to children.	23 December 2022
The registered person must ensure that all employees— undertake appropriate continuing professional development; 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)(a)(b)(c))	23 December 2022

In particular, the registered person should ensure that all staff receive regular supervision and appraisals to ensure opportunities for reflection and development.	
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— 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; 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; 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)(iv)(v)(viii)(b)(i)(ii)(c))	23 December 2022
Schedule 4 sets out the other information that the registered person must keep in relation to a children's home. The registered person must— maintain in the home the records in Schedule 4; ensure that the records are kept up to date; and retain the records for at least 15 years from the date of the last entry. (Regulation 37 (1) (2)(a)(b)(c))	23 December 2022

In particular, the registered person should ensure that rotas are accurate and include the full names of all staff who work in the home and the actual hours worked, including managers.

Recommendations

- The registered person should ensure that modifications to limit a child's access to any area of the home or that impact on privacy are properly recorded and kept under regular review. ('Guide to the Children's Homes Regulations, including the quality standards', page 15, paragraph 3.10)
- The registered person should ensure that staff have safeguarding training specifically in relation to children with disabilities and provide opportunities for managers to develop leadership and management skills. ('Guide to the Children's Homes Regulations, including the quality standards', page 53, paragraph 10.12)

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: SC035518

Provision sub-type: Residential special school

Registered provider: Seashell Trust

Responsible individual: John McCaffrey

Registered manager: Post vacant

Inspectors

Suzanne Birchall, Social Care Inspector

Judith Birchall, Social Care Inspector

Mark Woodbridge, Social Care Inspector

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