

SC040631

Assurance visit

Information about this children's home

The home is owned and run by Surrey County Council. Staff care for up to three children who all have complex difficulties, which generally include concerns about their mental well-being.

The registered manager was registered on 29 July 2020.

Visit dates: 8 to 9 September 2020

Previous inspection date: 28 November 2019

Previous inspection judgement: Requires improvement to be good

Information about this visit

Due to COVID-19 (coronavirus), Ofsted suspended all routine inspections in March 2020. As part of a phased return to routine inspection, we are undertaking assurance visits to children's social care services that are inspected under the social care common inspection framework (SCCIF).

At these visits, inspectors evaluate the extent to which:

- children are well cared for
- children are safe
- leaders and managers are exercising strong leadership.

This visit was carried out under the Care Standards Act 2000, following the published guidance for assurance visits.

Her Majesty's Chief Inspector of Education, Children's Services and Skills is leading Ofsted's work into how England's social care system has delivered child-centred practice and care within the context of the restrictions placed on society during the COVID-19 pandemic.

Findings from the visit

We identified no serious or widespread concerns in relation to the care or protection of children at this assurance visit.

The care of children

The staff make a positive difference to children's lives. One child said that the staff had, in a short time, helped her to change her life for the better: 'It is the best place I have lived in [while being cared for by a local authority].'

The quality of relationships between children and staff is generally good and supports children to progress. Staff know them well. One child said that the staff know how she will react before she does.

Staff listen to, value and take account of children's views. The monthly summaries celebrate children's progress, no matter how small, and identify goals for them to aim for. Children and staff create and review these goals together. This enables children to stay in touch with their successes and to understand how to take small steps to make more progress.

Staff promote education well. Children continued to engage effectively with their education during the lockdown period of the COVID-19 pandemic. This has helped children to be well prepared and to engage with their new education courses. One child said that the most positive thing about being here is getting onto the college course she wanted.

Children's contact with their families and friends is positively supported by the staff team. Staff work closely to build effective relationships with parents, and this work has resulted in changes that have helped a child to become safer because her mother helps staff to find her daughter when she is missing.

Staff understand and meet the health needs of children. Staff have access to relevant health support to guide their practice, especially in relation to children's mental health needs.

The safety of children

Children's safety is promoted by the relationships that staff develop with them over time. For example, children are involved in developing their safety plans, and staff learn from incidents that occur. The staff make safeguarding referrals appropriately and understand the safeguarding issues for each child. Records relating to safeguarding concerns are not methodically stored, and this means that a full history of the actions taken in response to safeguarding concerns is not readily available.

Some children raised concerns about their care with the inspector. Their concerns related mainly to misunderstandings between staff and the child, and poor

communication and recording practices. Staff and management were already aware of each of the concerns raised and had taken appropriate action. The managers also confirmed that they would revisit these issues with the children to ensure that no misunderstandings remained.

Managers are aware that some staff have a wider experience of responding to traumatised children than others. Managers take account of this in their daily management of the home. They have increased support to the staff team in order to help them to develop; for example, a therapist recently recommenced monthly support groups for the team.

Children have recently raised concerns that they feel bullied by one another. The manager has responded to this appropriately and has implemented systems to ensure that incidents of bullying and how they are dealt with are recorded in detail.

Relevant risks for each child are identified and understood by staff. However, the risk assessments are not regularly reviewed after incidents or when new concerns emerge. For example, there is no detailed written guidance for staff about how to manage the current complex and challenging relationships between children. Staff discussions and records indicate that, in practice, they manage these concerns well. However, the omission of written guidance runs the risk that staff may not consistently implement agreed strategies to manage children's risky behaviours.

Children rarely go missing, but, if they do, the staff know how to respond. The staff work well with other agencies and families to ensure that children come back as soon as possible to the home. Managers reflect and learn in response to incidents when children go missing. They focus staff practice and intervene effectively. This helps to reduce the likelihood that children will go missing.

Leaders and managers

The registered manager and responsible individual have a clear vision for the home. Service improvement is supported by a well-considered development plan that identifies many of the shortfalls that the inspector found during this inspection. This shows that the manager of the home has good insight into the strengths and weaknesses of the service. However, not all the shortfalls have been addressed.

The monthly independent visitor who monitors the quality of care has supported managers well to identify the strengths and weaknesses of the service. The visitor uses external sources, such as social workers and parents, effectively and engages with children creatively to form views of the home's operation. Although virtual visits occurred during COVID-19 lockdown, the visitor returned to face-to-face visits as soon as possible.

The last six-monthly review of the quality of care completed by the registered manager is well written and informative, but it lacks analysis and evaluation. The report makes statements about children's care and support which are not informed

by children's feedback on their experience of care or external views of the quality of services.

Staff spoke positively about the management support that they receive. They said that this helps them to meet children's needs and to develop their practice. One member of staff said that the open culture she had thought existed here when she came for interview has proved to be in place. Others reported that managers had been personally supportive of their individual needs during the COVID-19 pandemic.

Investigations into concerns about staff practice are in depth and conclusive. Clear plans to improve practice are developed, implemented and monitored effectively where appropriate.

Staff do not consistently follow guidance on where to record information. They also do not always check that changes made in one child's plan are reflected in other plans made about them. Missing information was located during the assurance visit. However, storing information in a haphazard way may result in gaps about a child's care at the home for the child to see in later life. This also creates a risk that staff cannot easily access the information they need to provide safe and consistent care.

Actions are being taken to address staff's training needs, but training has been impeded by COVID-19 restrictions. Staff have undertaken online courses, such as mental health awareness and first aid. Arrangements to complete more face-to-face training have also been arranged to commence in the next few weeks. Managers therefore show a good awareness of the consequences of COVID-19 on staff development and they are working to address any gaps.

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 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. (Regulation 12(1)(2)(a)(i))	30/09/2020

In particular, the registered person must ensure that risk assessments are reviewed frequently to ensure that these documents provide accurate and up-to-date guidance for staff on how to manage risks.	
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Recommendations

- Staff should be familiar with the home's policies on record keeping and understand the importance of careful, objective, and clear recording. Staff should record information on individual children in a non-stigmatising way that distinguishes between fact, opinion and third-party information. Information about the child must always be recorded in a way that will be helpful to the child. ('Guide to the children's homes regulations including the quality standards', page 62, paragraph 14.4)
In particular, the registered person should ensure that staff know where to record information in records and plans and file information in accordance with any file policy in place.
- The registered person is responsible for deciding what each review should focus on, based on the specific circumstances of the home at that particular time and any areas of high risk to the children that the home is designed to care for, such as missing or exploitation. They will also consider what information or data recorded in the home will form part of the evidence base for their analysis and conclusions. There is no expectation that the registered person will review the home against every part of the Quality Standards every six months – registered persons should use their professional judgement to decide which factors to focus on. The review should enable the registered person to identify areas of strength and possible weakness in the home's care, which will be captured in the written report. The report should clearly identify any actions required for the next 6 months of delivery within the home and how those actions will be addressed. The whole review process and the resulting report should be used as a tool for continuous improvement in the home. ('Guide to the children's homes regulations including the quality standards', page 65, paragraph 15.4)
In particular the registered person should ensure that children's views and, those of professionals and family, are used to inform the six-monthly review and feature in the report itself.

Children's home details

Unique reference number: SC040631

Registered provider: Surrey County Council

Registered provider address: Quadrant Court, 35 Guildford Road, Woking, Surrey GU22 7QQ

Responsible individual: Lisa Wade

Registered manager: Samantha Heighes

Inspector

Ruth Coler, Social Care Inspector

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