

SC042147

Child First Limited

Monitoring visit

Inspected under the social care common inspection framework

Information about this children's home

The home is run by a private organisation. It is registered to accommodate up to six young people, irrespective of gender, who have emotional and/or behavioural difficulties. The home aims to support young people to return to their families, move to foster carers or move on to independent accommodation. The organisation has its own school, which is registered with the Department for Education.

Inspection date: 24 October 2017

This monitoring visit

A full inspection took place on 31 August and 1 September 2017. The home was judged inadequate in all areas. The purpose of this visit was to monitor the progress made in relation to the four requirements made at the inspection.

12: The protection of children standard

In order to meet the protection of children standard, the registered person must ensure:

- (2)(a)(i) 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;
 - (2)(a)(iii) have the skills to identify and act upon signs that a child is at risk of harm;
 - (2)(b) 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.
- (Regulation 12(2)(a)(i)(iii)(b))

This is with specific reference to the assessment and management of risk, staff seeking guidance when managing dangerous incidents and calling the fire service when there is a risk of fire in the home.

And

After consultation with the fire and rescue authority, the registered person must take adequate precautions against the risk of fire and make arrangements for persons working at the home to receive suitable training in fire prevention.
(Regulation 25(1)(a)(c))

Specifically, ensure the home's fire safety plan specifies what staff should do if they discover a fire and ensure staff undertake refresher fire safety training if they fail to meet their responsibilities regarding fire safety.

Since the last inspection, the management team members, particularly the responsible individual and the acting manager, have ensured that fire procedures are clear and that all members of staff know what to do in the event of a fire. All members of staff have completed online fire safety training. Seven out of the 11 members of staff in the team have all attended additional fire marshal and fire warden training and the remaining four members of staff are rostered to complete this in November. Two of those four are new members of staff and the other two were unable to attend the earlier training due to illness and annual leave. The fire evacuation process and staff awareness of fire safety procedures have also been discussed at team meetings. Two members of staff who met with the inspector during this visit were clear about their roles in the event of a need to evacuate the premises and contact the fire brigade. This process also includes the need for members of staff to call senior members of staff for advice and support if required.

Since the last inspection, members of staff have sought advice and support when managing difficult and challenging situations which have occurred. Members of staff are complimentary about the managerial response and support during these incidents, which have been resolved safely. For example, a young person set a cushion alight in the garden and this was promptly extinguished. The acting manager attended the home and a thorough check of the premises was made to ensure that there was no risk to anyone in the building. During this time, all young people were supervised by members of staff to make sure that they were safe.

The management response to the requirements made under regulations 12 and 25 means that these requirements are now met.

13: The leadership and management standard

In order to meet the leadership and management standard the registered person must:

(2)(h) use monitoring and review systems to make continuous improvements in the quality of care provided in the home.

(Regulation 13(2)(h))

This is with specific reference to undertaking management reviews of serious incidents and identifying what steps need to be taken to improve practice.

Significant incidents are now reviewed by both the acting manager and the responsible individual. This ensures that they are analysed and action plans are put in place, or strategies are reviewed and changed. For example, staffing levels were raised to a one-to-one ratio when there were concerns about a young person's behaviour and his potential impact on other young people while he waited to move to a new home. This ensured that all of the young people received the support they needed and more settled atmosphere was established for the group.

Additionally, reviews of other incidents, such as physical restraints, have been carried out by the responsible individual. These reviews have given consideration to changing the strategies and types of hold used, and to seeking the young people's views on how to avoid repetition of unwanted behaviours. This approach shows that the responsible individual is actively involved in assessing and reviewing practice with a view to improving outcomes for the young people and the practice of members of staff. It is of note that the responsible individual and the acting manager have agreed that there will be no further admissions to the home until there has been a period of stability for the young people and staff. Significantly, the assessments of the impact of new admissions to the group have been reviewed. There has not been a chance to test the effectiveness of these yet, but they show that managers are seeking to improve practice in this area.

The managerial response to shortfalls in these areas now means that the requirement relating to regulation 13 has been met.

The procedure to be followed in the event of an allegation of abuse or neglect must provide for records to be kept of an allegation of abuse or neglect, and the action taken in response.

(Regulation 34(2)(d))

This is with specific reference to keeping records of what action has been taken to ensure managers and staff know the outcomes of child protection referrals made by the home.

At the last inspection, it was noted that records of child protection referrals to social workers and other agencies had not been completed to show whether or not they had been resolved, or what was being done to investigate them. These records are now more detailed and contain information about whether the incidents have been resolved or are the subject of further investigations. Importantly, they show that managers now routinely approach social workers for updates. This ensures that the young people can be informed of any developments, and that staff can be informed if there is a need to change a young person's care plan as a result of new information.

Shortfalls relating to the requirement made under regulation 34 have now been addressed and this requirement is met.

Recent inspection history

Inspection date	Inspection type	Inspection judgement
01/09/2017	Full	Inadequate
07/12/2016	Full	Requires improvement
25/04/2016	Interim	Sustained effectiveness
24/09/2015	Full	Good

Information about this inspection

The purpose of this visit was to monitor the action taken and the progress made by the children's home since its last Ofsted inspection.

This inspection was carried out under the Care Standards Act 2000.

Children's home details

Unique reference number: SC042147

Provision sub-type: Children's home

Registered provider: Child First Limited

Registered provider address: c/o 40 Oxford Road, Worthing, West Sussex BN11 1UT

Responsible individual: Johanna Davys Havard

Registered manager: Post vacant

Inspector

Paul Taylor, social care inspector

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Store Street
Manchester
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