

SC045408

Surrey County Council

Monitoring visit

Inspected under the social care common inspection framework

Information about this children's home

This home offers a period of short-term assessment to determine the suitability of the next planned steps for young people, which may include returning to family, foster care or other forms of longer-term residential care. The home provides care and accommodation for two young people, irrespective of gender, who are from 10 to 17 years old on admission.

Inspection date: 11 June 2018

This monitoring visit

This monitoring visit was carried out following a declined effectiveness judgement made at the interim inspection on 25 March 2018. Three compliance notices were issued from that inspection. The purpose of this monitoring visit was to assess the progress made against these compliance notices.

The registered manager was present at this monitoring visit, as well as the acting service manager on behalf of the responsible individual. The staff team has been further depleted with one senior staff member, one residential worker and two bank staff having left since the interim inspection. Two young people currently live in the home.

A compliance notice was served under Regulation 11

(1)(a)(b)(c)(2)(a)(i)(ii)(iii)(v)(ix)(x)

**Regulation 11.—(1) (a)(b)(c) In order to meet the positive relationships standard the registered person must ensure that children are helped to develop, and to benefit from, relationships based on—
mutual respect and trust; an understanding about acceptable behaviour;
and positive responses to other children and adults.**

Previous shortfalls included the staff's inability to maintain appropriate relationships with young people. The lack of realistic boundaries and expectations contributed to

young people's high-risk behaviours, some of which led to staff being injured. In particular, the steps related to the improvements needed to the relationships between staff and young people.

An audit, completed by the manager, identified that the high use of agency staff and inconsistent behaviour management interventions had contributed to frequent injuries to staff and damage to the home. A more strategic approach to staff recruitment and a review of behaviour management guidance have been implemented as a result.

The behaviour management policy has been updated. It clearly outlines what is considered acceptable behaviour and the boundaries of staff's interactions with the young people. A new section regarding physical contact further guides the staff in maintaining professional boundaries.

Staff have received safeguarding training and have attended team meetings where the behaviour management policy has been discussed. All five staff members were interviewed during this visit and they competently demonstrated their understanding of the new policy and how it informs their daily practice.

The steps are met and will be further tested at the next inspection.

(11)(2)(a)(i)(ii)(iii)(v)(ix) In particular, the standard in paragraph (1) requires the registered person to ensure— that staff— meet each child's behavioural and emotional needs, as set out in the child's relevant plans; help each child to develop socially aware behaviour; encourage each child to take responsibility for the child's behaviour; and communicate to each child expectations about the child's behaviour and ensure that the child understands those expectations in accordance with the child's age and understanding.

In particular, the steps were to ensure that staff understood the young people's behavioural needs and had clear guidance to follow in order to meet them.

A social pedagogue has supported the registered manager to undertake a review of the young people's emotional and behavioural needs.

Care plans now provide clear objectives and detail the strategies to achieve them. Discussions with the staff evidenced that they are now clear about how to conduct planned work with the young people and that they understand how to demonstrate the progress that the young people make.

The steps are met and will be further tested at the next inspection.

(11)(2)(a)(x) In particular, the standard in paragraph (1) requires the registered person to ensure— that staff— are provided with supervision and support to enable them to understand and manage their own feelings

and responses to the behaviour and emotions of children, and to help children to do the same.

In particular, the steps were to ensure that staff supervision is of good quality, frequent and consistently reviews staff's practice and sets clear targets.

A review of staff supervision has been conducted by senior managers. Consequently, a training plan is in place for all supervisors to ensure greater quality of supervision, including that the records record and review progress against targets. The supervision template has also been reviewed; it now includes prompts to ensure that relationships between the staff and young people are discussed and reflected upon. Records sampled show that the quality of supervision is already improving.

The steps are met and will be further tested at the next inspection.

Sufficient action has been taken against all of the steps under Regulation 11; therefore, this compliance notice is met.

A compliance notice was served under Regulation 12 (1)(2)(a)(i)(ii)(v)(vi)

Regulation 12.—(1)(2)(a)(i)(ii) In order to meet the protection of children standard, the registered person must ensure 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; and help each child to understand how to stay safe.

In particular, the steps referred to the staff having insufficient understanding of safeguarding and assessing risk particularly in relation to admission practices.

The registered manager and her team have reviewed risk assessment formats. A new impact assessment has been developed to use when assessing a potential referral to the home. It clearly outlines the need to consider the presenting risks of the young person already living in the home in order to consider the potential impact and changing dynamics that may occur.

A comprehensive risk assessment template that is being successfully used in another of the organisation's homes has been implemented with good effect. Staff meeting minutes demonstrate staff being involved in the review of the risk assessments for the young people currently in placement. These documents now provide clear guidance for staff, which is widely understood and consistently applied.

The steps are met and will be further tested at the next inspection.

(12)(1)(2)(v)(vi) In particular, the standard in paragraph (1) requires the registered person to ensure— that staff— understand the roles and responsibilities in relation to protecting children that are assigned to them by the registered person; and take effective action whenever there is a serious concern about a child’s welfare.

In particular, the steps referred to the staff’s limited understanding of their roles and responsibilities in relation to safeguarding.

The human resources department has conducted a staff skills and training audit that was examined during this monitoring visit. The audit identified that staff induction periods had been inconsistent, such as when staff are internally promoted. Consequently, plans are underway to address this identified shortfall and it is planned for all staff to have a fresh induction to their current roles. The registered manager has already visited other homes as part of her induction.

Staff have received updated refresher safeguarding training and further training is planned that is specific to the unique safeguarding aspects and risks of this particular home. No serious safeguarding incidents have occurred since the previous inspection to test staff’s ability to respond effectively. However, due to the improvement work already undertaken, staff are demonstrating a greater understanding of safeguarding and their roles and responsibilities.

The steps are met and will be further tested at the next inspection.

Sufficient action has been taken against all of the steps under Regulation 12; therefore, this compliance notice is met.

A compliance notice was served under Regulation 13 (1)(2)(a)(c)(f)(h)

Regulation 13.—(1)(2)(a) The leadership and management standard is that the registered person enables, inspires and leads a culture in relation to the children’s home that— 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.

In particular, the steps were to ensure that the registered manager understood her role and responsibilities and how to deliver the aims and objectives outlined in the statement of purpose.

The registered manager now has a mentor with whom she meets regularly to learn from the good practice in the organisation’s other homes. She has also met regularly with the responsible individual and acting service manager as part of a working group to improve the quality of service at this home.

Work is underway for the registered manager to gain a greater insight into the delivery of the home's statement of purpose through a number of planned and focused supervisions.

The steps are met and will be further tested at the next inspection.

(13)(2)(c) In particular, the standard in paragraph (1) requires the registered person to— ensure that staff have the experience, qualifications and skills to meet the needs of each child.

In particular, the steps referred to the skills and knowledge gaps of the staff team that were identified at the previous inspection.

The skills and training audit has been used to develop a three-month training plan for all the staff. Recruitment is also underway to replenish the team. In the interim period, the registered manager has identified two agency workers who are supporting the team regularly. These two workers are receiving supervision from the senior staff members to ensure that they too are supported to deliver the home's aims and objectives, as described within the statement of purpose.

(13)(2)(f)(h) In particular, the standard in paragraph (1) requires the registered person to— 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.

In particular, the steps identified the need to conduct a review of the previous monitoring arrangements due to the significant gaps and weaknesses identified at the previous inspection.

Senior leaders have completed a review of the previous monitoring systems and identified a number of shortfalls. No patterns or trends in relation to significant events had been identified by the registered manager or the independent visitor prior to the interim inspection.

Consequently, a more detailed monitoring tool has been implemented. The registered manager feels that this is more effective in ensuring the necessary checks are effective in highlighting any shortfalls or areas of concern.

A new independent visitor is now monitoring the home. He has undertaken one visit thus far. Therefore, the impact of his visits and subsequent findings cannot be fully tested at this stage. However, his appointment is demonstrative of the provider's desire to improve the effectiveness of external monitoring.

Comprehensive development plans have been made which extend beyond meeting

the compliance notices. The registered manager is confident in the plans' projected impact in continuing to support the team's development, and raise the quality of care provided at the home.

The steps are now met and will be further tested at the next inspection.

Sufficient action has been taken against all of the steps under Regulation 13; therefore, this compliance notice is met.

In conclusion, the provider has taken swift and decisive action to fully understand the impact of the three compliance notices and has set about tackling the identified shortfalls in a well-planned and comprehensive way. Most notably, at this monitoring visit, staff demonstrated their enthusiasm in response to the guidance and support now in place. The young people were engaging positively with the staff and the spike of incidents, noted at the previous inspection visit, had significantly reduced. All three compliance notices are judged as met. No further enforcement action is required following this monitoring visit.

Recent inspection history

Inspection date	Inspection type	Inspection judgement
21/11/2017	Full	Requires improvement to be good
13/03/2017	Full	Good
06/06/2016	Interim	Sustained effectiveness
30/11/2015	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: SC045408

Provision sub-type: Children's home

Registered provider: Surrey County Council

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

Responsible individual: Ian Forbes

Registered manager: Emma Scarr

Inspector:

Sarah Olliver: social care inspector

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Piccadilly Gate
Store Street
Manchester
M1 2WD

T: 0300 123 1231
Textphone: 0161 618 8524
E: enquiries@ofsted.gov.uk
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