SC053145

Registered provider: Partners in Care Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This children's home is operated by a private organisation. The home provides care for up to three children. The home's statement of purpose states that staff provide a familial environment where children who cannot remain at home can be cared for in a way that allows them to experience a strong sense of nurture matched by clear boundaries and routines.

The home is currently operating without a registered acting manager.

Inspection dates: 13 and 14 September 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 acting managers	inadequate

There are serious and widespread failures that mean children are not protected and their welfare is not promoted or safeguarded. The care and experiences of children are poor and they are not making progress.

Date of last inspection: 8 July 2021

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
08/07/2021	Full	Good
16/01/2020	Full	Good
19/03/2019	Interim	Improved effectiveness
09/05/2018	Full	Good

Inspection judgements

Overall experiences and progress of children and young people: inadequate

Staff are unable to develop trusting and secure relationships with the children they are providing care for. This is because of a high turnover of staff and an over-reliance on agency staff. Several windows had been damaged at the front of the home a week prior to the inspection. When inspectors asked how this happened, a child said, 'I was frustrated with the constant changes of staff and being left alone with strangers.'

Throughout the inspection, inspectors observed children persistently berating the manager and staff. The manager and staff were unable to support the children to de-escalate their presenting behaviours effectively. Attempts to distract the children resulted in further significant disruption.

Education is not prioritised. Therefore, children do not receive suitable education. The majority of children have not attended school since they moved into the home. At the time of the inspection, one child was receiving three hours of alternative education per week, and two children did not have an educational provision in place. The manager and staff do not liaise with other professionals to source suitable education for children or challenge the quality of education currently in place for one child. Despite not being in education, children are not provided with consistent daily routine or boundaries. As a result, children are living in a reactive and chaotic environment that does not support constructive learning opportunities.

The health and well-being of children are not being promoted. Some children are not registered with health professionals, and some children are not supported to attend health appointments. Additionally, for those children who have been prescribed medication, administration of the medication is not monitored by staff. For example, staff have failed to address a child's persistent refusal to take a prescribed medication and have not referred their concerns to the doctor.

Staff do not complete direct work with children to encourage them to attend health appointments or to support their understanding of healthy lifestyles. This lack of basic care and support compromises children's well-being and does not provide them with age-appropriate skills which will help them when they move out of the home.

The manager and staff do not enter children's bedrooms. They say that this is because they are not allowed by children. The manager stated that this was in line with the children's wishes and feelings. Because of this, children's bedrooms are disorganised and unkempt. This does not promote a nurturing environment or support the therapeutic parenting ethos which is detailed in the home's statement of purpose.

Opportunities to engage and build relationships with children are minimised due to a lack of routine, expectations and boundaries at the home. Staff are unable to encourage children to participate in meetings at the home. As a result, children express their wishes through aggression and challenge.

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

Risk assessments are ineffective and do not emphasise children's vulnerabilities and risks or the action to be taken by staff to mitigate any potential risks. For example, two children have developed a relationship together. The children are left unsupervised in each other's bedrooms, despite the agreed strategies stating that a member of staff must supervise the landing with the bedroom door open. The failure to ensure staff adhere to the agreed plans to manage risks results in children's safety being significantly compromised.

There have been a number of incidents when children have been missing from care. The manager and staff are not proactive in their approach and do not adhere to the missing-from-home protocol consistently. The recordings kept when children are missing from care are of poor quality. They lack detail and do not provide evidence of the action staff take to locate a missing child.

Staff do not take appropriate action to keep children safe. For example, a child refused to return home and was subsequently reported missing. The child contacted the home and told staff where they were and who they were with. However, staff failed to take appropriate action and did not make use of this information to attempt to locate the child.

Holding a child to keep them safe is used at the home. However, the protocol for managing such incidents is not adhered to routinely. For example, children are not always provided with an independent debrief or offered an opportunity to discuss and explore their feelings regarding the incident and why they had to be held. The process for evaluating the use of holding a child is not robust. This is because the manager evaluates incidents that she has been involved in. Therefore, the monitoring of incidents does not promote improvements and lacks transparency.

Allegations against staff are not suitably addressed. Children have made allegations following a physical hold to keep them safe. The manager has not responded to these allegations, or shared them with the appropriate safeguarding agencies, to ensure that they are handled impartially and quickly. Investigations into allegations or suspicions of harm are not completed consistently. Therefore, children's concerns are not prioritised to ensure that they are kept safe and protected.

Self-injurious behaviour is not managed suitably. The manager and staff have failed to identify the declining emotional health of children. When children

have required treatment, no arrangements have been made to provide additional support or monitoring for them. The failure to manage and respond to children's failing emotional well-being places children at further risk of harm.

Behaviour management plans are ineffective. Children are provided with financial incentives to encourage positive behaviours. However, incentives are consistently made available to children when their behaviour has not warranted a reward. A staff member said, 'We tick off children's targets for an easy life.' As a result, children's abusive and threatening behaviours continue to be unmanaged and control the operation of the home.

The effectiveness of leaders and acting managers: inadequate

The care provided in the home is not as detailed in the home's statement of purpose. The manager and staff are unable to demonstrate their understanding of the therapeutic parenting approach. The manager said, 'This is something we are working towards. We have not had the training yet.'

The manager's internal monitoring is inadequate. Significant shortfalls in practice have not been identified and addressed. The manager is unable to demonstrate the action taken to address the shortfalls that are identified by the independent visitor. The failure to recognise and address poor and unsafe practice impedes the necessary development required at this home.

Case records are not suitably monitored. As a result, documents such as missing-from-care reports, details of allegations and records of incidents when children have been held are of poor quality or incomplete. This failure to ensure that records are completed and maintained to a suitable standard impedes the manager's ability to have sufficient oversight of practice and compromises the care and protection of children living at the home.

Staff are provided with individual supervision sessions. However, the manager's failure to identify significant poor practice means that practice issues are not addressed. As a result, staff are not provided with opportunities to reflect on their practice to aid their continued development, and the quality of care is not improved.

A number of staff have left the organisation, resulting in the over-reliance on agency staff. Staff working at this home do not have the experience and skills required to help children with complex trauma effectively. As a result, the home lacks routine, boundaries and aspirations for children. One child openly expressed her anger and said, 'I was taken away from a chaotic and unsafe home and have been placed into a chaotic and unsafe home.'

The manager is not leading and managing the home in a way which is consistent with the home's statement of purpose. The failure to identify poor and unsafe

practice serves to exacerbate the cycle of risk. Therefore, outcomes for children are compromised.

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
In meeting the quality standards, the registered person must, and must ensure that staff— seek to involve each child's placing authority effectively in the child's care, in accordance with the child's relevant plans; seek to secure the input and services required to meet each child's needs; if the registered person considers, or staff consider, a placing authority's or a relevant person's performance or response to be inadequate in relation to their role, challenge the placing authority or the relevant person to seek to ensure that each child's needs are met in accordance with the child's relevant plans; seek to develop and maintain effective professional relationships with such persons, bodies or organisations as the registered person considers appropriate having regard to the range of needs of children for whom it is intended that the children's home is to provide care and accommodation. (Regulation 5 (a)(b)(c)(d))	30 October 2022
The education standard is that children make measurable progress towards achieving their educational potential and are helped to do so. In particular, the standard in paragraph (1) requires the registered person to ensure— that staff— help each child to achieve the child's education and training targets, as recorded in the child's relevant plans;	30 October 2022

support each child's learning and development, including helping the child to develop independent study skills and, where appropriate, helping the child to complete independent study; understand the barriers to learning that each child may face and take appropriate action to help the child to overcome any such barriers; help each child to understand the importance and value of education, learning, training and employment; promote opportunities for each child to learn informally; maintain regular contact with each child's education and training provider, including engaging with the provider and the placing authority to support the child's education and training and to maximise the child's achievement; raise any need for further assessment or specialist provision in relation to a child with the child's education or training provider and the child's placing authority; help a child who is excluded from school, or who is of compulsory school age but not attending school, to access educational and training support throughout the period of exclusion or non-attendance and to return to school as soon as possible; help each child who is above compulsory school age to participate in further education, training or employment and to prepare for future care, education or employment; help each child to attend education or training in accordance with the expectations in the child's relevant plans; and that each child has access to appropriate equipment, facilities and resources to support the child's learning. (Regulation 8 (1) (2)(a)(i)(ii)(iii)(iv)(v)(vi)(viii)(ix)(x)(b))	
*The health and well-being standard is that— the health and well-being needs of children are met; children receive advice, services and support in relation to their health and well-being; children are helped to lead healthy lifestyles.	30 October 2022

In particular, the standard in paragraph (1) requires the registered person to ensure— that staff help each child to— achieve the health and well-being outcomes that are recorded in the child's relevant plans; understand the child's health and well-being needs and the options that are available in relation to the child's health and well-being, in a way that is appropriate to the child's age and understanding; take part in activities, and attend any appointments, for the purpose of meeting the child's health and well-being needs; 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)(a)(i)(ii)(iii)(c))	
* The positive relationships standard is that children are helped to develop, and to benefit from, relationships based on— mutual respect and trust; an understanding about acceptable behaviour; positive responses to other children and adults. 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 the understanding and skills to recognise or withdraw from a damaging, exploitative or harmful relationship; strive to gain each child's respect and trust; understand how children's previous experiences and present emotions can be communicated through behaviour and have	30 October 2022

the competence and skills to interpret these and develop positive relationships with children. (Regulation 11 (1)(a)(b)(c) (2)(a)(i)(vii)(viii)(ix))	
* 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; 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)(b)(e))	30 October 2022
* 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; promotes their welfare.	30 October 2022

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 have the experience, qualifications and skills to meet the needs of 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; 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)(c)(e)(f)(h))	
The care planning standard is that children— receive effectively planned care in or through the children's home. In particular, the standard in paragraph (1) requires the registered person to ensure— that children are admitted to the home only if their needs are within the range of needs of children for whom it is intended that the home is to provide care and accommodation, as set out in the home's statement of purpose. (Regulation 14 (1) (2)(a))	30 October 2022
The registered person must ensure that the employment of any person on a temporary basis at the children's home does not prevent children from receiving such continuity of care as is reasonable to meet their needs. (Regulation 31 (1))	30 October 2022
The registered person must prepare and implement a policy ("the behaviour management policy") which sets out— how appropriate behaviour is to be promoted in the children's home;	30 October 2022

the measures of control, discipline and restraint which may be used in relation to children in the home. The registered person must keep the behaviour management policy under review and, where appropriate, revise it. 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; the effectiveness and any consequences of the use of the measure; 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; 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.	

Paragraph (3) does not apply in relation to restraint that is planned or provided for as a matter of routine in the child's EHC plan or statement of special educational needs. (Regulation 35 (1)(a)(b) (2) (3)(a)(i)(ii)(iii)(iv)(v)(vi(vii)(viii) (b)(i)(ii)(c) (4))	

* These requirements are subject to a compliance notice.

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: SC053145

Provision sub-type: Children's home

Registered provider: Partners in Care Limited

Registered provider address: 2 The Calls, Leeds LS2 7JU

Responsible individual: Krysia Watson

Registered manager: Post vacant

Inspectors

Maria McGranaghan, Social Care Inspector
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