

SC064663

Registered provider: Eastfield Group

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This privately owned home provides care and accommodation for up to seven children with social, emotional and mental health needs.

The manager has been registered with Ofsted since 2018.

Due to COVID-19, at the request of the Secretary of State, we suspended all routine inspections of social care providers carried out under the social care common inspection framework (SCCIF) on 17 March 2020. We returned to routine SCCIF inspections on 12 April 2021.

We last visited this setting on 29 January 2021 to carry out a monitoring visit. The report is published on the Ofsted website.

Inspection dates: 26 and 27 October 2021

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 managers **inadequate**

There are serious and widespread failures that mean children are not protected or their welfare is not promoted or safeguarded.

Date of last inspection: 9 April 2019

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
09/04/2019	Full	Good
12/06/2018	Full	Good
31/08/2017	Full	Good
07/02/2017	Interim	Sustained effectiveness

Inspection judgements

Overall experiences and progress of children and young people: inadequate

The current standards of care and support provided at this home mean that children's safety and emotional well-being needs are not being adequately met. The lack of coordinated placement planning to support children effectively is placing them at significant risk.

Children's plans do not contain their needs or the goals that they are trying to achieve. The adults caring for the children do not have a good understanding of their individual needs and they have not received specific training to educate them. These shortfalls result in children receiving care that is not personalised from adults who are not equipped to meet their individual needs.

Most children are attending education. However, the adults caring for them do not understand their educational needs and targets for the future. This has resulted in children not achieving their full educational potential and a culture of low aspirations for children.

Children are supported to spend time with the people who are important to them, such as family and friends. This enables them to create good memories and have social opportunities.

Children attend most of their health appointments with the adults who care for them. Their individual health needs are not always understood by the adults caring for them and children's health plans are not accessible. This results in children's health needs not being reviewed by adults who have the knowledge and understanding of their needs.

The team lacks curiosity and reflection relating to its own practice. The adults caring for children say that they offer activities to children; however, children spend a lot of time in their bedrooms. This results in children not having meaningful, impactful relationships with the adults caring for them.

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

The risks in children's lives are not clear in their plans. Their plans do not contain strategies for the adults to follow when children are at risk or to minimise the risk. This has resulted in the adults caring for children not responding to risk appropriately.

Children with high-risk health conditions have not received medication in line with health advice. There is no assessment of children's health needs, management oversight of medication errors or health advice sought when a child has not received their medication. There is also no medication protocol to follow to provide clear

direction to the adults providing medication to children. These shortfalls have created risky situations for children who have complex, life-threatening health conditions.

The adults caring for children lack curiosity relating to risks in children's lives. This has resulted in a child being exposed to unknown substances in the home and there has been no recognition of possible exploitation risks.

When children go missing from their home, the adults caring for them follow the missing-from-home protocol. They liaise with other agencies, the child and their family to get them back home safely.

The manager and the adults caring for children have deprived a child's liberty without authorisation from the responsible authorities. This has occurred as a behaviour management strategy, which is not in line with the child's plan. This has resulted in the child being exposed to risk that is avoidable.

The manager does not respond to children's complaints and/or allegations in line with the organisation's policies and procedures. The current complaints system is not inclusive of all children living in the home. The manager does not investigate all complaints, and children do not receive an outcome. There is a stigmatising approach to complaints, which has created a non-learning culture in the team and left poor practice unaddressed.

The effectiveness of leaders and managers: inadequate

The management team is not leading and managing the home in a manner that is consistent with the aims outlined in the statement of purpose. The failure to address the risk-taking behaviours and safeguarding concerns serves to exacerbate the cycle of risk. Therefore, outcomes for children are compromised.

Children's records contain judgemental statements, and they are not accessible to them. The manager and the adults caring for children are not always reflective about children's difficulties, which has created a lack of empathy for some children. This adds to children's feelings of low self-esteem and no self-worth.

When incidents occur, the manager does not evaluate practice. Following incidents and a physical intervention, independent evaluation does not take place. This reduces the opportunity for the manager and the adults caring for children to learn from incidents and improve the quality of care for children.

The adults caring for children report that they feel supported by their manager. However, they are not receiving supervision in line with the organisation's policy and there is a negative view of supervision. This view and practice do not enable the team to reflect about its own practice and development. It also minimises the opportunity for the manager to develop practice and ensure that the developmental needs are met for each team member.

The manager and the adults caring for the children have not received training to meet the children's needs. The manager has made decisions about children moving into the home without her team having the adequate knowledge and skills to provide good care to the child. She has not reflected about these decisions to ensure that a child-focused plan is put in place. This has resulted in children receiving care from adults who are not equipped with the appropriate skills and knowledge.

The rota system in place to ensure that there are enough adults caring for children in the home is poor. The hours that individual adults and managers are in the home are not clearly recorded and it is unclear who is providing management direction in the home and first aid. This results in children's day-to-day care being compromised and gaps being present in safeguarding practices.

Compliance notices have been served as a result of this inspection. Steps were taken by the provider to ensure that the children were immediately safe. Ofsted will continue to monitor the home to ensure that the necessary steps are taken to meet the compliance notices and requirements.

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 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; 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; 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. (Regulation 8 (1) (2)(a)(i)(iii)(iv)(v)(vii)) This specifically relates to children's educational needs and targets being contained in their plans. It also relates to staff having a good understanding of these needs and goals to help children to achieve their full potential.	12 December 2021
*The protection of children standard is that children are protected from harm and enabled to keep themselves safe.	12 December 2021

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;

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; and

are familiar with, and act in accordance with, the home's child protection policies;

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;

that the premises used for the purposes of the home are designed, furnished and maintained so as to protect each child from avoidable hazards to the child's health; and

that the effectiveness of the home's child protection policies is monitored regularly.

(Regulation 12 (1) (2)(a)(i)(ii)(iii)(v)(vi)(vii)(b)(d)(e))

This relates to: risk being assessed for each child's life, and clear, individualised plans being in place which can be followed by staff to keep children safe. The risk must be reviewed, and children need to be supported to reduce the risk in their lives;

the managers and staff understanding their roles and responsibilities in safeguarding children and taking effective action when there is a serious concern about a child's welfare in line with the home's child protection policies;

the manager and staff having the skills to safeguard children; avoidable hazards in the home being removed to ensure that children are not exposed to harm; children's day-to-day care protecting each child from harm, including medication practices.	
*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— 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; 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; demonstrate that practice in the home is informed and improved by taking into account and acting on— feedback on the experiences of children, including complaints received; 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)(a)(c)(f)(g)(ii)(h)) This specifically relates to: the use of monitoring and review systems to make improvements in the quality of care provided in the home, and the manager addressing poor practice if it is present;	12 December 2021

children's records not being stigmatising and ensuring that practice is non-judgemental; staff receiving supervision in line with the organisation's policy and ensuring that it is reflective with a focus on improving the quality of care for children; staff receiving training to meet the children's individual needs which has a positive impact on their care in line with the home's statement of purpose; practice in the home being informed and improved by taking into account and acting on feedback on the experiences of children, including complaints received.	
The care planning standard is that children— receive effectively planned care in or through the children's home. The registered person must ensure 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)(a) (2)(a)) This specifically relates to children's plans being individualised, containing their needs and planned goals that are trying to be achieved. This also relates to staff being able to meet children's individual needs before they move into the home.	12 December 2021
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;	12 December 2021

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; and 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; and 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)(i)(ii)(iii)(iv)(v)(vi)(vii)(viii)(b)(i)(ii)(c)) This specifically relates to recording of physical interventions. De-escalation strategies must be implemented and recorded. Debriefs must take place with staff and children who are involved in physical interventions by somebody who was not involved in the intervention.	
The registered person must— maintain in the home the records in Schedule 4; ensure that the records are kept up to date. (Regulation 37 (2)(a)(b))	12 December 2021

This relates to there being a clear and accurate account of who is caring for the children in their home and day-to-day accountability.	
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* 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: SC064663

Provision sub-type: Children's home

Registered provider: Eastfield Group

Registered provider address: Eastfield Group, 6d Ryeground House, 6b Ryeground Lane, Formby, Merseyside L37 7EQ

Responsible individual: Ivy Thompson

Registered manager: Christina Wood

Inspector

Carly Quinn, Social Care Inspector

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