

SC065789

Registered provider: Good Foundations Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This is a children's home for up to three young people who may have emotional and/or behavioural difficulties and/or learning disabilities. The home is owned and operated by a private company.

Inspection dates: 21 to 22 November 2017

Overall experiences and progress of children and young people, taking into account	Inadequate
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How well children and young people are helped and protected	Inadequate
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The effectiveness of leaders and managers	Inadequate
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There are serious and widespread failures that mean children and young people are not protected or their welfare is not promoted or safeguarded and the care and experiences of children and young people are poor and they are not making progress.

Date of last inspection: 6 March 2017

Overall judgement at last inspection: Sustained effectiveness

Enforcement action since last inspection: None

Key findings from this inspection

This children's home is inadequate because:

- Young people's safety, health and education needs have not been consistently met and this has compromised their welfare.
- Staff supervision of young people does not meet their assessed needs. There are long periods during the day when staff are unaware of where young people are or who they are associating with.
- Risks to young people are not clearly identified, understood or managed by staff. The failure of staff and managers to act on information shared by other professionals, or to recognise and respond appropriately to potential or actual safeguarding concerns, has left young people at risk.
- Young people's care plans and risk assessments are not sufficiently detailed and are not reviewed effectively to address the changing needs of the young people.
- Health plans that are in place for young people are not consistently followed. Therefore, it is unclear as to whether staff know what young people's individual health needs are and how they are to be met.
- Staff are not trained in certain subjects such as attention deficit hyperactivity disorder (ADHD) to meet the specific needs of individual young people.
- Internal monitoring of the home is ineffective because potential risks are not identified or addressed. In particular, the internal monitoring of the home fails to identify weaknesses in practice, such as those found at this inspection. The registered manager has failed to notify HMCI of serious events in the home.

The children's home's strengths:

- One young person is engaging well in his education.
- The home environment is of a very good standard.
- Young people who have moved on to independent living have done so in a planned and well-supported way. The young people value the ongoing support from staff as they adjust to their new circumstances.

Recent inspection history

Inspection date	Inspection type	Inspection judgement
06/03/2017	Interim	Sustained effectiveness
04/10/2016	Full	Outstanding
14/03/2016	Interim	Improved effectiveness
09/09/2015	Full	Good

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
6: The quality and purpose of care standard The quality and purpose of care standard is that children receive care from staff who understand the children's home's overall aims and the outcomes it seeks to achieve for children and that they use this understanding to deliver care that meets children's needs and supports them to fulfil their potential. In particular, the standard in paragraph (1) requires the registered person to ensure that staff— understand and apply the home's statement of purpose; protect and promote each child's welfare; help each child to understand and manage the impact of any experience of abuse or neglect; and to help each child to develop resilience and skills that prepare the child to return home, to live in a new placement or to live independently as an adult. (Regulation 6(1)(a)(b)(2)(a)(b)(i)(ii)(v)(vi))	08/01/2018
7: The children's views, wishes and feelings standard The children's views, wishes and feelings standard is that children receive care from staff who take their views, wishes and feelings into account in relation to matters affecting the children's care and welfare and their lives. (Regulation 7(1)(c)) In particular, ensure that young people feel listened to in respect of meeting the clothing requirements for education placements and that planned, agreed holidays with young people take place.	08/01/2018
8: The education standard The education standard is that children make measurable progress towards achieving their education 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 understand the importance and value of	08/01/2018

education, learning, training and employment; 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; and staff 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. (Regulation 8(1)(2)(a)(iv)(viii)(ix))	
10: The health and well-being standard 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; and children are helped to lead healthy lifestyles. 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; and that each child has access to such dental, medical, nursing, psychiatric and psychological advice, and other services as the child may require. (Regulation 10(1)(a)(b)(c)and(2)(a)(i)(c)) In particular, ensure that children receive health assessments without delay.	08/01/2018
11: The positive relationships standard The positive relationships standard is that children are helped to develop, and to benefit from, relationships based on mutual respect and trust, have an understanding about acceptable behaviour and 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 socially aware behaviour; encourage each child to take responsibility for the child's behaviour, in accordance with the child's age and understanding; 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; help each child to understand, in a way that is appropriate according to the child's age and understanding, personal, sexual and social relationships, and how those relationships can be supportive or harmful; help each child to develop the	08/01/2018

understanding and skills to recognise or withdraw from a damaging, exploitative or harmful relationship; ensure that staff 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 the competence and skills to interpret these and develop positive relationships with children; ensure that young people 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; (Regulation 11(1)(a)(b)(c)(2)(a)(i)(iii)((vi)(vii)(viii)(ix)(x))	
12: The protection of children standard * 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; 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; are familiar with, and act in accordance with, the home's child protection policies; Also, 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(1)(2)(a)(i)(ii)(iii)(v)(vi)(vii)(b)) In particular, ensure that all identified risks and the strategies to reduce those risks are recorded effectively in each child's relevant plans. Ensure that this is done so in a manner that enables staff to follow them in the delivery of care. That staff are familiar with and follow the home's safeguarding policies and procedures. That staff understand the roles and responsibilities in relation to protecting children that are assigned to them by the registered person. That care is delivered in a manner, which takes into account the	08/01/2018

risks identified in relevant plans, and that measures identified to reduce those risks are implemented and delivered by staff so that those receiving care are safe and protected.	
13: The leadership and management standard * 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; 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)and(2)(a)(c)(f)(h))	08/01/2018
14: The care planning standard In order to meet the care planning standard the registered person must ensure that children receive effectively planned care in or through the children's home and have a positive experience of arriving at or moving on from the 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; and that arrangements are in place to ensure the effective induction of each child into the home; ensure that each child's relevant plans are followed; that the child's placing authority is contacted, and a review of that child's relevant plans is requested, if the registered person considers that the child is at risk of harm or has concerns that the care provided for the child is inadequate to meet the child's needs; the child is, or has been, persistently absent from the home without permission. (Regulation 14(1)(a)(b)(2)(a)(b)(c)(e)(i)) In particular, ensure that impact risk assessments are thorough and undertaken prior to a young person coming to live in the home. Ensure that all care planning documents and agreed local authority plans are adhered to by managers and staff.	08/01/2018

36: Children's case records The registered person must maintain records ('case records') for each child which include the information and documents listed in Schedule 3 in relation to each child; are kept up to date and are signed and dated by the author of each entry. (Regulation 36(1)(a)(b)(c))	08/01/2018
40: Notification of a serious event The registered person must notify HMCI and each other relevant person without delay if a child is involved in or subject to, or is suspected of being involved in or subject to, sexual exploitation; an incident requiring police involvement occurs in relation to a child which the registered person considers to be serious; there is an allegation of abuse against the home or a person working there; a child protection enquiry involving a child is instigated; or concludes (in which case, the notification must include the outcome of the child protection enquiry); or there is any other incident relating to a child which the registered person considers to be serious. (Regulation 40(4)(a)(b)(c)(d)(i)(ii)(e))	08/01/2018

* These requirements are subject to a compliance notice.

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 young people's safety, health, emotional well-being and education needs are not being adequately met. The lack of coordinated placement planning to support young people effectively is placing them at significant risk.

Aspects of young people's health needs are either not identified or, if they are, decisive action is not taken to manage these. For example, the records held in the home indicate that young people had refused to attend planned medical appointments. There was no further information to show what action or strategies were in place to support young people in addressing their basic health needs. One young person told the inspector, 'I am scared of the dentist because one hurt me last year.' This young person had not received a dental check-up for over a year. Furthermore, two of the young people living in the home have refused to take their prescribed medication. The manager and staff have failed to seek medical advice about the impact on young people when prescribed medication has not been administered for long periods.

Staff are not trained to meet the needs of the young people living in the home. For example, staff have not received training on ADHD, despite two young people being diagnosed as having ADHD. The registered manager was unable to produce a training matrix for staff. This lack of management overview of staff training needs, and in ensuring that action is taken to address them, has a direct impact on the care and

support provided to young people.

Young people living at the home have had poor school attendance and two are currently not attending education. Staff fail to adhere to education plans that are in place. For example, on the first day of the inspection, a member of staff entered a young person's bedroom at 8.55 am to wake him for school and found that he had climbed out of the window during the night and was missing. The education plan stated that the young person should be woken at 7.30 am to prepare him for school. This is particularly significant as this was the young person's first day at a new education provision. Furthermore, this young person told the inspector that, 'I won't go to school because I don't have the right clothes.' The registered manager informed the inspector that he would rectify this immediately. However, the failure to liaise with the education provision at an early stage to ensure that the young person was fully equipped with everything he would need meant that an important milestone of beginning a new placement was missed.

When young people refuse to attend their education provision, they do not engage in purposeful activity. For example, some young people are driven by staff to meet their friends during the periods when they should be participating in education or educational activities. Poor routines and a lack of structure to young people's days limit their opportunities to reach their full educational potential, and this affects their future life chances.

Contrary to the home's admissions policy and procedures, not all young people have benefited from a detailed compatibility risk assessment or a thorough appraisal of their needs. The registered manager offered a placement to a new young person without clearly identifying, assessing or addressing their full range of needs and the subsequent impact on others living in the home. For example, the impact risk assessment for one young person was completed nearly two weeks after the young person came to live at the home. The delay has essentially made this assessment redundant and has resulted in disruption amongst the group of young people living in the home.

For some young people, moving on from the home and into independent living has been a positive experience. One young person, who had lived in the home for seven years, said, 'I got all the help I needed from staff and they helped me move and settle in to my own flat. I can't thank them enough. I am even coming back for Christmas dinner. I see them as part of my family.' This level of support alleviated any anxiety the young person may have been experiencing and helped towards a smooth transition. The ongoing support has also given this young person a sense of belonging.

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

Safeguarding practice in this home is poor and does not promote the welfare and safety of young people. Managers and staff are not sufficiently aware of their roles and responsibilities in relation to protecting young people. When there is a serious concern about a young person's welfare, effective action is not always taken to protect them from harm. For example, young people are not kept safe while in the community because staff do not know their whereabouts for prolonged periods of the day. At times, young people have been missing for up to 14 hours in duration. Furthermore, staff do

not know if and when young people are receiving a healthy and balanced diet, as two of the three young people are effectively only in the home when they go to sleep at night and have breakfast. This means that not all young people are protected and cared for effectively. This may place them at significant harm due to their vulnerability and potential exposure to drugs misuse, criminality and exploitation.

Even though managers and staff have attended risk management meetings for a young person when identified risks of substance misuse were discussed, the manager has failed to implement the agreed strategies to keep the young person safe. For example, it was identified that the young person was using cannabis and was known to smoke it while in the company of his friends. Despite this, the staff and the manager continue to take the young person and drop him off in an area in Liverpool where there are concerns about the prevalence of drugs and gang culture amongst young people. The daily sheets dated 15 November 2017 stated, '(Young person) up and about early this morning had a shower watched TV and was then taken over to Liverpool to meet his friends. He was picked up in good spirits at 22.00.' The risks to this young person are exacerbated by the fact that the staff are not aware of who the young person is associating with, or what activities they are engaging in. This practice is contrary to the placing authority's plan and all the care planning documentation held in the home, which states that the young person should be supported to attend his education provision.

Risk assessments relating to young people accommodated at the home contain significant deficiencies in ensuring the provision of safe care. The risk levels identified are not fully and accurately assessed or revised when new information and risks become evident. For example, on 21 November 2017, one young person climbed out of his bedroom window, which is on the first floor of the building, and jumped onto a ledge and left the home. The young person was last seen by staff at 11 pm the previous evening and was discovered missing at 8.55 am the following morning. A second young person had previously left the home by these means on at least one other occasion. Even though a risk assessment was on file dated 6 October 2017, staff on duty and the registered manager were unaware that this existed. The risk assessment that staff were aware of did not contain suitable strategies for them to follow in order to safely care for the young people on a day-to-day basis. This places young people at a significant risk of injury.

There are gaps in the monitoring and review systems. This reduces the extent of effective analysis and evaluation of the care provided and its impact on safeguarding and outcomes for young people. For example, placement plans for young people contained incorrect information, such as the details of the education provision in place for individual young people. Furthermore, a missing from care action plan dated 7 October 2017 had been compiled and signed by a registered manager from one of the provider's other registered provisions. The registered manager informed the inspector that he did not know why this was in a young person's file and could not confirm that these were the plans currently being followed by his staff team. This means that staff and the registered manager are unable to adequately address shortfalls in order to improve the service being provided.

Records do not provide a full insight into the young people's lives. For example, the few records that are on young people's files detail informal discussions, rather than a more

comprehensive record of planned sessions that address the individual needs of the young people. This is particularly evident in the lack of recorded key-working sessions after periods of missing from home and suspected substance misuse, to show the work undertaken to educate young people about the risks that they are exposing themselves to. Therefore, there is limited information to measure the young people's progress or to identify the effectiveness of the support provided.

On a positive note, the home environment is comfortable and welcoming and is decorated and furnished to a very high standard.

The effectiveness of leaders and managers: inadequate

The registered manager is suitably qualified and has the experience to undertake his role. However, his inaction to ensure that effective care planning is in place for each young person, and that the staff team strictly adheres to safeguarding procedures to protect young people, has led to the serious failings found during this inspection.

The young people live in a home that is poorly managed. Poor leadership means that the home is unable to fulfil its own aims and objectives. The staff are unclear about the ethos and philosophy of the home as described in the statement of purpose: 'The aim of the service is to help, by whatever means needed, young people to grow and develop in a safe and caring environment.' Given the serious shortfalls highlighted in this inspection, the home is not acting in accordance with its own statement of purpose.

Outcomes for some young people have deteriorated in key areas of their lives, including education, increased risk of harm from episodes of going missing and potential safeguarding concerns regarding substance misuse. Furthermore, records do not provide any meaningful insight into the young people's lives and experiences. For example, the lack of comprehensive records of direct work with young people means that there is limited information to measure their progress or identify the effectiveness of the support provided.

Staff receive regular supervision, which they say informs their practice. This is further supported by team meetings. Staff comments include, 'I value my supervision' and 'We have regular team meetings and they are good.' While staff value the supervision that they receive, this has not been effective in ensuring that the quality and standards of practice at the home are maintained.

There have been failings in management oversight and monitoring of the home to identify areas of weakness and to take decisive action to resolve these. Internal monitoring does not take place regularly and, as a result, the quality and standard of care have fallen to an unacceptable level. The manager has not reviewed records in the home, or evaluated incidents that have occurred, to identify shortfalls in staff practice and to highlight patterns and trends. Subsequently, areas for development are not clearly highlighted and there is no meaningful development plan to address areas of concern. This means that leaders and managers are not taking action to improve the experiences, care and safety of young people. As a result, young people's progress, welfare and safety are compromised.

Significant events involving young people living at the home have not been reported to

Ofsted. A failure to share information with all relevant people compromises the safety and welfare of young people. Furthermore, the regulator is unable to carry out its monitoring function to ensure that appropriate action is taken by the provider to safeguard young people.

The lack of rigour by the registered manager has not helped the home to sufficiently protect young people and maintain good enough standards of care. More effective systems are needed to ensure that the safety and well-being of the young people is promoted at all times.

Information about this inspection

Inspectors have looked closely at the experiences and progress of children and young people. Inspectors considered the quality of work and the differences made to the lives of children and young people. They watched how professional staff work with children and young people and each other and discussed the effectiveness of help and care provided. Wherever possible, they talked to children and young people and their families. In addition, the inspectors have tried to understand what the children's home knows about how well it is performing, how well it is doing and what difference it is making for the children and young people whom it is trying to help, protect and look after.

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: SC065789

Provision sub-type: Children's home

Registered provider: Good Foundations Limited

Registered provider address: 6 Tower Quays, Tower Road, Birkenhead, Merseyside CH41 1BP

Responsible individual: Andrew Mannix

Registered manager: Robert Jones

Inspector

Elaine Allison, 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
W: <http://www.gov.uk/ofsted>

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