

SC357133

Registered provider: Social Care Services (Clayton) Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This is a privately run children's home that provides care and accommodation for three young people who may have emotional and/or behavioural difficulties.

Inspection dates: 26 to 27 July 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/or widespread failures that mean children and young people are not protected or their welfare is not promoted or safeguarded and/or the care and experiences of children and young people are poor and they are not making progress.

Date of last inspection: 7 February 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

- The home does not adequately safeguard young people. Allegations or suspicions of harm are not addressed in line with safeguarding procedures.
- There is poor risk management within the home. Individual risks are not adequately identified, leaving young people at risk of significant harm.
- Young people do not benefit from a comprehensive approach to meeting their health needs, including one example where a nut allergy was not clearly recorded or understood by care staff.
- The manager does not ensure that HMCI is notified of allegations made about people working in the home. This prevents the regulator from having the necessary oversight to ensure that young people are being effectively safeguarded.
- Staff have not been able to engage young people effectively, resulting in a number of placements breaking down.
- Medication records are not robust which means there is a lack of clarity on administration times and medication doses.

The children's home's strengths

- The manager and staff work positively with other agencies.
- One young person has made measurable progress from their initial starting point.
- Contact between young people and their families is very well supported.
- The staff team remains stable, providing consistency for the young people.

Recent inspection history

Inspection date	Inspection type	Inspection judgement
07/02/2017	Interim	Sustained effectiveness
11/05/2016	Full	Good
11/02/2016	Interim	Declined in effectiveness
06/05/2015	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 with the given timescales.

Requirement	Due date
8(1) The education standard is that children make measurable progress towards achieving their educational potential and are helped to do so. (2) In particular, the standard in paragraph (1) requires the registered person to ensure— (a) that staff— (viii) 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. (Regulation 8)	28/09/2017
*10. (1) The health and well-being standard is that— (a) the health and well-being needs of children are met; (b) children receive advice, services and support in relation to their health and well-being; and (c) children are helped to lead healthy lifestyles. (2) In particular, the standard in paragraph (1) requires the registered person to— (a) ensure that staff help each child to— (i) achieve the health and well-being outcomes that are recorded in the child's relevant plans; (ii) 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. (Regulation 10) In particular, ensure that any risks in relation to any known allergies are fully assessed.	01/09/2017

*12.—(1) The protection of children standard is that children are protected from harm and enabled to keep themselves safe. (2) In particular, the standard in paragraph (1) requires the registered person to ensure— (a) that staff— (i) 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; (d) 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. (Regulation 12)	01/09/2017
*13.—(1) The leadership and management standard is that the registered person enables, inspires and leads a culture in relation to the children's home that— (a) helps children aspire to fulfil their potential; and (b) promotes their welfare. (Regulation 13)	01/09/2017
14. (1) The care planning standard is that children— (a) receive effectively planned care in or through the children's home; and (b) have a positive experience of arriving at or moving on from the home. (2) In particular, the standard in paragraph (1) requires the registered person to ensure— (a) 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; (b) that arrangements are in place to— (i) ensure the effective induction of each child into the home; (ii) manage and review the placement of each child in the home; and (iii) plan for, and help, each child to prepare to leave the home or to move into adult care in a way that is consistent with arrangements agreed with the child's placing authority.	31/08/2017

(Regulation 14)	
The registered person must make arrangements for the handling, recording, safekeeping, safe administration and disposal of medicines received into the children's home. In particular, the registered person must ensure that a record is kept of the administration of medicine to each child.(Regulation 23(1)(2)(c))	31/08/2017
25.—(2) the Regulatory Reform (Fire Safety) Order 2005 applies to the home- (b) the registered person must ensure that the requirements of that Order and any regulations made under it, are complied with in respect of the home. (Regulation 25 (2) (b)) In particular this refers to the home's fire safety risk assessment in relation to the timing of fire drills.	31/08/2017
The registered person must ensure that a record is made of any complaint, the action taken in response, and the outcome of any investigation.(Regulation 39(3))	31/08/2017
*34.—(1) The registered person must prepare and implement a policy which— (a)is intended to safeguard children accommodated in the children's home from abuse or neglect; and (b)sets out the procedure to be followed in the event of an allegation of abuse or neglect (2) The procedure to be followed in the event of an allegation of abuse or neglect must, in particular— (a)provide for liaison and co-operation with any local authority which are, or may be, making a child protection enquiry in relation to a child accommodated in the home; (b)provide for the prompt referral of an allegation about current or ongoing abuse or neglect in relation to a child to the placing authority and, if different, the local authority in whose area the home is located; (d)provide for records to be kept of an allegation of abuse or neglect, and the action taken in response. (Regulation 34)	01/09/2017
The registered person must notify HMCI and each other relevant person without delay if an incident requiring police involvement occurs in relation to a child which the registered person considers to be serious; or there is an allegation of abuse against the home or a person working there. (Regulation 40(b)(c))	31/08/2017

In order to complete a quality of care review the registered person must establish and maintain a system for monitoring, reviewing and evaluating: (b) the feedback and opinions of children about the children's home, its facilities and the quality of care they receive in it. (4) The registered person must: (a) supply to HMCI a copy of the quality of care review report within 28 days of the date on which the quality of care review is completed; and (b) make a copy of the quality of care review report available on request to a placing authority, if the placing authority is not the parent of a child accommodated in the home. (5) The system referred to in paragraph (2) must provide for ascertaining and considering the opinions of children, their parents, placing authorities and staff. (Regulation 45 (2)(b)(4)(a)(b)(5))	31/08/2017
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*These requirements are subject to compliance notices.

Recommendations

- The registered person should support staff to be ambitious for every child in the home and gain skills and experience that enable them to actively support each child to achieve their potential. To ensure that staff understand and can meet each child's needs, in line with their responsibilities.('Guide to the children's home regulations including the quality standards', page 52, paragraph 10.5)
- The registered person should have a workforce plan which can fulfil the workforce related requirements of regulation 16,schedule 1(paragraphs 19 and 20) The plan should be updated to include any new training and qualifications completed by staff while working at the home, and used to record ongoing training and continuing professional development needs of staff-including the home's manager. ('Guide to the children's homes regulations including quality standards', page 53, paragraph 10.8)
- When a child returns to the home after being missing from care or away from the home without permission, the responsible local authority must provide an opportunity for the child to have an independent return home interview. Homes should take account of information provided by such interviews when assessing risks and putting arrangements in place to protect each child.('Guide to the children's home regulations including the quality standards', page 45, paragraph 9.30)
- Ensure that all staff, including the manager, receive supervision of their practice from an appropriately qualified and experienced professional, which allows them to reflect on their practice and the needs of the children assigned to their care.('Guide to the children's homes regulations including quality standards', page 61, paragraph 13.2)
- Regulations 35-39 detail the records that must be kept in children's homes. All

children's case records (regulation 36) must be kept up to date and stored securely whilst they remain in the home. Ensure accurate, succinct and evaluative record keeping. ('Guide to the children's home regulations including the quality standards', page 62, paragraph 14.3)

Inspection judgements

Overall experiences and progress of children and young people: inadequate

Young people move to the home with already established high levels of risk-taking behaviours, including going missing, criminal behaviour, substance misuse and aggressive behaviours. Since the interim inspection, six young people have moved into the home. Four of these placements ended prematurely because the staff were unable to help the young people reduce their risk-taking behaviours, and the young people continued to place themselves at risk. This means that from their initial starting points the young people made no progress.

Young people are offered the opportunity to engage with staff, through structured activities, house meetings and key work sessions. However, relationships between some young people and staff have been strained, and in some cases relationships have broken down completely. On occasions young people's behaviour has escalated to the point where they have displayed violent and aggressive behaviour towards the staff and caused significant damage to the home. The staff's inability to resolve conflict and promote positive relationships means that young people do not live in a consistently safe, stable and nurturing environment.

One young person who moved into the home in February 2017, has settled well and has made some progress. Staff have supported him to explore individual hobbies and interests such as boxing and horse-riding. He is engaging with the youth offending service, and as part of his order recently took part in a restorative programme within the local community. His key worker said the young person had really enjoyed this and has asked if he can volunteer at the project. This helps to increase the young person's self esteem.

Since the last inspection, there has been limited progress in improving the educational outcomes for the majority of the young people. One young person does attend education regularly, but his behaviour has impacted on his participation in lessons. This means he has fallen behind in key subjects, including Mathematics and English. The manager has worked with education professionals and the placing authority to secure a more suitable education provision for the young person. Two young people moved into the home without any arrangements for their education being in place; a further two young people were unable to maintain suitable attendance at their educational placement due to them being frequently missing. This impacts negatively on their future life chances and economic well-being.

Young people are registered with local health practitioners. However, young people's health care plans do not include sufficient detail of their individual health needs, or

identify strategies on how their health needs will be responded to and met. For example, one young person's health care plan recorded that he 'has a nut allergy'. There was insufficient information recorded in the plan about how staff should respond if the young person was to have an allergic reaction. Furthermore, the staff were unclear if the young person should be avoiding foods that contained nuts. The manager and staff have not sought medical advice to clarify when the young person last had an allergic reaction. In addition, it is unclear from young people's health care plans if they have attended routine health appointments. Consequently, young people do not benefit from a comprehensive approach to meeting their health needs. A compliance notice has been issued in relation to this matter.

Medication is stored securely; however, staff do not record the time that individual young people receive their medication on their medication record sheets. A young person who is prescribed a controlled drug should only be administered this in the morning. However, because the time his medication is administered is not clearly recorded, the registered manager cannot be satisfied that the young person is receiving his medication as prescribed.

Staff encourage the young people to feel a part of the home, and they are supported to share their views and opinions in house meetings and key work sessions. Young people are helped to understand how to make a complaint should they have any concerns about their care. There has been one complaint since the last inspection. However, the records do not demonstrate that complaints are robustly investigated. In addition, it is unclear if the young person was satisfied with the outcome of their complaint.

Staff support the young people to sustain significant relationships with their families and friends. This includes transporting them for contact visits. This ensures that important attachments are maintained and young people's sense of identity is promoted.

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

It was not possible to speak to the young people about their experiences of living in the home during the inspection. However, young people's welfare and safety is being compromised by poor safeguarding practice.

Allegations or suspicions of harm are not addressed in line with safeguarding procedures. On two separate occasions there have been allegations made about the registered manager. However, the provider failed to produce any records to show that internal investigations had been undertaken. This means that leaders and managers have failed to demonstrate that they had investigated the concerns raised by the young people, and cannot provide a robust account of their enquiries to ensure young people are safe and appropriately cared for in line with safeguarding procedures. Furthermore, the second allegation was not referred to the designated officer for their consideration, nor was it escalated to the responsible individual. This does not demonstrate that the registered manager is fully aware of his role and responsibility to safeguard young people. A compliance notice has been issued in relation to this matter.

Insufficient action has been taken to ensure that risk management plans are regularly reviewed and updated. For example, there is conflicting information with regards to the levels of risk posed for individual young people. One young person's risk management plan identified his risk of arson as low, this is despite the young person burning a large hole in his bedroom carpet and staff finding other burnt items in his bedroom. Furthermore, the manager and staff did not identify alternative support systems, such as contacting the local fire safety officer to help educate the young person about the significant risks they are placing themselves and others at through their actions. A compliance notice been issued in relation to this matter.

Young people regularly go missing from the home. Staff attempts to reduce this behaviour have been ineffective. Whilst missing, young people engage in behaviours such as drug misuse and criminal activity, which compromises their welfare and safety. Records show that staff follow agreed missing-from-home protocols and co-operate with strategy meetings. While most young people have access to an independent person interview following any episode of missing, the home does not maintain a record of these visits. This limits the staff's ability to identify any concerns, or action needed to reduce the number of missing episodes.

Young people have demonstrated challenging behaviour that has resulted in assaults on staff and damage to the home. This has led to them being criminalised. At times there have been some inconsistencies with staff implementing firm boundaries. For example, a young person caused damage to his bedroom because he was denied access to his bedroom. The young person was told he could not go into his room until after 3pm because he should be in education, but the staff then offered to take the young person to the shops instead. This does not ensure that young people are provided with the security of clear, consistent and firm boundaries. The sanction and restraint records are poorly maintained which reduces the consistency of care in this area, as staff are unclear about previous sanctions and whether they worked well.

The overall standard of decor in the home is poor. The hall carpet is heavily stained and the carpet on the stairs is worn in parts. A young person's bedroom contains broken furniture, a large burn in the carpet and his curtains were badly torn. There was also evidence of smoking paraphernalia in the bedroom. Another young person's bedroom has dirty plates and milk cartons left in there. Although the fire records show that regular fire drills take place, the staff do not record the times that the fire evacuations were completed. This means it is not clear when the staff and young people last took part in a night time drill to ensure they know how to evacuate the building safely at night.

A requirement made at the last inspection to notify HMCI without delay if a child is involved in, or subject to, or suspected of being involved in sexual exploitation has not been met. The manager failed to notify HMCI of a young person who was missing for a total of 13 days. Furthermore, they have failed to notify HMCI of the allegations made in relation to the manager. This means the regulator does not have a good overview to ensure appropriate action has been taken to safeguard young people.

The effectiveness of leaders and managers: inadequate

Young people do not live in a home that is effectively managed, or promotes their welfare and safety. Young people do not benefit from a comprehensive impact risk assessment prior to moving into the home, to ensure the staff have the right skills and experience to fully meet their needs. During the inspection the inspector observed that one impact risk assessment was only completed on the day the young person moved into the home. Another young person did not have a risk assessment on his file. This means that decisions about placements have been based on incomplete information and this has impacted negatively on a number of placements.

The manager has failed to undertake any analysis or evaluation of the quality of care following placement breakdowns to identify any shortfalls in practice. This means that leaders and managers are unable to learn from practice to improve the experiences and care for the young people. Furthermore, the manager has not gathered the views and opinions from the young people, parents or professionals as part of his six-monthly quality care review. This does not ensure that their views underpin how the home runs or contribute to practice development. The registered manager has a development plan in place, but this has not been updated following the current difficulties to improve the quality of care.

Two requirements and one recommendation from the last inspection have not been addressed. Additionally, there are a number of requirements and recommendations made as a result of this inspection.

The current staff team is stable. Only three out of eight staff are suitably qualified, including the registered manager. The remaining staff are either undertaking or registered to obtain their professional qualification. Records show that staff do not receive regular supervision. This does not ensure that staff are fully monitored in their role. Currently, there is no workforce development plan in place to identify what training staff have undertaken, what needs updating or if new training has been scheduled. Therefore areas for further staff development have not been identified or addressed.

The standard of record keeping in the home is generally poor. For example, there were gaps in the information recorded in the admissions and discharge book. Shortfalls in young people's risk assessments and their health care plans, mean that these documents do not provide a clear picture in terms of their current needs. The lack of robust management oversight of staff practice and safeguarding concerns means the welfare and safety of children and young people is not being fully promoted.

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 difference 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 who 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: SC357133

Provision sub-type: Children's home

Registered provider: Social Care Services (Clayton) Limited

Registered provider address: Social Care Services Group, 31 Shaw Road, Stockport SK4 4AG

Responsible individual: Stephen Davitt

Registered manager: Raymond Ashton

Inspector

Michelle Bacon, social care regulatory inspector

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