

Children's homes inspection - Full

Inspection date	14/10/2015
Unique reference number	SC373958
Type of inspection	Full
Provision subtype	Children's home
Registered person	East Sussex County Council
Registered person address	County Hall, St. Annes Crescent, LEWES, East Sussex, BN7 1UE

Responsible individual	Elizabeth Rugg
Registered manager	Janet Fairless
Inspectors	Anna Williams Teri Peck

Inspection date	14/10/2015
Previous inspection judgement	Improved effectiveness
Enforcement action since last inspection	None
This inspection	
The overall experiences and progress of children and young people living in the home are	Requires improvement
The children's home is not yet delivering good help and care for children and young people. However, there are no serious or widespread failures that result in their welfare not being safeguarded or promoted.	
how well children and young people are helped and protected	Requires improvement
the impact and effectiveness of leaders and managers	Inadequate

SC373958

Summary of findings

The children's home provision requires improvement because:

- The Registered Manager is not sufficiently aware of the service's strengths and weaknesses. As a result, she is not taking action in areas which require attention to raise the standard of care.
- Risk assessments and in-house care plans fail to capture all the known risks relating to the young people, and in one case minimises known risks.
- Young people experience an institutionalised lifestyle. A culture has developed whereby the locking of doors is routine. The liberty of young people is restricted. Access to everyday items such as a towel or a snack is restricted.
- Recruitment practice has not improved although a requirement was set at the last full inspection. Actions taken following allegations against members of staff are not always clear. Outcomes of some allegations are poorly recorded.
- Staff supervision does not happen frequently enough for all staff. Oversight of staff training is poor and the Registered Manager has not completed all the mandatory training courses.
- The statement of purpose does not contain an age range. Information about the needs of young people the home cares for is minimal. Multiple versions of this key document exist which is confusing for staff.
- One child's bed requires replacing as it is not fit to meet the young person's individual needs. Failures exist in the health and physical safety of the building. Management monitoring systems are not robust. They fail to recognise areas of weakness and identify appropriate actions to address them.
- Direct oversight from the Responsible Individual is minimal. Their input has not been effective in supporting the service to sustain improvements following the full inspection of June 2014 when the home was judged adequate.

The children's home strengths

- Staff plan a wide range of activities which young people engage with well. Recent events such as the summer camping trip are captured in photos for young people to reflect on now and in the future.
- Attendance and progress at educational establishments is positive. Staff work well with the virtual schools team. Effective communication takes place, ensuring individual young people's academic needs are identified and fully met.

What does the children's home need to do to improve?

Statutory Requirements

This section sets out the actions which must be taken so that the registered person/s meets 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
6: The quality and purpose of care standard: In order to meet the quality and purpose of care standard, the registered person must: (2)(c) (i) ensure that the premises used for the purposes of the home are designed and furnished so as to meet the needs of each child.	03/12/2015
12: The protection of children standard: In order to meet the protection of children standard, the registered person must ensure that staff: (2)(a) (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; (vi) take effective action whenever there is a serious concern about a child's welfare. (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.	03/12/2015
The registered person must compile in relation to the children's home a statement ("the statement of purpose") which covers the matters listed in Schedule 1. The registered person must keep the statement of purpose under review and, where appropriate, revise it; and notify HMCI of any revisions and send HMCI a copy of the revised statement within 28 days of the revision.	03/12/2015

The registered person must ensure that the home is at all times conducted in a manner which is consistent with its statement of purpose. (Regulation 16(1)(3)(a)(b)(5))	
The registered person must ensure that— (b) children can access all appropriate areas of the children's home's premises; and (c) any limitation placed on a child's privacy or access to any area of the home's premises— (i) is intended to safeguard each child accommodated in the home; (ii) is necessary and proportionate; (iii) is kept under review and, if necessary, revised; and (iv) allows children as much freedom as is possible when balanced against the need to protect them and keep them safe. (Regulation 21(b)(c)(i-iv))	03/12/2015
	03/12/2015
The registered person may only employ an individual to work at the children's home; if the individual satisfies the requirements in paragraph (3) including full and satisfactory information in relation to the individual in respect of each of the matters in Schedule 2. (Regulation 32(3)(d))	03/12/2015
The registered person must ensure that all employees (a) undertake appropriate continuing professional development; (b) receive practice-related supervision by a person with appropriate experience. (Regulation 33(4)(a)(b))	03/12/2015
The registered person must maintain in the home the records in Schedule 4; and ensure that the records are kept up to date. In particular keep a record of actual hours worked by all staff including the Registered Manager. (Regulation 37, Schedule 4 (3))	03/12/2015
The registered person must produce a written report about the quality of care review and the actions which the registered person intends to take as a result of the quality of care review ("the quality of care review report"). (Regulation 45(3))	03/12/2015

Full report

Information about this children's home

This children's home is registered to provide care and accommodation for up to 4 children with emotional and behavioural difficulties. The home is run and managed by a local authority.

Recent inspection history

Inspection date	Inspection type	Inspection judgement
04/03/2015	Interim	Improved effectiveness
03/06/2014	Full	Adequate
22/01/2014	Interim	Good progress
05/06/2013	Full	Good

Inspection Judgements

	Judgement grade
The overall experiences and progress of children and young people living in the home are	Requires improvement
Young people living in this home do not experience the freedom of movement which a family home provides. Communal living spaces are locked on a daily basis. The reasons for restricting access are not informed by risk assessment and arise from custom and practice. For example, young people in the mornings cannot access the lounge, conservatory or study area before school. Overnight all the communal spaces are locked including the kitchen. This creates an institutionalised environment. Staff are directed to lock rooms up as an 'early intervention' within one behaviour management plan. This is not an appropriate 'de-escalation' technique. This practice contravenes the organisation's 'physical restraint' policy which states that internal doors must not be locked. Although staff are securing doors, this is not being recorded as a restraint as guidance states. The Registered Manager has not challenged this highly inappropriate practice. In addition, some snacks and drinks are routinely locked away. This does not support young people in preparation for adulthood and independence. Staff lack awareness of young people's pre-care experiences and how restricting food and	

snacks may impact on them. All young people have any aerosols permanently locked in the staff office. This policy has not been reviewed for some time. Towels and fresh bedding are kept in a locked cupboard, meaning young people have to ask staff to access them. This creates a home life where young people's liberty of movement and access to everyday items is significantly compromised each day.

Young people report varying degrees of feeling safe in the home while one young person said they feel safe 'all the time', another said only 'sometimes'. They strongly agree that staff look after them well. Young people reflect that staff help them learn things they will need to do as an adult, like cooking. Positive feedback has been received from external professionals via the Ofsted surveys. They strongly feel that staff care and support young people well, and know and understand their needs. Observations show that relationships between staff and young people are warm and highly positive.

Young people live in a home which has homely touches such as fresh flowers, and photos on display. Bedrooms are personalised by young people through choosing wallpapers and paint colours. One young person helped decorate their room and staff praised her achievement. However, not all the current beds are suitable for the individual needs presented, and managers have not recognised the significance of arrangements that may stigmatise a young person.

Educational outcomes for young people are positive taking into account their personal starting points. Attendance is good. One young person is deputy head boy for their year. Staff work well with educational establishments to help and support young people with their academic goals. A professional commented that staff want 'to support the children to grow into aspirational and independent young adults'. Staff support contact arrangements appropriately for all young people. This assists young people in maintaining bonds with family and friends.

Young people engage with routine and specialist health appointments. For example, engagement with external drugs services has taken place, although some cannabis usage has continued. Young people's emotional well-being is monitored through child and adolescent mental health services (CAMHS) and the young peoples' key workers in the home work in partnership with CAMHS professionals. Some staff attend joint sessions with young people. Positively, this increases young people's engagement in planned interventions.

One young person described the activities as good. A recent camping trip gave young people the experience of staying overnight in tents, fishing and other outdoor pursuits. One young person is part of the Child in Care Council and takes part in associated activities. For example they recently completed a first aid course. This gives them opportunities to make new friendships and learn new skills. Staff facilitate a range of community-based trips, such as to the local skate park, swimming, cinema, or further afield to Heathrow airport, Worthing and theme parks. This encourages young people to engage in purposeful activities.

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	Judgement grade
How well children and young people are helped and protected	Requires improvement
Young people are generally safe in the home but there are areas requiring significant attention. A requirement was set at the last full inspection in June 2014 which related to recruitment practice. Progress towards meeting this requirement was not considered at the interim inspection of March 2015 as the inspector was unable to access recruitment files. Staff personnel files sampled during this inspection show that weaknesses in recruitment practice remain. Gaps in employment histories of staff are apparent, including one of 11 years. Reasons why prospective candidates have left previous employment with vulnerable children are not always explored. One member of staff's Disclosure and Barring Service (DBS) check does not contain all previous names they have used. This shortfall had not been identified through internal monitoring systems. Senior staff informed inspectors that this member of staff will be re-checked. There is no interim risk assessment to consider levels of supervision for this staff member while they are re-assessed. Recruitment practice is not yet rigorous to ensure only suitable adults work in the home. Risk assessments in place to safeguard the welfare of young people are not adequate. They do not include a clear risk management plan for staff to follow. Risk assessments are not routinely reviewed after all significant incidents to evaluate their effectiveness and make relevant changes. This means staff are referring to risk assessments which do not reflect current behaviours, including those which are high-risk, displayed by young people. Some behaviours shown by young people are minimised within in-house care plans and risk assessments, such as sexualised behaviour. This places young people at risk as staff are not made fully aware of crucial information. Risk assessments and care plans do not always contain the views of young people themselves. As a result, young people's opinions about their targets and progress are not captured in records and their direct engagement is limited. There are a number of shortfalls linked to both the physical safety of the building and basic food hygiene practice. The airing cupboard is overcrowded with bedding and towels, which cover an internal electrical box. This is a fire risk. Basic food hygiene is not consistently followed in practice. Health and safety records are not well-organised, making auditing and oversight difficult. The record of weekly fire safety checks from May 2015 onwards and the daily fire checks for October 2015 could not be located at the time of the inspection. Fire extinguishers are locked	

away, without clear reason as to why. This has the potential to delay staff taking action in emergency situations. These shortfalls combined do not demonstrate sound monitoring of health and safety matters, leaving young people at risk of harm.

There have been 12 restraints since the previous full inspection. In one restraint record, the Regulation 44 visitor highlights the young person's views have not been captured, and this has not been followed up. Another restraint involved the Registered Manager, who records that her line manager should review the incident as she is involved. This demonstrates that an external person to the incident is considering the event, but there is no written evidence that this oversight happened. These are examples of ineffective monitoring within the home.

Records kept by the home show when a young person is reported missing as well as when they are absent without permission. This helps the Registered Manager to evaluate patterns and trends in behaviours shown by young people. A charity provides independent return home interviews for young people.

	Judgement grade
The impact and effectiveness of leaders and managers	Inadequate
The leadership and management of this children's home has systemic weaknesses. This impacts negatively on the experiences of young people and how well they are protected. The Registered Manager has been registered with Ofsted since August 2012. She is a qualified social worker. Throughout her career, she has had experience of working with children looked after through a variety of social work roles. She achieved the Level 5 Diploma in Leadership and Management for Residential Childcare in August 2014. Records indicate she has not undertaken the same mandatory training as staff members, for example, in medication and first aid. Without this it is difficult for her to effectively evaluate their day-to-day care practice. Multiple versions of the statement of purpose exist. This risks confusion for staff and other professionals, as to which one to refer to. Updated versions of this key document are not sent to Ofsted in line with regulations. The document itself does not contain details of the age range of children the home cares for. Information about the range of needs the home provides care for is limited. This makes it difficult to ascertain if the care the home provides is actually in line with what it states it will deliver. The statement of purpose states supervision will be provided monthly to staff members, which is not always happening. It also states staff all	

have a personal development plan, which is not the case. Recruitment practice is described as rigorous, which it is not. Consequently, the home is not being conducted in line with the expectations set out in the statement of purpose.

Rotas kept do not show which staff have 'slept-in' and worked the following morning. Without this information, records are incomplete. This compromises the oversight of staff hours and any queries about staff practice or whereabouts. In addition, rotas and other house records do not record how often the Registered Manager is present in the home. This makes it difficult to ascertain how regularly the Registered Manager is on-site seeing young people, observing staff members' practice and reviewing records. This is particularly relevant as the Registered Manager is responsible for two separate children's home for this local authority. Staff confirm the Registered Manager is accessible via telephone and does visit regularly. However, the effectiveness of this arrangement should be kept under review.

Staff team meetings take place weekly. Staff members value these meetings and the regular input from a CAMHS worker. The meetings are reflective and staff members discuss strategies to help young people progress and modify behaviours. The Registered Manager's input in these meetings is limited. She has attended only eight out of 22 recent meetings. This impacts negatively on her ability to both keep up to date with events in the home, and also to lead and inspire her team.

Supervision systems require improvement. Meetings are not always monthly, and for some staff two or more months are missed in a row. This means some staff have long breaks between formal supervision and feedback on their performance. Sessions are not always reflective or child focused. Poor staff members' supervision means that standards are not consistently reinforced and staff do not receive regular feedback on their practice to help them improve if required. In June 2014, the supervision of relief staff was raised as a requirement. Although improvements were made, these have not been sustained. One regular relief worker has not received any formal performance management since 2014. Recently, a new supervision template has been created. This contains more detailed headings for supervisors to follow. It is too early to evaluate the impact of this change.

Only 50% of the core staff team have valid certificates in food hygiene. This could be contributing to the lack of awareness of basic food hygiene practice. Some relief staff who work regularly have not completed child protection or child sexual exploitation training. Staff members whose training expires sometimes have to wait for up to six months for a place on a refresher course, this includes child protection training. This leaves young people being looked after by staff who are not kept updated in key safe caring skills. A previous recommendation to ensure that staff have training in self-harm has been addressed, but records do not show which staff attended the self-harm workshop. This makes it difficult for the Registered Manager to track staff skills and plan training accordingly.

A new external independent visitor has started since the previous inspection. Young people are suitably involved in these visits, as well as parents who also provide feedback. Good practice recommendations are identified to support the service to improve.

Self-evaluation systems are weak. The internal management monitoring report is completed by the deputy manager. This document is not signed by the Registered Manager to demonstrate she has read and approved it. Actions that are identified from the report do not have timescales for completion and they fail to identify who is responsible for carrying them out. Although previous actions are listed, there is no evaluation as to the impact they have had on improving practice. Links between the team plan, external monitoring systems and internal quality assurance checks are not apparent within these reports. As a result, the internal monitoring reports do not demonstrate a sound understanding of the strengths and weaknesses of the service.

The Responsible Individual delegates responsibility and direct oversight of the home to senior leaders and managers within the local authority. However, these systems have not been effective. This children's home was judged adequate in June 2014. Actions taken by the Registered Manager have not been sufficient to sustain improvements which were made in March 2015.

What the inspection judgements mean

The experiences and progress of children and young people are at the centre of the inspection. Inspectors will use their professional judgement to determine the weight and significance of their findings in this respect. The judgements included in the report are made against *Inspection of children's homes: framework for inspection*.

An **outstanding** children's home provides highly effective services that contribute to significantly improved outcomes for children and young people who need help and protection and care. Their progress exceeds expectations and is sustained over time.

A **good** children's home provides effective services that help, protect and care for children and young people and have their welfare safeguarded and promoted.

In a children's home that **requires improvement**, there are no widespread or serious failures that create or leave children being harmed or at risk of harm. The welfare of looked after children is safeguarded and promoted. Minimum requirements are in place, however, the children's home is not yet delivering good protection, help and care for children and young people.

A children's home that is **inadequate** is providing services where there are widespread or serious failures that create or leave children and young people being harmed or at risk of harm or result in children looked after not having their welfare safeguarded and promoted.

Information about this inspection

Inspectors have looked closely at the experiences and progress of children and young people living in the children's home. Inspectors considered the quality of work and the difference adults make to the lives of children and young people. They read case files, watched how professional staff work with children, young people and each other and discussed the effectiveness of help and care given to children and young people. Wherever possible, they talked to children, 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.

This inspection was carried out under the Care Standards Act 2000 to assess the effectiveness of the service 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*.

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