

SC407929

Registered provider: Our Place (2008) Ltd

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

A private company operates this children's home. It provides care for 10 children with learning disabilities, including autism spectrum disorder and associated challenging behaviours. Children may stay after they reach 18 years old.

We last visited this home on 20 January 2022 to carry out an interim inspection. The report is published on the Ofsted website.

Inspection dates: 26 and 27 April 2022

Overall experiences and progress of children and young people, taking into account	requires improvement to be good
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How well children and young people are helped and protected	requires improvement to be good
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The effectiveness of leaders and managers	inadequate
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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.

Date of last inspection: 20 January 2022

Overall judgement at last inspection: sustained effectiveness

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
20/01/2022	Interim	Sustained effectiveness
03/08/2021	Full	Requires improvement to be good
27/11/2019	Full	Good
12/06/2018	Full	Good

Inspection judgements

Overall experiences and progress of children and young people: requires improvement to be good

Since the last inspection, no children have moved into the home and no children have left. The staff continue to build good relationships with the children living in the home.

Children are supported to lead healthy lifestyles. They are registered at local health services and are supported to attend appointments. A nurse and a speech and language therapist are employed by the organisation. They work directly with the children as well as provide guidance and routines for the staff to follow. As a result, children are eating a healthy diet, are enjoying physical activities and exercise, and are developing new communication skills.

Children living in the home attend school full time and are making good progress. Staff promote education by working with education staff to create bespoke timetables and, where appropriate, support children in lessons. Practice and strategies that promote development in areas such as communication and appropriate behaviour are consistent between school and the home. As a result, routines for the children are consistent, they enjoy school and attendance is high.

Staff support children to take part in a range of activities which are planned to meet the children's needs and wishes. For example, one child recently attended a music concert, and another child has been spending time in the community packing welfare boxes to go to Ukraine. In addition, children enjoy meals out, trips to the cinema and playing sensory games. This practice means that children are developing their skills, having fun and making lasting memories.

There is an ongoing programme of maintenance and repair. Some areas of the home have improved since the last inspection. However, during the inspection, it was identified that some children's bedrooms were not personalised and there were locks on bedroom furniture without sufficient reason. In addition, some children's bedrooms have had en-suite bathrooms installed, and in doing so, the only window has been removed. This means that these bedrooms have limited natural light, which affects the suitability of this space. The newly appointed managers provided assurances that they will improve the living environment.

Staff support children to maintain relationships with loved ones. Staff send weekly reports to family members and provide regular updates on their child's progress. One parent provided feedback that 'staff are absolutely amazing' and are 'committed to developing [name of child]'s safety and well-being'. Because of this support, important relationships are maintained.

How well children and young people are helped and protected: requires improvement to be good

Safeguarding arrangements in the home require improvement. Managers have failed to ensure that an allegation made by a child was investigated in a timely manner and did not provide the child with an update following the investigation. Furthermore, actions agreed following the investigation being completed have not been implemented. This approach to safeguarding fails to protect children and staff.

Staff are aware of the risks presented by the children and have strategies in place to reduce known risks. Risk assessments are in place, but they do not all contain information about children's known risks, and they are not regularly reviewed or kept up to date. For example, one child's risk assessment did not provide staff with information on the child's deprivation of liberty order. Another risk assessment did not state what actions were in place to support a child with epilepsy overnight. As a result, staff are not being provided with accurate written information that informs their care of complex children. There is also a risk that practice develops that does not have the oversight of managers and professionals.

Physical intervention is used to keep children or other staff safe. The recording of physical interventions has improved. Since the last inspection, a new recording system has been introduced and a designated manager has been assigned to provide oversight of these records. This ensures that documents contain sufficient detail and that the interventions are justified and appropriate.

Staff use incentives effectively. Some children have individualised reward systems. More recently, a tree mural has been put up in a communal area of the home, and the children's achievements are being recorded on leaves that are being regularly added. The children's progress is being recognised by staff and celebrated.

Medication arrangements are not consistent. The records of the administration of medication contain essential information and sufficient detail. However, the storage of medication requires improvement. For example, during the inspection, it was identified that a medication cabinet was not sufficiently secured to the wall. Furthermore, medication to be returned to the pharmacy was not suitably stored as it was kept in an unlocked box. This practice does not ensure that storage is safe and could present a risk to children.

Surveillance is used in the home without sufficient assessment. There is CCTV used in the external areas, the staff use radios to communicate children's movements, and external doors are alarmed at night. There is no assessment of children's needs to support the requirement of this measure and, in some cases, there has been no consultation with the children's social workers. As a result, there is the possibility that surveillance may be being used unnecessarily.

The recruitment of staff is safe. The staff who are recruited to work in the home are subject to all the necessary checks. This helps to ensure that staff who work in the home are safe to do so.

Regular health and safety checks take place to ensure that the home is physically safe. The children in the home all have personal evacuation plans, which are regularly reviewed. This helps to ensure that the children live in a physically safe environment.

The effectiveness of leaders and managers: inadequate

Since the last inspection, there have been changes in leadership and management. The registered manager and responsible individual have left the service. There are plans to recruit for these positions. The head of care and managing director are providing managerial oversight in the interim. The managers in place acknowledged the shortfalls identified during this inspection. They are determined to rectify shortfalls and, during the inspection, provided reassurances that improvements will be made.

Managers fail to ensure that staffing arrangements in the home meet the needs of the children living there. For example, there have been occasions where there have only been three night staff working when there should be four. Furthermore, one child requires additional support and there have been occasions where this has not been provided. This does not provide assurances that children are consistently receiving sufficient care. The managers have recognised the impact of this shortfall, and there are plans for recruitment.

Managers do not ensure that staff receive sufficient support. Staff supervision is not frequent and is not related to practice. In addition, staff have not received an appraisal to plan for their development. Furthermore, staff that provide supervision to staff have not received the sufficient training. As a result, staff are not provided with support to understand children's individual needs and to improve their practice.

Managers and staff work with a range of professionals to support children's needs and progress. However, there is a lack of effective communication systems to ensure that set tasks are completed. For example, there has been a significant delay by staff in implementing a toileting programme for one child as agreed within his care planning review. This practice does not ensure that the children are receiving the support they need to progress and reach their full potential.

Managers do not ensure that staff have the skills and training to meet the needs of the children living in the home. Staff have not received training in areas specific to the children's needs. For example, staff do not know about deprivation of liberty orders and have not received training on this. This does not ensure that staff have the sufficient skills to meet the children's needs, which impacts the quality of care. They are, however, supporting a child whose deprivation of liberty order has a significant impact on his day-to-day life and expectations on staff practice.

Children's case files do not contain all the information required. For example, records are not up to date and fail to reflect the care that is being provided in the home. These shortfalls have not been addressed by managers. This means that staff do not have all the information they need to provide coordinated care.

The internal monitoring systems used by managers have not been effective in identifying and responding to issues. Furthermore, shortfalls raised during this inspection were raised as requirements at the previous inspection and are now repeated. This fails to demonstrate that management has a clear overview of the home and understanding of its responsibilities.

The statement of purpose has not been updated in line with the regulation. The document does not provide sufficient information about the care provided and has not been updated to reflect the changes to the staff team. This means that Ofsted does not have the most up-to-date information.

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
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; 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— provide to children living in the home the physical necessities they need in order to live there comfortably; ensure that the premises used for the purposes of the home are designed and furnished so as to— ensure that staff— meet the needs of each child. (Regulation 6 (1)(a)(b) (2)(b)(vii)(c)(i)) This specifically relates to the managers ensuring that the environment is improved and meets the needs of the children living in the home.	01 June 2022
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— understand the roles and responsibilities in relation to protecting children that are assigned to them by the registered person; and	01 June 2022

take effective action whenever there is a serious concern about a child's welfare. (Regulation 12 (1) (2)(a)(v)(vi)) This specifically relates to managers ensuring that concerns about staff practice are responded to promptly and that the actions following investigation are followed. In addition, the provider must ensure that children understand the steps taken to investigate and respond to concerns raised against care staff.	
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; ensure that the home has sufficient staff to provide care for each child; ensure that the home's workforce provides continuity of care to each child; 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)(d)(e)(h)) This relates to ensuring that there are sufficient staff and that they have received training which is specific to meet the needs of the children. Additionally, the manager must review and evaluate the quality of care and implement monitoring systems to bring improvement. This requirement was made at last inspection and is restated.	01 June 2022

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 (5)) This specifically relates to the statement of purpose being up to date with the care that is provided in the home.	01 June 2022
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— medicines kept in the home are stored in a secure place so as to prevent any child from having unsupervised access to them. (Regulation 23 (1) (2)(a)) In particular, the registered person must ensure that medication is stored safely.	01 June 2022
The registered person may only use devices for the monitoring or surveillance of children if— the monitoring or surveillance is for the purpose of safeguarding and promoting the welfare of the child concerned, or other children. (Regulation 24 (1)(a)) This specifically relates to ensuring that door alarms, CCTV and radios are only used as set out in a child's agreed risk assessment.	01 June 2022
The registered person must ensure that all employees— receive practice-related supervision by a person with appropriate experience; and have their performance and fitness to perform their roles appraised at least once every year. (Regulation 33 (4)(b)(c)) This specifically relates to managers ensuring that all staff working in the home receive practice-related supervision and appraisals. This requirement was made at last inspection and is restated.	01 June 2022
The registered person must maintain records ("case records") for each child which—	01 June 2022

include the information and documents listed in Schedule 3 in relation to each child and are kept up to date.
(Regulation 36 (1)(a)(b))

This specifically relates to the need for plans to reflect the care and arrangements for the child.

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: SC407929

Provision sub-type: Children's home

Registered provider: Our Place (2008) Ltd

Responsible individual: Jarrod Elcock

Registered manager: Post vacant

Inspectors

Sophie Hills, Social Care Inspector
Dawn Bennett, Social Care Inspector

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