

SC408655

Registered provider: Priory Education Services Limited 06244880

Interim inspection

Inspected under the social care common inspection framework

Information about this children's home

This children's home is registered to care for seven young people. The home is run by a private organisation, providing care and accommodation for young people who have learning disabilities. Young people who currently resident at the home are educated at the provider's school approximately 10 miles away.

Inspection date: 10 January 2018

Judgement at last inspection: Good

Date of last inspection: 23 May 2017

This inspection

The effectiveness of the home and the progress and experiences of children and young people since the most recent full inspection

This home was judged good at the last full inspection.

At the interim inspection, Ofsted judges that it has declined in effectiveness.

Staff report that team morale is good and that they enjoy working with the young people in their care. This contributes to the warm and friendly environment of the home, even though there is friction in the relationships between some of the young people. The manager and staff have managed incidents of bullying effectively. There has not been an incident reported for two months, although several incidents had occurred prior to that. Some young people are still wary of unpleasant behaviour recurring, but the level of supervision and staff's strategy of engaging each of the young people in activities on a one-to-one basis significantly reduces the likelihood. One young person said of the staff, 'They entertain us and we don't get bored.'

Young people have made complaints about the behaviour of peers and other matters, such as websites being blocked on the internet. The log evidences action taken and conclusions reached, but it does not confirm if the complainant is or is not satisfied with the outcome. This was the subject of a requirement in the last inspection report, but has

not been acted on.

Similarly, a requirement to supply HMCI with a quality of care review at least every six months has not resulted in the manager producing them in a timely manner. Copies were available during the inspection, but the manager was unable to obtain evidence that they had previously been sent to Ofsted, and one review had not been completed until almost three months after the period being reported on.

Recommendations regarding staff supervision and supporting young people's education have not been addressed sufficiently. Although staff report that they have supervision monthly (or fortnightly, if a new starter), records do not bear this out. Files sampled indicated that no sessions had taken place in 10 weeks, nor had staff had the number of sessions specified in the home's workforce plan during the last 12 months. In addition, the plan does not specify the frequency of supervision for bank and agency workers. Bank staff are not included in the supervision log; as a result, it is not easy to identify when sessions have taken place or are due.

Most young people said that they did not need support with their education from residential staff, as they did not get homework. Nonetheless, relevant reports should be available and staff should be conversant with the recommendations and targets recorded within them. Although files looked at do have education, health and care plans in them, personal education plans were not present and staff were not able to say what was being worked towards for any young person.

Staff set independence targets for young people, following discussion, and they report that all young people have made progress as a result. This includes independent travel by public transport and cooking skills. Records, however, are sparse, with limited written accounts of how staff assist young people to work to their targets. Records of achievements have few, if any, entries.

Almost all case records seen were dated and clearly identified the author. Signing sheets indicated that the vast majority of staff had seen reviews of plans and assessments, and emails demonstrated that social workers had been sent copies.

Staff signed all key-worker session records, but only about half were signed by the young person. The sessions occur frequently; many of these are unplanned, but there is worthwhile recording to capture relevant issues addressed. Many key-worker sessions result in actions or outcomes for staff and/or the young person; however, the section in the format for updating progress on these has not been used for this purpose. This means that actions might be forgotten and young people may not get feedback on what workers have done on their behalf. Frequently, the narrative does not provide sufficient information to convey what was discussed. Sometimes, the narrative only describes an activity undertaken, even though headings indicate important conversations had taken place.

A variety of other recordings do not contain sufficient information. Placement plans do not always enable staff to understand arrangements for young people's care, for example direct and indirect contact with parents (its type, frequency, where it happens, or any requirement for supervision). Sanction logs do not always provide adequate detail for a reader to understand why a member of staff imposed a particular measure, and it

is not clear when the manager had spoken to the young person about it. Occasionally, there is no management oversight of the incident, or it is late because the manager was away and no one had been authorised to undertake the task.

Records show that, on one occasion, a hold that was not indicated as one appropriate to use with a young person was employed when other measures did not have the desired effect of keeping the young person and staff safe. While this was justifiable, staff had not updated the positive handling plan to take account of the development. This was not an isolated incident, as another plan contained information that clearly related to a previous placement. Although the manager and almost all staff had read the plan, this oversight had not been identified.

The lack of attention to accurate records has also lead to consent forms containing errors that made it unclear what the intentions of the person signing were. Also, some placing authority documentation had been misfiled when it had previously been thought to be missing.

Copies of emails demonstrate that staff make requests for paperwork that has been unforthcoming. However, this is seldom done promptly and is not escalated if requests for paperwork are unsuccessful.

Many of these deficiencies have been the subject of recommendations made by the independent person conducting regulation 44 visits. However, the manager has not been able to respond swiftly enough to make adequate progress.

An area of improvement has been in making risk assessments more thorough. Those sampled, including impact risk assessments, were detailed and contained sound conclusions on which to base placement decisions, or to identify strategies for staff to work to.

Over a period of several months, the manager has helped his staff group to become a cohesive team. The majority of staff members feel supported by colleagues and managers in the home and in the wider organisation. Recruitment has improved the availability of staff so that there is less reliance on bank workers and working overtime. This has a positive impact on young people, who benefit from carers who have the physical and emotional energy to help them tackle their struggles and enhance their experiences.

Recent inspection history

Inspection date	Inspection type	Inspection judgement
23/05/2017	Full	Good
04/01/2017	Interim	Declined in effectiveness
31/08/2016	Full	Good
10/02/2016	Interim	Improved effectiveness

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
In order to meet the education standard the registered person must ensure: that staff help each child to achieve the child's education and training targets, as recorded in the child's relevant plans. (Regulation 8(2)(a)(i))	28/02/2018
In order to meet the positive relationship standard the registered person must ensure: that staff 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(2)(a)(x))	28/02/2018
The registered person must ensure that within 24 hours of the use of a measure of control, discipline or restraint in relation to a child in the home, a record is made which includes the name of the child; details of the child's behaviour leading to the use of the measure; the date, time and location of the use of the measure; a description of the measure and its duration; details of any methods used or steps taken to avoid the need to use the measure; the effectiveness and any consequences of the use of the measure and a description of any injury to the child or any other person, and any medical treatment administered, as a result of the measure. The registered person must ensure that within 48 hours of the use of the measure, the registered person, or a person who is authorised by the registered person to do so ("the authorised person") has spoken to the user about the measure; and has signed the record to confirm it is accurate. (Regulation 35(3)(a) and (b)) In particular, records must contain sufficient information to identify why the user took the measure and when she or he has been spoken to about it. In addition, if the registered person is unlikely to be able to complete the tasks within the timescales set she or he must authorise another person to undertake them.	28/02/2018
The registered person must ensure that a record is made of any complaint, the action taken in response, and the outcome of any investigation so that the process followed and how it has led to	28/02/2018

the outcome is clear. (Regulation 39(3)) In particular, the record must state if the complainant is satisfied with the outcome and, if not, what further action has been taken to resolve the issue.	
The registered person must complete a review of the quality of care provided for children ("a quality of care review") at least once every 6 months and supply to HMCI a copy of the review report within 28 days of the date on which the quality of care review is completed. (Regulation 45(1) and (4)(a)) In particular, the review should be completed and forwarded within a reasonable time of the period being reviewed.	28/02/2018

Recommendations

- Children should be able to see the results of their views being listened to and acted upon. ('Guide to children's homes regulations, including the quality standards', page 22, paragraph 4.11) In particular, actions agreed in key-work sessions and young people's meetings should be reported back to children and recorded.
- Staff should continually and actively assess the risks to each child and the arrangements in place to protect them. Where there are safeguarding concerns for a child, their placement plan, agreed between the home and their placing authority, must include details of the steps the home will take to manage any assessed risks on a day-to-day basis. ('Guide to the children's homes regulations including the quality standards', page 42, paragraph 9.5)
- The registered person should have a workforce plan which should detail the process and timescales for supervision of practice and keep appropriate records for staff in the home. ('Guide to children's homes regulations including the quality standards', page 53, paragraph 10.8) These should include the process and timescales for the supervision of agency and bank staff.

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.

This inspection focused on the effectiveness of the home and the progress and experiences of children and young people since the most recent full inspection.

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: SC408655

Provision sub-type: Children's home

Registered provider: Priory Education Services Limited 06244880

Registered provider address: Priory Group, 80 Hammersmith Road, London W14 8UD

Responsible individual: Hannah Cox

Registered manager: Christopher Ward

Inspector

Chris Peel, social care inspector

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