

Children's homes inspection – Full

Inspection date	17/01/2017
Unique reference number	1236620
Type of inspection	Full
Provision subtype	Children's home
Registered provider	Cambian Childcare Ltd
Registered provider address	4th Floor, Waterfront, Hammersmith Embankment, London, W6 9RU

Responsible individual	Katie Howard
Registered manager	Post vacant
Inspector	Janice Hawtin



Inspection date	17/01/2017
Previous inspection judgement	N/A
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



1236620

Summary of findings

The children's home provision requires improvement because:

- This is a newly registered children's home. Young people were admitted before the home could provide the service as described in its statement of purpose. The provision of clinical assessments and the therapeutic support needed by young people were considerably delayed.
- The home has been unable to provide consistency of staffing. Of those employed, only a minority have substantial experience and/or suitable childcare qualifications. Staff who are still in their probationary period often work together caring for young people with complex emotional needs.
- Records are not reliably completed or useful in helping staff to understand the experiences and needs of young people. Essential risk assessments have not been completed. Other records contain language that states that young people are sexually active rather than they have been sexually abused. This pejorative assumption demonstrates a lack of understanding among some of the staff team.
- The home is not providing structured and planned learning activities for young people when they refuse to attend or are excluded from school.



The children's home's strengths

- The current resident, who has lived here since the home opened, has made significant progress. This is exceeding the expectations of both professional stakeholders and a parent, who commented: 'I don't think they could be in a better place.'
- Young people are safer and at significantly less risk of sexual exploitation and abuse since living in this home.
- A clinical psychologist and assistant psychologist have been working in the home since October. They are providing assessment and then therapeutic input to the young person. Their support, alongside the training and guidance provided to staff, is having an impact on the staff's ability to understand and respond effectively to difficult behaviour and keep young people safe.
- The manager and staff are optimistic and enthusiastic about young people and their prospects. They have created a homely, welcoming environment, which is well maintained and personalised. Staff speak positively of young people and want them to do well.
- A newly appointed manager is working at the home. To some extent, her monitoring has been effective in identifying more than 40 actions needed to improve the home. The staff team has become more stable over time, and with the support available, its members are in a much better position to progress the service and work towards providing a dependably good home.



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 within the given timescales.

Requirement	Due date
16: Statement of purpose 16.—(1) 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. (2) The registered person must provide a copy of the statement of purpose to HMCI and make a copy of it available upon request to— (a) a person who works at the home; (b) a child, or a child for whom accommodation in the home is being considered; (c) a parent of a child, or a parent of a child for whom accommodation in the home is being considered; (d) a child's placing authority; and (e) in the case of a qualifying school, the Secretary of State. (3) The registered person must— (a) keep the statement of purpose under review and, where appropriate, revise it; and (b) notify HMCI of any revisions and send HMCI a copy of the revised statement within 28 days of the revision. (4) If a home has a website, the registered person must ensure that a copy of the statement of purpose is published on that website unless the registered person considers that such publication would prejudice the welfare of children in the home. (5) Subject to paragraph (6), the registered person must ensure that the home is at all times conducted in a manner which is consistent with its statement of purpose. (6) Nothing in paragraph (5) or Regulation 46 (review of premises) requires or authorises the registered person to contravene or not comply with— (a) any other provision of these regulations; or (b) any conditions in relation to the registration of the registered person under Part 2 of the Care Standards Act 2000. (The Children's Homes (England) Regulations 2015)	28/02/2017
13: The leadership and management standard The leadership and management standard	28/02/2017



- 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.
- (2) In particular, the standard in paragraph (1) requires the registered person to—
- (a) 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;
- (b) ensure that staff work as a team where appropriate;
- (c) ensure that staff have the experience, qualifications and skills to meet the needs of each child;
- (d) ensure that the home has sufficient staff to provide care for each child;
- (e) ensure that the home's workforce provides continuity of care to each child;
- (f) 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;
- (g) demonstrate that practice in the home is informed and improved by taking into account and acting on—
- (i) research and developments in relation to the ways in which the needs of children are best met; and
- (ii) feedback on the experiences of children, including complaints received; and
- (h) use monitoring and review systems to make continuous improvements in the quality of care provided in the home.

The positive relationships standard

- $\dot{11}$.—(1) The positive relationships standard is that children are helped to develop, and to benefit from, relationships based on—
- (a) mutual respect and trust;
- (b) an understanding about acceptable behaviour; and
- (c) positive responses to other children and adults.
- (2) In particular, the standard in paragraph (1) requires the registered person to ensure—
- (a) that staff—
- (i) meet each child's behavioural and emotional needs, as set out in the child's relevant plans;
- (ii) help each child to develop socially aware behaviour;
- (iii) encourage each child to take responsibility for the child's behaviour, in accordance with the child's age and understanding;
- (iv) help each child to develop and practise skills to resolve

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conflicts positively and without harm to anyone;

- (v) 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;
- (vi) 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;
- (vii) help each child to develop the understanding and skills to recognise or withdraw from a damaging, exploitative or harmful relationship;
- (viii) strive to gain each child's respect and trust;
- (ix) 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;
- (x) 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;
- (xi) de-escalate confrontations with or between children, or potentially violent behaviour by children;
- (b) that each child is encouraged to build and maintain positive relationships with others.

35: Behaviour management policies and records

- 35.—(1) The registered person must prepare and implement a policy ('the behaviour management policy') which sets out—
- (a) how appropriate behaviour is to be promoted in the children's home; and
- (b) the measures of control, discipline and restraint which may be used in relation to children in the home.
- (2) The registered person must keep the behaviour management policy under review and, where appropriate, revise it.
- (3) The registered person must ensure that—
- (a) 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—
- (i) the name of the child;
- (ii) details of the child's behaviour leading to the use of the measure;
- (iii) the date, time and location of the use of the measure;
- (iv) a description of the measure and its duration;
- (v) details of any methods used or steps taken to avoid the need to use the measure;

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- (vi) the name of the person who used the measure ('the user'), and of any other person present when the measure was used;
- (vii) the effectiveness and any consequences of the use of the measure; and
- (viii) a description of any injury to the child or any other person, and any medical treatment administered, as a result of the measure;
- (b) 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')—
- (i) has spoken to the user about the measure; and
- (ii) has signed the record to confirm it is accurate; and
- (c) within five days of the use of the measure, the registered person or the authorised person adds to the record confirmation that they have spoken to the child about the measure.

Recommendations

To improve the quality and standards of care further, the service should take account of the following recommendations:

- 14.4 Staff should be familiar with the home's policies on record keeping and understand the importance of careful, objective, and clear recording. Staff should record information on individual children in a non-stigmatising way that distinguishes between fact, opinion and third-party information. Information about the child must always be recorded in a way that will be helpful to the child. ('Guide to the children's homes regulations including the quality standards', page 62, paragraph 14.4)
- 5.15 Where children placed in a home are not participating in education because they have been excluded or are not on a school roll for some other reason, the registered person and staff must work closely with the placing authority so that the child is supported and enabled to resume full-time education as soon as possible. In the interim, the child should be supported to sustain or regain their confidence in education and be engaged in suitable structured activities. If no education place is identified by the placing authority, the registered person must challenge them to meet the child's needs under Regulation 5 (engaging with the wider system to ensure that children's needs are met). ('Guide to the children's homes regulations including the quality standards', page 28, paragraph 5.15)
- 7.15 Please see Regulation 23. Care must be taken to ensure that prescribed medicines are only administered to the individual for whom they are prescribed. Medicines must be administered in line with a medically approved protocol.



Records must be kept of the administration of all medication, which includes occasions when prescribed medication is refused. Regulation 23 requires the registered person to ensure that they make suitable arrangements to manage, administer and dispose of any medication. These are fundamentally the same sorts of arrangements as a good parent would make but are subject to additional safeguards. When the home has questions or concerns about a child's medication, they should approach an expert such as a general medical practitioner, community pharmacist or designated nurse for children looked after. ('Guide to the children's homes regulations including the quality standards', page 35, paragraph 7.15)

- 9.30 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 homes regulations including the quality standards', page 45, paragraph 9.30)
- 5.19 Children should have access to a computer and the internet to support their education and learning, unless there are specific safeguarding reasons why this would be inappropriate. In such cases, the home should consider whether and how it can support the child to access a computer and the internet safely. ('Guide to the children's homes regulations including the quality standards', page 28, paragraph 5.19)



Full report

Information about this children's home

■ The home is registered to provide care and accommodation for up to four children who have emotional and/or behavioural difficulties. This home is dedicated to providing safety, care and therapy to children who have experienced or are at risk of child sexual exploitation and sexual abuse.

Recent inspection history

This is the first inspection since the home was registered in July 2016.



Inspection judgements

	Judgement grade
The overall experiences and progress of children and young people living in the home are	Requires improvement

Progress for young people was initially delayed. Assessments and therapy were not provided because of a lack of clinical staff when the home opened. This provision is now in place and impacting on the rate of progress for a young person who is beginning to develop coping strategies for her independence.

Instability in the staff team affects the young people's ability to form meaningful, sustained relationships with the adults caring for them. To date, more than 30 members of staff have worked in this home. Staffing has recently been more stable, and the young person can identify trusted adults that she can talk to and with whom she can share concerns.

Three young people have lived in this home. It was not possible to meet the mental health needs of one young person. They were moved to another home which specialises in dealing with mental health issues. This followed significant violent behaviour and damage to property. This behaviour may not have been predictable from the referral information provided, but it continued long enough to have a negative impact on the current resident, who remains fearful that this may happen again.

A full-time school place is available to young people. Attendance has improved since the young person moved into the home, although it is still not good. When a young person is excluded or refuses to attend, the staff do not have clear planned alternatives in place. This reduces opportunities for learning and further disadvantages young people.

Activities are promoted and horse riding is a favourite. Young people's talents are encouraged and there is an element of mutual sharing of skills. The young person taught a member of staff to play some guitar chords and drums. The staff are enthusiastic about the young person's prospects and clearly communicate that they want her to do well.

Spending time with families and those important to young people is promoted. This has improved relationships and the quality of time spent with significant people. The manager acted promptly to improve communication between the home and a parent.

Young people are consulted about the home and the services it offers. They are commonly involved in choosing food and activities. The home is personalised and young people have meaningful belongings around them.



	Judgement grade
How well children and young people are helped and protected	Requires improvement

Records and assessments to support the safety and well-being of both staff and young people are not fully in place or up to date. This includes detail of the risks associated with staff working on their own.

Risk management records used to inform staff and other agencies if young people go missing from the home contain language which is open to misinterpretation. Describing a young person who has been sexually abused as sexually active is both derogatory and devalues the child's traumatic experiences.

Young people have not consistently had the opportunity to meet with someone independent of the home following episodes of being missing. This reduces opportunities for the staff to consider if any aspects of the care provided need to be amended to reduce incidents. On one occasion when a return interview was carried out, the manager did not make use of the feedback provided to explore the feelings of the young person further. Incidents of young people being missing have reduced over time.

After some initial delay due to staffing shortages, young people are now appropriately assessed and making use of the therapeutic support provided. This has led to a reduction in self-harm and to an improvement in emotional well-being. Previously, staff had been unable to engage the young person in therapy.

Behaviour management has improved over time. The staff team is gaining the experience and understanding they need. Responses to managing difficult behaviour are more considered and effective in avoiding escalation, while keeping young people safe and allowing them to take increased responsibility for their actions.

Young people have become considerably safer since moving into the home and the staff have been able to prevent them from being abused.

Physical intervention is used to avoid serious injury to young people, and staff are trained in these techniques. Not all records are fully complete, with one record missing sufficient information to understand the location of the incident. Others evidence no feedback from young people or staff. This limits opportunities for review and monitoring.

Young people have established some trusted relationships and feel they can talk to



most of the staff, whom they trust to protect them. Staff are clear about their duty to safeguard young people and who to share child protection concerns with. Allegations have been taken very seriously, and the manager acted swiftly to protect a young person who may have been at risk.

Staff understand the dangers and risk posed by use of the internet and social media. Young people do not currently have safe access to a computer. This limits the staff's ability to provide guidance and support around safe use, and address any access issues.

	Judgement grade
The impact and effectiveness of leaders and managers	Inadequate

The home did not provide the services as described in the statement of purpose for more than two months when the first young person was admitted in August 2016. The current statement has not been updated to provide accurate information, including details of the staffing structure and the experience and qualifications of staff.

The organisation has not been able to recruit and retain suitably qualified and experienced staff. More than 30 different members of staff have worked in the home since it was opened, including three different managers. This situation does not provide stability for young people or support them to develop meaningful, trusting relationships with those caring for them.

Records to support staff's understanding of young people's needs are not consistently useful. In particular, care plans lack sufficient detail. How targets are to be achieved and detail of who will be responsible for making sure plans are implemented is not recorded. These shortfalls also make it difficult to monitor progress made by young people effectively.

Medication records do not contain the reasons why painkillers are given to young people. This prevents staff from seeing whether symptoms are persistent and if additional medical guidance should be sought.

The staff are not supervised frequently enough. Members of staff, including several who are new to this work or unqualified, are missing important opportunities to discuss and develop their practice and/or raise concerns.

Team meetings provide some opportunities for staff to develop their understanding of the young people and to consider the young people's needs. The clinical team is involved in these meetings, which is helping to support staff development and



encourage reflective practice.

Independent monitoring of the home is completed monthly. These reports have identified what needs to be prioritised to improve the service. The manager has also recently completed a monitoring report for the home, which identifies a large number of areas for development.

This service is in its infancy. In the five months that it has been a home to young people, three different managers have been in charge, which is disruptive for both young people and staff. The current manager holds suitable qualifications for the role and has several years' experience of managing children's homes. Her experience of working with young people who have been or are at risk of sexual exploitation and abuse is limited. The clinical team and senior management support is essential to ensuring that expert knowledge and guidance are available to support the developments this home needs. Recent advances in practice are promising.



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 children looked after 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 that 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 that 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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