

Children's homes – Interim inspection

| Inspection date | 27/03/2017 | |
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| Unique reference number | SC425985 | |
| Type of inspection | Interim | |
| Provision subtype | Children's home | |
| Registered provider | Autism Initiatives (UK) | |
| Registered provider address | Sefton House, Bridle Road, Bootle, Merseyside L30 4XR | |

| Responsible individual | Katharine Silver |
|------------------------|------------------|
| Registered manager | Helen Smith |
| Inspector | Karen Willson |



| Inspection date | 27/03/2017 |
|--|------------|
| Previous inspection judgement | Good |
| Enforcement action since last inspection | None |
| 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 full inspection. At this interim inspection, Ofsted judges that it has **declined in effectiveness**.

Two young people have been admitted to the home since the previous inspection. Pre-admission assessments were completed to gather information to develop the home's care plans. The young people were able to visit the home prior to moving in, and to contribute to personalising their bedrooms. However, both young people were admitted on the same day, which had not been planned. Impact risk assessments, while completed, were weak in considering the impact the new admissions might have on young people already living in the home, and on each other. The locality risk assessment was not included in these assessments, particularly in relation to considering needs of road safety. Strategies to mitigate any such risks were, therefore, not considered. For one young person who is looked after, the home has not ensured that all relevant plans have been provided by the placing authority. Professional assessments, including the education, health and care plan for one young person, are not current. Consequently, the home does not hold important information to demonstrate compliance in care planning.

Records show that the two new young people have impacted on one another in particular; for example, staying up late at night, and leaving the home without authorisation. A member of staff reported that one of the young people is more dominant and encourages the other to engage in negative behaviour. When incidents occur that highlight new risks, including changes and developments in self-harming behaviour, or leaving the home without authorisation, risk assessments have not been updated to ensure that staff understand them and can respond to reduce these risks. However, when the young people have left the home, staff have followed them and returned them safely without having to report them missing.

Progress for young people has been mixed. Young people who had previously not attended education regularly are now attending the organisation's school. However, another young person has disengaged from school since December 2016. Arrangements to meet with a Connexions worker or visit colleges have been unsuccessful, although the young person will meet with some school staff as part of an education plan. One social worker reported that incidents of self-harm are reducing and that a young person is accessing more community activities than before. Another young person's health is improving, following a complaint by a parent, as a result of planning to increase exercise levels by walking to school and



to reduce unhealthy foods, particularly snacks. Advice has been sought from a dietician to support the home to help the young person make progress.

There have been a number of incidents where young people have verbally abused and physically hurt one another, despite a high ratio of staff. Records do not clearly identify what action is taken to identify strategies for staff to manage behaviour and reduce the risk of further incidents. The additional needs of the young people may impact on their ability to understand concepts such as bullying. However, when asked, staff did not identify how they ensure that each young person is protected from being harmed by others. The home is able to access additional specialist support from services within the organisation, including speech and language therapists, behaviour support and a mental health practitioner to support the highly vulnerable young people who live there. Incidents for one young person are reported to be reducing in frequency, but indicate increased aggression. An internal review with behaviour support specialists identified that particular methods of restraint are not appropriate for this young person due to specific health needs. The report of this review states that, on at least four previous occasions, the home was not informed of these restraints being used in school, in order for staff to monitor any health concerns. On one occasion in the home, a record describes an unplanned physical intervention of the same young person, which lacks detail and conflicts with a verbal description of the incident. This indicates a shortfall in the quality and clarity of recording. It is also unclear how effectively the home utilises communication and support from services within the organisation to manage behaviour in the home. A social worker also reports concerns raised by a specialist from a child and adolescent mental health team, that internal resources have not yet been used to fully understand this young person's identity and diversity of needs.

The provider has internal monitoring systems in place to enable the registered manager to analyse the use of restrictive practices, alongside monthly audits of young people's files. These support the quality of care reports to identify the young people's progress and any improvements required, which have provided a good overview of the home previously. External monitoring reports by the independent visitor continue to lack rigorous assessment of the quality of care in the home required by the regulations to determine whether, in particular, young people are effectively safeguarded and whether the home promotes their well-being. This means that they do not fully support the registered manager's understanding of shortfalls in the home and which improvements could be made. Staff receive regular supervision and attend monthly team meetings. However, during the inspection, it was identified that staff who were leaving the organisation had not followed whistleblowing procedures to raise concerns regarding safeguarding. The matter has been reported by a third party to the designated officer of the local authority in which the home is located.

Improvements have been made since the last inspection with regard to some, but not all, of the requirements and recommendations. Improvements to the electronic recording system have been made, but are not consistently used to good effect to evaluate outcomes of debriefs with young people following restraints or



effectiveness of measures used. Improvements have also been made to young people's health files to more accurately reflect medical appointments and progress, which are reviewed each month. The admission and discharge register now records the date on which a young person ceased to be accommodated. Staff have now received e-safety training to inform their practice to reduce risks to young people when they use the internet. Statutory requirements which have not been addressed are repeated at this inspection.

While shortfalls have been identified during the inspection, the responsible individual has already started to take action to address them and to implement improvements.



Information about this children's home

The home offers care and accommodation for up to seven young people who experience autistic spectrum disorder and/or a learning disability.

Young people who access the home attend the organisation's school. A range of placements are provided, including 52 weeks, term time, holiday, weekends and short breaks.

It is owned by a national organisation.

Recent inspection history

| Inspection date | Inspection type | Inspection judgement |
|-----------------|-----------------|------------------------|
| 24/11/2016 | Full | Good |
| 03/02/2016 | Interim | Improved effectiveness |
| 15/07/2015 | Full | Good |
| 26/06/2014 | Full | Adequate |



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 |
|--|------------|
| 5: Engaging with the wider system to ensure that children's needs are met | 12/05/2017 |
| The registered person must, and must ensure that staff, seek to involve each child's placing authority effectively in the child's care, in accordance with the child's relevant plans. (Regulation 5 (a)) | |
| In particular, the registered manager should ensure that relevant plans are received to contribute to care planning, and demonstrate compliance with placing authorities' expectations. | |
| 14: The care planning standard | 12/05/2017 |
| In order to meet the care planning standard, the registered person must ensure that children are admitted to the home only if their needs are within the range of needs of children for whom it is intended. (Regulation 14 (2)(a)) | |
| This is specifically in relation to having a robust impact risk assessment in place that includes: looking at the compatibility of the group, using the location risk assessment to ensure that young people will be in a safe environment, and it being individual to each young person. | |
| 44: Independent person: visits and reports | 12/05/2017 |
| The independent person must produce a report about a visit which sets out, in particular, the independent person's opinion as to whether children are effectively safeguarded and that the conduct of the home promotes children's well-being. This also includes evaluating the quality of the records in the home. (Regulation 44 (4)(a)(b)) | |
| 12: The protection of children standard The registered person must ensure that staff manage relationships between children to prevent them from harming each other. (Regulation 12 (2)(iv)) | 12/05/2017 |



| 12: The protection of children standard | 12/05/2017 |
|---|------------|
| The registered person should ensure that staff are familiar with, and act in accordance with, the home's child protection policies. (Regulation 12 (2)(vii)) | |
| This is specifically in relation to staff reporting to an appropriate authority any concern they have about a child in the home being at risk of harm, via the organisation's whistleblowing procedures. | |
| 12: The protection of children standard | 12/05/2017 |
| The registered person should ensure that staff assess whether each child is at risk of harm, taking into account information in the child's relevant plans and, if necessary, makes arrangements to reduce the risk of any harm to the child. (Regulation 12 (2)(a)(i)) | |

Recommendations

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

■ Ensure that the staff are familiar with the home's policies on record keeping and understand the importance of careful, objective, and clear recordings. This includes ensuring that records are up to date, signed and dated by the author of each entry. ('Guide to the children's homes regulations including the quality standards', page 62, paragraph, 14.4)



What the inspection judgements mean

At the interim inspection we make a judgement on whether the home has improved in effectiveness, sustained effectiveness, or declined in effectiveness since the previous full inspection. This is in line with the 'Inspection of children's homes: framework for inspection'.

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

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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