

1230268

Registered provider: Kites Children's Services Ltd

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home is one of two operated by a private provider. It is registered to provide accommodation and specialist therapeutic care and treatment for four children. The provider also operates a school and an independent fostering agency as part of a separate but linked company.

Inspection dates: 14 to 15 June 2017

Overall experiences and progress of children and young people, taking into account **good**

How well children and young people are helped and protected **good**

The effectiveness of leaders and managers **good**

The children's home provides effective services that meet the requirements for good.

Date of last inspection: 20 October 2016

Overall judgement at last inspection: Not judged

Enforcement action since last inspection

None

Key findings from this inspection

This children's home is good because:

- The children benefit from committed, caring and supportive staff.
- The children are very positive about their experiences of living at the home.

They always feel well supported and safeguarded.

- Professionals and children's families have absolute confidence that their child's individual needs are well met by caring and nurturing staff.
- The staff provide individualised care with a therapeutic ethos. The children engage in regular therapy as an essential component of their care support package.
- The children value the trusting relationships that they have with the staff. These relationships allow the children to explore their experiences and identity in a non-judgemental environment.
- The children make good progress in health, education, behaviour and social relationships.
- Good admission and transition planning help the children to feel secure.
- Close partnership working with other agencies promotes positive outcomes.

The children's home's areas for development:

- Risk assessments do not always contain sufficient detail, nor are they consistently reviewed to ensure that they contain current and accurate information.
- Some care records do not clearly detail the actions that the staff have taken in response to a situation.
- Staff on occasion work excessive hours.
- Fire doors are sometimes propped open, and not all of the children have received instruction in what to do in the event of a fire.
- The manager has not established clear systems to inform the local authority of children moving into and leaving the home.
- The manager has not conducted a quality of care review.
- The staff have not received training in respect of preventing and managing self-harm.
- Non-prescription medication is administered without verification of its suitability by either a pharmacist or medical practitioner.
- The manager has not contacted placing authorities to ensure that they visit and interview the child after each missing from care incident.

Recent inspection history

| Inspection date | Inspection type | Inspection judgement |
|-----------------|-----------------|----------------------|
| 20/10/2016 | Interim | Not judged |

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 |
|---|------------|
| <p>The protection of children standard is that children are protected from harm and enabled to keep themselves safe.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure—</p> <p>that staff 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;</p> <p>that the home's day-to-day care is arranged and delivered so as to keep each child safe and to protect each child effectively from harm. (Regulation 12(1)(2)(a)(i)(b))</p> <p>In particular, ensure that individual risk assessments for each child clearly identify areas of risk and the actions to be taken to reduce the risks and ensure that staff do not work excessive hours in the home.</p> | 10/07/2017 |
| <p>The registered person must ensure that the requirements of the Regulatory Reform (Fire Safety) Order 2005 and any regulations made under it, except for article 23 (duties of employees), are complied with in respect of the home. (Regulation 25(2)(b))</p> <p>In particular, ensure that, in the absence of a suitable automatic closing mechanism, all fire doors are kept closed, and ensure that children understand how to evacuate from the building safely in an emergency. (Regulation 25(2)(b))</p> | 10/07/2017 |
| <p>The registered person must notify, without delay, the local authority for the area in which the children's home is located of every admission of a child into the home and every discharge of a child from the home. (Regulation 41(1))</p> | 10/07/2017 |
| <p>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. (Regulation 45(1))</p> | 10/07/2017 |

Recommendations

- 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. ('Guide to the children's homes regulations including the quality standards', page 35, paragraph 7.15)

In particular, ensure that all non-prescription medication is from a list which is approved as suitable by either a pharmacist or medical practitioner.

- 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)

In particular, establish a system to prompt the arrangement of a return interview after each missing from care event.

- Ensure that staff can access appropriate facilities and resources to support their training needs. ('Guide to the children's homes regulations including the quality standards', page 53, paragraph 10.11)

In particular, ensure that all of the staff receive suitable training in preventing and managing self-harm, and in all aspects of the care that are detailed in the statement of purpose.

- Ensure that staff understand the importance of careful, objective and clear recording. Ensure that information regarding the child is 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)

Inspection judgements

Overall experiences and progress of children and young people: good

Placements are well planned. The children settle quickly into an environment that feels like a home from home, and they build positive relationships with staff. As a result, the children experience a stable and nurturing home where they flourish. The children feel that staff care about their well-being and future. One child said, 'I know that they care about us very much.' These nurturing relationships underpin the therapeutic ethos which

flows through the service.

The children are supported to maintain the friendships and family relationships which are important to them. The staff make arrangements for family contact, including when the children are placed a long way away from their family. The children enjoy living at the home. Their comments included:

- 'The staff are really good. They will try out the situation as best they can to help us.'
- 'I have matured so much.'
- 'It's an excellent place. I would give it 10 out of 10.'

The staff provide highly individualised, child-focused care and support. One social worker said, 'It's been a brilliant placement for him. They know him really well. They 'get him', which is so lovely.' This sensitive non-judgmental support helps the children to explore their experiences, identity and sexuality in a safe environment. Therefore, the children make progress in all aspects of their lives. They reduce risk-taking behaviours such as going missing from home and committing offences, and they improve their engagement in education. The children's confidence and emotional resilience increases because of the support of staff and weekly therapy sessions.

The children are involved in all day-to-day decisions about their daily lives. They have confidence that staff listen to them and will respond to any issues of concern that they may raise. Opportunities for discussion occur not only in the home but also as part of the children's regular therapy sessions. The children feel valued. They develop tools to communicate and manage their emotions.

The children are healthy and receive good support from staff to maintain a healthy lifestyle. For example, they are eating a wider and more balanced diet due to the encouragement and positive role modelling from staff. Medication arrangements are safe and meet statutory requirements. However, in order to fully safeguard children, a suitably qualified medical professional should approve the home's list of available non-prescribed medication.

The children experience improved emotional well-being. They are developing their resilience because of the positive relationships which they enjoy with staff, and the therapy that they receive. Some children have a history of presenting with self-harming behaviours. However, there is no evidence to confirm that the staff have undertaken training in respect of preventing and managing self-harm. It is important that all of the staff have suitable knowledge of all of the aspects of care which affect the children, in order to meet their needs effectively.

The children have excellent attendance at school and are progressing well in their education. One child would have achieved 100% attendance had their care review been held outside of school hours. A headteacher said, 'The staff are really absolutely fabulous. I'd give them 10 out of 10.' The organisation is committed to providing learning and enrichment opportunities outside of school. For example, one child loves

playing the drums and another who previously received singing lessons now sings in their school choir. The children enjoy activities which appeal to their interests, including outward-bound activities, such as cooking breakfast on the beach, and activity clubs and console games. They enjoy planning a packed programme of activities for the school holidays. One child said, 'It's amazing. I love it. We do lots of fun stuff.'

The children receive support to develop practical life skills appropriate their age, understanding and emotional development. One child has negotiated to progress from full staff supervision to have a mobile phone and travel to school independently. His social worker said, 'He's grown up massively since he's been there, in such a good way. He does a mean leek and sausage bake now.'

How well children and young people are helped and protected: good

The children say that they always feel safe, listened to and well cared for by the staff. The staff are aware of their safeguarding responsibilities. There have not been any significant safeguarding incidents. The staff maintain a close eye on group dynamics to ensure that any conflicts are dealt with swiftly. One child said, 'I feel safe because they [the staff] keep us safe and make sure that nothing bad happens to us.'

Partner agencies and parents are very positive about the improvements that the children have made in relation to their behaviour and personal safety since coming to live at the home. They have absolute confidence in the staff to keep the children safe.

The children who have been in placement for an extended time have a detailed individual risk assessment and integrated treatment plan. They are fully aware of these plans and how to earn extra freedom and responsibilities by considering and managing risk effectively. This helps them to mature and to develop age-appropriate self-management skills. Those who are newer to the home have succinct management plans prior to the development of their integrated treatment plans. These management plans do not always cover all of the areas of need or give sufficient information to guide staff effectively. One child's risk assessment did not contain a historical risk of fire setting. Risks of self-harm were identified, but the assessment did not provide sufficiently clear guidance about how the risks should be managed. On occasion, these risk management plans have not been updated to reflect the changes in support needs. The impact of this is reduced because the staff know the children well and verbally communicate changes in needs. However, it does mean that there is potential that important information may not be documented and shared effectively.

The atmosphere is warm and calm, and the focus is on resolving any conflict through discussion. The children are encouraged to make reparation when an incident occurs, which helps them to take personal responsibility for their actions. As result, there are no concerns regarding anti-social behaviour. One child said, 'No, there's been no restraints. It's pretty chilled here.'

Suitable staffing levels and robust security measures promote the children's safety. However, the children's individual missing-from-care risk assessments are not

consistently detailed or accurate. Information regarding the required supervision arrangements have not always been updated, and there is no clear written guidance for staff regarding when to contact the police. The impact of this is reduced as incidents of children going missing from home are few. When incidents have occurred, staff have acted to safeguard the child. Independent return home interviews have not taken place. Consequently, opportunities to explore future protective actions are missed.

The manager ensures that the children live in a suitably safe environment. However, during the inspection the laundry and office fire doors were propped open without a clear and detailed risk assessment. This means that fire would be able to spread more quickly should it start. Furthermore, not all of the children have received documented instruction in how to exit the building safely in the event of a fire.

The effectiveness of leaders and managers: good

The suitably experienced and qualified manager leads by example, ensuring that the children are consulted about their care and aspirations for the future. As a result, the children feel cared for, valued and listened to. The home is suitably resourced and the staff are meeting the aspirations set out in the home's statement of purpose.

The children are making good progress from their individual starting points because of the personalised good quality care that they receive. The staff are individually highly committed to providing good care. One social worker said, 'The individual staff members are really great. He [child] likes it and says he wants to stay until he is 18.'

The staff maintain positive and effective relationships with the local community and other agencies, such as placing authorities, the police and youth offending teams. These relationships help to promote positive outcomes and tolerance. One placing social worker said, 'The staff are able to see the good side and bring out the positives in him [child].' Another said, 'The home has been really, really good, and, at times, brilliant. He always tells me how much he likes it. He really feels like it's his home.'

The staff work well in partnership with parents so that the parents can have an active involvement in their children's lives. A parent said, 'It's a very good home. He seems happier than he has felt in a long time.' Another said, 'It's a brilliant home. I have absolutely no concerns. It's all been really positive.'

The staff work well together as a team and they feel well supported through effective induction, training, supervision and team meetings. They are knowledgeable about the ethos of the home. All of the staff who have been working with children in a children's home for over two years have completed the relevant level 3 diploma. Staff access a comprehensive training program that covers most of the aspects of care and support required. However, staff have not received training in respect of identifying and responding to self-harming behaviours.

Due to temporary staffing shortages, one or two staff have, on occasions, worked very long shifts which may affect their ability to manage difficult situations effectively. On

occasion, staff have worked through the day and night, staying awake for 24 hours. This gave no opportunity to rest or to have a break from the home. The provider must provide suitable emergency arrangements to respond to a staffing crisis in the home, as excessive working hours are not conducive to good quality childcare.

Recording systems are generally sound. However, on specific occasions suitably detailed records of care have not been maintained. The recording of one significant incident did not clearly detail when the incident occurred or how the child was demonstrating their emotions at the time. This means that there is limited understanding of how the staff judged the level of risk.

The manager has not formally notified the host authority of the children moving into or leaving the home, as required by regulation. The manager has ensured that the one requirement set at the previous inspection has been met. He has an understanding of the quality of care, and the monthly independent visitor's reports have aided this. However, he has yet to formally review the quality of care in accordance with the regulations.

Although some requirements have been set at this inspection, the quality of care and support that the children receive remains of a high standard.

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.

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: 1230268

Provision sub-type: Children's home

Registered provider: Kites Children's Services Ltd

Registered provider address: The Forge, Langham, Colchester CO4 5PX

Responsible individual: Rosslyn Parsons

Registered manager: Peter McGugan

Inspector

Joanna Heller, social care inspector

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