

1246834

Registered provider: The Amicus Community Arundel Limited

Full inspection

Inspected under the social care common inspection framework

#### Information about this children's home

The home is registered to care for five children who have emotional and behavioural difficulties. The home is a recognised provider of therapeutic care. Children living at the home attend the organisation's school.

good

**Inspection dates:** 17 to 18 July 2017

Overall experiences and progress of

children and young people, taking into

account

How well children and young people are

helped and protected

requires improvement to be 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:** Not applicable

**Overall judgement at last inspection:** Not applicable

**Enforcement action since last inspection** 

None

## **Key findings from this inspection**

This children's home is good because:

■ Staff provide children with routine, structure and consistency, which enables them to make good progress.

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- Children are beginning to explore their past traumas and experiences.
- Staff are caring and nurturing and enjoy very good relationships with children.
- Children have good educational attendance and each is making progress.
- Staff support children to address their physical and emotional health needs.
- Staff facilitate and promote contact between children and their families and friends.
- Staff are knowledgeable about those in their care and skilled in supporting them.

#### The children's home's areas for development:

- Managers have not formally assessed or managed risk in the environment.
- Managers have not completed detailed and thorough pre-admission risk assessments which explore the impact of new arrivals to the home.
- Risk assessments regarding restrictions to access and locked doors are not individualised and thorough.
- Staff have not completed fire drills following the arrival of a new young person to the home.
- Managers have not sought consent from placing authorities for door sensors and buzzers.
- Managers have not robustly evaluated and monitored the quality of care provided by the home.

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# 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
Fire precautions After consultation with the fire and rescue authority, the registered person must ensure, by means of fire drills and practices at suitable intervals, that persons working at the home and, so far as reasonably practicable, children are aware of the procedure to be followed in case of fire. (Regulation 25 (d))	01/10/2017
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 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; and  that the premises used for the purpose of the home are designed, furnished and maintained so as to protect each child from avoidable hazards to the child's health.  (Regulation 12 (1)(2)(i) and (d))	01/10/2017
The leadership and management standard requires the registered person to use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13 (2)(h))	01/10/2017

#### Recommendations

■ Any home using CCTV or other monitoring equipment should have a written policy describing how this will support the safeguarding and well-being of those living and working in the home, in accordance with regulation 24. Homes must gain consent to any monitoring or surveillance by the placing authority in writing



at the time of placement. ('Guide to the children's homes regulations including the quality standards', page 16, paragraph 3.16)

- The registered person should only accept placements for children where they are satisfied that the home can respond effectively to the child's assessed needs as recorded in the child's relevant plans and where they have fully considered the impact that the placement will have on the existing group of children. The Statement of Purpose is an important document in the process of care planning as it sets out the needs of children the home is set up and equipped to care for. ('Guide to the children's homes regulations including the quality standards', page 56 paragraph 11.4)
- Just as in a family home, children should be able to access all shared areas of their home unless there are specific reasons why this would not meet a child's needs. Limits on privacy and access may only be put in place to safeguard each child in the home. (regulation 21(c)(i)) Any decisions to limit a child's access to any area of the home and any modifications to the environment of the home must only be made when this is intended to safeguard the child's welfare. All decisions should be informed by a rigorous assessment of that individual child's needs, be properly recorded and be kept under regular review. Information on restraint and deprivation of liberty is contained in the protection of children section of the Guide from paragraph 9.41. ('Guide to the children's homes regulations including the quality standards', page 15, paragraph 3.10)

### **Inspection judgements**

#### Overall experiences and progress of children and young people: good

Children make good progress while living at the home. They are beginning to explore their past traumas and experiences. Staff are child centred, caring and nurturing in their approach to, and care of, children. Children are supported through a high staff ratio by skilled and knowledgeable therapeutic staff. The routine, structure and approach of staff allow children to talk about their feelings, challenges and anxieties.

The home is in its first year of registration; this is due to a previous home operated by the same provider moving to this new address which is more suitable and offers more space for children.

Staff follow detailed plans which are child friendly, enabling staff to share them openly with children. Staff regularly gain children's views through questionnaires, completing reviews and talking with them about their feelings. The daily house meetings and one-to-one support provided create opportunities for children to talk with staff. Children are involved and make choices about a home life, including decoration, activities and menus.

Children have good attendance at school and make progress there through the staff's support.



Staff support children to maximise their physical and emotional health and well-being. The home is part of a larger organisation which provides therapeutic services. Children engage in therapy and develop positive skills to assist them in self-regulating and managing their anxieties and emotions. They are exploring their life stories, and the impact these have had upon them, in a safe and supportive environment. Staff also refer children to additional specialist services to address complex health needs if required.

Staff provide a structured planned day for each child. Each day has meeting time, chill time and a bed-time settling. Staff offer reward activities at weekends; these have included trips to places of interest, the cinema, trampolining, the beach and shopping. There is also a wide variety of activities on offer in the home, including art and craft, baking and film nights.

Children are supported to develop their independence, life, social and personal care skills. They assist with basic chores and cooking tasks in the home. Staff are teaching and encouraging children to learn and use good road safety skills and have awareness of how to keep safe when out in the community. These basic skills are developing their confidence and self-esteem.

Staff support and facilitate family contact in line with children's care plans. Those children who have recently arrived at the home are settling well. They have swiftly formed positive relationships with staff and peers. Staff have supported this through well-considered and planned transitions into the home. Children visit and meet those who will be caring for them during this transition process.

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

Children have good relationships with staff, enabling each of them to share their worries and concerns with a trusted adult.

Safeguarding concerns are well managed and responded to. Managers seek guidance and advice from the local safeguarding board when required. Staff have good knowledge and understanding of risk factors and what is required to manage and minimise these. Records are thorough, providing clear detailed information and evidence.

Staff manage behaviour well, with physical intervention only used to manage significant risk. Staff are trained in the home's preferred method of behaviour management. The detail in records provides information about what occurred before the incident and how staff tried to calm a situation. However, records detailing who was involved and which strategy or physical intervention was used are not consistent. Children have opportunity to review an incident and think about what caused it and how they might respond if a similar event occurred again.

Staff have implemented practices to manage children's behaviour and minimise risk, for example locking all external doors. These practices were not formally documented, regularly reviewed or re-assessed to conclude whether these restrictions were required.



There has been no formal consideration of the impact on other children in the home.

Episodes of missing are well managed through a collaborative and coordinated approach. Staff actively seek young people and request the support of additional agencies in line with children's individual plans. Staff welcome children back to the home and offer children the opportunity to explore and talk about their reasons for going missing.

The home has been through a demanding and challenging period in which the home sustained damage. It is in the process of being repaired and re-decorated to return it to its original presentation.

Staff and managers have not managed the environment to ensure that it does not pose or create additional risk for children. On inspection, chemicals were not stored in the designated location. Rubbish bins outside of the property were spilling over and food items in the fridge did not comply with good food hygiene practices. There has not been a recent fire drill since the arrival of a new young person in the home.

Risk assessments detail actions required to minimise risk: they are regularly reviewed and updated. Risk assessments also form part of the admission documentation for each young person; these do not routinely include the impact a new admission may have on others.

The location risk assessment does not explore all risk factors in the local community or detail what is required to minimise and manage risk.

There are door buzzers on bedroom doors to assist staff to know a child's location at night. Managers have not sought consent from the placing authority for these.

#### The effectiveness of leaders and managers: good

This is the home's first inspection. The staff and children have moved from another house. Leaders and managers have addressed the requirements and recommendations set at the inspection of the previous home.

A newly appointed house manager manages the home. He is not yet fully accustomed to all of the management tasks and responsibilities. The registered manager and operational manager are providing additional support and guidance during this period of transition. The quality and presentation of the environment was being addressed at the time of this inspection.

Managers have not monitored, evaluated or addressed low-level risk factors robustly in the home. They plan to develop systems to support and promote the monitoring and evaluation of the quality of care provided by the home. Managers have begun to seek the views of children regarding the quality of care they receive, through questionnaires, sharing of plans and gaining views each day.

The information and detail provided by the robust monthly independent visits to the home informs the managers of tasks required. Managers are addressing some of these areas swiftly, while others are improving but taking longer to embed into staff practice.



An example of this is the quality of record keeping and tracking.

Staff are provided with regular effective supervision and review of their practice. Staff feel well supported and able to reflect, debrief and review effectiveness, following complex and challenging incidents.

Staff complete training specific to their roles, which includes Makaton, self-harm management and refresher safeguarding training. Staff attend regular team meetings and review sessions, in which they review practice, interventions and strategies used. This has a positive impact on staff practice, knowledge and understanding, enabling them to reflect on and improve their interventions and to be child focused and individualised in their support for each child.

There has been a recruitment drive with several new staff in post. There continue to be vacancies in staffing which leaders and managers are addressing through a continual recruitment drive. Managers currently use a bank of known agency staff to supplement gaps in staffing. Leaders adhere to safer recruitment practice, and newly appointed staff are provided with a thorough induction to the home and its approach.

Children are well supported by staff to use community facilities. Staff form very positive relationships with community and voluntary groups which have enabled young people to be well supported in their community. Managers have developed effective working relationships with other professionals and stakeholders.

# 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 difference 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. Whenever 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:** 1246834

**Provision sub-type:** Children's home

Registered provider: The Amicus Community Arundel Limited

Registered provider address: The Amicus Community, P O Box 79, Arundel BN18

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Responsible individual: Rebecca Newton

**Registered manager:** Stewart Thomson

# **Inspector**

Amanda Maxwell, social care inspector



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