

# Pafa (Parenting Assessments For All) Ltd

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Inspected under the social care common inspection framework

## Information about this residential family centre

This residential family centre is registered to accommodate up to four families at any one time. The residential family centre is privately owned. Families access the centre at the direction of the family court and/or the local authority for the purposes of assessment.

**Inspection dates:** 5 to 6 September 2017

**Overall experiences and progress of children and parents, taking into account**

**requires improvement to be good**

How well children and parents are helped and protected

requires improvement to be good

The effectiveness of leaders and managers

requires improvement to be good

The residential family centre is not yet delivering good assessments, help and care for children and parents. However, there are no serious or widespread failures that result in their welfare not being safeguarded or promoted.

**Date of previous inspection:** N/A

**Overall judgement at last inspection:** This is the residential family centre's first inspection since it was registered in June 2016.

## Key findings from this inspection

This residential family centre is requires improvement to be good because:

- The process for compiling placement plans is too lengthy. Families may be in the centre for a number of weeks before they have a completed placement plan.
- Recording systems are somewhat disorganised, and records can be difficult to

locate and lack clarity in their content.

- Handover meetings take place but are not documented. This means there is no audit trail or evidence that essential information relating to risks or welfare are effectively passed on to new staff coming on shift.
- Medication is not always stored securely and medication records are not always completed. Staff sometimes do not know whether medication has been administered.
- Risk management is compromised by the lack of specific risk assessments. Although staff are able to identify and articulate risks, there are no clear records of risks and how these are to be mitigated and managed in the centre.
- There has been one occasion when risk to a family was not managed effectively in a timely manner. This incident should have been notified to the regulator under regulation 26 but was not.
- Quality assurance systems are in place although are not yet well embedded. Managers do not yet have a good grasp of the service's weaknesses or a plan to address these. Reports for reviewing and improving the quality of care required under regulation 23 have been neither completed nor provided to the regulator.
- Although regular visits take place by an independent visitor for the purposes of monitoring, the reports are not always received by the regulator.

The residential family centre's strengths:

- Staff develop high-quality relationships with families, which enables them to develop trust, invest in their placement, participate in the support offered and make progress.
- Staff spoken with during the inspection are committed to helping parents make progress and overcome barriers that impact on their ability to care for their children.
- Assessment reports are detailed and of a good quality. They are supported by evidence and give clear outcomes and recommendations.
- External agencies speak positively about the service. They report communication and cooperation to be good, and value the service and support offered to parents and children.
- Parents speak positively of their experiences. These include how they were helped to settle, how they are supported to make progress and changes, and how they are helped to access support and groups in the community to prepare them for leaving the centre.
- The centre's environment is homely and welcoming. Families have more than ample space and facilities. The atmosphere is calm and families generally get along with each other and offer support to one another.

## What does the residential family centre 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, Residential Family Centre Regulations 2002 and the national minimum standards. The registered person(s) must comply within the given timescales.

Requirement	Due date
<p>11: Further requirements as to health and welfare The registered person shall make arrangements for the recording, handling, safe keeping, safe administration and disposal of medicines received into the residential family centre. (Regulation 11(2))</p>	11/10/2017
<p>13: Placements The registered person shall, before providing a family with accommodation in the residential family centre, or if that is not reasonably practicable, as soon as possible thereafter, draw up in consultation with the placing authority a written plan setting out an assessment of risk, which a resident may present to their own health, safety and welfare or that of other residents at the centre. (Regulation 13(1)(c))</p>	11/10/2017
<p>19: Records The registered person shall maintain in respect of each family accommodated in the residential family centre a record which includes the information, documents and other records specified in schedule 3 relating to the members of the family and ensure these records are kept up to date. (Regulation 19 (1)(a)(b))</p>	11/10/2017
<p>23: Review of quality of care The registered person shall establish and maintain a system for reviewing at appropriate intervals and improving the quality of care provided at the residential family centre. The registered person shall supply to the Commission a report in respect of any review conducted by him for the purposes of paragraph (1), and make a copy of the report available to residents. (Regulation 23(1)(a)(b) and (2))</p>	11/10/2017
<p>25: Visits by registered provider The registered person shall supply a copy of the report required under regulation 25 to the Commission. (Regulation 25 (5)(a))</p>	11/10/2017
<p>26: Notifiable events If, in relation to a residential family centre, any of the events listed in column 1 of the table in schedule 5 takes place, the</p>	11/10/2017

registered person shall without delay notify the persons indicated in respect of the event in column 2 of the table. (Regulation 26(1))	
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## Recommendations

### ■ 5: Safeguarding children & vulnerable adults

Ensure that clear procedures promote parents and children's safety and welfare at the centre and protect them from abuse and other forms of significant harm.

(Residential Family Centres National Minimum Standards' page 12, paragraph 5.1)

### ■ 20: Records

Ensure that the centre implements an effective policy that clarifies the purpose, format and content of information to be kept on the registered person's files and information to be kept on the parents' and children's files. Records may be kept in electronic form, providing the information is capable of being reproduced in legible form. (Residential Family Centres National Minimum Standards' page 30, paragraph 20.1)

## Inspection judgements

### **Overall experiences and progress of children and parents: requires improvement to be good**

Families benefit from good quality support delivered by well-trained, enthusiastic and motivated staff. Staff are skilled in welcoming families into the centre and helping them to understand why they are there and how the centre can help them achieve their desired outcomes. This enables families to build up trust and understand that staff are there to support and educate them with the ultimate aim of keeping their child in their care. Parents consistently reported positive relationships with staff. They felt they were understood, listened to and helped to improve their parenting.

Some families have placement plans which are detailed and useful. Other families' placement plans are in the process of being compiled and are not yet on their files for staff to read. This shortfall causes potential for staff not to fully understand a family's needs or history and leaves them without clear strategies for meeting those needs other than those which have been verbally communicated to them.

The assessment process is clear. Parents understand what areas are being assessed and how the assessment is carried out. Helpful weekly reports tell them their areas of strength and areas for development. Additionally four-, eight- and 12-week review reports help families to understand how the assessment is progressing and which areas they need to improve in. Difficult messages are delivered sensitively so that parents do not feel staff are critical of their efforts.

Two of the directors are trained to undertake PAMS (parenting assessment manual) assessments. All four directors undertake assessments and provide key-work support to parents. This ensures that all assessments are completed by a person who is qualified to do so, and that parents benefit from expert support backed up by social work experience.

Staff are highly vigilant in observing, supporting and monitoring parents' care, attention and handling of their child. There is constant dialogue between staff and parents, which ensures that parents are given every opportunity to learn best practice in relation to childcare and develop positive attachments.

Parents are offered a good level of support within the centre to understand their feelings and reflect on situations through cognitive behavioural work delivered by the registered manager. They also participate in domestic abuse sessions (the Freedom Programme) with a director who is social work qualified. Additionally, parents are supported to access community resources such as 'Tomorrow's Women' (a local community project for reducing female imprisonment and offending, and providing assistance to women who want to make positive lifestyle changes) and the 'Spider project' (a creative arts and well-being recovery community project), which helps them develop support networks and resilience for when they leave the centre.

Attendance at community baby and toddler groups also contributes to preparing for parenting in the community.

The centre is open to wider family members one day each week, which enables residents to maintain contact with their families and to ensure that children have contact with their extended family network. This is particularly important for some young mothers who are not used to living away from their family.

The centre itself is designed and furnished to meet the needs of the parents and children placed there. Bedrooms are spacious and well decorated, some recently having had new furniture. Communal areas have also recently had new furniture and provide space for families to relax and share their experiences. Observation of families with staff and with each other evidenced a calm, respectful and settled environment. Regular residents' meetings also show that residents work hard to get along and to agree rules that will help to ensure the smooth running of the home.

Staff help prepare families for moving out of the centre. Where assessments are positive, families are encouraged to be more independent within the community. The centre produces life-story work for children to help them understand their experience in the centre when they are old enough.

### **How well children and parents are helped and protected: requires improvement to be good**

The centre does not have clear risk assessments for each resident. Risks such as self-harm, substance misuse and domestic abuse are not consistently recorded and therefore strategies to manage such risks are not documented. Because risk assessments are not in place there is no evidence that risks are routinely shared with the staff team or residents in order that they are appropriately monitored and reviewed.

Similarly, the centre does not make any record of information shared at handover meetings between staff teams, and therefore it is not clear that any new risks or important information has been shared effectively. Risk information in respect of residents is considered within other documents, and staff spoke with confidence about their level of communication in respect of risk but no robust system of recording was in place to support this.

Details of how prescribed medication is to be administered is confusing. Some medicines were not stored securely at the time of inspection, although this was immediately rectified. The system for recording administration of medication is confusing and staff were unable to identify whether a resident had taken their prescribed medication, because this had been neither recorded nor communicated.

The centre has reported few significant safeguarding incidents since becoming operational. Inspectors established that on one occasion an incident had occurred which was not promptly addressed, leaving families at risk until the registered

manager returned to work two days later, and identified that one parent's placement needed to be immediately terminated. This incident resulted in police involvement and should have been notified to the regulator but was not. The centre has no systems in place to record safeguarding incidents other than daily paperwork, which makes identifying the incident and any actions the centre took to address the issues difficult to decipher.

More positively, staff spoken to felt they had had sufficient training in safeguarding and could identify and act on any areas of concern. All staff at the centre reported very regular discussion about identifying and managing risk. Additionally, staff are alert to subtle changes in parents' presentation, which alerts them to the possibility of increased risk. Staff speak to parents about risk and help them to reduce their risk-taking behaviours in order to improve their parenting. Significant work is undertaken with parents around domestic abuse, which parents find helpful and informative.

Staff feel confident to intervene in arguments between parents and remove any children from parents who are using raised voices or behaving inappropriately. They spend time with parents, helping them understand the impact of their behaviour on their children. All staff are trained in team teach and use de-escalation techniques to manage conflict. There has been no use of restrictive physical intervention since the home became operational.

There are clear rules and boundaries set out in the centre's SOP and residents' guide so families know what to expect from staff and what is expected of them.

Parents are helped to learn skills to keep their child safe, such as following the NICE bathing guidelines, ensuring bottles are clean and sterile, safe sleeping and food hygiene. Additionally, there are strict rules enforced around smoking and ensuring that babies are not exposed to the ill effects caused by smoking.

Where parents are not making progress in respect of keeping their child safe, the centre brings this to the attention of the placing authority and, where appropriate, challenges them on the appropriateness of continuing the placement where a parent's assessment is clearly negative in safeguarding.

There have been no missing from home episodes for residents or children. Directors could articulate clear procedures should a parent go missing.

Staff are highly vigilant in ensuring that parents are observed and any issue which may impact on a child's safety is addressed immediately. Electronic monitoring is in use. Parents are aware of this and understand the reason for the use of surveillance is to minimise the risk of harm.

## **The effectiveness of leaders and managers: requires improvement to be good**

The residential family centre is led by an experienced and social work qualified registered manager. The manager, along with the three other directors, delivers a service based on core social work values and commitment to thorough assessment and providing the best possible chances for families to succeed. Managers have high expectations and aspirations for resident families and for the staff team. Regular progress reviews ensure that managers have a clear understanding of the progress being made by families.

A number of shortfalls were identified in respect of leadership and management at this inspection. Systems for record keeping are not well organised. Many records lacked clarity and order, which makes analysis of the information they contain difficult. Staff recruitment and supervision files varied widely in their quality of documentation and order. Some handwritten case notes were illegible and many records were disordered and kept either loose or in plastic wallets rather than folders or bound books, which led to an overall feel that recordings were not systematic and not easy to review.

The manager had some systems in place for reviewing the quality of care. These systems are not widespread and do not give a thorough review or provide detailed monitoring which contributes towards overall improvements. Further, no review of the quality of care has been completed as required by regulation 23 despite the centre having been registered in June 2016. Managers did not display a thorough understanding of the shortfalls highlighted during this inspection, which means they had not taken effective action to address them.

External monitoring visits are taking place monthly, and the directors find these visits useful in highlighting areas for development. The monthly reports have not all been received by the regulator and this, along with the absence of reports under regulation 23, and the serious incident which was not notified, compromises the ability of the regulator to monitor the service effectively and to robustly assess its risk.

The home is fully staffed and the staff team has been relatively consistent since the home commenced operating. Staff are thoroughly vetted prior to commencing work in the centre. Staff had the opportunity to attend training prior to beginning work in the centre and report that this, and their induction, prepared them well. Staff report access to ongoing training and there are opportunities for professional development available. The staff team works together effectively to provide consistency and stability. Staff report they are well led and managed, that managers are always available to offer guidance and support and that staff morale is high.

Managers have systems in place to assess the suitability of any planned placements by considering the needs of the families already in residence. The admission impact risk assessments take account of the likely impact of a new family joining the centre.

Managers challenge other agencies where their plans for families are unclear or when they are concerned that placing authorities are not making decisions that are in children's best interests. The centre has developed good relationships with external agencies such as local authorities, children's guardians and health professionals, which helps to ensure that the parents and children's needs are met in all areas.

Families at the centre have diverse needs. The centre meets the needs of individual families effectively and promotes an ethos of respect and tolerance of differences.

## **Information about this inspection**

Inspectors have looked closely at the experiences and progress of children and parents. Inspectors considered the quality of work and the differences made to the lives of children and parents. They watched how professional staff work with children and parents and each other and discussed the effectiveness of help and care provided. Wherever possible, they talked to children and parents. In addition, the inspectors have tried to understand what the residential family centre knows about how well it is performing, how well it is doing and what difference it is making for the children and parents 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 Residential Family Centre Regulations 2002 and the national minimum standards.

## **Residential family centre details**

**Unique reference number:** 1227599

**Registered provider:** Pafa (Parenting Assessments For All) Ltd

**Responsible individual:** Elizabeth Perry

**Registered manager:** Elizabeth Perry

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## **Inspectors**

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