

1243966

Registered provider: Chaigeley Educational Foundation

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home is registered to provide care and accommodation for up to six young people with emotional/and or behavioural difficulties and/or learning disabilities. It is part of a charitable organisation which also provides specialist educational services.

Inspection dates: 19 to 20 September 2017

Overall experiences and progress of children and young people, taking into

requires improvement to be good

account

How well children and young people are

helped and protected

requires improvement to be good

The effectiveness of leaders and managers inadequate

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.

Date of last inspection: This is the first inspection after registration

Overall judgement at last inspection: not applicable

Enforcement action since last inspection:

None

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Key findings from this inspection

This children's home requires improvement to be good because:

- Leadership arrangements since registration have been inconsistent and inadequate in meeting regulatory requirements.
- The current manager of the service has not applied for registration with Ofsted.
- There are significant deficits in record-keeping practice since the home registered in December 2016.
- The staff team has not notified Ofsted of significant and serious events that have occurred in the home.
- Leaders have not demonstrated sufficient rigour in evaluating and debriefing sanctions and physical restraints.
- Leaders have not completed a review of the quality of service provided at the home.

The children's home's strengths:

- Young people are settling in their home environment and their behaviour has improved.
- Young people have developed close relationships with the staff team.
- Young people with a history of non-engagement in education have improved their attendance and attainment.
- The new manager has demonstrated a good understanding of the service's strengths and areas for development.
- Since June 2017, police involvement at the home has diminished significantly and record-keeping practice is much improved.
- Placing authorities have provided good feedback about this service.



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
The registered person must ensure that 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 –	31/10/2017
the name of the child;	
details of the child's behaviour leading to the use of the measure;	
the date, time and location of the use of the measure;	
a description of the measure and its duration;	
details of any methods used or steps taken to avoid the need to use the measure;	
the name of the person who used the measure ('the user'), and of any other person present when the measure was used;	
the effectiveness and any consequences of the use of the measure;	
and a description of any injury to the child or any other person and any medical treatment administered, as a result of the measure.	
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') has spoken to the user about the measure; and has signed the record to confirm it is accurate;	
and within 5 days 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. (Regulation 35 (3)(a)(i)(ii)(iii)(v)(v)(vi)(vii)(viii)(b)(i)(ii)(c))	

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The registered person must maintain records ('case records') for each child, which include the information and documents listed in Schedule 3 in relation to each child, are kept up to date and are signed and dated by the author of each entry.	31/10/2017
Case records must be kept—	
if the child dies before attaining the age of 18, for 15 years from the date of the child's death; in cases not falling within sub-paragraph (a), for 75 years from the child's date of birth;	
securely in the children's home during the period when the child to whom the case records relate is accommodated there; and in a secure place after the child has ceased to be accommodated in the home.	
(Regulation 36 (1)(a)(b)(c)and(2)(a)(b)(c)(d))	
The registered person must ensure that the following items, which may be kept in electronic form, are kept in an accessible manner — children's case records (see regulation 36); (Regulation 38 (i))	31/10/2017
The registered person must notify HMCI and each other relevant person without delay if –	31/10/2017
a child is involved in or subject to, or is suspected of being involved in or subject to sexual exploitation;	
an incident requiring police involvement occurs in relation to a child which the registered person considers to be serious; there is an allegation of abuse against the home or a person working there;	
a child protection enquiry involving a child is instigated; or concludes (in which case, the notification must include the outcome of the child protection enquiry);	
or there is any other incident relating to a child which the registered person considers to be serious.	
(Regulation 40 (4)(a)(b)(c)(d)(i)(ii)(e))	
When the independent person is carrying out a visit, the	31/10/2017



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registered person must help the independent person, if they consent, to interview in private such of the children, their parents, relatives and persons working at the home as the independent person requires. (Regulation 44 (2)(a))	
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.	31/12/2017
In order to complete a quality of care review the registered person must establish and maintain a system for monitoring, reviewing and evaluating the quality of care provided for children;	
the feedback and opinions of children about the children's home, its facilities and the quality of care they receive in it;	
and any actions that the registered person considers necessary in order to improve or maintain the quality of care provided for children.	
After completing a quality of care review, the registered person must produce a written report about the quality of care review and the actions which the registered person intends to take as a result of the quality of care review ('the quality of care review report').	
The registered person must supply to HMCI a copy of the quality of care review report within 28 days of the date on which the quality of care review is completed; and make a copy of the quality of care review report available on request to a placing authority, if the placing authority is not the parent of a child accommodated in the home.	
The system referred to in paragraph (2) must provide for ascertaining and considering the views of children, their parents, placing authorities and staff.	

Recommendations

(Regulation 45 (1)(2)(a)(b)(c)(3)(4)(a)(b)(5))

■ The registered person should have a workforce plan that can fulfil the workforce related requirements of regulation 16, schedule 1 (paragraphs 19 and 20). The plan should be updated to include any new training and qualifications completed by staff while working at the home, and used to record the ongoing training and



continuing professional development needs of staff, including the home's manager. ('Guide to the children's homes regulations including the quality standards', page 53, paragraph 10.8)

■ Staff should be familiar with the home's policies on record keeping and understand the importance of careful, objective and clear recording. ('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: requires improvement to be good

The home was registered in December 2016; this is the first inspection. The progress and experiences of the young people accommodated are varied. There are limited records in the home to demonstrate the progress and experiences of the young people that lived previously at the home. Furthermore, there is no evidence to demonstrate that the manager had completed compatibility risk assessments on all young people before they moved into the home. Consequently, staff were unable to meet the escalating needs of one young person. He has now left the home after the manager served notice to the placing authority. This was due to the negative impact he had on the other young people.

There are two young people currently living in the home. One young person has not engaged fully with staff at the placement and has made limited progress. The young person who recently moved into the home has settled in well and is developing very good relationships with staff. During the inspection, the interim manager of the service was in the process of welcoming another young person to the home. They were welcomed sensitively and with careful and considered planning.

Since the home opened, 11 staff members have left. This does not ensure that young people receive care from a stable and consistent team. However, the provider has taken appropriate action to recruit a new staff team with diverse experience and skills. One young person is developing really close and trusting bonds with the staff and is showing early signs of making progress in her social and emotional development. The young person said, 'this home is the best'. Another young person does not respond positively to care provided by female staff. Male members of staff are meeting the majority of his care needs and they are working with him to develop his relationships with female staff members.

All young people are accessing specialist educational provision on the same site as the home. One young person with a previous history of non-engagement in education has successfully returned to school. Staff at the home work closely with the teaching staff team. This ensures that young people are appropriately supported and prepared for their education.



Healthcare plans are comprehensive and young people are accessing in-house therapeutic support. Staff have had intensive training, which has provided them with practical and therapeutic strategies to help young people to achieve good emotional health.

Young people are able to influence their day-to-day care arrangements through house meetings. Recently the children's guide was updated. This is of good quality and clearly outlines the service that young people can expect when living at the home. Two young people have exercised their right to complain and the manager has responded promptly and sensitively. Those matters have been resolved successfully.

Young people are encouraged to pursue their own interests and explore their talents. One young person enjoys swimming, dancing and horse riding. Another young person likes trampoline activities, visits to the park and going on bike rides with the staff. This means that young people have opportunities to engage in the community and have fun. Staff support young people to maintain contact with their family and friends.

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

Leaders have failed to notify Ofsted when young people have been involved in serious incidents. This included occasions when the police had visited the home to manage the behaviour of young people. On at least one occasion, the police have charged a young person with a criminal offence. Since the interim manager has been in her position, calls to the police have reduced considerably. There has been one recent instance where staff at the home did not notify Ofsted of a significant event. A requirement is made to meet this shortfall.

Previously, there had been a high number of missing from care incidents at the home. This behaviour has reduced significantly. Leaders have taken appropriate steps to work with other agencies and make suitable plans to keep young people safe. At the time of the inspection, comprehensive risk management plans were in place for both young people. They provide clear strategies to assist staff in providing a consistent response to young people who present with challenging behaviour. When staff sanction young people, they are using restorative methods to help young people to take responsibility for their actions and behave in a more socially acceptable manner.

Staff have intervened physically when young people are placing themselves or others at risk. However, leaders have not demonstrated sufficient oversight and scrutiny of behaviour management practices. Leaders have not routinely evaluated and signed the records to confirm that they are accurate. Debriefs with staff and young people have not consistently taken place. On occasions, records are incomplete and a requirement is made to address this matter.

Medication procedures for storage and administration are stringent. Recruitment procedures are robust and ensure that staff are suitably vetted before they are able to work at the home. Staff and young people take part in regular fire drills. Leaders take



appropriate steps to ensure that the physical environment in the home is safe. Staff at the home have all had relevant safeguarding training. They are familiar with the procedure to report a concern about a young person or a staff member. This ensures that young people are kept safe.

The effectiveness of leaders and managers: inadequate

The previous registered manager of this service notified Ofsted that he was ceasing to manage the home on 17 March 2017. The provider arranged for a person with previous experience of residential care for young people to undertake the manager role. However, this person became unexpectedly absent from her role, due to sickness. A new deputy manager recruited at a similar time lacked sufficient qualifications and experience to ensure that regulatory requirements of the service were met. Until the appointment of an experienced manager in June 2017, the home did not have suitable interim leadership arrangements. Despite the current interim manager of the service having started her role in June 2017, she has not yet made an application to register with Ofsted. Therefore, leadership arrangements throughout this inspection period are inadequate.

Prior to June 2017, there is a lack of evidence of sufficient record-keeping practice. In particular, records that related to a young person who has since left the service were unavailable and/or inaccessible at the time of inspection. Requirements are made to address this breach of regulation. Since June 2017, the interim manager has put appropriate methods of recording in place. However, she has not yet completed a review of the quality of service provided to young people. A requirement is made to address this. Furthermore, some minor typing errors in records were identified and a recommendation is made to ensure that there is clarity of any information recorded.

Staff state that they are enjoying their roles. They feel that the new leader and deputy manager are supportive and the environment is conducive to promoting their professional development. The organisation has invested in providing intensive therapeutic training to staff. This will enable staff to offer high-quality support to young people with very complex and challenging needs. Staff have had sufficient mandatory training but the workforce development plan was not reflective of the current position. A recommendation is made to ensure that this is updated.

The interim manager has updated the statement of purpose and has taken steps to ensure that the service will meet the aims and objectives specified. The interim manager demonstrated a good understanding of the strengths of the service and the ability to capitalise on them. She has a development plan in place to address aspects of the service that require improvement. Despite the shortfalls identified in this report, placing authorities provided positive feedback about the efforts of staff.

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: 1243966

Provision sub-type: Residential special school

Registered provider: Chaigeley Educational Foundation

Registered provider address: Chaigeley School, Lymm Road, Thelwall, Warrington

WA4 2TE

Responsible individual: Antonio Munoz-Bailey

Registered manager: Post vacant

Inspector

Nicola Thomas, social care inspector

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