

SC487702

Registered provider: Fonjocks Social Work Practice Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This children's home is operated by a private company and is registered to provide care for up to three children with emotional and/or behavioural difficulties.

Inspection dates: 20 to 21 September and 11 to 12 October 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 m

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

Date of last inspection: 23 March 2017

Overall judgement at last inspection: sustained effectiveness

Enforcement action since last inspection:

None



Key findings from this inspection

This children's home is good because:

- The children in the home have placements that provide them with stability.
- The children make progress while they are at the home.
- The staff understand the anxiety that moving can cause for the children and they support them in their moves into and out of the home.
- The children and staff form good relationships with each other.
- The children have opportunities to express their wishes and feelings.
- The staff involve the children in developing their plans.
- The staff arrange medical appointments and specialist services to help ensure that the children's health needs are met.
- The children are able to develop a range of interests and take part in activities which they enjoy.
- The staff help children to develop their independence skills.
- The children become safer while living at the home. The frequency of going missing from care incidents reduces.
- The staff respond appropriately to incidents of bullying.
- The home is a physically safe and comfortable place for the children to live in.
- Managers have a good knowledge of the children and their individual needs. They want the children to do well.

The children's home's areas for development:

- There are some gaps in the records of medicines given to children.
- While there are generally good relationships with other agencies, there are some areas in which this could be improved.
- The registered manager's reviews of the quality of care in the home do not include the views of parents or staff.
- Not all staff have completed the training on diabetes, so they do not have the in-depth knowledge of the condition that they could have.
- While the children have good opportunities to express their wishes and feelings, they do not always get feedback so that they can see the results of this.



Recent inspection history

Inspection date	Inspection type	Inspection judgement
23/03/2017	Interim	Sustained effectiveness
28/04/2016	Full	Good
23/11/2015	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
In meeting the quality standards, the registered person must, and must ensure that staff-	30/11/2017
if the registered person considers, or staff consider, a placing authority's or a relevant person's performance or response to be inadequate in relation to their role, challenge the placing authority or the relevant person to seek to ensure that each child's needs are met in accordance with the child's relevant plans; seek to develop and maintain effective professional relationships with such persons, bodies or organisations as the registered person considers appropriate having regard to the range of needs of children for whom it is intended that the children's home is to provide care and accommodation. (Regulation 5 (a)(b)(c)(d))	
In particular ensure that any concerns about the failure of placing authorities to arrange return interviews for children who have been missing are escalated appropriately. Further, that discussions with relevant parties with regard to decisions about calling the police to the home are used to develop a joint understanding about this.	
The registered person must ensure that a record is kept of the administration of medicine to each child. (Regulation 23 (2)(c))	30/11/2017
The registered person must complete a review of the quality of care provided for children ('a quality of care review') and this must provide for ascertaining and considering the opinions of children's parents and staff. (Regulation 45 (1)(5))	31/03/2018



Recommendations

- Children should be able to see the results of their views being listened to and acted upon. ('Guide to the children's homes regulations including the quality standards', page 22, paragraph 4.11)
- The registered person must ensure that staff have the relevant skills and knowledge to be able to respond to the health needs of children and help children to manage long-term conditions. ('Guide to the children's homes regulations including the quality standards', page 34, paragraph 7.12)

Inspection judgements

Overall experiences and progress of children and young people: good

The children make good progress while at the home. A placing social worker and independent reviewing officer spoke of how well a child is doing. This is his longest placement and it follows a number of placement breakdowns. The time he has spent at the home has helped him to develop stable relationships with the staff and to improve his education attendance. The staff work with placing authorities to try to find suitable education placements for children, but despite these efforts a placement has not been found for one child due to her specific needs. That child will be moving to a residential and education placement. The staff show a sensitive understanding of the anxiety and upset that this is causing for the child and are helping her to prepare for the move. The staff also help children to move into the home. One social worker spoke of the support that staff had provided and the 'lovely welcome' that they gave the child, which helped her to settle into the home. Times of transition can be very difficult for the children, so the understanding and support of staff is important to help children manage these changes.

The children have good relationships with the staff, who spend time with them and listen to them. They share jokes and are at ease together. This helps the children to feel part of the home. One child said that the home is brilliant, he gets on well with staff and they are the best thing about the home. There are regular residents' meetings when the children can express their wishes and views, but it is not clear that they always receive feedback on these. It does happen in some cases. For example, the children are consulted over some of their plans, in particular how they want staff to respond to some of their behaviours. When they have asked for a response which would not be appropriate, the staff explain to them and record why this would not be appropriate. The staff buy and cook halal meat for one child at her request. However, while seeking children's views can help them to feel valued and provides the children with the opportunity to contribute to the home, not consistently providing feedback to them can limit this.

The staff work to meet the children's health needs. They discuss these with the children and take appropriate action, such as arranging medical appointments. One child has been reluctant to agree to an important and beneficial medical procedure. The staff have



worked with the placing social worker to provide incentives for the child to agree to the procedure. The relationships with and confidence in staff are likely to have made the child feel more secure in agreeing to the procedure. The managers have arranged for one child who is placed away from her home authority to have specialist mental health support to help meet her specific health needs. The staff keep records of the medication that they give to the children, but there are a few gaps in these. Consequently, it is not clear whether the child refused the medication, or if staff did not offer it to them. This makes it difficult for the managers to ensure that the staff are making appropriate attempts to ensure that the children have the medication that they are prescribed.

The children have opportunities to develop their interests and take part in a range of activities. This helps them to develop their self-esteem and have enjoyable childhood experiences. One child said how much he enjoys trips out with staff to a local resort, as it reminds him of time he has spent there with his extended family. Some children enjoy spending time in the house with staff and then going out to see their friends. They have friends close by whom they see regularly and spend time or play sports with. One child has expressed an interest in sign language. There is information on sign language in the home and the staff spend time with her practising this.

The children are able to develop their independence skills in preparation for their future. One child has begun to travel to and from school by train. His independent reviewing officer said that he is able to do this because he has developed a sense of security. He has also developed his understanding and management of money, doing some of his own shopping and bringing back receipts.

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

The staff use clear risk assessments to help identify risks to children and measures to reduce the risks. An external professional said that the home is a safe environment and that they have never felt that the children are at risk there. The children become safer while they are living at the home. Two of the children have significantly reduced their episodes of going missing from care since being at the home. The staff respond appropriately when the children are missing. Managers challenge placing authorities if they do not arrange independent interviews with the children on their return, to try to understand the reasons they went missing. However, this challenge has not always been escalated sufficiently when there have been concerns about continued failure to provide these interviews. This can limit the ability to understand the children's motivation for going missing. The number of incidents that children are involved in also reduces while they are at the home. There are appropriate responses to incidents of bullying, so that children can understand that is it not acceptable and be protected from it.

Staff have conversations with children about their use of social media and the reliability of information which they get from it. Staff arrange individual work with the children over issues such as drug and alcohol misuse and sexual health. Providing this information can help the children to understand the associated risks and how they can keep themselves safer. The staff have safeguarding training and are informed about how to respond to concerns or allegations. Any concerns about staff practice are discussed



with the designated officer. The children live in a physically safe environment. The staff carry out regular health and safety checks, including fire drills, to help ensure that children know what to do in case of an emergency.

The home has a policy of not using restraint except in extreme circumstances. This is set out in its statement of purpose. The staff are trained in de-escalation and breakaway techniques. To date they have not used a restraint. They have at times guided children away from situations, but the staff are clear that they would stop this if the child resisted. Some of the other agencies that work with the home are unclear about some of the reasons that the police are called to the home. This lack of understanding has the potential to result in inconsistent responses. Lack of discussion over this also prevents the home from receiving feedback in this area from other professionals. However, in general there are good relationships with other agencies and children's parents.

The records of sanctions used in the home have previously been inconsistent and not always provided the required information. However, a new recording format has been introduced which clearly prompts staff to record full and clear details of any sanctions that are used. A child described the consequences for inappropriate behaviour as 'fair'.

The effectiveness of leaders and managers: good

The home has a registered manager who has been in post for a year. She is experienced and appropriately qualified. A deputy manager is also in post, which strengthens the management team. A qualified, experienced social worker has recently been appointed to further bolster the staff team. There are a number of relatively new staff, so this appointment is beneficial in providing a suitable level of overall experience. The registered manager was not present during the inspection, but the deputy manager and the responsible individual showed a good level of knowledge of the children and their individual needs. They use monitoring systems to keep track of the progress that the children are making so that they can take any action they need to if progress slows or stops. They want the children to do well.

There is an independent visitor who makes monthly visits to the home as part of the external monitoring. The registered manager undertakes regular reviews of the quality of care. These reviews are used to identify actions to improve the care which the managers and the staff provide for the children. They include children's views and to some extent the view of placing authorities, but not those of parents or the staff. Overall, the reviews do lead to better care of children, but not including the views of some key stakeholders does restrict the evidence base upon which the review is completed. This can result in some useful feedback being missed. The actions that are identified as necessary to improve care are acted upon to bring the required changes about. The manager monitors the incident records and all incidents requiring notification to Ofsted and other agencies are correctly made. This provides Ofsted with current information about incidents at the home.

Managers provide the staff with regular supervision. The records of supervisions are clear and include discussions about children, staff practice and personal development. A



member of staff said that they had addressed things in supervision which have subsequently been dealt with. They described the process as helpful. There is a range of training for the staff to help them meet the children's general and individual needs. However, one child is diabetic and while there is some good basic written information for the staff on this, only a few of the staff have done an online course on diabetes which has been made available for them, and which would provide them with more in-depth knowledge. Given the significant and long-term nature of diabetes, it is important that all staff are well informed about how to manage it.

The managers and staff have generally good and effective relationships with other agencies and parents, which help to ensure consistent and effective care of the children. As described above in the section on the overall experiences and progress of children and young people, there are some areas where this could be further improved.

The home is well presented, it has recently been redecorated and damage is repaired quickly. The children are encouraged to personalise their bedrooms. This ensures that children feel that they have some ownership of the home, and that the environment is one where they feel comfortable.

The records kept by the staff are clear and would be useful to children in the future if they should want to gain a better understanding of their backgrounds and history. The children are able to see their records and comment on them. They are involved in drawing up their plans and in meetings about their plans. This helps to ensure that children's views are heard and that they feel able to participate in their planning.

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: SC487702

Provision sub-type: Children's home

Registered provider: Fonjocks Social Work Practice Limited

Registered provider address: Orchard House, 1 Old Convent Orchard, Bury St. Edmunds, Suffolk IP33 3PQ

Responsible individual: Caroline Fonjock

Registered manager: Yvonne Shaw

Inspectors

Clive Lucas, social care inspector Cathy Russell, social care inspector



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