

1244946

Registered provider: Wigan Council

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This is a local authority children's home. It is registered to provide care and accommodation for up to two children at any given time who have emotional and/or behavioural difficulties and/or mental disorders.

Inspection dates: 5 to 6 February 2018

Overall experiences and progress of children and young people, taking into account **requires improvement to be good**

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

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

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: 31 July 2017

Overall judgement at last inspection: not judged

Enforcement action since last inspection: none

Key findings from this inspection

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

- This is a relatively new service, recently staffed from across the local authority so there are not, as of yet, consistent practices and standardised or good-

quality record keeping.

- The staff do not demonstrate the confidence and competencies to appropriately challenge other relevant agencies and advocate on young people's behalf, as is indicative of a good corporate parent.
- Care-planning decisions have not all been made in a child's best interest.
- The young people are not in receipt of full-time education.
- Not all the young people are receiving the health checks and treatment they require.
- The internal and external monitoring systems are not sufficiently robust.
- Independent return interviews are not undertaken in a timely manner.
- The location of the toileting facilities in the home compromises young people's privacy and dignity.

The children's home's strengths:

- The young people living at this home are happy and settled, and feel safe and secure.
- Constructive contact with family and friends is actively encouraged and facilitated.
- Young people enjoy a range of constructive activities, and individual interests and talents are specifically encouraged and supported.
- A key strength of this service is the ability to de-escalate some extremely challenging behaviours without the use of restraint or police involvement.
- The use of reparation avoids unnecessary criminalisation of young people effectively, yet young people still learn that there are consequences to negative behaviours.
- Staff confirm good support, supervision and training.
- A range of professional stakeholders and parents confirm good collaborative working with this staff team, and they are satisfied with the quality of care the staff team provides.

Recent inspection history

Inspection date	Inspection type	Inspection judgement
31/07/2017	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>14: The care planning standard</p> <p>In order to meet the care planning standard, the registered person must ensure that each child's relevant plans are followed. In particular that significant changes to the care plan such as a change of placement, should only take place following a statutory review of their care plan. (Regulation 14(2)(c))</p>	28/02/2018
<p>8: The education standard</p> <p>In order to meet the education standard, the registered person must ensure that staff help each child to attend education or training in accordance with the expectations in the child's relevant plans. (Regulation 8(2)(x))</p>	31/03/2018
<p>5: Engaging with the wider system to ensure children's needs are met</p> <p>If the registered person considers, or staff consider a placing authority's or a relevant person's performance or response is 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. (Regulation 5(c))</p>	28/02/2018
<p>10: The health and well-being standard</p> <p>In order to meet the health and well-being standard, the registered person must ensure that each child has access to such dental, medical, nursing, psychiatric and psychological advice, treatment and other services as the child may require. (Regulation 10(2)(c))</p>	31/03/2018
<p>45: Review of quality of care</p> <p>The registered person must complete a review of the quality of care provided for children at least every six months. The review must provide for ascertaining and considering the opinions of children, their parents, placing authorities and staff. The registered person must supply to HMCI a copy of the review</p>	28/02/2018

within 28 days of its completion. (Regulation 45(1)(4)(a) and (5))	
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Recommendations

- 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)
- Ensure that, as in a family home, children are able to access all areas 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. This is in particular regard to current toileting facilities. ('Guide to the children's homes regulations including the quality standards', page 15, paragraph 3.10)
- Ensure that any individual appointed to carry out visits to the home as an independent person makes a rigorous and impartial assessment of the home's arrangements for safeguarding and promoting the welfare of the children in the home's care. ('Guide to the children's homes regulations including the quality standards', page 65, paragraph 15.5)
- Demonstrate that all staff are familiar with the home's policies on record keeping and understand the importance of careful, objective, and clear recording. Staff should record information on individual children in a non-stigmatising way that distinguishes between fact, opinion and third-party information. Information about a child must always be recorded in a way that is 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: requires improvement to be good

A professional who has worked closely with the staff at this home for a lengthy period of time wrote, 'From my attendance at meetings and training events I have facilitated, it is clear that improving young people's outcomes is a priority at this home.'

This inspection found variable outcomes, experiences and progress for the two young people currently placed. Nevertheless, young people are both relatively happy and settled at this home and they enjoy good relationships with the staff and want to stay.

One young person who was recently discharged successfully moved on to foster care in

line with her care plan. The most recent admission was a sensitive and gradual process taking into account the risks, needs and preferences of the young person already living in the home. Staff say this is their established practice and stakeholders confirm that this is their experience of the home. Comments include, 'The voice of the child is central to the care planning process', 'All the young people are involved in their care planning and a support plan is completed with them prior to them moving in', 'Young people are invited to all meetings where decisions about their care will be made' and, 'Very careful consideration is given to ensure that each child's needs are addressed and taken into account if children are to be placed together.'

However, in sharp contrast to this established good practice, a recent discharge for one young person was not made in his best interests, nor was it in line with his care plan or made in consultation with key professionals. He was happy and settled living at this home in a solo placement and was attending a mainstream school. He had developed sound relationships with the staff and his behaviour was good. However, he was then moved to one of the bigger children's home operated by the local authority along with three other young people. From the outset he was unhappy and vulnerable there. The decision to move him was made at a senior level within the local authority and was not in the best interests of the young person. Although the young person was moved back to this home and he quickly settled, the transition caused him undue stress and anxieties. This was not a positive experience for the young person.

Both of the young people are accessing alternative educational provision to meet their current learning and behavioural needs. One young person's attendance and engagement is very good. The other young person is now engaging in home tuition, which is significant progress from the point of admission. However, neither are receiving a full-time programme. Although there is clear evidence of ongoing liaison with the virtual school to try to address this, there is no sense of urgency or challenge from the registered manager. This is despite the fact that one young person longs to return to school. There was also a delay of over two months in an educational referral being completed by a social worker, which again went unchallenged.

One young person is fit and healthy and all health checks and immunisations are up to-date. However, another young person is refusing to attend some essential health appointments to ensure continued good physical health and well-being. Moreover, records held in the home do not clearly demonstrate that staff ensure that new appointments are always made in a timely manner. This requires improvement to be good. That said, good partnership working with the specialist nurse for children looked after has recently ensured direct access to a paediatrician, a bereavement counsellor and sexual health services.

Young people positively contribute to the day-to-day running of the home. Formal opportunities include frequent key-worker sessions and young people's meetings. They also both benefit from regular visits by an independent advocate. He wrote, 'I have trained this team on advocacy and have found good practice. Young people's wishes and feelings are at the forefront of the service they provide.' However some of the young people's records do not demonstrate that all staff are familiar with the home's policies on

record keeping and understand the importance of careful, objective, and clear recording. Staff should record information on individual young people in a non-stigmatising way that distinguishes between fact, opinion and third-party information. Information about a young person must always be recorded in a way that is helpful to the young person.

Staff say generally that the young people enjoy good relationships with each other. Also, the age difference has proved to be beneficial for them both. The older child has been able to demonstrate a caring nature towards the younger child and has provided him with sound advice, which he listens and positively responds to.

Young people attend local youth clubs and meet up with friends, which aids their sense of belonging and improves their social skills. Individual interests and talents are actively encouraged and supported, which increases competencies and self-esteem. Current examples include horse-riding, cycling, cooking and baking.

Staff offer daily age-appropriate opportunities for the young people to continually develop the practical and social skills needed for future independent living. Examples include budgeting, cooking, laundry and gardening. One young person said, 'I like all the food here and the staff often make me my favourite meal, which is chicken and chorizo. I now choose healthy snacks. My favourite is strawberries.'

Since the last inspection, Ofsted has received positive feedback from parents on the quality of care provided in this home. In particular, parents confirmed good communication with staff who support family contact. They were also impressed with the range of activities their children took part in, and the way they are helped to develop independence skills. Comments include, 'I am kept up to date on how my child is doing', 'If my child has wanted to see me or other family members, staff have facilitated it' and, 'My child is encouraged to cook meals.'

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

The two young people living at this home feel safe and secure. They generally get on well with each other and enjoy good relationships with all the staff. Furthermore, they both have staff whom they feel particularly comfortable talking to if they feel upset.

One young person said, 'I like living here because I now feel safe.' His social worker confirmed, 'This service has proven beneficial to my young person's well-being, and he seems a lot more settled and happy since moving to this home.'

Comments from other professionals include, 'The staff are friendly and nurturing, which has a very positive impact on my young person', 'It is a safe, homely and nurturing environment where young people can gain independence skills, build self-esteem and learn techniques to better deal with difficult times' and, 'All the staff are trained to deal appropriately and effectively with children who go missing, are at risk of child sexual exploitation and in managing challenging behaviours.'

A key strength of this service is the ability to de-escalate some extremely challenging behaviours without the use of restraint or police involvement. Also, the use of reparation avoids unnecessary criminalisation of young people effectively, yet young people still learn that there are consequences to negative behaviours. One young person said, 'I now have a punch bag in my bedroom, which helps when I am cross.'

The positive reinforcement of good behaviours and efforts has the desired effect. For example, one young person has not caused any criminal damage for over a month. This is significant progress from his starting point.

Professionals confirm effective partnership working with the staff at this home to safeguard young people and promote their welfare. Comments include, 'This is an extremely professional management and staff team. Good partnership working has significantly reduced the risk of harm for my young person.'

One young person frequently goes missing from the home late at night. This was known risk-taking behaviour prior to admission, and increased staffing was immediately put in place to try to prevent this. The young person remains in contact with staff when she goes missing, insisting that she is safe and well, but refuses to divulge her location and who she is with. In the one recorded independent return interview, the young person is very clear that she is not running away because she is unhappy at this home, but because she wants to see her mates. To this end, she is now positively engaging in direct work sessions around keeping herself safe when out in the community with a view to increased independence. Moreover, to her credit, she recently contacted staff to say she was in an uncomfortable situation and wanted to be collected. This is significant progress.

This inspection found that although correct safeguarding procedures are followed when young people go missing, there is limited documentary evidence of staff being pro-active in, for example: searching for young people; disrupting known addresses; challenging the police to share intelligence to keep young people safe. There is also limited evidence of the registered manager challenging social workers to undertake timely independent return home interviews. Seven interviews are overdue, which suggests it is not a meaningful process in re-assessing risks and agreeing new strategies to keep young people safe. This is an area that requires improvement to be good.

At a recent multi-agency strategy meeting, all those present agreed that, 'This home remains a safe and secure place for this young person and, although there are missing from home episodes, she does always go back. However, her health needs must be addressed.'

Comprehensive and individualised risk assessments are in place and reviewed at least six weekly. Any changes are fully discussed at the next weekly team meeting. This is to ensure that all staff have a good understanding of the strategies in place to reduce known risks in the home and in the community. Parents are involved in these decisions, which makes them feel valued and respected. Comments include, 'This home is staffed well to support good behaviour and to manage difficult feelings', 'The staff have built up

good relationships with my child', 'My child has self-harmed and gone missing and staff always inform me' and, 'The staff are very friendly. They listen to me and consider my views about my child's care and support.'

All the required health and safety certificates are in place and checks are undertaken within the required timescales to ensure a safe and well-maintained environment. The home is suitably decorated and furnished throughout. Young people are proud to show off their bedrooms, which are highly personalised. There is a good-sized private garden at the back of the property with access to a conservatory.

However, the main shower room is located on the ground floor off the open plan communal lounge, kitchen and dining area. This compromises young people's privacy and dignity. There is also a toilet that is locked and only used by staff. This practice is not indicative of a family, homely environment.

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

This home has changed its main function since the last inspection in July 2016, and it is still in a period of transition. It previously offered a short-break service, which successfully avoided some young people coming into care. However, for those who needed long-term residential care, it was found that the strict timescales for moving young people on were unrealistic in identifying the most appropriate placement.

In response, the home now functions as a two-bedded home while future permanency is explored. There are no set timescales for moving young people on. These are agreed in care planning meetings. The risk is a drift in care planning and will require strong advocacy and challenge by the home, which was not evident at this inspection. The plan for both young people living at this home is foster care, but at present there is no individual professional identified to progress this.

The authority as a whole is also re-structuring. The overall aim by May 2018 is to establish three 'Hubs' where all relevant professionals are based, and thereby improve the timeliness of access to specialist services for young people. To this end, all residential staff have reapplied for their own positions. Some have not been successful, so anxieties for the future are high and morale is low.

There has been significant staff turnover at this home in recent months. It is now sufficiently staffed, but has been resourced from across the local authority. This means that some individuals have little or no previous experience of working in similar settings. Furthermore, three experienced members of staff are on long-term sick.

The experienced and suitably qualified manager is acutely aware of the current and future challenges ahead. He said, 'We are, in effect, a very new service of only six weeks with an embryonic team, so we are having weekly team meetings to get everyone working together better, up-to-speed very quickly with practice issues and records and to ensure more and much needed consistency.' He has ensured that the staff team has access to ongoing clinical support through this difficult time.

Staff spoken to, and those who responded to the Ofsted survey, all feel well supported, valued and respected by the managers in the home, and confirmed satisfaction with the quality and frequency of supervision and training. Comments include, 'We are regularly consulted on how the service can improve', 'I am asked my opinions and ideas about developing the service which are taken seriously', 'I have monthly supervision with my manager and monthly clinical supervision with an advanced health practitioner, so I feel thoroughly supported in my role and valued' and, 'My supervision helps me to reflect and improve my practice.'

The current internal and external monitoring systems are not sufficiently robust. In particular, a six monthly review by the manager of the quality of care in the home has not been completed in a timely manner. Also, key statistics are not maintained to aid this process. Examples include the number and timeliness of independent return interviews, and young people's current educational attendance, achievement and progress. This requires improvement, and a requirement has been made to address this shortfall.

The variable quality of the required documentation maintained in the home also suggests a lack of stringent internal monitoring by the registered manager and external auditing. In particular, missing from home records do not consistently detail the appearance and demeanour of a young person on their safe return. This is vital information in reviewing risks. There is also limited or unclear evaluation as to exactly what strategies have been put in place to try to prevent a re-occurrence. For example, one record reads, 'Numerous interventions offered but refused to engage.'

A recommendation has been made in respect to ensuring robust monthly independent monitoring visits. A requirement has not been made in acknowledgement that the service has already started to address this shortfall. The reports since the last inspection suggest a lack of scrutiny of records, evaluation, consultations and actions to aid the home in continually improving. As a direct result, the current visitor is serving his notice and the council are tendering for a new provider to commence in April.

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: 1244946

Provision sub-type: Children's home

Registered provider address: Wigan Metropolitan Borough Council, Town Hall,
Library Street, Wigan WN1 1YN

Responsible individual: Lynne Bennett

Registered manager: Stuart Ainge

Inspectors

Lynn O'Driscoll, social care inspector
Caroline Jones, social care inspector

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