

1258343

Registered provider: New Forest Care Ltd

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 organisation, and is registered to provide care and accommodation for three children who have emotional and/or behavioural difficulties

Inspection dates: 12 to 13 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 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 since the home was registered in September 2017.

Overall judgement at last inspection: not applicable

Enforcement action since last inspection: none

Key findings from this inspection

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

- Leaders and managers fail to monitor care practices and records rigorously. The lack of scrutiny leads to weak and ill-informed assessments of the strengths, and areas for development, in this children's home. Monitoring systems are process driven, and fail to focus on the experiences of and outcomes for children.
- The restraint of a child through ground holds is used without full consideration of the emotional impact of this extreme level of intervention. No evidence was provided to demonstrate whether leaders and managers are working towards a reduction in the use of this restrictive practice.
- Records of physical intervention and restraint are spread across four different documents, and incomplete and disorganised.
- There is a delay in providing continual professional development for staff, as they are not yet all enrolled on the required diploma after completing their probationary periods.
- The report produced following the independent person's visit is not completed in accordance with the regulations. The independent person fails to provide an opinion as to whether children are effectively safeguarded and their well-being is promoted.

The children's home's strengths:

- Children make progress in their health and well-being, education and independence. The children's risk-taking behaviour has dramatically reduced since they have been living at this home. These successes lead to an increase in self-confidence and belief that they can achieve their personal goals.
- Partnership working with parents and carers is good. The manager and staff support children to successfully repair and develop family relationships.
- Staff report that they are well supported through training and supervision. The manager is available to staff, and ensures that communication among the team members is effective and that regular team meetings occur.

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>The leadership and management standard</p> <p>The leadership and management standard is that the registered person enables, inspires and leads a culture in relation to the children's home that</p> <p>(b) promotes their welfare.</p> <p>In particular, the leadership and management standard requires the registered person to -</p> <p>(f) understand the impact that the quality of care provided in the home is having on the progress and experiences of each child and use this understanding to inform the development of the quality of care provided in the home.</p> <p>(g) use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13(1)(b)(2)(f)(h))</p>	31/03/2018
<p>Restraint and deprivation of liberty</p> <p>Restraint in relation to a child must be necessary and proportionate. (Regulation 20(2))</p>	01/03/2018
<p>Behaviour management policies and records</p> <p>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—</p> <ul style="list-style-type: none"> – the location of the use of the measure – a description of the measure and its duration – the effectiveness and any consequences of the use of the measure – a description of any injury to the child or any other person, and any medical treatment administered, as a result of the measure. 	01/03/2018

<p>The registered person must ensure that 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, has signed the record to confirm it is accurate. (Regulation 35(3)(a)(iii–v)(vii–viii)(b)(ii))</p>	
<p>Independent person: visits and reports</p> <p>The independent person must produce a report about a visit (“the independent person’s report”) which sets out, in particular, the independent person’s opinion as to whether—</p> <ul style="list-style-type: none"> (a) children are effectively safeguarded; and (b) the conduct of the home promotes children’s well-being. <p>The independent person must provide a copy of the independent person’s report to HMCI. (Regulation 44(4)(a)(b)(7)(a))</p>	<p>31/03/2018</p>
<p>Review of quality of care</p> <p>In order to complete a quality of care review the registered person must establish and maintain a system for monitoring, reviewing and evaluating—</p> <ul style="list-style-type: none"> (a) the quality of care provided for children (b) the feedback and opinions of children about the children’s home, it’s facilities and the quality of care they receive in it; and (c) any actions that the registered person considers necessary in order to improve or maintain the quality of care provided for children. (Regulation 45(2)(a–c)) 	<p>31/03/2018</p>

Inspection judgements

Overall experiences and progress of children and young people: requires improvement to be good

The experiences and progress of children requires improvement to be good. This is a result of the weaknesses identified in the leadership and management of this home and the impact on children with regards to behaviour management.

On four occasions a child has been held on the floor by staff. It is not clear from the records that this intervention has always been necessary and proportionate. Neither is it clear that staff have fully considered the emotional impact of this level of intervention on the child.

In a period of less than five months, children have settled well into this new home. Children have built some positive relationships with the adults who care for them. To assist with the move to this home, and to continue with trusted relationships, some staff moved with the children from the children's home where they lived previously. The strength of these relationships has reduced the impact of staff turnover where four staff have left and new staff have joined the team.

A social worker reports that they are very pleased with this placement. '[Child's name] has settled well and made great progress. There are very good weekly reports submitted to the department in a timely fashion and good communication of any issues or concerns.' Written reports prepared for a review meeting provide a comprehensive view of the child's progress and areas for development.

The house is divided into two living areas. There is an area for each child, but they have the ability to visit each other to spend time together if they wish. The house is pleasantly furnished and is set in extensive grounds. The rural location means that transport is required to access shops and local attractions. To support children with independent travel, they are using local buses to nearby towns.

Children make progress with their learning. They attend the school operated by the provider, where they are preparing for examinations and further education at local colleges. Children who have missed extensive periods of their education are supported to re-engage with their learning, apply for college courses and prepare for interviews. This level of success contributes to raised self-esteem and a sense of direction as they start to plan for their young adult lives.

Children receive emotional and behavioural support through the opportunity to meet with therapists and a mental health nurse. Children are in good physical health and can access local health services as required. Both children are responding well to a reduction plan regarding their use of tobacco and vaping. Medication is stored securely, and is administered by trained staff. There has been one medication error, but this did not result in any harm to the children. As a result of the error, staff received additional training and the dosage of medication required was recorded more clearly.

Staff help children to maintain and develop their relationships with family and friends. With structure and support, previous difficulties in family relationships have improved. As a result, the children benefit from spending quality time with people who are important to them. Family members have told the independent visitor that communication is good, and that they are kept informed of the children's plans. Records confirm that the manager and staff team are working well in partnership with families.

Children are encouraged to make progress through an incentive scheme that is linked to financial rewards. Generally this is effective and children respond well to the boundaries and expectations regarding areas such as attendance at school, completion of homework and safe use of mobile telephones. Children are praised and their success is celebrated. Memories and photographs are collected as a record of the children's experiences of living at this home.

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

At times when children are harming themselves or others, they are restrained by staff. Four out of five incidents of restraint have involved a child being restrained on the floor. This restrictive level of intervention is not always explained through records. There is a failure to demonstrate that the use of ground holds is necessary and proportionate.

Incident reports concerned with the restraint of children are disorganised due to the fact that they are recorded in four different documents, the main record being held on a computerised system. The records fail to meet the regulations. As a result, the records do not provide sufficient information for leaders and managers to review practice and ensure that the welfare of children is fully protected and promoted.

By failing to review the four sources of information collectively, leaders and managers do not have an accurate account of each incident and are unable to identify discrepancies and errors. The electronic records do not state exactly where the restraint took place, as the system restricts this information to only the name of the children's home. The duration of each physical intervention is recorded, yet often miscalculated with regard to the total time of a 'laying hold'. Injuries to one child have been recorded separately and not recorded on the electronic record; therefore, the review of this incident has not included the injuries to the child. The inadequate record-keeping does not enable leaders and managers to evidence that restraint is only used in accordance with the legislative framework to protect the child and those around them.

Risk management documents provide staff with guidance and strategies that equip them to care for children and their particular needs. However, one behaviour management plan gives conflicting advice by stating that one of the preferred methods of physical intervention includes a ground holds, and later states, 'Laying holds to be avoided where possible.' This lack of direction is confusing for staff and from the records it is not

evident that 'laying holds' are avoided.

A recent questionnaire reports that children feel safe 'always' and 'most of the time'. Children are settled in this home and have not gone missing. They have not been involved in criminal activity, and have not engaged in the use of drugs or alcohol. This is a great development, as there were concerns about their risk-taking behaviour prior to them coming to live at this home. Children recognise that they are making the right choices with regard to keeping themselves safe. They are rightly proud of their progress and report that living at this home has helped them.

When there are difficulties and disagreements, a lot of time is spent talking through the problems and finding solutions. Children said that the staff give them the time and the space to make their own decisions. Sanctions are minimal and usually restorative. For example, misuse of a mobile phone may mean that the child does not have the use of it for a short period, and is required to engage in some learning about the dangers of sexting and safe use of the internet. The records of sanctions do not always include reviews of whether they have been effective or not.

Safeguarding policies and procedures provide clear guidance for staff. The manager has responded appropriately to safeguarding concerns, maintaining suitable records and making prompt referrals to external agencies. The manager has developed professional networks with the local authority and the police.

New staff are employed subject to safer recruitment procedures. Staff recruitment is managed through the provider's head office, with senior managers and human resources personnel. The registered manager has not been involved in the selection of staff for this home; however, this practice has recently changed and he will participate in all future interviews. It is important that the registered manager takes responsibility for selecting new staff who will complement the current team.

Health and safety matters are routinely checked to provide a safe environment. Children and staff are aware of the fire evacuation procedures; the risks are reduced as this building is a bungalow with several external doors.

The effectiveness of leaders and managers: inadequate

Leaders and managers fail to monitor care practices and records effectively. This systemic failing is caused by the registered manager, the senior managers within the company and the independent person who visits each month.

The practice of restraining children on the ground and the associated records lack scrutiny. The factual errors and incomplete records noted by the inspector have not been identified by leaders and managers. The monitoring systems are inadequate; leaders and managers fail to analyse and evaluate the quality of care provided.

The manager looks at records each month and has produced a three month summary

report for the period October to December 2017. This document, submitted to Ofsted as a regulation 45 report, has been collated without an evaluation of the impact of the quality of care provided to children. As a result, the areas for development and any strengths are not captured in order to inform a meaningful development plan. At the time of inspection, the provider was in the process of developing an improved report template with reference to the quality standards.

The independent person fails to report their opinion as to whether children are effectively safeguarded at this home, as required by the regulations. The monthly reports from the independent person list recommendations for improvements to address the shortfalls that they see. These reports fail to demonstrate progress as there is no reporting the following month as to whether the recommendations have been met or not.

The monthly reports submitted to Ofsted are difficult to comprehend due to the use of acronyms and initials. For example one recommendation is listed as, '[staff member's initials] down by one week.' The registered manager explained to the inspector this refers to a member of staff whose formal supervision was delayed by one week. This style of reporting hinders the regulator in assessing the functioning of the home. The inspector was informed that Ofsted is provided with a different report template of an independent person's visit to that held by the registered manager. Ofsted should receive a copy of the independent person's report, not a different version.

Staff report that they receive good support and supervision from the registered manager and senior staff in the home. Training is provided through group meetings and e-learning, as arranged through the wider company. Staff say that this level of training supports them in their role. There is a delay in staff being enrolled for the level 3 qualification in residential childcare. Two staff completed their probationary periods and are still waiting to be enrolled on this essential training, or an equivalent qualification.

There are regular staff meetings, which often occur weekly. This forum provides a good opportunity to discuss the children and the development of this new home. The records of the staff meetings are in the form of handwritten notes. There are no clear actions identified from these meetings and the various styles of handwriting result in records that are difficult to read. The poor quality of these records hinders them from contributing to the development of the team.

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: 1258343

Provision sub-type: Children's home

Registered provider: New Forest Care Ltd

Registered provider address: New Forest Care Ltd, West Shore House, West Street, Hythe, Southampton SO45 6AA

Responsible individual: Michael Ferne

Registered manager: Gary Macarthur

Inspector

Clare Davies: social care regulatory inspector

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