

SC036304

Registered provider: Sefton Metropolitan Borough Council

Full inspection Inspected under the social care common inspection framework

Information about this children's home

This local authority children's home provides short- to medium-term care for up to four children, from age seven to 17. The purpose of the home is to prepare children to move to a foster family or long-term residential care or, when possible, to be reunited with their family.

The registered manager registered with Ofsted in March 2007.

Inspection dates: 24 to 25 July 2018	
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 meet the requirements for good.	

Date of last inspection: 18 May 2017

Overall judgement at last inspection: requires improvement to be good

Enforcement action since last inspection: none



Recent inspection history

Inspection date	Inspection type	Inspection judgement
18/05/2017	Full	Requires improvement to be good
22/02/2017	Interim	Declined in effectiveness
01/06/2016	Full	Good
09/02/2016	Interim	Improved effectiveness



What does the children's home need to do to improve?

Statutory requirement

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 keep the statement of purpose under review and, where appropriate, revise it; and notify HMCI of any revisions and send HMCI a copy of the revised statement within 28 days of the revision. (Regulation 16 (3)(a)(b))	24/08/2018

Recommendations

- Staff should consistently pursue the child's health appointments. ('Guide to the children's homes regulations including the quality standards', page 34, paragraph 7.11)
- Staff should provide more detail in the child's risk assessments and share risk assessments with all relevant people, for example parents. ('Guide to the children's homes regulations including the quality standards', page 42, paragraph 9.5)
- Staff should receive training in therapeutic approaches to behaviour management and attention deficit hyperactivity disorder (ADHD). ('Guide to the children's homes regulations including the quality standards', page 53, paragraph 10.11)
- Staff should record information on children in a non-stigmatising way. Information about the child must always be recorded in a way that will be helpful to the child. ('Guide to the children's homes regulations including the quality standards', page 62, paragraph 14.4)
- Any individual appointed to carry out visits to the home as an independent person must make a rigorous and impartial assessment of the home's arrangements for safeguarding and promoting the welfare of the children. The independent person must have the relevant skills, experience and professional background, for example in carrying out work of a similar nature, to enable them to reach a rigorous and impartial judgement. ('Guide to the children's homes regulations including the quality standards', page 65, paragraphs 15.5 and 15.9)



Inspection judgements

Overall experiences and progress of children and young people: good

With the staff's dedicated support, two children have successfully moved out of the home. The children moved in a planned and supported way, and the staff made this important change a positive experience for the children and their new carers.

One child continues to be cared for at the home and he is clearly benefiting from being the only child. The registered manager has made a child-centred decision not to move any other children into the home until he is ready to live alongside other children.

The child is making progress in most areas of his life. His school attendance is excellent, and in the last year he has exceeded his expected targets in most subjects. Good routines and regular meetings between the school, home and social worker have supported the child to progress with his learning.

Staff seek activities and hobbies that the child enjoys. This proactive approach is helping the child to discover his interests and talents, such as music and trampolining. The child's self-esteem and confidence are beginning to increase as he succeeds in his new hobbies and interests. Staff celebrate all his achievements no matter how small they may seem.

Staff support the child to maintain strong attachments with important people. Staff welcome the child's father into the home, and they have established excellent working relationships with him. This is reflected by the father's comments that, 'Staff are great, and they are doing a brilliant job. I can't praise them enough. They have really helped me, and I am always made to feel welcome when I visit.'

In the main, the staff arrange medical appointments for the child and they are successful at encouraging him to attend. As a result, he is accessing services that assess and support his emotional well-being. However, one health issue has not been satisfactorily addressed by the team. An appointment with the child's doctor, to discuss a referral to a specialist clinic, is outstanding. On this health issue, the child's health plan was unclear, and staff did not have a shared understanding of what they needed to do.

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

Following the decision to care for one child only, the home has become a safer and more settled living environment. Incidents of bullying, physical restraints and children going missing from home have significantly decreased. Children's welfare and safety were central to the decision to care for one child only.

There have been improvements in how staff assess risk. Mostly, risk assessments are detailed and provide clear guidance to staff on how to respond to risky situations, such as aggression towards staff. However, risk assessments can be developed further. Some risks are not detailed sufficiently, for example the specific weapons used by the child and



the potential risks to other children in the community. Additionally, not all relevant people, for example the child's father, who is significantly involved in the child's care, are involved in drawing up risk assessments.

Staff are vigilant, and they provide the child with a high level of supervision in the home and in the local community. Staff acknowledge the restrictions that this places on the child, and staff supervision is decreased when it is safe to do so. The team makes sure that he has lots of opportunities to go out and play and take part in fun activities alongside other children, in a safe way.

Staff have a good understanding of the potential risks when children go missing from home. They know the child well, including the places where he often goes to in the local area. This helps staff to quickly locate him when he does go missing from their care. On most occasions, it is not necessary to report him to the police because the staff actively look for him and make sure that he returns home quickly and safely.

Staff help the child to understand danger and risk by talking to him about his feelings, behaviour and actions. The records from these sessions are variable. While some demonstrate the staff's nurturing approach to behaviour management, others do not. At times staff recordings have used stigmatising language and have not been written in a way that is helpful to the child when he reads his records.

Regular health and safety checks and equipment servicing are making the home a safe place to live. Additionally, the local area assessment is reviewed and updated annually to make sure that the staff team is aware of any potential risks in the local community.

The effectiveness of leaders and managers: good

The home is led by an experienced and suitably qualified registered manager. An experienced and hands-on deputy supports the smooth running of the home.

The team is skilled at developing long-lasting relationships with the children in its care. Many children who have moved on from the home still visit, and continue to benefit from the staff's guidance and reliable support. A consistent, stable and caring staff team makes this possible.

Staff benefit from regular supervision and team meetings that provide them with opportunities to think about their role, responsibilities, actions, and any gaps in their learning. The team is settled, and most team members have worked at the home for many years. This shows their dedication and commitment to the children and the service.

The manager makes sure that there is always a sufficient number of staff on duty to provide the child with the care, support and supervision that he needs. This is making sure that he is cared for well and kept safe.

All staff have, or are working towards, the relevant qualification. Additionally, staff



receive new and refresher training, including safeguarding, managing aggression and first aid. The team would benefit from having training in working therapeutically with children who have experienced loss and trauma, and ADHD. This would further equip them to respond to the child's specific needs.

The independent monitoring of the home is variable. The quality of the reports largely depends on the individual person carrying out the visit. The manager is not responsible for appointing the independent persons. She has not assessed if they have the relevant experience, skills and background to carry out the role rigorously. Inconsistencies in monitoring of the service are weakening the home's improvement journey.

Although the manager has kept the home's statement of purpose under review, she has not provided Ofsted with a copy as required. Consequently, the service regulator has not been kept up to date about important changes in the home.

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: SC036304

Provision sub-type: Children's home

Registered provider: Sefton Metropolitan Borough Council

Registered provider address: Town Hall, Oriel Road, Bootle, Merseyside L20 7AE

Responsible individual: Dwayne Johnson

Registered manager: Sally-Ann Edwards

Inspector

Marina Tully, social care inspector



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