

1230268

Registered provider: Kites Children's Service's Ltd

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home is one of two operated by a private provider. It is registered to provide accommodation and specialist therapeutic care and treatment for five young men. The provider also operates a school and an independent fostering agency as part of a separate but linked company.

The suitably qualified manager has been in post since registration of the home in 2016.

Inspection dates: 14 to 15 August 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: 28 November 2017

Overall judgement at last inspection: improved effectiveness

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
28/11/2017	Interim	Improved effectiveness
14/06/2017	Full	Good
20/10/2016	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>The registered person must compile in relation to the children's home a statement ("the statement of purpose") which covers the matters listed in Schedule 1.</p> <p>The registered person must keep the statement of purpose under review and, where appropriate, revise it; and</p> <p>notify Ofsted of any revisions and send Ofsted a copy of the revised statement within 28 days of the revision. (Regulation 16 (1)(3)(a)(b))</p>	29/10/2018

Recommendations

- For children's homes to be nurturing and supportive environments that meet the needs of their children, they will, in most cases, be homely, domestic environments. Children's homes must comply with relevant health and safety legislations (alarms, food hygiene etc.); however, in doing so, homes should seek as far as possible to maintain a domestic rather than 'institutional' impression. ('Guide to the children's homes regulations including the quality standards', page 15, paragraph 3.9)
- Medicines must be administered in line with a medically approved protocol. Records must be kept of the administration of all medication, which includes occasions when prescribed medication is refused. Regulation 23 requires the registered person to ensure that they make suitable arrangements to manage, administer and dispose of any medication. These are fundamentally the same sorts of arrangements as a good parent would make but are subject to additional safeguards. ('Guide to the children's homes regulations including the quality standards', page 35, paragraph 7.15)
In particular, ensure that all non-prescription medication is from a list which is approved as suitable by either a pharmacist or medical practitioner.
- Staff should continually and actively assess the risks to each child and the arrangements in place to protect them. Where there are safeguarding concerns for a child, their placement plan, agreed between the home and their placing authority, must include details of the steps the home will take to manage any

assessed risks on a day-to-day basis. ('Guide to the children's homes regulations including the quality standards', page 42, paragraph 9.5)

In particular, ensure that risk assessments and risk management plans contain all required information, and are regularly updated and followed.

- Ensure that staff understand the importance of careful, objective and clear recording and that information regarding the child is 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)

Inspection judgements

Overall experiences and progress of children and young people: good

Meticulous assessment and pre-admission processes mean that children only come to live at the home if it is clear that the staff are able to meet their needs. There is effective matching of the children in the group, which minimises the risk of conflict. As a result, placement breakdown is rare and all of the children are making good progress from their starting points. A parent said, 'It's changed his life around for the better. He [the child] is happy, more confident and doing better at school.'

The children benefit from the good balance of male and female strong role models in the staff team. The staff are skilled at developing positive relationships with the children. As a result, the children enjoy the time that they spend with the staff chatting, playing Cluedo and watching films. A parent said, 'He [the child] has flourished since he's been there. They [the staff] really get him.'

A particular strength of the home is the wide variety of activities the children have the opportunity to try. The children particularly enjoy the regular outward-bound activities such as camping and cooking on the beach, as well as the challenges set. The staff provide good enrichment opportunities. All of the children are encouraged to learn a musical instrument and pursue personal interests.

The children develop independence skills that help prepare them for adult life. A social worker said, 'I love the way that the staff work with the young people to help them develop their skills and cope within the community.'

Medication arrangements are generally safe and appropriate. However, one child has often been given a widely available non-prescribed medication to help with indigestion. The staff have not consulted a suitably qualified medical professional before giving this, which means that there is potential for the child to be given medication which is unsuitable for them.

The house and its furnishings have suffered from significant wear and tear. The sofas are torn in places, sagging and uncomfortable, some dining chairs are missing, and a fridge has no shelves. The paintwork, particularly in the hallways and downstairs toilet, is the worse for wear. Areas of the home such as some window sills are dirty. As a

result, particular areas of the home do not provide children with high-quality accommodation.

The staff consistently seek and act on the children's views. The children feel valued and understand exactly why they live at the home and the expectations that staff have of them. Consequently, the children like living at the home and enjoy the good-natured 'banter' that they share with staff. The children described the home as 'brilliant' and 'amazing'.

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

The children are safe and feel safe. One child said 'I like it here', and another said, 'I like the fact it's chilled.' Professionals and the children's families have absolute confidence that staff keep the children safe.

The children have weekly therapy to help them understand their personal histories and any risks that they are vulnerable to, or present to others. The manager and staff have training in therapeutic approaches and know each of the children well. This means that the staff are able to engage with the children positively on their level and the children feel able to talk to staff about any worries. This joined-up approach helps the children develop a greater understanding of keeping safe. A social worker said, 'He [the child] is confident and comfortable with staff, and sees them in a protective role.'

The staff use praise, rewards and discussion to promote positive behaviour. This helps the children understand the impact that their behaviour has on themselves and others. As a result, the children develop greater maturity and significant incidents are rare. Consequently, sanctions are unusual and physical restraint has not been used.

Each child who has lived in the home for 12 weeks or more has a detailed risk assessment and risk management plan integrated into their individual treatment plan. The risk management plans are detailed and developed in partnership with the children. The children are proud of their progress and demonstrate improved personal safety. However, prior to the development of the individual treatment plan, documented interim risk management plans are not consistently updated, shared with the staff team and followed. For example, two children's risk management plans said that they should be supported by two staff when outside the home. However, they were not supported by two staff when they took part in group activities. Furthermore, some of the activity risk assessments are not sufficiently robust. For example, the risk assessment for swimming in the sea does not include consideration of essential information such as whether the accompanying staff can swim or the particular dangers presented by local mudflats. The inconsistent documentation of risk management means that there is potential on occasion for a lack of clear and consistent approach to safeguarding the children in particular circumstances.

The effectiveness of leaders and managers: good

The manager and staff have high aspirations for the children and help the children to make positive changes. As a result, the children thrive. Parents and professionals hold the staff in high regard. Parents and professionals comments included:

- 'The staff are great.'
- 'It's the best place he [the child] has been. It's a really good fit for him.'
- 'It's like a family. I wouldn't be happy for him [the child] to be anywhere else.'

The manager's open and non-hierarchical approach is valued by staff and children alike. The manager is named by the children as one of the people with whom they feel most able to talk. The staff support the children in a flexible manner, consistently keeping their needs at the forefront of their practice.

Parents and professionals consistently describe staff's collaborative approach, which promotes strong partnership working to ensure that the child's needs are well met. A social worker said that this close working has meant that the child feels very positive about school for the first time.

The staff do not consistently maintain all of the home's records to a high enough standard. Occasionally, this has an impact on the staff's ability to evidence the care and support given to individual children. For example, it is sometimes difficult to understand whether any issues of concern have been noted during children's preventative health checks and what actions, if any, have been taken.

The home is suitably resourced to deliver services in accordance with the statement of purpose. However, the manager has not sent a copy of recent changes to the statement of purpose to Ofsted. This means that Ofsted as the regulator does not hold the most current information about the service.

The staff are well supported with good-quality training and regular, practice-based supervision. This is further enhanced with therapeutic supervision and case discussion that promotes staff's individual skills and ability to meet the children's needs to a high standard.

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: 1230268

Provision sub-type: Children's home

Registered provider: Kites Children Service's Ltd

Registered provider address: The Forge, Langham, Colchester CO4 5PX

Responsible individual: Rosslyn Parsons

Registered manager: Peter McGugan

Inspector

Joanna Heller: social care inspector

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