

1271467

Registered provider: The Priory Group

Interim inspection

Inspected under the social care common inspection framework

Information about this children's home

This home provides care for up to five children who have a learning disability. The home is operated by a national private organisation.

A registered manager is in post but is currently absent from the home. At present, an interim manager is in day-to-day charge of the home, supported by the responsible individual.

Inspection date: 5 November 2018

Judgement at last inspection: requires improvement to be good

Date of last inspection: 12 June 2018

Enforcement action since last inspection: none

This inspection

The effectiveness of the home and the progress and experiences of children and young people since the most recent full inspection

This home was judged requires improvement to be good at the last full inspection. At the interim inspection, Ofsted judges that it has declined in effectiveness.

Since the full inspection in June 2018, this home has declined in effectiveness. Serious weaknesses in how well children are helped and protected stem from poor leadership and management oversight.

Senior leaders placed a child in this home without ensuring that the staff team that cares for him has the required training and support. Some staff started work without completing induction and basic mandatory training, including restraint and child protection training. Other staff have been involved in restraint of a child and the handling of medication without having up-to-date training in these areas. Not all staff are receiving regular practice-related supervision. This includes a lack of regular

supervision for senior leaders. This poor practice places the child and staff at risk of harm.

Too few staff have the necessary expertise in residential childcare and caring for children who have learning difficulties and autism spectrum disorders. The statement of purpose defines these areas as a specialism of the home. Not all staff have a good understanding of how to meet the current child's complex needs effectively.

Insufficient action has been taken to ensure that the child's day-to-day experiences are good. Most of his day is spent in his bedroom using electronic devices. Although staff are trying to engage the child in alternative activities, boundaries for the length of time he can spend on the electronic devices are not in place.

The child is restricted inside the home because of high fencing and locks on the exterior gate, and staff do not yet feel it is safe to take him outside of the home. As a result, the child is not seeing primary healthcare professionals and does not attend school.

Staff from the provider's school visit the home three days a week to engage the child in some educational experiences. While this is positive, these visits are not yet having a measurable impact on the child's educational progress.

Ineffective management oversight has resulted in poor monitoring of incidents and restraint. As a result, a child has suffered injuries during incidents where restraints are used. Leaders and managers do not know how these injuries occurred and, at the time of the incidents, did not obtain external medical attention for the child. They did not immediately inform the placing authority and the family of the child about the injuries. Action has recently been taken to rectify these serious omissions.

The arrangements for managing medication are poor. The medication room does not provide staff with sufficient workspace to check records and manage medication safely. At times, medication administration records are illegible and a medication error that occurred two weeks before the inspection had not been investigated. Staff are currently receiving online medication training only. They have not had their competency to administer medication assessed.

The independent visitor identified weaknesses in the 'pro re nata' (PRN) medication protocol at her visit on 22 October 2018. Leaders and managers have not acted quickly to address these concerns and to ensure that the protocol provides staff with absolute clarity about the use of PRN medication and when it can be administered. Medication plans contain information that is contradictory. As a result, there is a risk that staff can interpret the guidance to administer PRN medication inconsistently.

The three requirements made at the full inspection remain unmet as the same or similar weaknesses were identified at this inspection.

The monitoring completed by the independent visitor and members of the quality team is good and accurately identifies where practice is poor. In October, the independent visitor stated that, in her view, children were not effectively safeguarded and that their welfare was not promoted. Because of these findings, the recently appointed responsible individual began to work directly in the home. He has started to take action to address the shortfalls. However, this work is in the very early stages of development and the

severity and scale of the action required is going to take time to address.

Recent inspection history

Inspection date	Inspection type	Inspection judgement
12/06/2018	Full	Requires improvement to be good

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>6: The quality and purpose of care standard</p> <p>The quality and purpose of care standard is that children receive care from staff who—understand the children's home's overall aims and the outcomes it seeks to achieve for children; use this understanding to deliver care that meets children's needs and supports them to fulfil their potential.</p> <p>In particular, the standard in paragraph (1) requires the registered person to understand and apply the home's statement of purpose; and ensure that staff—</p> <p>understand and apply the statement of purpose; protect and promote each child's welfare; provide personalised care that meets each child's needs, as recorded in the child's relevant plans, taking account of the child's background; and</p> <p>makes decisions about the day-to-day arrangements for each child, in accordance with the child's relevant plans, which gives the child an appropriate degree of freedom and choice.</p> <p>(Regulation 6 (1)(a)(b)(2)(a)(b)(I)(ii)(iv)(ix))</p> <p>In addition:</p> <ul style="list-style-type: none"> ■ ensure that the child is supported to engage in a wide range of activities, make measurable educational progress and is provided with access to primary health care practitioners. 	21/11/2018
11: The positive relationships standard	21/11/2018

<p>The positive relationships standard is that children are helped to develop, and to benefit from relationships based on mutual respect and trust; an understanding about acceptable behaviour; and positive responses to other children and adults.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure that staff—</p> <p>meet each child’s behavioural and emotional needs as set out in the child’s relevant plans;</p> <p>helps each child to develop socially aware behaviour;</p> <p>communicate to each child expectations about the child’s behaviour and ensure that the child understands those expectations in accordance with the child’s age and understanding;</p> <p>understands how children’s previous experiences and present emotions can be communicated through behaviour and have the competence and skills to interpret these and develop positive relationships with children; and</p> <p>de-escalate confrontations with or between children, or potentially violent behaviour by children.</p> <p>(Regulation 11(1)(a)(b)(c)(2)(a)(I)(ii)(v)(ix)(xi))</p>	
<p>12: The protection of children standard</p> <p>The protection of children standard is that children are protected from harm and enabled to keep themselves safe.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure that staff—</p> <p>understand the roles and responsibilities in relation to protecting children that are assigned to them by the registered person;</p> <p>take effective action whenever there is a serious concern about a child’s welfare; and</p> <p>are familiar with, and act in accordance with, the home’s child protection policies.</p> <p>(Regulation 12(1)(2)(a)(v)(vi)(vii))</p>	21/11/2018
<p>*13: 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 helps children aspire to fulfil their potential; and promotes their welfare.</p> <p>In particular, the standard in paragraph (1) requires the registered person to—</p> <p>lead and manage the home in a way that is consistent with the</p>	21/11/2018

approach and ethos, and delivers the outcomes, set out in the home's statement of purpose;

ensures that staff have the experience, qualifications and skills to meet the needs of each child; ensures that the home has sufficient staff to provide care to each child; ensures that the home's workforce provides continuity of care to each child;

understands the impact that the quality of care provided in the home is having on the progress and experiences of each child and uses this understanding to inform the development of the quality of care provided in the home; and

uses monitoring and review systems to make continuous improvements in the quality of care provided in the home.

(Regulation 13(1)(a)(b)(2)(a)(c)(d)(e)(f)(h))

In particular:

- Take urgent action to prioritise the review and assessment of the child's needs.
- In response to this review and assessment, ensure that staff have the training, skills and experience required to meet his needs.
- Take urgent action to ensure that staff have completed the required training in the management and administration of medication prior to being asked to observe or administer the child's medication.
- Take urgent action to ensure that staff have specialist training in meeting the needs of children with autism spectrum disorders, attention deficit hyperactivity disorder and obsessive-compulsive disorder. This training must provide sufficient knowledge and skills for staff to meet the needs of the child and to reduce his anxiety and isolation.
- Take urgent action to ensure that where staff have not received up-to-date training in physical restraint that they are not required to intervene in incidents where physical intervention is or may be required, and that this training is provided without delay.

*23: Medicines

The registered person must make arrangements for the handling, recording, safekeeping, safe administration and disposal of medicines received into the children's home.

In particular the registered person must ensure that—

medicines kept in the home are stored in a secure place so as to prevent any child from having unsupervised access to them;

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medicine which is prescribed for a child is administered as prescribed to the child for whom it is prescribed and to no other child; and

a record is kept of the administration of medicine to each child.

Paragraph (2) does not apply to medicine which—

is stored by the child for whom it is provided in such a way that other persons are prevented from using it; and

may be safely self-administered by that child.

In this regulation, "prescribed" means—

ordered for a patient, for provision to the patient, under or by the virtue of the National Health Service Act 2006 or section 176(3) of the Health and Social Care (Community Health and Standards) Act 2003(b); or

in a case not falling within sub-paragraph (a), prescribed for a patient in accordance with regulation 217 of the Human Medicines Regulations 2012(c).

(Regulation 23(1)(2)(a)(b)(c)(3)(a)(b)(4)(a)(b))

In particular:

- Take urgent action to ensure that the PRN protocols and supporting documents accurately confirm when PRN medication can be administered.
- Take urgent action to ensure that the area for staff to prepare medication is fit for purpose enabling two staff to have sufficient oversight of the checking process.
- Take urgent action to ensure that staff who are responsible for handling and administering medication have sufficient training to enable them to undertake this task safely.

33: Employment of staff

The registered person must—

ensure that each employee completes an appropriate induction; and

ensures that all employees receive practice-related supervision by a person with appropriate experience.

(Regulation 33(1)(a)(4)(b))

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<p>35: Behaviour management policies and records</p> <p>The registered person must ensure that—</p> <p>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> <p>a description of any injury to the child or any other person, and any medical treatment administered, as a result of the measure; (Regulation 35 (3)(a)(viii))</p> <p>In particular:</p> <ul style="list-style-type: none"> ■ ensure that staff respond effectively when children are injured during incidents when restraint is used. 	<p>21/11/2018</p>
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* These requirements are subject to a compliance notice.

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.

This inspection focused on the effectiveness of the home and the progress and experiences of children and young people since the most recent full inspection.

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: 1271467

Provision sub-type: Children's home

Registered provider: The Priory Group

Registered provider address: Priory Education Services Limited, 80 Hammersmith Road, London W14 8UD

Responsible individual: Guy Mammatt

Registered manager: Gail Stevens

Inspector(s)

Tracey Ledder, social care inspector

Paula Lahey, social care regulatory inspection manager

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