

Savannah Lodge Limited

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8 Ranworth Avenue, Hoddesdon, Essex EN11 9NR

Inspected under the social care common inspection framework

Information about this residential family centre

This residential family centre provides parenting assessments for up to four families. The families are accommodated in a domestic-type house. Parents must be at least 16 years old, and the service will accept children who are up to 10 years old.

Inspection dates: 28 to 29 January 2019

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| Overall experiences and progress of children and parents, taking into account | requires improvement to be good |
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| How well children and parents are helped and protected | requires improvement to be good |
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| The effectiveness of leaders and managers | requires improvement to be good |
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The residential family centre is not yet delivering good assessments, help and care for children and parents. However, there are no serious or widespread failures that result in their welfare not being safeguarded or promoted.

Date of previous inspection: n/a

Overall judgement at last inspection: n/a

Enforcement action since last inspection: none

Key findings from this inspection

This residential family centre requires improvement to be good because:

- There are parts of the environment that are not certified as satisfactorily safe

following service visits. The health and safety checks failed to identify safety risks.

- Risk assessments are not always updated following incidents or categorised using individuals' histories.
- The house and garden require maintenance and fresh decor.
- Some staff have not had regular supervision.
- The majority of staff members are unqualified and inexperienced.
- Storage provision fails to include provision for families who have specific health needs.
- Recruitment checks for new staff lack depth and exploration.

The residential family centre's strengths:

- The management team leads and generates a therapeutic approach to parenting capacity and assessment.
- The management team is focused on families' progress and positive outcomes.
- The manager is approachable. Difficult messages are conveyed with clarity and sensitivity.
- Assessment time frames are met. Supervision levels are set out and reports make clear recommendations.
- There is ambition and enthusiasm to address identified shortfalls and drive improvement.

What does the residential family centre 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, Residential Family Centre Regulations 2002 and the national minimum standards. The registered person(s) must comply within the given timescales.

| Requirement | Due date |
|---|------------|
| <p>The registered person shall ensure that—</p> <p>all parts of the family centre to which residents have access are so far as reasonably practicable free from hazards to their safety; and</p> <p>unnecessary risks to the health and safety of residents are identified and so far as possible eliminated. (Regulation 11 (4)(a)(c))</p> | 08/02/2019 |
| <p>The registered person shall ensure that the residential family centre is suitably furnished with adequate living, storage and communal space to—</p> <p>meet the needs of the residents. (Regulation 14 (k)(i))</p> | 21/02/2019 |
| <p>The registered person shall ensure that there is, having regard to—</p> <p>the statement of purpose of the residential family centre, its size and the numbers and needs of its residents; and</p> <p>the need to safeguard and promote the health and welfare of residents;</p> <p>a sufficient number of suitably qualified, competent and experienced persons working for the residential family centre. (Regulation 15 (a)(b))</p> | 21/05/2019 |

Recommendations

- Ensure that the centre has high expectations for parents and staff. (NMS 4.1)
In particular, ensure that staff do not smoke with families, and that they act as healthy role models.
- Ensure that any review informs future practice. (NMS 4.5)

In particular, ensure that written risk assessments are updated to include actions and learning from incidents.

- Ensure that the centre provides a comfortable and homely environment and is well maintained and decorated. Avoidable hazards are removed as is consistent with a domestic setting. Risk reduction does not lead to an institutional feel. (NMS 11.2)
- The registered person can demonstrate, including from written and electronic records, that it consistently follows good recruitment practice, and all applicable current statutory requirements and guidance, in staff recruitment. This includes Disclosure and Barring Scheme (DBS) checks and all requirements in Schedule 2 of the Residential Family Centres Regulations 2002, as amended. All personnel responsible for recruitment and selection of staff are trained in, understand and operate these good practices. (NMS 14.2)
- Ensure that all staff are provided with regular supervision by appropriately qualified and experienced staff. (NMS 17.4)

Inspection judgements

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

The inspection took place in the absence of the registered manager or centre manager on day one, and the centre manager on day two due to sickness. While the registered manager was available on day two, an emerging crisis at the centre limited time to demonstrate and discuss some areas of practice.

Placement plans are developed after an initial placement meeting with the family. The plans are based on the instructions from the court. Staff tailor the assessment and the placement to incorporate the specific court instructions. In the immediate absence of instructions, staff use the objectives that are agreed with placing authorities.

The house is a large semi-detached property in a residential area of the town. The space is limited and there are some areas of the house and garden that are not maintained adequately. The kitchen has a missing cupboard front and there are missing tiles under the boiler and a loose kick board. The rear garden is unkempt, with uneven grass and areas of mud. A playhouse lies in pieces on the patio area. Smoking debris is evident on the patio and lawn, and outside the back door to the kitchen. The first floor has several stains on the carpets. These shortfalls mean that the centre is failing to provide a well-kept, homely environment. There is not enough storage space. A family that has a child with additional health needs, and uses extra equipment, has insufficient storage.

The established assessment framework sets out how parenting capacity will be assessed in a clear time frame. Assessment work is overseen by a qualified social worker who writes the mid-term and court reports. Parents understand the assessment process. They are kept informed throughout and made aware of any concerns. This makes the assessment process fair and transparent.

Parents have good relationships with the staff. The delivery of targeted educational sessions and thorough assessments of parenting capacity has enabled some parents to remain with their children in the community.

Parents' and children's views are actively sought. Residents' meetings are hosted by families and supported by the staff. This encourages each family to feel empowered to express their views. Good, regular communication between families and staff eases the tensions that can result from several families sharing communal living space.

Occasional crisis situations are managed well by calm staff. This was commented on by professionals who were spoken to during the inspection. Transitions are also managed well. Staff provide ongoing support in the local community for one family

that was previously accommodated at the centre. Parents and babies who require hospital care receive ample support from staff, who visit and telephone daily. Other parents continue to stay in contact with staff despite failed assessments. This demonstrates that parents develop good relationships with the staff, and that they understand that the core safeguarding principles have influenced recommendations for the court.

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

Risks are identified, but some categorising and documentation are contradictory. One individual risk assessment fails to include substance misuse risks despite these being known. Another assessment categorises risks as low despite being a high-risk area. Although the staff may be aware of actual risks, the lack of clear documentation of risks does not guide new or agency staff well. An individual risk assessment for alcohol use has not been updated despite the occurrence of three alcohol-related incidents. Details on a healthcare plan include several important factors for maintaining and monitoring a baby's health. One of these factors has not been added to the risk assessment. This means that staff may not be aware of changing risks and, therefore, may not be able to mitigate risk factors, potentially increasing the risk.

The daily health and safety checks are not working properly. Despite staff identifying health and safety concerns, these are not all reported and addressed. These concerns include water temperatures in communal bathrooms, which have been recorded as too hot. This poses a risk to children using taps. An electrical safety report was deemed unsatisfactory and there is no evidence to show that the identified works have been carried out. This was addressed immediately during the inspection and an electrician has been booked to carry out these works.

Safe staff recruitment is improving after some shortfalls were detected by the external visitor. These shortfalls included the lack of verification of employment references. This was addressed. However, a recruitment file that was sampled showed that one member of staff provided two referees from the same previous employer. This means that there is a failure to carry out thorough checks that support safe recruitment.

Safeguarding arrangements work well. Designated staff lead on safeguarding and have the relevant training. There have been no allegations made against the staff. The current arrangements for closed-circuit television (CCTV) are in line with the local authority's requests and associated safeguarding risks. Camera views are unrestricted and this coverage is reviewed regularly. This is clearly documented and justified on an individual basis for each family, with consideration given to the family's privacy and dignity.

There are clear house expectations and rules. Staff ensure that families show

consideration for one another while living in the house. Difficult dynamics are addressed quickly. This contributes to a peaceful and relaxed environment in which families feel equally safe and valued.

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

The centre has been open for 11 months. It is managed by a registered manager and a centre manager who have a proven positive history of managing residential childcare settings. The registered manager is an experienced qualified social worker and was registered by Ofsted in February 2018.

The feedback from staff is positive. While the team is new and inexperienced, the staff possess genuine enthusiasm and energy for their roles. The staff receive supervision, but this lacks regularity, particularly when practice concerns have been raised. This lack of supervision and guidance means that there is a failure to fully support staff who are new to the role.

The centre manager and the registered manager are qualified and experienced in providing residential childcare and assessment. However, the staff team is inexperienced and unqualified. Therefore, the staff who are supporting parents with observations and support sessions are new to parenting assessment work. Most of the staff have started working towards a level 3 qualification. However, there are staff who lack the skill and competence to balance unobtrusive support with safe supervision levels.

There are staff who regularly smoke outside with parents. This does not provide healthy role models and falls below the managers' expectations of the staff. A policy was devised during the inspection that clearly set out staff conduct requirements and staff breaks.

Managers have written a business development plan. This realistically details several shortfalls and how the managers will address areas that do not meet the required standards. There is a committed drive to improve practice and embed systems that will support improvement.

Professionals reported that communication from the family centre is good. The staff always keep professionals aware of changes and incidents. There were several compliments from professionals and families about the centre.

The manager ensures that complaints are resolved, and that acknowledgement letters are sent within five days. Complaints are investigated and outcomes shared with the complainants.

The external monthly monitoring reports are detailed and thorough. The visits have been instrumental in helping the manager to develop new systems and devise record

templates in order to monitor practice.

Information about this inspection

Inspectors have looked closely at the experiences and progress of children and parents. Inspectors considered the quality of work and the differences made to the lives of children and parents. They watched how professional staff work with children and parents and each other and discussed the effectiveness of help and care provided. Wherever possible, they talked to children and parents. In addition, the inspectors have tried to understand what the residential family centre knows about how well it is performing, how well it is doing and what difference it is making for the children and parents 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 Residential Family Centre Regulations 2002 and the national minimum standards.

Residential family centre details

Unique reference number: 1258033

Registered provider: Savannah Lodge Limited

Registered provider address: 8 Ranworth Avenue, Hoddesdon, Essex EN11 9NR

Responsible individual: Lina Chirandura

Registered manager: Talent Chirandure

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Inspector

Ms Keating: social care inspector



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