

# SC060327

Registered provider: The Chiltern Centre for Disabled Children Limited

Full inspection

Inspected under the social care common inspection framework

#### Information about this children's home

The service provides short breaks for up to five young people who have learning difficulties and/or sensory impairment and/or physical disabilities. A registered charity provides this service.

The manager was registered with Ofsted on 28 January 2014.

**Inspection dates:** 7 to 8 January 2019

Overall experiences and progress of

children and young people, taking into

account

How well children and young people are

helped and protected

inadequate

inadequate

The effectiveness of leaders and managers inadequate

There are serious and/or widespread failures that mean children and young people are not protected or their welfare is not promoted or safeguarded.

**Date of last inspection:** 19 March 2018

Overall judgement at last inspection: Sustained effectiveness

**Enforcement action since last inspection:** none

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## **Recent inspection history**

Inspection date	Inspection type	Inspection judgement
19/03/2018	Interim	Sustained effectiveness
16/05/2017	Full	Good
03/01/2017	Interim	Improved effectiveness
26/07/2016	Full	Requires improvement



## 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
The protection of children standard is that children are protected from harm and enabled to keep themselves safe.  In particular, the standard in paragraph (1) requires the registered person to ensure—	14/02/2019
that staff—	
assess whether each child is at risk of harm, taking into account information in the child's relevant plans, and, if necessary, make arrangements to reduce the risk of any harm to the child; have the skills to identify and act upon signs that a child is at risk of harm;	
understand the roles and responsibilities in relation to protecting children that are assigned to them by the registered person; take effective action whenever there is a serious concern about a	
child's welfare; and are familiar with, and act in accordance with, the home's child protection policies;	
that the home's day-to-day care is arranged and delivered so as to keep each child safe and to protect each child effectively from harm; that the effectiveness of the home's child protection policies is monitored regularly. (Regulation 12(1)(2)(a)(i)(iii)(v)(vi)(vii)(b)(e)) *the compliance notice relates to Regulation 12 (1)(2)(a)(i)(b) only.	
The leadership and management standard In particular, the standard in paragraph (1) requires the registered person to—	14/02/2019
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;	
demonstrate that practice in the home is informed and improved by taking into account and acting on—	
research and developments in relation to the ways in which the needs of children are best met; and	
feedback on the experiences of children, including complaints received; and	
use monitoring and review systems to make continuous improvements in the quality of care provided in the home.	

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*(Regulation 13 (2)(f)(g)(i)(ii)(h))	
Statement of purpose 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. Subject to paragraph (6), the registered person must ensure that the home is at all times conducted in a manner which is consistent with its statement of purpose. Nothing in paragraph (5) or regulation 46 (review of premises) requires or authorises the registered person to contravene or not comply with— any other provision of these Regulations; or any conditions in relation to the registration of the registered person under Part 2 of the Care Standards Act 2000. (Regulation 16(3)(a)(b)(5)(6)(a)(b))	14/02/2019
Fire precautions After consultation with the fire and rescue authority, the registered person must— take adequate precautions against the risk of fire, including the provision of suitable fire equipment in the children's home.  *(Regulation 25(1)(a))	23/01/2019
Fitness of manager A person may only manage a children's home if— the person is of integrity and good character; having regard to the size of the home, its statement of purpose, and the number and needs (including any needs arising from any disability) of the children— the person has the appropriate experience, qualification and skills to manage the home effectively and lead the care of children. (Regulation 28(1)(a)(b)(i))	14/02/2019
Fitness of workers For the purposes of paragraph (3)(b), an individual who works in the home in a care role has the appropriate qualification if, by the relevant date, the individual has attained—the Level 3 Diploma for Residential Childcare (England) ('the Level 3 Diploma'); or a qualification which the registered person considers to be equivalent to the Level 3 Diploma. The relevant date is—in the case of an individual who starts working in a care role in a home after 1st April 2014, the date which falls 2 years after the date	14/02/2019



on which the individual started working in a care role in a home; or in the case of an individual who was working in a care role in a home on 1st April 2014, 1st April 2016.  The registered person may defer the relevant date if the individual—does not work, or has not worked, in a care role in a home for a prolonged period; or works, or has worked, in a care role in a home on a part-time basis. (Regulation 32(4)(a)(b)(5)(a)(b)(6)(a)(b))	
Complaints and representations Subject to paragraph (6), the registered person must establish a procedure for considering complaints made by or on behalf of children.  The registered person must ensure that a record is made of any complaint, the action taken in response, and the outcome of any investigation.  The registered person must supply to HMCI, at HMCI's request, a statement containing a summary of any complaints made during the preceding twelve months and the action that was taken in response to each complaint. (Regulation 39(1)(3)(5))	14/02/2019
Notification of a serious event The registered person must notify HMCI and each other relevant person without delay if— a child protection enquiry involving a child— is instigated; or concludes (in which case, the notification must include the outcome of the child protection enquiry); or there is any other incident relating to a child which the registered person considers to be serious. A notification made under this regulation— must include details of— the matter; the other persons, bodies or organisations (if any) who or which have been notified; and any actions taken by the registered person as a result of the matter; must be made or confirmed in writing. (Regulation 40(4)(d)(i)(ii)(e)(d)(a)(i)(iii)(iii))	14/02/2019

<sup>\*</sup> These requirements are subject to a compliance notice.



## **Inspection judgements**

#### Overall experiences and progress of children and young people: inadequate

There are serious and widespread failures that mean that young people's welfare is not promoted and, due to the significant concerns about how children and young people are helped and protected, this has had an impact on the overall judgement.

Staff provide young people with individualised, personalised care and support. Staff are caring and treat young people with respect and dignity. They follow detailed health plans, which inform staff about young people's dietary, medical, physical and personal care needs. Plans are informative and provide practical information and advice to guide staff. Some young people have targets and areas to develop. However, it is not clear when the home and others collectively review plans to ascertain whether they meet need.

Staff provide young people with a varied programme of activities and experiences that they may not normally access. Staff provide meaningful activities in and out of the home. These include art and craft, bowling, visits from entertainers and trips into the community.

Young people use a variety of communication systems. Staff have good knowledge and understanding of each young person's communication needs. Staff encourage and support young people to make basic choices about their day-to-day care, for example choosing food and drink. Staff monitor a young person's emotional state to assist them in understanding whether a young person is happy or sad. Young people's views are not evident in all areas of the home and they are not routinely consulted about developments and improvements made to the home.

#### How well children and young people are helped and protected: inadequate

Serious failings have been identified in the home's systems and processes for reporting, referring and recording safeguarding concerns. Staff make managers aware of concerns, but not all of these have been referred to others as required. This has occurred on more than one occasion over a period of time. Leaders and managers did not follow the home's policy and procedure or apply professional curiosity regarding the concerns. They did not ensure that a young person's welfare was safeguarded. The records in the home do not provide a clear and concise evidence trail from instigation to outcome. They lack detail about actions and would not withstand challenge or scrutiny.

Leaders and managers have referred allegations to others as required, although this was not completed within the required timescale. Records lack clarity and detail and do not have a clear chronology of events and actions. This hinders the manager's ability to effectively review and evaluate responses and identify whether any lessons need to be learned.



Matters of a serious nature have not been referred to HMCI, and those that have were not referred within the required timescale.

Staff complete risk assessments, but they are inconsistent in their quality and do not consider all known risks. Staff use restrictions in the home environment, but they do not explore the measure, whether it is needed or its impact on individual young people. One young person had four risk assessments, but two of these were not specific to her and staff had not explored her individual needs and risks.

Managers in the home have completed a fire risk assessment, but it is weak and does not explore all risks or their severity. Staff have not been suitably trained or equipped to complete this assessment. All staff complete fire awareness training, and each young person has a personalised emergency evacuation plan.

The presentation of the home is variable. Bathing areas are awaiting refurbishment and are not all accessible. Young people currently share one bathroom, but there are additional toilet facilities if needed.

Staff are trained in the home's preferred method of behaviour management. They try to use de-escalation strategies rather than physical intervention to manage behaviour. Physical intervention has been used on occasions since the last inspection. This was to de-escalate a situation, and the restraint was applied for a short period of time. Records provide information about the incident, type of hold used and for how long and by whom. This has been an area of practice that has improved since the last inspection. However, staff have not yet explored and developed ways to support those young people who are non-verbal to be able to voice their views about the use of the physical intervention.

Staff follow and adhere to effective safer recruitment processes.

#### The effectiveness of leaders and managers: inadequate

Leaders and managers have not been effective in identifying areas of weakness in the home. They do not have clear systems in place to assist them in reviewing, monitoring and evaluating the quality of care provided by the home. Due to this, the home's development plan is weak. It does not explore all the weaknesses that are present. It does not state what is required to improve weaknesses or detail by when this needs to be completed.

The home's complaints policy is detailed in the 'Young persons' guide', but managers and staff have not evaluated or reviewed whether this is understood and accessible to all young people. The 'Young persons' guide' and the complaints policy are only available in a written format.

The home is providing a service to many more adults than children. The manager has not clearly identified how he will manage and address this to ensure that the home is wholly or mainly a children's home. The monitoring and review processes applied to the home are not sufficiently robust to ensure that the service provided is in line with the home's registration. The statement of purpose also states that the home provides care to people from the age of



six to 25 and that the home accepts referrals from adults.

Staff access regular, effective supervision and their practice is appraised annually, but records of appraisals are not as detailed and thorough as supervision records.

Managers' and staff's knowledge regarding safeguarding practice is variable. It is not supported by the home's safeguarding policy, which is not explicit about required actions or the roles and responsibilities of staff when a concern is identified. Leaders and managers do not routinely test, explore or assess staff knowledge and understanding of safeguarding practice. Staff access a wide variety of training pertinent to their roles. Staff are enrolled on the required qualification, but some staff have not achieved this within the set timeframe.

## 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:** SC060327

**Provision sub-type:** Children's home

Registered provider: The Chiltern Centre for Disabled Children Limited

Registered provider address: Chiltern Centre, Greys Road, Henley-on-Thames,

Oxfordshire RG9 1QR

Responsible individual: Paul Barrett

Registered manager: Keith Manning

## **Inspectors**

Amanda Maxwell, social care inspector Pete Hylton, regional inspection manager



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