

1156098

Registered provider: Cambian Childcare Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

The children's home is one of a number of homes operated by a large private company. It is registered to provide care and accommodation for up to three children who may have emotional and/or behavioural difficulties.

The registered manager has been in post since 13 December 2015.

Young people spoke to the inspector throughout the inspection.

Inspection dates: 9 to 10 April 2019 Overall experiences and progress of children and young people, taking into

requires improvement to be good

account

How well children and young people are

helped and protected

requires improvement to be good

The effectiveness of leaders and managers

requires improvement to be good

The children's home is not yet delivering good help and care for children and young people. However, there are no serious or widespread failures that result in their welfare not being safeguarded or promoted.

Date of last inspection: 26 September 2018

Overall judgement at last inspection: good

Enforcement action since last inspection: none

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Recent inspection history

Inspection date	Inspection type	Inspection judgement
26/09/2018	Full	Good
24/07/2017	Full	Good
06/03/2017	Interim	Sustained effectiveness
28/11/2016	Full	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
The leadership and management standard is that the registered person enables, inspires and leads a culture in relation to the children's home that—	22/05/2019
helps children aspire to fulfil their potential; and	
promotes their welfare.	
In particular, the standard in paragraph (1) requires the registered person to—	
ensure that staff have the experience, qualifications and skills to meet the needs of each child;	
use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13 (1)(a)(b)(2)(c)(h))	
The registered person must—	22/05/2019
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. (Regulation 16 (3)(a)(b)(5))	
The registered person must ensure that all employees receive practice-related supervision by a person with appropriate experience. (Regulation 33 (4)(b))	22/05/2019
The registered person must ensure that 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—	22/05/2019

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the name of the child;	
details of the child's behaviour leading to the use of the measure;	
the date, time and location of the use of the measure;	
a description of the measure and its duration;	
details of any methods used or steps taken to avoid the need to use the measure;	
the name of the person who used the measure ('the user'), and of any other person present when the measure was used;	
the effectiveness and any consequences of the use of the measure; and	
a description of any injury to the child or any other person, and any medical treatment administered, as a result of the measure;	
within 48 hours of the use of the measure, the registered person, or a person who is authorised by the registered person to do so ('the authorised person')—	
has spoken to the user about the measure; and	
has signed the record to confirm it is accurate; and	
within 5 days of the use of the measure, the registered person or the authorised person adds to the record confirmation that they have spoken to the child about the measure. (Regulation 35 (3)(a)(i)(ii)(iii)(iv)(v)(vi)(vii)(viii)(b)(i)(ii)(c)(iv))	
The registered person must maintain records ('case records') for each child which are kept up to date; and are signed and dated by the author of each entry. (Regulation 36 (1)(b)(c))	22/05/2019
Schedule 4 sets out the other information that the registered person must keep in relation to a children's home.	22/05/2019
The registered person must maintain in the home the records in Schedule 4. (Regulation 37 (2)(a)). With specific reference to the rota, this needs to include the hours of all staff including the registered	
manager. The registered person must complete a review of the quality of	22/05/2019

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care provided for children ('a quality of care review') at least once every 6 months. The registered person must—	
supply to HMCI a copy of the quality of care review report within 28 days of the date on which the quality of care review is completed.	
(Regulation 45 (1)(4)(a))	

Recommendations

■ Staff should be familiar with the home's policies on record keeping and understand the importance of careful, objective, and clear recording. Staff should record information on individual children in a non-stigmatising way that distinguishes between fact, opinion and third-party information. 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)

Inspection judgements

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

Since the last inspection the home has been unsettled. One young person who had lived at the home for several months had to move out of the home. This was due to a significant increase in his risk-taking behaviours, both in the home and local community. Staff were unable to keep him safe despite their best attempts.

The two young people who have moved into the home both engage in risk-taking behaviour, in the home and local community. This has resulted in police involvement and criminal proceedings. While these admissions were planned, there was incomplete referral information received for one young person. This hindered the matching process and the staff's abilities to keep young people safe.

One young person is making progress living at the home and has established positive relationships with staff. He is supported to take part in a wide range of activities and told inspectors that he gave the home 'nine out of 10 and was happy living in the home'.

Educational outcomes for young people are varied. One young person is making progress in his education. His attendance is excellent, and he was keen to tell the inspector all about learning to care for animals as part of his studies. The other young people living in the home have access to reduced timetables. Staff encourage and support these young people to attend their education settings, but their attendance can be sporadic. This has had an impact on their educational progress.

Young people are supported to address their health needs and are registered with all



local health services. However, one young person had suffered a significant injury that required hospital treatment. Despite the need to attend the hospital for follow-up appointments, the young person refused. The staff tried to encourage the young person to attend his appointments, but these efforts have been unsuccessful.

Young people are encouraged and supported to take part in a variety of activities. The young people have memory books containing photographs of the activities they have enjoyed.

Staff support the young people to spend quality time with their family members. The staff understand the importance of helping the young people to maintain these significant relationships.

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

Not all risk assessments identify the young people's known risks or include written guidance for staff to follow to reduce any known risks. There was a missed opportunity for staff to learn from an incident where two young people climbed out of one of their bedroom windows and left the home. This incident was then repeated with another young person. Furthermore, information in assessments does not consistently match the information recorded in individual behaviour management plans. This does not demonstrate that all staff have up-to-date, factually correct information.

Staff take action to safeguard young people when they go missing. Staff respond quickly and work collaboratively with local authorities and police. Despite the efforts of staff, missing episodes have increased for one young person since moving into the home.

Staff respond appropriately, to incidents of substance misuse and knife crime within the home and local community. However, risks for young people have increased. Staff undertake follow-up sessions with the young people on these issues. However, the records of these sessions are undated and unsigned. This means that it is unclear whether all incidents are followed up and/or discussed individually to consistently attempt to minimise the known risk factors.

During the inspection, gaps were noted in record-keeping. In the recording of incidents, on one occasion the manager has used judgemental and opinionated language. Staff talked to the inspector about the direct work that they had undertaken with the young people to minimise risk. However, records were not available to demonstrate this work. This is a missed opportunity for staff to demonstrate the support that they consistently provide to young people to keep them safe.

Sanctions are poorly recorded and, in most cases, relate to restrictions upon money or food. The sanctions have been implemented by the registered manager, with no oversight from a senior manager. This lack of evaluation hinders the monitoring of the effectiveness of the sanction.



The registered manager had failed to ensure that all physical interventions are recorded and reported appropriately. Furthermore, the registered manager has reviewed incidents she had been involved in, with no independent scrutiny of the events. This does not ensure that young people have been appropriately managed.

Staff purchased an e-cigarette and the vapour liquid for a young person, despite them being underage. Staff were also observed during the inspection providing a cigarette lighter to a young person. This was reported by the provider to be against the company's own policies and procedures.

All staff are suitably checked and vetted prior to appointment. This helps to prevent the appointment of adults that may pose a risk to young people's safety.

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

The manager is experienced and is working towards her NVQ level 5 qualification. She is supported by an experienced and conscientious deputy. There is a permanent staff team in place, with one vacancy for a team leader. The staff team members are suitably qualified or are working towards the NVQ level 3 qualification.

The manager has ensured that multi-agency meetings have taken place when risks have escalated for the young people living in the home. One social worker noted that communication with the manager and the home is generally good. However, she also advised that the young person's missing episodes have significantly increased since they moved into the home.

Staff report satisfaction in the level of support that they receive in the home from the management team. Despite this, there are gaps noted in the supervision frequency for staff. This limits staff learning and progress. This was a requirement at the last inspection and is repeated.

Staff have completed the provider's mandatory training programme, but not all have been trained in specific issues relating to the young people living in the home. There are identified gaps in training in epilepsy, substance misuse and sexually harmful behaviour. The deputy manager has taken action to request this training for all staff. A requirement has been made to address this shortfall and this is a repeat requirement from the last inspection.

Managers have ensured that rosters state the members of staff who are working in the home. However, the registered manager herself is not included on the roster. This is not safe practice for young people or staff as there is no clear record of who was working with the young people at certain times. A repeat requirement has been made to address this.

The home is not operating within the statement of purpose, as it states that there will be a senior member of staff on each shift. This was not the case during the inspection and staff confirmed this had occurred on other occasions. Furthermore, the statement of



purpose does not accurately state the various bank staff who are working in the home.

At the time of the inspection, the manager had not provided a review of the quality of care to Ofsted as required by regulation. There have been several requirements repeated at this inspection, despite the registered manager providing an action plan that indicated that all previous requirements had been addressed. This fails to demonstrate that the registered manager has a clear overview of the home and an understanding of her roles and responsibilities.

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: 1156098

Provision sub-type: children's home

Registered provider: Cambian Childcare Limited

Registered provider address: 4th Floor, Waterfront Manbre Wharf, Manbre Road,

Hammersmith, London, Middlesex W6 9RH

Responsible individual: Beverley Woods

Registered manager: Rachel Grima

Inspector

Jenny Brady, social care inspector



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