

# 1183479

Registered provider: Slough Children's Services Trust Limited

Full inspection

Inspected under the social care common inspection framework

#### Information about this children's home

This service primarily offers residential short breaks for children who have learning and/or physical disabilities. In exceptional circumstances, the home may provide known children with an extended or full-time care package. The home is registered to provide care and accommodation for up to six children.

The manager registered with Ofsted in December 2018.

Inspection dates: 21 to 22 May 2019

Overall experiences and progress of good

children and young people, taking into

account

How well children and young people are good

helped and protected

The effectiveness of leaders and managers good

The children's home provides effective services that meet the requirements for good.

**Date of last inspection:** 5 February 2019

**Overall judgement at last inspection:** declined in effectiveness

#### **Enforcement action since last inspection:**

Following the interim inspection of 5 February 2019, a compliance notice (regulation 25) was issued with a due date of 24 February 2019.

A monitoring visit was conducted on 25 February 2019 and the compliance notice in terms of regulation 25 was deemed to have been met.

Inspection report children's home: 1183479

1



# **Recent inspection history**

Inspection date	Inspection type	Inspection judgement
05/02/2019	Interim	Declined in effectiveness
23/05/2018	Full	Requires improvement to be good
22/08/2017	Full	Good
09/08/2016	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
In order to meet the quality and purpose of care standard the registered person is required to:	22/07/2019
ensure that staff provide personalised care that meets each child's needs, as recorded in the child's relevant plans, taking account of the child's background. (Regulation 6 (2)(b)(iv))	
This specifically refers to ensuring that staff consider a child's gender, religion, ethnicity, culture, language, sexual identity, mental health, known disability, assessed needs and previous experiences.	
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—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 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.	30/06/2019
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.	
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 $35 (3)(a)(b)(c)$ )	

Inspection report children's home: 1183479



In particular, ensure that records of sanctions comply with this regulation and that monitoring of records identifies where they need to improve.	
In order to complete a quality of care review, the registered person must establish and maintain a system for monitoring, reviewing and evaluating the feedback and opinions of children about the children's home, its facilities and the quality of care they receive in it; and any actions that the registered person considers necessary in order to improve or maintain the quality of care provided for children. The system must provide for ascertaining and considering the opinions of children, their parents, placing authorities and staff. (Regulation 45 (2)(a)(b)(c)(5))	31/07/2019

#### 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. ('Guide to the children's homes regulations including the quality standards', page 15, paragraph 3.9)
- 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, where risks are inherent to an activity, such as accessing the internet, or there are significant concerns due to circumstances, such as child criminal exploitation, staff should record current control measures even if these are considered to reduce risks to a very low level. In addition, staff should be clear about which risks are assessed to be current and those that are historical.

■ 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)

In particular, ensure that each key-work session is recorded, including details of who was present, the agenda or purpose of the session, the content and any outcomes.



## **Inspection judgements**

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

Staff are attentive to the needs of children while assisting them to participate in activities and to enjoy meal times. As part of the daily routine, they follow through targets set for children to increase eating skills and make choices.

Staff provide a wide range of activities, some following children's individual preferences but some expanding their experiences, such as going to a variety of different parks and arranging a cookery course for one young person who likes to help cook. Staff have sought and followed up children's suggestions for things they would like to do, which has increased children's sense of choice and their ability to affect their own experiences. There are opportunities for the children to interact with other children outside the home, at local clubs, community facilities and in parks. In some cases, staff reallocate days for children's stays so as to ensure better matching of children and improved relationships between them.

A staff member has devised charts that record progress towards targets and a communication tool that shows children how staff think they are doing, which reinforces children's perception of how their skills are developing. Managers and staff monitor progress regularly and celebrate with children the achievement of targets and other successes, which have in some cases been considerable. Families and professionals report several areas in which children make progress. These include communication, sleeping patterns, understanding consequences, reduction of self-harm, and understanding the sequence of events, such as at meal times, so a child can be proactive and not wait for adults to do things for them.

Children's feedback and observations made by parents and professionals show that children enjoy and benefit from short stays or living in the home. One professional said that a young person's 'behaviours have gone to zero, due to lots of work on daily routines and informing him of changes in advance', and another that a child had obvious 'pride in the home'.

The work that staff do is helping children become healthier by, for example, reducing weight, and developing a sense of self-worth through the experience of positive, individual care.

Staff make efforts to promote equality and diversity through, for example, setting up displays on religious festivals, providing diets that meet religious requirements and replicating dishes made in family homes using ingredients brought in by parents. However, staff do not adequately reflect this in placement plans or other records, and leaders have not ensured that the service strives for an individual approach to promoting children's heritage, especially for those who have extended stays or are permanently placed.

Managers have planned a major refurbishment of the premises later in the year but, in



the meantime, they have not given attention to those areas of fabric and furniture that have become worn and fallen into disrepair, particularly in bedrooms. This detracts from the homely environment the team strives to provide.

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

Staff keep children safe through a combination of appropriate levels of supervision and careful planning. Positive handling plans give helpful directions to avoid problems arising. For example, the plans include information on how to structure the environment to be conducive for individual children.

Individual assessments generally describe risks and control measures well. However, staff do not distinguish between current and historical risks, some of which are highly unlikely to need some of the controls. For example, an assessment for one young person includes the instruction to 'call police if behaviour is unmanageable for an extensive period of time', when the firmest intervention needed is physical guidance away from a situation. Staff might therefore anticipate a higher degree of challenging behaviour than they are likely to encounter. Risk assessments do not routinely address child sexual or criminal exploitation, or online safety for children who have access to the internet. However, staff do supervise use of the latter and use key-work sessions to inform children of potential dangers.

Staff have been very effective in helping children become both progressively safer and more independent. For example, one young person no longer approaches strangers while out in the community and so has a reduced level of staff supervision, but has also increased his use of facilities such as banks and shops.

Staff have made pertinent observations about, and promptly reported issues regarding, the care of children, which have been instrumental in instigating or informing care and child protection plans. The staff play an effective role in the multi-disciplinary approach to making children safer.

Managers pay exemplary attention to the safe administration of medication. As a result, staff have identified discrepancies between prescriptions and information on medicine bottles and have initiated improved procedures for the handover of medication from schools. This has reduced the potential for mistakes to occur. The team leader with responsibility for this area conducts six-monthly testing of staff members' ability, which means that competency is maintained at a high level.

Staff act as very effective advocates for children, including those who are non-verbal. They understand how children communicate feelings through behaviour and so, on occasion, interpret distressed behaviour following an incident as a complaint. Staff record and respond to these in the same way as other complaints, and the manager acts to resolve them. This allows children whose disability does not allow them to communicate as others might to have their views 'heard' and improve their experiences.

Clinical staff have helped managers and staff of the service to sensitively and successfully address inappropriate touching of adults by some children. A process of



directing children to suitable alternatives for showing affection has resulted in no further concerning incidents for several months for one young person.

Managers have arranged for the health and safety of the service to be strengthened by regular visits from the person in the trust who has overall responsibility for this area. This will complement the assessment and auditing regime already in place.

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

Children's experience of short breaks is positive and helps them to make progress. The manager and staff are in frequent communication with families and professionals to achieve this. Liaison with schools is particularly effective due to arrangements that ensure that workers promptly share information with counterparts who can act on it. Collaboration on approaches to such matters as behaviour and promoting self-care ensures consistency across both settings.

There has been a focus on enhancing children's sensory experiences through the purchase of equipment and toys, and the launching of a 'homework club' (while it was running). Managers have incorporated the pursuit of sensory experiences into plans for a complete refurbishment of the premises. These plans are well advanced, although it is still to be decided where the service will be situated while the refurbishment takes place. The manager and staff have informed children about the plans, and children have contributed their own suggestions for colour schemes and what they would like to see in the garden and play areas.

The manager provides a supportive environment for staff, achieved through formal individual supervision with a line manager and group sessions led by clinical staff from the trust. There is continuous dialogue about children and the service provided. Staff report that managers always make themselves available. The statement of purpose was ambiguous about how frequently individual supervision should take place, but it occurs four-weekly or six-weekly. The statement was redrafted during the inspection to be clearer.

Managers address competency issues well when required, and staff say that they are helped to reflect on practice. However, supervision records do not always evidence the latter.

Children's files are well structured, and information is accessible either in hard copy or electronic format. The quality of recording, however, varies widely. This is especially true of key-work sessions and sanctions logs. Managers monitor restraint logs but do not always record their findings. This means that children's records do not universally reflect their views and the work being undertaken with them, or show that practice is regularly and formally considered.

The manager and staff frequently consider children's views, acting on them whenever possible. This includes responding to a request to play table tennis, which several children now enjoy at a club. This is one of several activities taking place in the wider community, and involved liaison with the owners to ensure that it was a successful



experience for all.

The review of care under regulation 45 refers to the different means of consultation with children, but the manager does not report on how the service has followed them through, despite there being several examples to draw on. Future actions are not clearly identified, but the manager does have ambitions and plans to improve the service.

## 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:** 1183479

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

Registered provider: Slough Children's Services Trust Limited

Registered provider address: Ground Floor West, St Martin's Place, 51 Bath Road,

Slough, Buckinghamshire SL1 3UF

Responsible individual: Jackie Pape

Registered manager: Samuel Tumba

# **Inspector**

Chris Peel, social care inspector

Inspection report children's home: 1183479

9



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