

# 1258343

Registered provider: New Forest Care Ltd

Full inspection

Inspected under the social care common inspection framework

#### Information about this children's home

- This privately operated children's home is one of a group of homes and educational premises located in the south of England.
- The home provides short-term care and accommodation for up to four children.
- The home specialises in short-term 90-day emergency placements for children who have complex emotional and behavioural difficulties.
- Children experience a variety of other accommodation including tents, lodges, caravans and activity centres whilst accessing a wide range of outward bound activities.
- The manager is qualified and was registered in September 2017.

**Inspection dates:** 2 - 3 July 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 are not protected or their welfare is not promoted or safeguarded and the care and experiences of children are poor and they are not making progress.

**Date of last inspection:** 4 February 2019

**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
04/02/2019	Interim	Sustained effectiveness
02/10/2018	Full	Good
12/02/2018	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
The quality and purpose of care standard	31/08/2019
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. In particular, the standard in paragraph (1) requires the registered person to understand and apply the home's statement of purpose; ensure that staff—	
(i) understand and apply the home's statement of purpose; (ii) protect and promote each child's welfare; (iii) treat each child with dignity and respect; (iv) provide personalised care that meets each child's needs, as recorded in the child's relevant plans, taking account of the child's background; (v) help each child to understand and manage the impact of any experience of abuse or neglect; (vi) help each child to develop resilience and skills that prepare the child to return home, to live in a new placement or to live independently as an adult; and (ix) make decisions about the day-to-day arrangements for each child, in accordance with the child's relevant plans, which give the child an appropriate degree of freedom and choice.	
(Regulation 6 (1)(2)(a)(b)(i)–(vi) and (ix) and 'Promoting the health and well-being of looked after children', March 2015, page 24, paragraph 86)	
This is with particular reference to ensuring that:  ■ there are clear, measurable and achievable targets to help children to achieve a greater degree of independence before they move on from the home.	

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#### The positive relationships standard

20/08/2019

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.

In particular, the standard in paragraph (1) requires the registered person to ensure that staff meet each child's behavioural and emotional needs, as set out in the child's relevant plans; help each child to develop socially aware behaviour; encourage each child to take responsibility for the child's behaviour, in accordance with the child's age and understanding; help each child to develop and practise skills to resolve conflicts positively and without harm to anyone; 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; strive to gain each child's respect and trust; understand 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; are provided with supervision and support to enable them to understand and manage their own feelings and responses to the behaviour and emotions of children, and to help children to do the same; de-escalate confrontations with or between children, or potentially violent behaviour by children; that each child is encouraged to build and maintain positive relationships with others.

(Regulation 11 (1)(2)(a)(i)–(v), (viii)–(xi) and (b))

This is with particular reference to:

- ensuring that behaviour management strategies involve only measures that are not excessive, promote the children's dignity and welfare and which are compatible with the home's therapeutic ethos;
- ensuring that staff receive regular, qualified clinical supervision to improve their understanding and practice in relation to children's complex needs.

### The protection of children standard

20/08/2019

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 that staff—

understand the roles and responsibilities in relation to protecting



children that are assigned to them by the registered person;	
are familiar with, and act in accordance with, the home's child protection policies.	
(Regulation 12 (1)(2)(a)(v) and (vii) and 'Working Together to Safeguard Children', 2018, page 67, paragraph 45)	
In particular, ensure that the home works with its local safeguarding partners to agree how they will work together, and with the placing authority, to make sure that the needs of the individual children are met. This specifically refers to consulting safeguarding partners before taking action in relation to a child protection matter.	
*Restraint	20/08/2019
Restraint in relation to a child must be necessary and proportionate. (Regulation 20 (2))	

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

#### Recommendations

- Ensure that there is a diverse staff team with a range of interests, skills and experiences and that whenever possible, staff in day to day contact with children include staff from the different gender groups. ('Guide to the children's homes regulations including the quality standards', pages 52 and 54, paragraphs 10.6 and 10.22)
- Any individual appointed to carry out visits to the home as an independent person must make a rigorous and impartial assessment of the home's arrangements for safeguarding and promoting the welfare of the children in the home's care. ('Guide to the children's homes regulations including the quality standards', page 65, paragraph 15.5). In particular, ensure that reports made under regulation 44 are sent to Ofsted in a timely manner.

# **Inspection judgements**

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

Staff do not always find the least restrictive ways to keep children safe, considering their physical needs and traumatic histories. Restraint is used in this home. This includes the use of high-level restraints; prone and supine holds where children are held on the ground, at times by up to four staff members. In the eight-month period since the last full inspection, 117 restraints have been used on six children. During one child's three-month stay in the home, he was restrained 81 times. Restraint is permissible, and staff say that they have used these interventions to keep children safe. Nevertheless, physical



restraint can be a distressing experience and its regular use is incompatible with the home's stated ethos of therapeutic parenting. Leaders and managers have failed to identify less restrictive and more creative ways to respond to challenging behaviour.

The staff team does not give sufficient consideration to children's emotional needs and well-being. On occasions, children are restrained when they experience highly distressing life events, for example following attendance at a funeral or after a court hearing when the child was distressed after being subjected to a full care order. The behaviour exhibited by children seldom justifies the type of physical intervention that is used by the team.

Children are subjected to restrictions, which do not enable them to progress and develop. Restrictive measures such as no free time, no mobile phones, no internet access and no money in-hand are in place for the current children from the time that they move in. No progress is made in reducing these restrictions by the time they are due to move on from the home.

One child's educational outcomes have declined because they have refused to attend school on most days in recent weeks. Prior to that, they were attending the company's own school and their educational outcomes were better than they are now. The child now spends his days at home and is supervised by two staff. The staff team is negotiating with the child to encourage his return to school.

Other children have an activity-based educational programme that includes a wide range of activities such as gardening, art, animal care and forest school. Although the activities are highly beneficial, they do not replace education.

Staff have worked hard to re-establish family contact between a child and his loved one. This has made a major difference to the quality of this child's life.

The home's activity programme is good. Children have access to the company's school. The school and activity farm work with the home to coordinate a wide range of exciting and unusual activities, such as white-water rafting, rifle shooting, canoeing and axe throwing. One child in this home goes horse riding regularly and another was on an activity weekend in Wales during part of the inspection.

Although there are some positive outcomes in some areas, such as the children's activities, these do not override the poor outcomes for children in terms of behaviour management and the other shortfalls found during this inspection.

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

Children's behaviour is not always well managed. At times, situations escalate quickly, and result in restraint. These restraints include the frequent use of prone and supine holds which cause too many injuries to children. One 12-year-old past resident was held on the ground 37 times in three months. During one incident, the child was held in a number of restraints for 55 minutes. Records confirm documented injuries to the child. A



14-year-old current resident has been held exclusively on the ground 12 times over a 56-day period. Insufficient work has been undertaken to find child-centered solutions and to work in ways that minimise conflict and reduces the use of restraint.

Leaders and managers do not always respond to safeguarding matters effectively. For example, on one occasion, staff and the manager failed to follow the home's child protection procedures and the statutory guidance 'Working Together to Safeguard Children'. Staff showed a lack of professional curiosity and arranged to have video evidence deleted without first consulting with the police. The child involved was interviewed by staff without the social worker or the police's permission. These serious omissions mean that potential safeguarding concerns have been overlooked.

The staff team is not currently diverse as the majority of the staff members are male. The male-dominated team does not provide a healthy balance of male and female workers to create a diverse, nurturing environment for the children and positive role modelling.

The home uses a recognised behaviour management technique and every restraint is evaluated and monitored. However, there is insufficient objectivity or scrutiny about the impact of restraint on children to identify ways to reduce and seek to avoid the use of restraint.

Currently, only senior staff receive regular clinical supervision. Staff members can access the drop-in service. However, not routinely providing the same regular provision to the whole staff team limits the opportunity to help them to discuss their work with children and consider more creative strategies to reduce the use of restrictive practices.

Staff recruitment is generally well managed. Staff have enhanced Disclosure and Barring Service certificates, identity checks, verified references and a full employment history. Practice could be further enhanced by recording the outcome of the conversation with referees when references are verified.

### The effectiveness of leaders and managers: inadequate

Monitoring of the home is ineffective and fails to help the leadership team to find creative ways to improve practice and the quality of care that children receive. Neither leaders, managers or the independent visitor have identified or challenged the serious weaknesses found at this inspection in relation to behaviour management, restraint and the management of a child protection concern.

Leaders and managers have not demonstrated enough aspiration for children. In order to help children to achieve greater independence and prepare them for moving on, there should be clear, specific, measurable and achievable targets in their care plans, but none were evident.

Although some children do make progress in certain areas of their lives, the lack of a phased reduction in staffing and other restrictions means that they are likely to leave the



home still very dependent on high levels of staffing and control. They may also leave the home unable to manage mobile phones, the internet and time away from adults safely. Most children in their mid-teens would have learned these skills.

The recommendation from the last inspection has been met. This concerned the quality of recommendations and actions from the independent person's monthly reports. However, these reports are not currently providing sufficient challenge to the home in relation to the practice matters identified in this inspection. In addition, copies of the reports have not been correctly forwarded to Ofsted as required. These documents were emailed during the inspection.

The home has a qualified, experienced manager and plenty of staff, who are deployed on a two-to-one basis. No agency staff are used, in order to ensure continuity of care.

Staff feel well supervised and supported. They work well together as a team and enjoy their training and development opportunities. Staff training in safeguarding and physical intervention is regularly updated. However, training has not been effective in helping staff to develop more child-centred practice. Staff receive additional training to meet individual children's needs, for example a specific health concern.

# 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:** 1258343

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

Registered provider: New Forest Care Ltd

Registered provider address: West Shore House, West Street, Hythe, Southampton

SO45 6AA

Responsible individual: Michael Ferne

Registered manager: Gary Macarthur

# **Inspectors**

Heather Chaplin, social care inspector Michelle Oxley, regulatory inspection manager



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