

SC036740

Registered provider: Nottinghamshire County Council

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This secure children's home is managed by a local authority. It is approved by the Department for Education to restrict children's liberty. The children's home can accommodate up to 20 children, who are aged between 10 and 17 years.

It provides accommodation for up to 12 children placed by the Youth Custody Service and has up to eight places for children accommodated under section 25 of the Children Act 1989.

Admission of any young person under section 25 of the Children Act 1989 who is under 13 years of age requires the approval of the Secretary of State.

The commissioning of health services in this home is the statutory responsibility of NHS England under the Health and Social Care Act 2012. Education is provided on site.

The manager has been registered with Ofsted since May 2018.

Inspection dates: 1 to 2 October 2019

Overall experiences and progress of children and young people, taking into account

requires improvement to be good

How well children and young people are helped and protected

requires improvement to be good

Health services

good

The effectiveness of leaders and managers

requires improvement to be good

Outcomes in education and related learning

not judged

activities

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: 25 June 2019

Overall judgement at last inspection: inadequate

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
25/06/2019	Full	Inadequate
11/12/2018	Interim	Sustained effectiveness
17/07/2018	Full	Good
08/03/2018	Interim	Declined in effectiveness

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
<p>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; and use this understanding to deliver care that meets children's needs and supports them to fulfil their potential.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure that staff—</p> <p>treat each child with dignity and respect. (Regulation 6 (1)(a)(b)(2)(b)(iii))</p> <p>Specifically, ensure that adequate resources are provided for children when they cannot eat their meals in the dining room.</p>	06/11/2019
<p>The protection of children standard is that children are protected from harm and enabled to keep themselves safe.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure that—</p> <p>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. (Regulation 12 (1)(2)(b))</p> <p>Specifically, ensure that any issues that emerge from the weekly health and safety check are addressed to ensure that a safe and risk-free environment is maintained.</p>	06/11/2019
<p>The registered person must maintain records ("case records") for each child which—</p> <p>include the information and documents listed in Schedule 3 in relation to each child;</p>	06/11/2019

are kept up to date; and

are signed and dated by the author of each entry. (Regulation 36 (1)(a)(b)(c))

Specifically, ensure that children's records are legible and of a good quality, and that they contain all relevant and up-to-date information, including the placing local authority plans.

Recommendations

- Immediate searching may be necessary where there are reasonable grounds for believing that there is a risk to the child's or another person's safety or well-being. ('Guide to the children's homes regulations including the quality standards', page 16, paragraph 3.20)

Specifically, ensure that suitable arrangements are made to promote the privacy and dignity of children when subjecting them to searches that require them to remove their clothes, and ensure that a record is kept of all personal searches.

- Ensure that the children's home is a nurturing and supportive environment that meet the needs of children, and is a homely, domestic environment. Children's homes must comply with relevant legislations; however, in doing so, homes should seek as far as possible to maintain a domestic rather than 'institutional' impression. ('Guide to the children's homes regulations including the quality standards', page 15, paragraph 3.9)

Specifically, staff should seek to personalise communal living spaces and allow children to freely access items such as games and books if safe to do so.

- Staff should understand what they must do to prevent bullying of children by other children or adults. ('Guide to the children's homes regulations including the quality standards', page 39, paragraph 8.16)

Specifically, staff should work with children to help them to understand the consequences of bullying behaviour with the aim of influencing change that is not solely reliant on external risk management strategies.

- The behaviour management strategy should be understood and applied at all times by staff and must be kept under review and revised where appropriate. ('Guide to the children's homes regulations including the quality standards', page 46, paragraph 9.34)

Specifically, ensure that sanctions are proportionate and fair.

- The ethos of the home should support each child to learn. ('Guide to the children's homes regulations including the quality standards', page 29, paragraph 5.18)

Specifically, leaders, managers and staff in the home should support the development of children's social and personal skills, identifying their needs and

targeting the improvement in these areas for development, ensuring that these skills are recognised as valuable outcomes by children during their time at the home.

Inspection judgements

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

Ofsted inspected the home on 25 and 26 June 2019 and judged the service to be inadequate. This was because of significant weaknesses in medication practice, risk management and security arrangements and ineffective managerial oversight. Outcomes in education and related learning activities were judged to be good and have not been inspected at this visit.

Some parts of the home do not feel homely and have an unnecessarily institutional feel. For example, communal lounges lack pictures, and children cannot freely access suitable books, toys or games without asking a member of staff.

Staff demonstrate an improved understanding of the needs, behaviours, risks and vulnerabilities of the children in their care. This is because key staff attend multi-disciplinary case management meetings and are routinely involved in reviewing each child's individual targets, risks and progress. However, there are occasions when staff show a naivety about the implementation of strategies. For example, one child is expected to eat her meals in the bedroom corridor away from the main group. The rationale for this is to manage risk. However, staff have not made suitable provision for the child who was observed having to eat her meal sitting on the floor. This does not reflect good-quality care.

The quality of children's records is variable. Some documents are detailed and informative and provide a good insight into children's needs, progress and experiences. However, other records are illegible, out of date and missing important information.

Children have a strong voice in this home. They have confidence in the home's complaints procedure. Children said that managers and staff listen to their views and take their concerns seriously.

Staff support children to reflect on their experiences and develop mutually agreed and child-friendly support plans. This helps children to better understand and address the reasons that led to them being in a secure children's home.

Staff recognise the importance of children maintaining relationships with family members and other important people. There is a good focus on ensuring that safe contact arrangements are in place for each child from the point of admission. The quality and safety of contact are discussed as part of the care planning process, and arrangements are changed when appropriate.

Plans for children moving on from the home are carefully considered with the placing local authority and professionals involved with the child. Children are supported to visit future accommodation and education placements. This promotes good transitions.

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

Children are now safer. This is because leaders and managers have been robust in their response to the issues raised at the last full inspection. Children told inspectors that they feel safe and that they can talk to staff if they have any concerns or worries.

Information relating to children's risks and vulnerabilities has been organised into one document. This document is regularly reviewed and frequently updated. However, the quality of recording is sometimes poor. Inspectors saw examples of illegible and unclear handwritten entries. In some cases, this made it difficult to see which strategies are current.

A series of checks have been introduced to ensure that a safe environment is maintained. This includes a weekly health and safety and security check by one of the senior managers. However, emerging issues are not always addressed. For example, a DVD remote control went missing in August 2019 and had not been located at the time of the inspection. Managers and staff have failed to recognise the potential risk associated with this item, especially to those children who may self-harm through ingesting batteries.

Bullying is challenged by staff. Measures of control are introduced quickly to prevent bullying continuing. However, there is sometimes an over-reliance on external measures, such as mixing bans and managing away. There is little evidence that children are encouraged to reflect on the consequences of bullying and change their behaviour without these external measures.

It is standard practice to complete a 'pat down' and 'wand' search for all children admitted to the home. Higher-level searches can be undertaken, which require children to undress and put on a dressing gown. These are intelligence led and must be authorised by a senior manager. The location in which these searches take place does not afford children enough privacy or promote their dignity. Managers recognise this and have started to improve these search arrangements.

Records of searches are maintained. However, inspectors saw several examples of staff having failed to complete these records fully. Many were missing key information such as the name of the staff member completing the search, the type of search being undertaken or whether anything was found. This does not sufficiently protect children or staff.

Several children expressed dissatisfaction with the way that sanctions are used in response to poor behaviour. This is because children are often given more than one

sanction for the same misdemeanour, for example completing a chore and dropping a level on the home's incentive scheme.

Recording shortfalls are to some extent offset by the understanding that staff have about the safety needs of the children in their care. Information pertaining to children's risks is better shared and coordinated using forums such as risk management meetings, daily handovers, team meetings and staff supervision. This means that staff know when plans change and can adapt their practice to ensure that risks such as self-harm are managed safely.

Staff practice is underpinned by a range of safeguarding policies and procedures that are understood and suitably implemented by staff. Safeguarding concerns and allegations have been managed effectively, including referral to external safeguarding agencies. Managers are now better at recognising when external agencies need to be informed and involved, which has resulted in an increased number of notifications to Ofsted. This improved working partnership ensures a multi-agency response to improving the safety of the children in the home.

Records relating to physical restraint, single separation and managing away have improved. The monitoring activity undertaken by middle and senior managers has improved and now ensures that the quality of information meets the required standard. Managers make good use of closed-circuit television to evaluate staff practice and to ensure that interventions are necessary and proportionate. Senior managers are now using this analysis to good effect to influence behaviour management practice and aid staff development.

Health services: good

At the last full inspection, medicine management was of significant concern. Leaders and managers have worked in partnership with the on-site health team to review and implement wholesale change to medication management procedures. This includes re-training all staff, using competency-based assessments, simplifying medication administration records and ensuring that shifts are planned in a way that prioritises the administration of medication. This, combined with a zero tolerance for poor practice, has reduced significantly the risk to children.

While the health and well-being team is currently carrying several vacancies, it meets the needs of children currently placed, and its work is valued by the children. Health staff are enthusiastic and dedicated to providing good outcomes for those they care for. An appropriate range of primary care services are delivered, without delay, on and off site. Consequently, young people feel well supported by health staff.

Health and well-being needs are identified promptly through the 'children's health assessment tool', which informs ongoing care. Several children who are diagnosed with attachment and developmental trauma receive very good support before they are discharged or transferred.

Most mental health interventions are provided by a psychiatrist and an operational lead who is a mental health nurse. Although there are vacancies in the mental health team, there has been no significant impact on the services available to the children.

The health team works effectively with care staff to support children. Joint work includes weekly case formulation meetings, reflective practice sessions for staff and weekly multi-disciplinary case discussions.

Two registered physical health nurses provide a good service to the children, including dealing with minor injuries. They are visible and available to staff and children. They are available each day and provide out-of-hours cover on a rota basis. This ensures that children's health needs are addressed quickly.

The recent return of the permanent speech and language therapist has added to the already significant input by this service. This means that children with speech, language and communication needs are dealt with swiftly and have regular input.

There is good, detailed case recording. Healthcare plans are tailor made and reviewed appropriately.

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

The decision to voluntarily reduce the number of children who are accommodated is enabling a period of consolidation. This provides the opportunity to start to implement a carefully considered and well-thought-out improvement plan. The improvement plan is being used as a working document and is providing a good framework from which to address the serious shortfalls identified at the previous inspection. Progress has been made overall, including suitable action taken to address the seven requirements from the last full inspection.

It is reassuring that the local authority and the home's managers are realistic about the progress that has been made so far. They recognise that there is still much more to do and that the progress made so far needs to be sustained and fully embedded into practice.

Part of this process is the restructuring of the senior leadership team, that is beginning to take a more strategic and developmental approach to running the home. For example, internal reporting mechanisms have been introduced to ensure that senior leaders are aware of and involved in decisions about serious incidents. This enables the right action to be taken to minimise risk and to ensure the safety of the children. Additionally, managers are more critical and challenging of staff practice, demonstrating less tolerance for repetitive errors.

There has been a strong focus on the recruitment of staff, and several new staff are due to start at the end of October 2019. At the time of the inspection, there was still a high number of vacancies within the care team and a few staff were absent due to disciplinary procedures. Because of the reduced numbers of children at present, the

ratio of staff to children has improved overall. This, combined with better shift management, has improved the quality of care.

A range of effective mandatory and needs-led training has been delivered and is ongoing. This includes bespoke training that focuses on key areas of practice such as medication management, the effective implementation of safety plans and child observation regimes.

The standard of internal monitoring and quality assurance has improved. A number of processes have been introduced to ensure that there is effective management oversight of the home. This increased diligence means that emerging shortfalls are now being identified and addressed.

Outcomes in education and related learning activities: not judged

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: SC036740

Provision sub-type: Secure unit

Registered provider address: Nottinghamshire County Council, County Hall,
Loughborough Road, West Bridgford, Nottingham NG2 7QP

Responsible individual: Devon Allen

Registered manager: Paul Thomas

Inspectors

Paul Scott, social care inspector

Elaine Allison, social care inspector

Andrea Crosby-Josephs, health and justice inspector, Care Quality Commission

Jo Stephenson, social care inspector

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