

# SC457423

Registered provider: MacIntyre Care

Full inspection

Inspected under the social care common inspection framework

## Information about this children's home

This home provides care for five children aged between 14 and 19 who have severe learning difficulties, social and/or communication disabilities, and children with autistic spectrum disorder.

There is an acting manager in post who is not yet registered.

**Inspection dates:** 8 to 9 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**

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 February 2019

**Overall judgement at last inspection:** good

**Enforcement action since last inspection:** none

## Recent inspection history

<b>Inspection date</b>	<b>Inspection type</b>	<b>Inspection judgement</b>
26/02/2019	Full	Good
01/06/2017	Full	Good
17/11/2016	Full	Good
14/09/2016	Interim	Sustained 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 health and well-being standard is that—</p> <p>the health and well-being needs of children are met;</p> <p>children receive advice, services and support in relation to their health and well-being; and</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure—</p> <p>that each child has access to such dental, medical, nursing, psychiatric and psychological advice, treatment and other services as the child may require. (Regulation 10(1)(a)(2)(c) and (2)(b)(c))</p> <p>In particular that children attend health appointments within an appropriate timescale.</p>	25/11/2019
<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—</p> <p>that staff—</p> <p>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. (Regulation 12(1)(a)(2)(a)(i))</p> <p>In particular, ensure that risk assessments are relevant and kept updated.</p>	25/11/2019
<p>The leadership and management standard is that the registered person enables, inspires and leads a culture in relation to the children's home that—</p> <p>helps children aspire to fulfil their potential; and</p> <p>promotes their welfare.</p> <p>In particular, the standard in paragraph (1) requires the registered person to—</p>	25/11/2019

<p>use monitoring and review systems to make continuous improvements in the quality of care provided in the home (Regulation 13(1)(a)(b)(2)(h))</p>	
<p>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. (Regulation 16(3)(a)(b))</p>	<p>08/11/2019</p>
<p>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 1 April 2014, the date which falls 2 years after the date 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 1 April 2014, 1 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))</p>	<p>01/01/2020</p>
<p>The registered person must ensure that all employees– undertake appropriate continuing professional development; receive practice-related supervision by a person with appropriate experience. (Regulation 33 (4)(a))</p>	<p>05/12/2019</p>
<p>The registered person must ensure that– 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</p>	<p>05/12/2019</p>

<p>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)(b)(i)(ii)(c))</p>	
<p>Case records must be kept— securely in the children’s home during the period when the child to whom the case records relate is accommodated there. (Regulation 36(2)(c))</p>	<p>04/11/2019</p>

## Recommendations

- The registered person is responsible for ensuring that each child’s day to day health and well-being needs are met. (‘Guide to the children’s homes regulations including the quality standards’, page 33, paragraph 7.3)

In particular, ensure that the children have clear health plans that identify health appointments.
- Where there is a possibility that a child will run away or go missing from a children’s home placement, their placement plan should include a strategy to minimise this risk. (‘Guide to the children’s homes regulations including the quality standards’, page 45, paragraph 9.24)

In particular, ensure that the children have an individual missing-from-care protocol.
- Ensure that staff understand the importance of careful, objective and clear recording, and that information regarding the child is 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)
- The review of the appropriateness and suitability of the location and the premises of the home should include the identification of any risks and opportunities presented by the home’s location and strategies for managing these. (‘Guide to the children’s homes regulations including the quality standards’, page 64, paragraph 15.1)

In particular, use information from external agencies to inform the location risk assessment.

## Inspection judgements

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

The number of shortfalls in safeguarding, and leadership and management, have the potential to compromise children’s welfare and safety. The quality of care has

declined; however, despite this, some children are making progress.

The children's health plans are sparse. They do not give the staff enough information regarding children's health appointments and the outcomes of these. Because of this, the children have missed routine health appointments.

The children have individual targets and the staff support them in working towards these. However, the records lack detail and rationale about whether the targets are met. This makes it difficult to gauge the children's progress.

The children benefit from regular children's meetings and individual meetings. These include meaningful and relevant topics. The staff use picture exchange communication systems to gain the children's wishes and feelings. The children participate and they express their views, and can see that these have been acted on.

The staff understand the importance of education and that the transitions between school and the home can cause the children difficulty. School support staff work at the home during term time. This supports the children's transitions and lessens their anxieties.

The staff have good interactions with the children. The high staff ratio means that the children can do things independently, supported by a member of staff. This offers them quality one-to-one time.

The staff celebrate the children's achievements and are proud of their individual accomplishments. One child was proudly showing his football trophy that he had received the evening before.

The staff understand the children's complex backgrounds. They spoke about the children with warmth and affection. One child said that he liked living at the home and that the staff were nice.

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

The children's behaviour and risk management plans are not consistently updated following incidents. The supporting records are too long and designed for a school environment. These records are updated by the education staff and their input can be misleading. The physical interventions are also recorded on a school system and updated by the school staff. These systems are convoluted and unhelpful, and have resulted in missing information. The children and staff are not always debriefed after physical interventions. Records do not always include the manager's commentary on the effectiveness of the intervention used. This does not provide good oversight or monitoring.

There are children who are at risk of going missing from the home or the community. Even so, they do not have individual missing-from-care protocols. This means that staff may not always act effectively.

The manager has not sought information from external agencies to inform the location risk assessment. There are known factors that are not included and these

could pose a risk to the children.

The staff understand the children's vulnerabilities. They have completed safeguarding training and understand the importance of reporting concerns. The manager works well with partner agencies to safeguard the children. One parent said, '[child] is safe because staff are always with him and they know him really well.'

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

There have been three managers since the last inspection. Frequent managerial changes have contributed to a number of shortfalls in the managerial oversight and leadership of the home. There is a current manager in post who is in the process of being registered.

There are some gaps in the staff's supervision and a lack of team meetings. Although these have recently been addressed, this fails to ensure that the staff receive support for their roles.

The staff have undertaken all of the mandatory training required by the organisation. However, they have not all obtained a relevant level 3 qualification in the required timescales. Consequently, there are staff who are not suitably qualified to work at the home.

Some records are unclear. They are not factual or meaningful to the children. They can lack clarity, meaning that it is difficult to assess the children's behaviour or the actions that the staff have taken.

The children's files are not held securely. They are stored in an unlocked cupboard in the dining room. This means that the children can access each other's files. This has led to some children taking and destroying other children's records.

The manager's six-monthly review of care has not been completed. The service has not been monitored effectively and, therefore, potential shortfalls have been missed.

The statement of purpose has not been updated with the new manager's details along with the experiences and qualifications of the staff working in the home. Therefore, Ofsted has not been made aware of changes.

## **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:** SC457423

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

**Registered provider:** MacIntyre Care

**Registered provider address:** 602 South Seventh Street, Milton Keynes,  
Buckinghamshire MK9 2JA

**Responsible individual:** Maria Fiddimore

**Registered manager:** Post vacant

## Inspector

Trish Palmer, social care inspector

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