

SC1246834

Registered provider: The Amicus Community Arundel Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

The children's home is part of an independent children's therapeutic community which is accredited by the Royal College of Psychiatrists. It provides therapeutic care for up to five children.

The manager was registered with Ofsted on 18 May 2012. He also manages the organisation's other home.

Inspection dates: 29 to 30 January 2020

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: 16 October 2018

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Inspection report children's home: 1246834

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Recent inspection history

Inspection date	Inspection type	Inspection judgement
16/10/2018	Full	Good
18/01/2018	Interim	Sustained effectiveness
17/07/2017	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
A person may only manage a children's home if—	01/04/2020
by the relevant date, they have attained—	
the level 5 Diploma in Leadership and Management for	
Residential Childcare (England) ("the Level 5 Diploma").	
(Regulation 28(1)(2)(c))	
In particular, ensure that the registered manager commences	
management training before April 2020.	
Schedule 4 sets out the information that the registered person	01/04/2020
must keep in relation to a children's home.	
The registered person must—	
ensure all records are kept up to date. (Regulation 37(1)(b))	
cristic an records are kept up to date. (Regulation 37(1)(b))	
In particular, ensure that records are easily accessible, organised	
and include the date when works are carried out; for example,	
actions resulting from a fire audit.	



Inspection judgements

Overall experiences and progress of children and young people: good

Using the home's chosen therapeutic approach, the staff provide good support and care for children. The warmth and the good quality of care that they receive help the children to feel cared for and to be able to make progress across areas of their lives. This includes, for example, their ability to form trusting relationships with peers and staff, to think about the consequences of their behaviours and to take responsibility for their actions.

The children receive high levels of support, guidance and therapeutic intervention. The staff work alongside the children and encourage them to talk about their previous and current experiences. The routines in the home create stability and consistency. Therefore, the children know what to expect on a daily basis, from morning routines, after-school routines and eating a home-cooked dinner every evening to having a sensible, well-planned and supported bedtime routine. The staff are calm and caring in their approach and in their interactions with the children.

The children's learning is an essential part of their development and is integrated into the therapeutic living approach in the home. All children have excellent attendance rates at the organisation's school, located nearby. Each child has an education programme that is integrated into the child's therapeutic placement plan and daily care programme. This provides consistency of care by all professionals. Communication between the home and school is embedded in daily practice.

Play is an important aspect of the therapeutic approach delivered by the staff team. Many of the children arrive at the home unable to play or be creative either by themselves or with other children. Due to the young age of the children, play is seen as important and is included in the discussions and delivery of activities. Creativity is encouraged, with an emphasis on arts and crafts. Play is included in the children's placement and therapeutic care plans and care-needs assessments. The children discuss, choose and suggest activities at their daily meetings and in their individual time with a member of the staff team.

Meals are nutritious and well presented. Mealtimes are an important social time. Eating together is a valued part of the culture and routine of the home.

Leaders and managers complete thorough pre-admission assessments. An external consultant child and adolescent psychotherapist and an experienced director, alongside the registered manager and the home's staff team, undertake comprehensive assessments to ensure that they can meet the needs of the child. All referrals are carefully considered to ensure compatibility with the established group of children.



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

There is a strong safeguarding culture in the home. The staff have a good level of understanding and knowledge of what is required to manage risk and keep the children safe. Across the organisation, a dedicated team of safeguarding leads ensures that all concerns and allegations are referred to external agencies in a very timely manner. The safeguarding team meets weekly and uses chronologies effectively to complement good record-keeping.

The staff's comprehensive understanding of each child's vulnerabilities, behaviours and previous life experience is underpinned by guidance from specialist therapists. This enables the staff to provide an emotionally safe home. In turn, this helps the children to feel confident enough to explore their behaviours. Due to the children's early life experiences, they often lack the strategies to manage and contain their emotions, feelings and behaviours. This can be seen in their disruptive behaviours. Over time, the children develop positive coping strategies and resilience and, as a result, the more challenging behaviours decrease.

The numbers of incidents of restraint have decreased significantly over the last year. There is a commitment to continually decrease the number of prone restraints, and the data shows this to be the case. Incidents of restraints are scrutinised by managers and therapists. This ensures that all restraints are assessed to establish whether they are managed appropriately and whether any actions need to be taken or behaviour plans changed. Children's views are obtained after each incident to make sure that they feel safe and can reflect on the intervention. Information on the physical interventions used with each child is gathered on a monthly basis, and the data is used to explore any patterns emerging.

Appropriate sanctions are used to help the children to understand the consequences of their behaviour and their associated feelings. All sanctions are appropriate to the actual incident, the child's specific needs and their level of emotional development. Where possible, the sanctions imposed are discussed with the child so that the reasons for them are clear. The aim is to enable them to think about the possible feelings and anxieties that underlie the behaviour that led to the sanction, and to find alternatives to the child's disruptive behaviour. Any sanctions imposed are recorded. This record measures the sanctions' effectiveness and usefulness to the child.

Health and safety matters are suitably addressed, but some records were not easily accessible during this inspection. However, these were supplied immediately following the inspection.

All members of staff who work at this home are subject to a thorough recruitment process, and this ensures that all necessary background checks are carried out prior to them starting work.

The effectiveness of leaders and managers: good



The manager is registered to manage two homes. Each home has a supporting manager. While extremely well qualified in the therapeutic field, the registered manager is yet to undertake formal management qualification training. This shortfall does not impact on the well-being of the children or the management of the home; however, it is a requirement of the children's homes regulations. The responsible individual confirmed by the end of the inspection that the registered manager would start this qualification in the very near future.

This service is one of a few that is accredited by the Royal College of Psychiatry. Its quality improvement programme has been approved for use in therapeutic communities. Visits and inspections are welcomed, and action is taken when the need is identified.

Staffing is now more stable. A recruitment programme has had a positive impact. The staff receive mandatory and specialist training that is related to the home's therapeutic approach. They are well supported through regular clinical supervision and line manager meetings. In addition, the staff attend a group supervision which is facilitated by senior leaders and receive group clinical supervision. The staff are provided with space to discuss and focus on the children, themselves and the therapeutic ethos of the home. The staff are extremely complimentary about the quality of supervision that they receive.

A consultant child psychotherapist contributes to all assessments of children's needs and the corresponding placement and therapeutic care plans. Referrals are carefully considered, and consideration is given to how a new child will fit in with the established group of children.

The monitoring of the home's procedures and practices by the registered manager and senior leaders is thorough. The development plan highlights areas for change and improvement. A few records showed that staff had failed to date and sign them.

Overall, the staff's approach to diversity and culture is to convey to the children the sense that difference is both enjoyable and enriching.



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 difference 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: 1246834

Provision sub-type: Children's home

Registered provider: The Amicus Community Arundel Limited

Registered provider address: PO Box 79, Arundel BN18 9XA

Responsible individual: Rebecca Newton

Registered manager: Stewart Thomson

Inspectors

Liz Driver, social care inspector Kelly Monniot, social care inspector



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