

# SC033457

Registered provider: Leeds City Council

Full inspection

Inspected under the social care common inspection framework

## Information about this children's home

This secure children's home is operated by a local authority. The home is approved by the Department for Education to restrict children's and young people's liberty.

The children's home can accommodate up to 24 children or young people who are aged between 10 and 17 years old. It provides for up to 14 children or young people placed by the Youth Custody Service and 10 children or young people accommodated under section 25 of the Children Act 1989, and who are placed by local authorities. Admission of any child under 13 years of age under section 25 of the Children Act 1989 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 in dedicated facilities.

The manager has been registered with Ofsted since 2007.

**Inspection dates:** 7 to 8 January 2020

<b>Overall experiences and progress of children and young people,</b> taking into account	<b>good</b>
Health services	good
How well children and young people are helped and protected	good
The effectiveness of leaders and managers	good
Outcomes in education and related learning activities	outstanding

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

**Date of last inspection:** 24 April 2019

**Overall judgement at last inspection:** sustained effectiveness

**Enforcement action since last inspection:** none

## Recent inspection history

<b>Inspection date</b>	<b>Inspection type</b>	<b>Inspection judgement</b>
24/04/2019	Interim	Sustained effectiveness
30/10/2018	Interim	Sustained effectiveness
01/05/2018	Full	Outstanding
24/10/2017	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, the Children’s Homes (England) Regulations 2015 and the ‘Guide to the children’s homes regulations including the quality standards.’ The registered persons must comply within the given timescales.

<b>Requirement</b>	<b>Due date</b>
<p>The registered person must ensure that—</p> <p>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—</p> <p>the name of the child;</p> <p>details of the child’s behaviour leading to the use of the measure;</p> <p>the date, time and location of the use of the measure;</p> <p>a description of the measure and its duration;</p> <p>details of any methods used or steps taken to avoid the need to use the measure;</p> <p>the name of the person who used the measure (‘the user’), and of any other person present when the measure was used;</p> <p>the effectiveness and any consequences of the use of the measure; and</p> <p>a description of any injury to the child or any other person, and any medical treatment administered, as a result of the measure;</p> <p>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’)—</p> <p>has spoken to the user about the measure; and</p> <p>has signed the record to confirm it is accurate; and</p>	<p>28/03/2020</p>

<p>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)(i)(ii)(iii)(iv)(v)(vi)(vii)(viii),(b)(i)(ii) and (c)(iv))</p>	
<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> <p>use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13 (1)(a)(b) and (2)(h))</p> <p>In particular, this relates to having sufficiently detailed restraint debrief records and thorough and effective monitoring of closed-circuit television (CCTV).</p>	<p>28/03/2020</p>

## Recommendations

- Children’s homes staff should encourage children to take a proactive role in looking after their day-to-day health and well-being. (‘Guide to the children’s homes regulations including the quality standards’, page 34, paragraph 7.10) This is with specific reference to limiting the number of sweets and amount of chocolate accessible to children, in accordance with their individual health plans.

## Inspection judgements

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

The children make good progress. They benefit from structured routines and the consistent help and support of care, education and health staff. Well-planned and holistic care allows children to settle quickly and develop a sense of belonging and trust.

The children enjoy a broad range of activities. Choices include access to beauty therapy treatments, the unit's purpose-built gym and the football pitch. Activities help build self-esteem and offer skills which are of use to the children on release. During a weekend away from the home, as part of an approved plan, one child accessed a nationally recognised award scheme to learn survival and team-work skills.

The children receive a well-planned induction, and support plans are well coordinated by the home's specialist resources. The children understand their plans and contribute to them on a regular basis. Each child has an individualised behaviour goal, such as improving peer relationships or learning to recognise when they are becoming angry or upset.

Progress results in improved behaviours. One child has not exhibited any violent behaviour since October, despite arriving in the home with a significant history of violence. Placing social workers commented on the proactivity and thoughtfulness of the staff team. Recently, this included entering a child into a writing competition to allow her to express herself in a more positive manner.

The children enjoy individualised support, and their needs are well understood by staff. When children have specific needs, such as those relating to a diagnosis of autism spectrum disorder, routines and behaviour plans are adjusted. For example, staff offer regular reminders of the daily routine and ensure that unplanned endings are handled sensitively.

Direct work with the children is effective and valued. One child said: 'The staff really try hard to help me, and it works.' The staff know the children well and understand the resilience and strength required to explore difficult family histories. All work is completed within the children's own timescales, and their progress is rigorously monitored by staff.

Offence-based work for children serving a custodial sentence is effective. Structured work encourages the children to think through the consequences of their actions, both for themselves and the wider community. The children are encouraged to consider triggers behind their behaviour and resist the input of negative peers.

The children understand a clear and individualised points-based behaviour management system, which is managed consistently by staff. The children are motivated by the opportunity to attain 'champion' status. When the children struggle, staff act quickly and consider children's individual plans and needs before responding. The children engage well and learn how to settle themselves, for example through the use of sensory toys, talking to staff or accessing their own music. When appropriate, the children learn to apologise and learn lessons to avoid a repetition. This focuses on addressing key behaviour targets, such as improving peer interactions to earn extra privileges.

The voices of the children are well heard, and children feel that their concerns are acted on. The junior leadership team offers views on the weekly menu and activity schedule and has recently fed into the drafting of the revised behaviour management scheme. The complaints system is effective. If children feel aggrieved by a staff decision, such as

a loss of behaviour level, they can appeal the decision. The children are well supported by independent advocates, who are embedded in the home and well known to the children.

Transition planning is a major strength of the service. The staff strive to prepare children to move on from the home, by teaching independence skills and facilitating visits to future placements when possible. The staff offer outreach support for children after they leave the home and closely follow their progress. The staff support placing authorities in drafting referral paperwork which fully reflects the progress achieved by children. The children are encouraged to feed into this process by writing letters and expressing their views.

Expectations in relation to healthy living are unclear. Despite the children enjoying a balanced diet, and visitors being limited to bringing only fresh fruit into the home, one child was observed to have access to a large number of sweets and amount of chocolate in his bedroom.

### **Health services: good**

Healthcare is provided by Leeds Community Healthcare NHS Trust (LCH), and South West Yorkshire Partnership NHS Foundation Trust (SWYPFT) is subcontracted to lead on the Secure Stairs holistic approach to supporting children's health and well-being. Both teams are linked to the larger healthcare provision at nearby HMYOI Wetherby, and physical healthcare, substance misuse team members and some management work across those sites.

The focus on Secure Stairs has led to an increase in on-site mental health team staffing over the last year. There are currently two part-time psychologists, who are working to move the Secure Stairs approach forward. They are supported by an assistant psychologist, a team manager, and two mental health practitioners, who spend 50% of their time with children and staff on the units. A psychiatrist attends twice a week to review cases and monitor children and their prescribed medicines.

Owing to two further mental health practitioner vacancies, the mental health team has been unable to fully embed one practitioner on each of the three units and is currently not on site at weekends. The care staff can contact the team at HMYOI Wetherby for out-of-hours support if required, although this service has not been called on at weekends to date. The unit, which does not currently have an allocated mental health practitioner, is receiving additional support from the team manager, psychologists and other practitioners.

All care staff and the majority of health staff have received Secure Stairs training. Case formulations are used to support the understanding of children's experiences and behaviours. These contribute to the care and risk support plans and play a significant role in discharge planning. The care staff demonstrate an empathetic understanding of the children's needs and effective ways of working with them, which reflects the skills and thinking learned through the Secure Stairs approach. This is supported by monthly

Secure Stairs Project Group meetings, attended by team members from both healthcare providers and the home, and involvement in national and regional Secure Stairs networks, alongside other secure children's homes and YOIs.

Formulation meetings are held for each child, attended by relevant care and health team members, along with invited external professionals when they are available. This gives the staff the opportunity to understand the children's needs and explore how to best work with them. The psychologists, who joined in the late autumn, are also attending care staff meetings to discuss the children. There are plans to implement regular reflective practice sessions for care staff as part of the Secure Stairs model.

Three substance misuse workers and a team lead from Young People's Drug and Alcohol Support Service (YPDASS) based at HMYOI Wetherby provide 21 hours a week on-site support. They work with individual children and provide personal, social and health education, and enrichment group sessions. The team has not yet been able to access Secure Stairs training at Wetherby, although the staff team members are reflecting the Secure Stairs approach at the home, and training is to follow.

The children's physical health needs are promptly met by accessing a range of health professionals on site, for example nurses and doctors. A dentist and optician visit every six weeks, and other healthcare professionals visit as required or external appointments are made. All physical health assessments, clinics and treatments are undertaken in a dedicated treatment room. The care staff can identify where first aid and emergency equipment is kept, and which children have significant allergies. This ensures that the children's health needs are well met.

The home has recently introduced a new system for the management of medicines. The new ordering process means that repeat prescriptions can be more easily ordered and delivered in good time. Training has been given to the care staff who administer medication to children, and weekly medicine audits are undertaken. The care staff show a good understanding of the reasons why medicines have been prescribed and their possible side effects. The children receive prescribed medication without delay, which ensures that their health needs are being met.

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

The children become safer because of the care and support that they receive. Trusting relationships with staff enable children to confide in them, should they have any worries or concerns. The children are confident that the staff listen and told inspectors that they feel safe and cared for.

Care practice is underpinned by robust policies and procedures. The staff fully understand and implement these in their daily practice. Links with external agencies are used well for consultation, advice about practice and formal referral of safeguarding concerns and allegations. The designated officer for the local authority said: 'They are one of the agencies who have a clear view of how to deal with situations. They know

what to do but appreciate objectivity.' She went on to say: 'I have no concerns because children's safety is given a high priority.'

Assessments and interventions are informed by expert input from qualified mental-health practitioners. Detailed risk assessments identify areas of vulnerability and contain professionally informed plans to manage and reduce risk. These plans are reviewed regularly and adjusted in response to any emerging behaviours or concerns. Any changes are communicated effectively throughout the staff team. This ensures that interventions are pitched at the right level for each child and are no more restrictive than necessary to manage risk-taking behaviour, such as self-harm.

Individualised and well-thought-out programmes of support are used to help children to understand their risk-taking and offending behaviour. It was positive to hear children talk about how staff have helped them to understand and address the behaviours that led to them being in a secure setting. Several children said it will help them to make better choices when they leave.

The staff present as good role models and promote positive behaviour. The children benefit from good routines, clear boundaries and expectations. Positive behaviour is reinforced using an incentive and reward scheme. The children said that they like this scheme and enjoy the benefits of being on the higher levels. Individual achievements are recognised and celebrated during weekly assemblies.

The staff are resilient and committed to helping the children to develop positive coping skills. They encourage the children to be respectful of each other, taking a proportionate and restorative approach when this is not the case. One child said: 'When we have an argument, staff will sit us down and get us to talk about things. It doesn't always work, but most of the time it does.'

The staff take a proportionate and considered approach when using single separation and managing children away from the group. Detailed records are maintained and confirm that staff maintain appropriate levels of supervision and make every effort to reintegrate the child into the group as quickly as possible.

All physical restraints are subject to review by a duty manager and a member of the senior leadership team. This process includes the assessment of written records and CCTV. Managers use this review to ensure that practice is lawful and in line with legislative frameworks and internal procedures. When implemented well, the system is effective. However, a lack of rigour over recent weeks means that the standard of restraint records has declined in some cases. Some records are not sufficiently detailed to provide an accurate account of the incidents. Others were found to be missing key information, such as staff debriefs and the date of sign off by the duty manager.

Inspectors reviewed several restraints using CCTV, and there were no issues of concern in most cases. However, there was one incident when staff had not used the home's chosen techniques when responding to the challenging behaviour of a child. It is concerning that the practice was evaluated as appropriate by the duty manager signing



off the report, and that there was a failure to investigate the origin of an injury that was noted during the physical check by the nurse. The registered manager acknowledged this shortfall and took appropriate steps to investigate. Although this is believed to be an isolated incident, and no child was harmed, the ineffective application of monitoring processes has the potential to place children at risk of harm.

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

The registered manager has an abundance of experience in the management of secure children's homes settings. He leads by example and communicates to the staff team his high expectations to provide the best care to the children. The children benefit greatly from the ethos of the home: that is for children to have positive experiences and succeed. This forms the foundation of all that the staff do for the children.

The home has started to implement the 'Kaizen' approach within the service. This new development involves all levels of the staff making suggestions to make small changes within the home. This is to bring further improvements to the care and service provided to the children and young people.

This staff team is diverse, dedicated and child centred. There is a strong core of staff with extensive experience. In recent months, there have been some changes within the management team. Recruitment to vacancies is under way, and a small number of staff are in interim senior and manager positions to cover posts. This has been planned to support the continued smooth running and oversight of the home.

Priority is given to staff training. Therefore, the staff access a comprehensive range of training that includes a six-week induction programme. The majority of staff hold the level 3 diploma in caring for children and young people. Mandatory training areas are kept up to date. In addition, the staff undertake more specialist training in, for example, child sexual exploitation, psychological resilience, self-harm, the 'Prevent' duty and Secure Stairs. This ensures that the staff are equipped with the skills to meet the needs of the children in their care.

The staff receive regular, good-quality supervision. This is reinforced with daily handovers and an array of staff meetings. This provides inclusive, positive support and effective communication systems to all levels of staff working in the service. Managers respond to the needs of the staff, and this maintains suitable levels of staff morale.

Strong partnership working with professionals and other supporting agencies makes certain that the children receive the assistance to meet their individual needs. This proactive and collaborative working approach ensures that children receive effective care and support.

The internal and external monitoring systems continue to be wide ranging. Monthly regulation 44 visits support the service's improvement. The manager has reviewed the service and is aware of the strengths and weaknesses, identifying clear areas for

developments to address shortfalls. This assists in maintaining good standards of care. However, shortfalls have been found in the monitoring of a restraint incident.

### **Outcomes in education and related learning activities: outstanding**

The headteacher provides exceptional and effective leadership. Leaders have brought about continuous improvements since the previous inspection by introducing a comprehensive range of quality monitoring, programme review, staff performance management and development activities. Leaders have a robust and effective system for collecting and analysing a wide range of information and data relating to the progress and achievements of individual children and specific groups and acting to address any differences. Leaders, and those responsible for governance, have an improved and accurate understanding about the quality of provision, the progress that the children make, and any actions required to improve education further.

The staff establish the children's starting points and additional support needs quickly and accurately when they arrive at the home. Along with other information they receive from children's previous placements, schools and placing local authorities, they develop highly personalised education and support arrangements for each child. The headteacher works relentlessly to hold the children's home's local authority to account for developing or reviewing existing education, health and care plans. Where required, the home ensures that it receives the pupil premium that children are entitled to for their complex education and support needs to be met.

The staff plan teaching activities very effectively to meet children's needs and individual learning targets. Teachers and learning support staff work with a high degree of flexibility so that children's personal circumstances and behaviours can be accommodated. Highly effective links with care and healthcare staff, including speech and language specialists, ensure that the staff carefully and thoroughly consider the individual approaches that work well for each child in their interactions with them.

The staff have very high expectations of what children can achieve both academically and personally. The staff regularly assess the children's progress against their individual learning and personal development targets that they meet. They provide the children with a clear understanding of what they have done well and what they need to do to improve. The children make significant progress in the subjects they take, based on their starting points. The staff are fully aware of the children's individual circumstances and work sensitively with children to help them to make incremental improvements to their attitudes, behaviours and ability to engage in education.

The curriculum provides the children with a broad and well-balanced mix of academic and vocational subjects, which they enjoy participating in. The children can gain accredited qualifications in all the subjects they follow. In mathematics, English and science, a few children who are able achieve GCSEs.

Learning takes place in well-equipped teaching rooms and practical workshops. Through vocational subjects, such as motor vehicle technology, and hairdressing and barbering, the children learn the importance of the work-related attitudes that employers and commercial clients will expect, and they demonstrate these well. In addition, the children participate in a wide range of enrichment activities, such as the Duke of Edinburgh award scheme.

The staff are very sensitive to children's needs and treat them with respect. The children respond very well. Their attendance and punctuality are high, and the behaviour of most is exemplary. When the children show signs that they may become disruptive, the staff manage this swiftly and sensitively so that the learning of other children is not disrupted. The children improve rapidly their understanding about the need to respect and tolerate the different views of other children and staff.

The staff regularly consult with children to gather their views about education and related learning activities through surveys and forums. The staff inform children well about any changes made as a result.

Leaders and the staff have a well-informed understanding about children's potential next steps either in the secure estate or in education, training or work. They use this to plan a personalised curriculum for each child. The children receive effective impartial careers advice and guidance to help them to make well-informed choices about college courses or apprenticeships they could apply for. The staff have begun to use planned and approved education mobility to support children to prepare for their next steps, and they plan to extend this further for more children in line with their individual plans. One child recently attended a further education college to study horticulture. On his release, he continued the course. Other children have been helped to gain the construction skills certification scheme site safety card so that they can apply to work or train in the construction industry.

## **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:** SC033457

**Provision sub-type:** Secure unit

**Registered provider:** Leeds City Council

**Registered provider address:** Merion House, 7th Floor West, Merrion Centre, Leeds LS2 8TU

**Responsible individual:** Stephen Walker

**Registered manager:** Francis N'Jie

## Inspectors

Debbie Foster: social care inspector

Malcolm Fraser: social care inspector

Barnaby Dowell: social care inspector

Paul Scott: social care inspector

Catriona Reeves: care quality care commission

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