

1249184

Assurance visit

Information about this children's home

This home is one of a group of homes operated by the same organisation. The home provides accommodation for up to three children, offering a period of stability to reflect on their difficulties and make plans for their futures.

An appropriately qualified manager started working in the home in September 2020 and the interim manager remains in post to provide a comprehensive handover.

Visit dates: 22 to 23 September 2020

Previous inspection date: 18 February 2020

Previous inspection judgement: Declined in effectiveness

Information about this visit

Due to COVID-19 (coronavirus), Ofsted suspended all routine inspections in March 2020. As part of a phased return to routine inspection, we are undertaking assurance visits to children's social care services that are inspected under the social care common inspection framework (SCCIF).

At these visits, inspectors evaluate the extent to which:

- children are well cared for
- children are safe
- leaders and managers are exercising strong leadership.

This visit was carried out under the Care Standards Act 2000, following the published guidance for assurance visits.

Her Majesty's Chief Inspector of Education, Children's Services and Skills is leading Ofsted's work into how England's social care system has delivered child-centred practice and care within the context of the restrictions placed on society during the COVID-19 pandemic.

Findings from the visit

We did not identify any serious or widespread concerns in relation to the care or protection of children at this assurance visit.

The care of children

Children are happy in the home and feel well supported by staff. They have good, open relationships that help them to grow and develop.

Children are supported to stay in touch with important people in their lives and staff are flexible to meet these needs. During the period of social restrictions due to COVID-19, staff have worked hard to facilitate video and face-to-face contact with family and friends where possible so that children do not feel isolated.

Children's learning and education have been well supported during lockdown. While there has been some confusion about who leads on pursuing education placements for children, staff in the home advocate well for them within professional networks about their learning.

Staff communication with other professionals has improved over time but remains inconsistent. This inconsistency does not help children to always have a clear response from those outside the home who help them.

Children have frequent key-working times with staff. Key-working planners are comprehensive and provide focus. In contrast, records do not reflect the detail of this work and so children are not provided with a comprehensive record of how staff help them.

Children are encouraged to take responsibility for their medication when they are ready to do so. There are clear risk assessments in place which show staff have thought about the immediate and wider implications of this approach. This needs to be expanded to all medication that children take so that staff are clear about children's capabilities. It is positive that staff look for ways to safely increase children's independence.

The safety of children

The interim manager considers requests for children to live at the home very carefully. She draws on all known information about the child who is arriving and the children already in the home to make a clear decision. The interim manager plans arrivals carefully and children are welcomed into the home warmly.

Managers do not ensure that risk assessments have guidance for all known risks to children. In contrast, managers and clinical staff put in place comprehensive therapeutic plans for children where some of these known risks are considered. This approach leaves confusion about where staff can reference their approach with children. However, staff know children well and this knowledge means that they are able to reduce most risks.

Staff are keen to support children's independence and have agreed with one child's network to put in place an agreed return time rather than have set time away from the home. While there have been times when this child has not returned to the home at the agreed time, they have stayed in touch with staff, so they have some assurance about their safety. This has not been well recorded in terms of risk, but it has been considered well and staff know what has been agreed. The approach has been well judged with this child and has aided the development of a trusting, supportive relationship with staff.

Staff pay close attention to children's ethnicity and heritage. They make sure that children have specific personal items that are needed and challenge others who do not pay close enough attention to children's ethnic identities. This emphasises to children that staff are committed to all aspects of their lives.

Physical interventions are proportionate. Staff recording is variable, which means that records are not always fully completed. Staff debriefs do not challenge practice which is not in line with the agreed underpinning therapeutic approach and learning from these incidents is not always clear. There has been limited opportunity for face-to-face physical intervention training during the period of social restriction due to COVID-19. This means that all agency staff are still not trained to use the organisation's approach by qualified trainers. This has not impacted on the care of children during this period.

Leaders and managers

The home has been without a registered manager for several months. Interim management arrangements have largely been successful. A permanent manager has been recruited and is undertaking their induction. The interim manager will remain in post temporarily to provide a thorough handover.

The interim manager has a good working knowledge of the home. However, some areas are not considered in regular monitoring. This has led to placement plans not being fully reviewed and some information about children not being known. As a result of this, not all objectives for children are current. The manager and interim manager are aware that this is an area for development.

Staff appreciate their supervision and they feel supported by the interim manager. The interim manager has increased the focus on staff reflection. This has enabled staff to look beyond behaviour to provide context and so help children better. Supervision records are not comprehensive and are not always clear about where staff need to improve and the expectations of them. This is a missed opportunity to reinforce the reflective work that is being done and to hold staff to account for their work.

Managers at all levels address complaints fully and effectively. They make sure that investigations into staff practice follow procedure and where needed they take appropriate action. External agencies such as the designated officer are

appropriately kept informed about outcomes. This ensures that any issues in the home are independently scrutinised and transparent.

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>In meeting the quality standards, the registered person must, and must ensure that staff—</p> <p>seek to develop and maintain effective professional relationships with such persons, bodies or organisations as the registered person considers appropriate having regard to the range of needs of children for whom it is intended that the children's home is to provide care and accommodation. (Regulation 5 (d))</p>	04/11/2020
<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)(2)(a)(i))</p>	04/11/2020
<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 promotes their welfare.</p> <p>In particular, the standard in paragraph (1) requires the registered person to—</p>	04/11/2020

<p>ensure that staff have the experience, qualifications and skills to meet the needs of each child;</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)(2)(c)(h))</p>	
<p>The care planning standard is that children—</p> <p>receive effectively planned care in or through the children's home. (Regulation 14 (1)(a))</p> <p>In particular, internal plans must be kept up to date so that staff know the objectives they are working to.</p>	04/11/2020

Recommendations

- The registered person is responsible for ensuring that all their staff have been adequately trained in the principles of restraint and any restraint techniques appropriate to the needs of the children the home is set up to care for as defined in the home's Statement of Purpose. ('Guide to the children's homes regulations including the quality standards' page 49, paragraph 9.57)
- A record of supervision should be kept for staff, including the manager. The record should provide evidence that supervision is being delivered in line with regulation 33(4)(b). ('Guide to the children's homes regulations including the quality standards' page 61, paragraph 13.3)

Children's home details

Unique reference number: 1249184

Registered provider: Horizon Care And Education Group Limited

Registered provider address: Venture House, Unit 12, Prospect Business Park, Longford Road, Cannock WS11 0LG

Responsible individual: Denise Knowles

Registered manager: Post vacant

Inspectors

Karol Keenan, Social Care Inspector
Ann-Marie Jones, Social Care Inspector

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Piccadilly Gate
Store Street
Manchester
M1 2WD

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