

# Jamma Umoja

23 Haling Park Road, SOUTH CROYDON, Surrey CR2 6NJ

Monitoring visit

Inspected under the social care common inspection framework

## Information about this residential family centre

This residential family centre is a family resource service offering assessment and treatment services. A group of directors owns the company.

The centre provides assessments of parenting on a residential basis and in the community. The centre can accommodate up to nine families.

#### Inspection date: 1 October 2020

Date of previous inspection: 24 October 2017

### This monitoring visit

This monitoring visit was triggered by a complaint sent to Ofsted. The complaint expressed concerns about the provider's management of the quality of the service that families receive during the night and the level of support provided to night staff. The complaint alleges that:

- there is a general lack of support for staff, but especially night staff.
- there is not enough staff on shift at night. This means that some families do not receive the level of support they need
- there is a lack of staff training. This is particularly the case for medication training
- some complaints made by families staying at the centre remain unresolved
- the frequency and quality of staff supervision is poor
- staff induction processes are poor
- staff do not manage the arrival of new families at the centre well
- there is a lack of resources for night staff to complete their duties efficiently.

The main outcomes of the visit are as follows:



- there is a general lack of support of night staff. They do not receive regular supervision. Annual appraisals for night staff do not take place each year
- the provider offers appropriate training opportunities. However, staff do not consistently attend the courses. This includes training sessions on medication
- managers resolve the complaints that they receive from families. However, they do not always provide families with a written response of the outcome of their complaint
- staff induction processes have been recently improved
- families new to the centre are warmly welcomed. However, some do not receive key information about the service in a timely fashion
- resources are available for night staff to complete key tasks while on shift.

The centre's last full inspection was undertaken on 24 to 25 October 2017. The overall judgement was good.

A number of requirements and recommendations raised at the last inspection were not reviewed during this visit and are, therefore, repeated here.

The centre has not had a registered manager in place since November 2019.

The responsible individual, staff members and some resident parents were interviewed during this visit. All said that families receive an appropriate level of care and monitoring during the night.

The complaint alleged that the provider does not provide good support to night staff. Information reviewed during the visit supported the view that there has been ongoing communication between managers and night staff to help resolve the issues that night staff had.

Staff personnel records highlighted that there are gaps in the frequency of supervision provided to night staff. Additionally, annual appraisals do not always happen. This means that staff's performance is not well monitored, and their learning needs are not well met.

The provider ensures that there is a good programme of training for staff. This has recently been interrupted because of the COVID-19 pandemic. Recently, staff have been offered training in child attachment and the administration of medication. Records confirmed that these training sessions had been provided but that some staff failed to attend, as expected.

The provider has recently revised the staff induction process. This is now comprehensive and incorporates staff's various learning styles. These include reading, shadowing and coaching. This prepares staff to complete their shift duties efficiently.



Parents spoken with confirmed that they felt warmly welcomed upon their arrival at the centre. They said that their arrivals were managed well by staff. However, one parent stated that they did not receive key information about the centre until several days later. This is not helpful as families require clear information about the centre's facilities, rules and the expectations placed on them.

The complaint highlighted issues with the exchange of information between staff working during the day and night staff. The provider has developed several communication systems, including verbal and electronic systems, which enhance the sharing of information. These are largely used effectively. However, despite this, a parent said that on one occasion, the poor communication between staff resulted in them failing to complete key care tasks for their child. This was not in the best interest of the child in question.

Managers, staff and parents confirmed that there is a sufficient number of staff working during the night. Lone working does not happen. In the case of an emergency, bank staff and managers would provide shift cover. Parents commented that they receive appropriate care and are well monitored and supported during the night. Staff have access to the equipment that they need to complete allocated tasks.

Parents confirmed that they know how to make complaints. These can be made in writing, in person or anonymously. Parents shared differing views about the effectiveness of the centre's complaints procedures. Some had little faith that their complaints would be addressed, while others who had made complaints were satisfied with how they had been managed.

Records of complaints showed that managers deal with complaints promptly. They provide families with information about how their complaint is to be resolved. However, in some cases, families do not receive this information in writing. This would be useful so that there is a clear record of families being made formally aware of how their complaint has been resolved.

In conclusion, some of the issues raised in the complaint received by Ofsted are justified. However, other issues appear unjustified or have been appropriately resolved. There are no concerns that families are being placed at risk of harm.



# What does the residential family centre 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, Residential Family Centre Regulations 2002 and the national minimum standards. The registered person(s) must comply within the given timescales.

Requirement	Due date
A person shall not manage a residential family centre unless he is fit to do so.	01/01/2021
A person is not fit to manage a residential family centre unless—	
he is of integrity and good character;	
having regard to the size of the residential family centre, the statement of purpose, and the number and needs of the residents—	
he has the qualifications, skills and experience necessary to manage the centre;	
and	
he is physically and mentally fit to do so;	
he provides in relation to himself full and satisfactory information in respect of each of the matters listed in Schedule 2. (Regulation 7 (1)(2)(a)(b)(c))	
For the purpose of paragraph (1), a person is not fit to work in a residential family centre unless—	01/12/2020
full and satisfactory information is available for each person employed in respect of all matters specified in Schedule 2. (Regulation 16 (3)(d))	
The registered person shall ensure that all persons employed by him—	01/12/2020
receive appropriate supervision and appraisal. (Regulation 17(5)(a))	
The registered person must ensure that a written record is made of any complaint or representation, the action taken in	01/12/2020



response, and the outcome of the investigation. (Regulation 20(6))	
The registered person shall ensure that there is, having regard to—	01/12/2020
the statement of purpose of the residential family centre, its size and the numbers and	
needs of its residents; and	
the need to safeguard and promote the health and welfare of residents, a sufficient number of suitably qualified, competent and experienced persons working for the residential family centre. (Regulation 15(a)(b))	

#### Recommendations

- Managers and staff are clear about their roles and responsibilities. The level of delegation and the lines of accountability are clearly defined. (NMS 19.3) In particular, that communication between staff members is effective.
- Except in an emergency, parents and children are given information, before arrival, about the centre and the placement, training, supervision, assistance and assessment they can expect, in a format which meets their needs. Parents and their children should visit the centre prior to a placement decision being made. (NMS 7.3)

## Information about this inspection

The purpose of this visit was to monitor the action taken and the progress made by the residential family centre since its last Ofsted inspection.

This inspection was carried out under the Care Standards Act 2000.

## **Residential family centre details**

#### Unique reference number: SC052588

Registered provider: Jamma Umoja (Community Services) Limited

**Registered provider address:** Mazars Llp Apex 2, 97 Haymarket Terrace, Edinburgh EH12 5HD

Responsible individual: Ronald Crosbie



Registered manager: Position vacant

## Inspector

Sandra Jacobs-Walls, social care inspector



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