

2530832

Assurance visit

Information about this children's home

The home is owned by a private company. It is registered for four children. The home provides care for children aged 11 to 17 years who have experienced adverse childhood experiences that have led to associated trauma and presenting complex behaviours.

The manager holds her level 5 diploma in leadership and management and was registered with the Ofsted in July 2019. She is currently absent from work on long-term leave. However, she is keeping in touch with the home regularly. In the absence of the manager, the day-to-day running of the home is being overseen by the deputy, with the support of the responsible individual.

Visit dates: 12 to 13 October 2020

Previous inspection date: Not previously inspected

Previous inspection judgement: Not previously inspected

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

Staff support children well and help them to lead a healthy lifestyle. All children have registered with local health services. Staff support children to attend routine health appointments. In respect of COVID-19, staff are enabling the children to understand the rules and are following government guidelines. This is helping children to stay well, and staff are promoting the health and well-being needs of children.

Children's experiences of education are mixed. Managers explained that it has been a challenge to find children aged over 16 years suitable education provision during COVID-19. Managers have contacted education providers that the provider has worked with in the past. As a result, one child is now engaging in an alternative education programme. During COVID-19, staff implemented a home-learning timetable, and they kept this under review to reflect each child's preferred learning style. Daily individual achievement targets and positive reinforcement have helped motivate the children to engage in some constructive activities during the school day. As a result, children are making some progress towards achieving their education goals. Work is ongoing to find two children who have left secondary school, education, training or employment opportunities.

Managers ensure that children have positive experiences of moving into the home. For example, two staff visited a child before they moved in, and the child then visited the home and received written information about what to expect. This considered process helped to allay the child's anxieties. One professional said, 'The admission process was very detailed. They requested a lot of information to ensure that they could meet [the child's] needs and that [the child] was a match with the other children in placement.' Managers appropriately assess the suitability of children who need a place to live. This helps to ensure that all children's care needs can be met by staff.

The safety of children

When children go missing from home, staff share information with relevant people and undertake searches to try and locate children and return them safely. However, managers do not ensure that children are consistently offered the opportunity to discuss incidents of going missing from home with an independent person. The deputy manager explained that there is sometimes a lack of response from external organisations who are responsible for providing the independent return home interview service. However, managers have not escalated this concern. When children do have return interviews, information from these is not always recorded. These shortfalls present missed opportunities to understand why children go missing from home and what happened while they were away in order to review and reduce risk.

When there are concerns about children misusing drugs, staff take action to discourage children. Staff talk to children about the dangers of misusing drugs. A reduction in incidents shows that this approach is working and shows that staff promote children's safety and welfare.

Managers and staff provide some good support to children when alleged incidents happen. For example, they provided reassurance to a child who said that he had been a witness to an incident in the community while living in a previous placement. This information was then shared with the child's social worker. However, neither managers nor staff followed this up with the police and do not know what the child's social worker did with this information. This lack of professional curiosity and comprehensive follow-up action does not fully promote children's welfare and safety and leaves unanswered questions about an experience a child has had.

Children receive positive reinforcements and consequences to help them understand the impact of their behaviour on themselves and others. However, staff do not record these consistently, including whether the consequence used is effective. This has not been picked up by managers, which highlights a shortfall in the monitoring of behaviour management records.

Children know how to make a complaint and staff support them to express their concerns. Managers take children's complaints seriously and ensure that an independent person investigates them. Children's views, wishes and feelings are listened to and acted on by staff and managers.

In response to the COVID-19 pandemic, staff talk to children about how to keep themselves and others safe. Staff encourage children to maintain social distancing and wear a face covering when in the community. Children are advised by staff to maintain good personal hygiene and do so throughout the day. This reduces the chance of children and staff contracting or spreading the virus.

Leaders and managers

Staff said that they feel well supported to carry out their role. They receive regular supervision, which provides staff with a safe place to reflect on children's progress and their own practice. This promotes a supportive learning culture.

Staff undertake a range of training courses to help them keep up to date with the skills and knowledge they need to care for children well. Due to COVID-19, the delivery of some courses changed to online learning. Face-to-face learning is being reintroduced following lockdown, and arrangements are in place to make this as safe as possible to do so.

The deputy manager has used the flexibilities permitted by The Adoption and Children (Coronavirus Amendments) Regulations 2020 responsibly. For example, independent visitors undertook remote visits during lockdown so that some external oversight of the quality of care still took place.

Since the last monitoring visit, there have not been any incidents of physical intervention or bullying. Managers have taken steps to improve staff's recording practice so that when it comes to having to record a description of any injury to a person, and any medical treatment administered as a result of a measure of control, they know how to do this. In addition, managers have completed some work with children and staff about the impact of bullying and how to respond to and manage bullying incidents. As a result, shortfalls raised at the last monitoring inspection have been addressed. This shows that managers act on feedback and drive forward improvements.

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>if the registered person considers, or staff consider, a placing authority's or a relevant person's performance or response to be inadequate in relation to their role, challenge the placing authority or the relevant person to seek to ensure that each child's needs are met in accordance with the child's relevant plans. (Regulation 5(c))</p>	29/11/2020
<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>	29/11/2020
<p>The registered person must prepare and implement a policy ("the behaviour management policy") which sets out—</p> <p>how appropriate behaviour is to be promoted in the children's home; and</p>	29/11/2020

the measures of control, discipline and restraint which may be used in relation to children in the home.

The registered person must ensure that—

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—

the effectiveness and any consequences of the use of the measure; and

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

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(1)(a)(b)(3)(a)(vii)(b)(i)(ii)(c))

Children's home details

Unique reference number: 2530832

Registered provider: Hexagon Care Services Limited

Registered provider address: Unit 1 Tustin Court, Riversway, Preston PR2 2YQ

Responsible individual: Mark Dunn

Registered manager: Leonie Ashby

Inspector

Helen Malanaphy, Social Care Inspector

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