

# 1244287

Registered provider: ROC Northwest

Full inspection

Inspected under the social care common inspection framework

## Information about this children's home

The home is one of several owned and managed by a private company. The home provides care and support for up to five children who can no longer live at home.

There is a new manager in post who is not yet registered with Ofsted.

Ofsted last visited this setting on 16 September 2020 to carry out an assurance visit. The report is published on its website.

### Inspection dates: 14 to 15 April 2021

**Overall experiences and progress of children and young people, taking into account**      **inadequate**

How well children and young people are helped and protected      inadequate

The effectiveness of leaders and managers      inadequate

The children's home is not yet delivering good help and care for children and young people. However, there are no serious or widespread failures that result in their welfare not being safeguarded or promoted.

**Date of last inspection:** 19 February 2020

**Overall judgement at last inspection:** Good

**Enforcement action since last inspection:** There has been no enforcement action.

## Recent inspection history

<b>Inspection date</b>	<b>Inspection type</b>	<b>Inspection judgement</b>
19/02/2020	Full	Good
21/11/2018	Full	Good
11/01/2018	Interim	Declined in effectiveness
09/05/2017	Full	Good

## Inspection judgements

### **Overall experiences and progress of children and young people: inadequate**

There have been numerous changes to the staff team, which means that children are not able to build and sustain positive relationships with staff. As a result, children will often go to the manager for support rather than staff, as she is the only consistent adult in the home.

Healthcare plans are poor, often missing vital information about children's health needs. For example, plans demonstrate that one child struggles to attend healthcare appointments and work is needed around this. Despite this being identified as an action, this has not taken place. Therefore, the child continues to refuse to attend appointments and is not receiving appropriate medical interventions.

In addition, plans do not include children's needs with regard to self-harm and mental health. As a result of these shortfalls, children often experience delays in having their health needs met.

Overall, care planning is poor and does not outline the specific and individual needs of each child. Plans mention children having a learning disability but not what support is in place for them or if staff are trained in this area. Plans are not individualised for each child, with all plans containing similar information. This blanket approach to recording does not celebrate the uniqueness of each child and means that they are not receiving care and support that meet their individual needs.

Direct worker sessions are not carried out on a regular basis. This means pertinent issues such as fire setting and the use of weapons are not discussed. This does not help children to reflect upon this type of behaviour or make progress while they are living at the home.

Support for children's education is inconsistent. One child has been out of education for some considerable time. Although the manager has worked with the placing authority and virtual head to source a college placement, this has been put on hold due to changes in the child's circumstances. Staff are not, however, providing the child with any alternative education in the interim period.

Another child is being tutored at home and is supported by staff to complete their online work, but this is for a minimal amount of time. Staff are not engaging children in additional educational activities, and consequently, children spend excessive amounts of time in the home playing on gaming consoles without planned activities.

Children are encouraged to carry out tasks to help them to develop life skills, but their engagement in these activities is inconsistent. One child spoke about their project to start a car washing business and how they had been washing the staff's

cars as part of this. However, there are no plans as to what children should be doing during the day to support their learning.

Children were observed to enjoy positive relationships with staff. One child played happily on the games console while chatting to a new member of staff. Another child was eager to show inspectors his musical skills. Children said that they were 'ok'. Children said that they are listened to and staff are helping them to go to activities that they enjoy. One child spoke enthusiastically about joining a local football team.

Children are able to remain in contact with their families. Staff ensure that the children have the opportunities to talk to their families and to meet with them once the COVID-19 (coronavirus) restrictions are lifted.

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

When safeguarding issues have arisen, staff have failed to follow the agreed safety plans. Managers have reflected on this and have provided additional training to prevent a recurrence. Staff spoken to at this inspection, demonstrated that they have some understanding of child protection and safeguarding and who they would speak with to report any concerns.

A safeguarding concern was raised by a court professional in relation to the improper conduct of a senior member of staff. The records of the internal investigation into the matter are poor and do not identify any actions to address the concerns raised.

Children's risk management plans are inadequate. They do not identify all known risks to children or the strategies for staff to follow to reduce the risks. For example, staff have failed to carry out room searches in line with a child's safety plan, when there are known self-harm concerns. Similarly, the risk management plan for another child does not outline the strategies to manage the use of electrical items, when there are concerns about the child not sleeping at night. These shortfalls fail to adequately promote the health wellbeing and safety of children.

External doors and internal kitchen doors are locked with keys at night, restricting children's movement around their home. The practice of locking doors also means that the home is not following its own fire safety procedures, as children are unable to exit the home without the assistance of staff.

There has been a significant decrease in one child's episodes of going missing from home. Staff are aware of the action to take should a child be missing; this includes notifying British Transport Police and family members.

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

The leadership and management of the home is poor. There have been numerous staffing changes in the home resulting in a lack of continuity of care for children. The manager has also worked additional shifts to reduce the number of temporary staff working in the home. However, as a consequence several managerial tasks

have not been completed, such as the monitoring and review systems to make improvements in the home.

The home has failed to meet all of the requirements issued at the last inspection. These have been raised again following this inspection.

Senior managers have recently identified that the staff team was struggling. As a result, additional managerial oversight is being provided by the responsible individual and two registered managers from other homes in the company.

Only two staff currently hold an appropriate level 3 qualification. Other members of staff are continuing with their induction and probationary period. Staff training records are inaccurate, making it difficult to see what training staff have attended and if they have the necessary skills to meet the children's needs. Similarly, the workforce development plan is out of date.

Staff rotas are frequently changed at very short notice. On the day of inspection, staff arrived at work to be informed that they were on sleep-in duties that night, which they were unprepared for. This demonstrates poor managerial planning and adds to uncertainty for children.

Staff, including the new manager, have not received regular supervision. The manager's last recorded supervision was in June 2020. In addition, new staff at the home have not received fortnightly supervision in line with the organisation's policies and procedures. This lack of oversight means that areas of concern are not identified or acted on.

Record-keeping is inadequate. On many occasions, records and documentation fail to show the depth of discussions held with children to identify the actions that need to be taken.

Monitoring of the home is poor and has failed to identify areas of concern. Records and documentation are not current and do not reflect the needs of the children. One child's risk assessment has not been updated since October 2020 despite new areas of concern arising. It is unclear who has completed a number of records. On one occasion, the manager signed a physical intervention debrief record, when this had been completed by a senior manager in the organisation.

Impact risk assessments for children moving into the home are ineffective. They fail to consider the needs of children who are already living in the home as well as the needs of the child moving in. The responsible individual agreed that the assessment for one child did not demonstrate that the home was a suitable place for them to live, and that they should not have accepted the placement. This indicates that there are not only shortfalls with admission procedures for the organisation, but also a lack of thorough management oversight and understanding of children's needs.

## 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>The health and well-being standard is that—</p> <ul style="list-style-type: none"> <li>the health and well-being needs of children are met;</li> <li>children receive advice, services and support in relation to their health and well-being; and</li> <li>children are helped to lead healthy lifestyles.</li> </ul> <p>In particular, the standard in paragraph (1) requires the registered person to ensure—</p> <ul style="list-style-type: none"> <li>that staff help each child to—</li> <li>achieve the health and well-being outcomes that are recorded in the child’s relevant plans. (Regulation 10 (1)(a)(b)(c) (2)(a)(i))</li> </ul>	<p>7 June 2021</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> <ul style="list-style-type: none"> <li>helps children aspire to fulfil their potential; and</li> <li>promotes their welfare.</li> </ul> <p>In particular, the standard in paragraph (1) requires the registered person to—</p> <ul style="list-style-type: none"> <li>lead and manage the home in a way that is consistent with the approach and ethos, and delivers the outcomes, set out in the home’s statement of purpose;</li> <li>ensure that staff work as a team where appropriate;</li> <li>ensure that staff have the experience, qualifications and skills to meet the needs of each child;</li> <li>ensure that the home’s workforce provides continuity of care to each child;</li> <li>understand the impact that the quality of care provided in the home is having on the progress and experiences of each child and use this understanding to inform the development of the quality of care provided in the home;</li> </ul>	<p>7 June 2021</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)(a)(b)(c)(e)(f)(h))</p>	
<p>The registered person must maintain records ("case records") for each child which— include the information and documents listed in Schedule 3 in relation to each child; are kept up to date; and are signed and dated by the author of each entry. (Regulation 36 (1)(a)(b)(c))</p>	7 June 2021
<p>The quality and purpose of care standard is that children receive care from staff who— understand the children’s home’s overall aims and the outcomes it seeks to achieve for children; use this understanding to deliver care that meets children’s needs and supports them to fulfil their potential. (Regulation 6 (1)(a)(b))</p>	7 June 2021
<p>The education standard is that children make measurable progress towards achieving their educational potential and are helped to do so. In particular, the standard in paragraph (1) requires the registered person to ensure— that staff— help each child to achieve the child’s education and training targets, as recorded in the child’s relevant plans; support each child’s learning and development, including helping the child to develop independent study skills and, where appropriate, helping the child to complete independent study; understand the barriers to learning that each child may face and take appropriate action to help the child to overcome any such barriers; help each child to understand the importance and value of education, learning, training and employment; promote opportunities for each child to learn informally; maintain regular contact with each child’s education and training provider, including engaging with the provider and the placing authority to support the child’s education and training and to maximise the child’s achievement; (Regulation 8 (1) (2)(a)(i)(ii)(iii)(iv)(v)(vi))</p>	7 June 2021

<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;</p> <p>help each child to understand how to keep safe;</p> <p>have the skills to identify and act upon signs that a child is at risk of harm;</p> <p>manage relationships between children to prevent them from harming each other;</p> <p>understand the roles and responsibilities in relation to protecting children that are assigned to them by the registered person;</p> <p>take effective action whenever there is a serious concern about a child’s welfare;</p> <p>that the home’s day-to-day care is arranged and delivered so as to keep each child safe and to protect each child effectively from harm;</p> <p>that the premises used for the purposes of the home are located so that children are effectively safeguarded. (Regulation 12 (1) (2)(a)(i)(ii)(iii)(iv)(vi)(b)(c))</p>	<p>7 June 2021</p>
<p>The care planning standard is that children—</p> <p>receive effectively planned care in or through the children’s home; and</p> <p>have a positive experience of arriving at or moving on from the home.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure—</p> <p>that children are admitted to the home only if their needs are within the range of needs of children for whom it is intended that the home is to provide care and accommodation, as set out in the home’s statement of purpose. (Regulation 14 (1)(a)(b) (2)(a))</p>	<p>7 June 2021</p>
<p>The registered person must ensure that all employees—</p> <p>undertake appropriate continuing professional development;</p>	<p>7 June 2021</p>

receive practice-related supervision by a person with appropriate experience; and have their performance and fitness to perform their roles appraised at least once every year. (Regulation 33 (4)(a)(b)(c))	
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## Recommendations

- Staff should be familiar with the homes policies on record keeping and understand the importance of careful, objective and clear recording. Information about the child must always be recorded in a way that is helpful to them. The home's records on each child represent a significant contribution to their life history. ('Guide to the children's homes regulations including the quality standards', page 62, paragraphs 14.4, 14.5)

## Information about this inspection

Inspectors have looked closely at the experiences and progress of children and young people, 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:** 1244287

**Provision sub-type:** Children's home

**Registered provider:** ROC Northwest

**Registered provider address:** ROC Northwest, Metropolitan House, 3 Darkes Lane, Potters Bar EN6 1AG

**Responsible individual:** Katie Stephens

**Registered manager:** Post vacant

## Inspectors

Chris Scully, Social Care Inspector

Mandy Williams, Social Care Inspector

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