

1223681

Registered provider: Sandcastle Care Ltd

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home provides care for up to four children of the same gender (female). The manager has been in post since January 2021.

Due to COVID-19 (coronavirus), at the request of the secretary of state, we suspended all routine inspections of social care providers on 17 March 2020.

We last visited this setting on 2 December 2020 to carry out an assurance visit. The report is published on our website.

Inspection dates: 19 to 20 May 2021

Overall experiences and progress of children and young people, taking into account	requires improvement to be good
How well children and young people are helped and protected	requires improvement to be good
The effectiveness of leaders and managers	requires improvement to be good

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: 8 October 2019

Overall judgement at last inspection: Outstanding

Enforcement action since last inspection: none

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Recent inspection history

Inspection date	Inspection type	Inspection judgement
08/10/2019	Full	Outstanding
04/12/2018	Full	Good
06/03/2018	Interim	Improved effectiveness
08/05/2017	Full	Good



Inspection judgements

Overall experiences and progress of children and young people: requires improvement to be good

Children are not currently having a positive experience living at this home. All four children were spoken to as part of this inspection. They all shared concerns about their day-to-day life in the home. They said that they often did not have positive relationships with each other. This was causing them to feel anxious and unhappy sometimes.

Children can, at times, have a negative influence upon each other. There have been occasions when they have conspired together to go missing from the home. They can also be negative and hurtful towards each other. This causes them distress.

The home has been damaged by children on several occasions. This has occurred during incidents when children's behaviour has been destructive. Staff have been unable to prevent them from pulling light fittings down and causing damage to the walls. One child's bedroom had two large holes in the wall. The home does not currently provide a homely environment. Some children reported that it did not feel like a home to them.

Children reported that there was always 'drama' in the home. There had been an increase in the number of incidents. These left children feeling unsettled and wanting other children to leave the home.

All children at this home smoke cigarettes. One child started smoking while living at the home and another's smoking has increased. None of the children are engaging in smoking cessation support despite this being offered. This does not show that children are helped to make changes resulting in positive health and lifestyle choices.

Two children have had successful transitions out of the home. They have had planned moves into semi-independent accommodation. They had a good experience of living at the home and progressed well.

Staff support children to attend education. Children who were not in education prior to coming to live at the home now attend. One child returned to education on a reduced timetable which is now increasing. Children's life chances are improved as a result of their engagement in education.

Social workers and one parent spoken to as part of this inspection gave positive feedback. They said that good progress had been made in some areas and that children had positive relationships with staff.

Children have also made progress in reducing their self-harm. This is due to the positive relationships they have with staff. They feel able to trust and confide in



them. Children engage with the home's therapist and benefit from the therapeutic support she offers.

One child has progressed well in developing independence skills and now has several skills that will help her live independently as an adult.

Although there are concerns about the children's current impact on each other, matching considerations are detailed and well thought through. Managers have made the decision to reduce the number of children in the home down to three. This is because they feel that matching a fourth child into the home always results in difficult relationship dynamics. It is pleasing that managers have recognised this and intend to take action to reduce the likelihood of similar difficulties in the future.

How well children and young people are helped and protected: requires improvement to be good

A serious safeguarding incident has occurred which put all children at risk of harm. All four children took a class A drug which was supplied by one or two of them to the others. Drug use is a known risk for one child, but actions taken to mitigate against this were ineffective on this occasion. Staff acted appropriately to support children once they were aware of their drug use.

Risks for one child are escalating due to negative peer influence. She is involved in regular heightened incidents in the home and is also putting herself at risk of harm in the community. She has become criminalised due to unsafe behaviours in the community. Staff have not been able to keep her safe.

Relationships between children are a cause for concern. Staff reported that children do not feel safe and have been intimidated by others. Children reported that others in the home sent them threatening messages over social media. Children also reported that they were directed by staff to remain in their bedrooms while staff attempted to manage incidents of heightened behaviour. This does not promote an environment where children feel, and are, safe.

Staff are familiar with children's risks and understand what they should do to manage and mitigate those risks. When children go missing, staff follow their missing from home protocols.

The risk of self-harm has reduced for some children. Although they stated that sometimes they felt like harming themselves, they had strategies in place to manage these feelings, and felt that staff were a good source of support.

Staff understand contextual safeguarding and how external factors have an impact on children's safety. One member of staff has taken a lead and trained others in this area. Peer mapping has also been introduced so that staff have better understanding of children's peers and the influence they may have on their safety.



Safe recruitment practice ensures that all staff employed to work with children are safe and suitable to do so.

The effectiveness of leaders and managers: requires improvement to be good

Managers have developed good relationships with external professionals and with children's families. This helps to ensure that every aspect of children's care, safety and welfare is considered.

Managers have acted on the requirements made at the home's assurance visit, and these requirements are now met.

The home's records are generally in good order, although a few shortfalls were identified. One child's healthcare plan and placement plan did not contain important information relating to medication. Tracking the number of incidents was difficult due to no clear log of incidents being in place. This hinders incident monitoring.

The complaints process is not clear. Where children have made complaints, there is no audit trail of actions or outcomes, so children are not clear what has happened after they have complained. This has the potential to leave them feeling that they have not been listened to.

Some staff felt that a fourth child should not have been admitted to the home. They reported that the current difficult situation may have been avoided had the admission not taken place. They felt that the addition of a fourth child had had a significant detrimental impact on the three children already living at the home.

Staff report that they feel well supported by the manager, deputy manager and responsible individual. The deputy manager takes the role of 'well-being practitioner' which staff feel supports their mental health and overall well-being.

Managers understand when children are not making good progress. They take effective action to end placements while being mindful of the impact of a placement disruption and supporting a planned move out of the home.



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
The quality and purpose of care standard is that children receive care from staff who—	30/06/2021
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.	
In particular, the standard in paragraph (1) requires the registered person to—	
ensure that the premises used for the purposes of the home are designed and furnished so as to—	
meet the needs of each child. (Regulation 6 (1)(a)(b) and $(2)(c)(i)$)	
The positive relationships standard is that children are helped to develop, and to benefit from, relationships based on—	30/06/2021
mutual respect and trust;	
an understanding about acceptable behaviour; and	
positive responses to other children and adults. (Regulation $11(1)(a)(b)(c)$)	
The protection of children standard is that children are protected from harm and enabled to keep themselves safe.	30/06/2021
In particular, the standard in paragraph (1) requires the registered person to ensure—	
that staff manage relationships between children to prevent them from harming each other	

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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. (Regulation 12 (1)(2)(a)(iv)(b))	
The registered person must maintain records ("case records") for each child which— are kept up to date. (Regulation 36(1)(b))	30/06/2021
The registered person must ensure that a record is made of any complaint, the action taken in response, and the outcome of any investigation. (Regulation 39(3))	30/06/2021

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: 1223681

Provision sub-type: Children's home

Registered provider: Sandcastle Care Ltd

Registered provider address: Sandcastle Care Ltd, 49 Whitegate Drive, Blackpool

FY3 9DG

Responsible individual: Amber Steib

Registered manager: Lisa Routh

Inspector

Charlie Bamber, Social Care Inspector



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