

2497156

Registered provider: Compass Children's Homes Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home provides care and accommodation for up to four children with a variety of complex needs and who are aged seven to 17. A private provider operates the home.

There is no registered manager. Two managers who have been in charge of the home have since left. At the time of the inspection, a senior manager had recently taken over and was supporting the day-to-day management of the home.

Inspection dates: 5 to 6 May 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**

There are serious and widespread failures that mean children and young people are not protected and their welfare is not safeguarded. The care and experiences of children and young people are poor, and they are not making progress.

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

Ofsted last visited this home on 10 February 2021 to carry out a monitoring visit. The report is published on the Ofsted website.

Date of last inspection: 28 February 2020

Overall judgement at last inspection: sustained effectiveness

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
28/02/2020	Interim	Sustained effectiveness
26/09/2019	Full	Good

Inspection judgements

Overall experiences and progress of children and young people: inadequate

Children's behaviours are not managed well by staff. This contributes to children experiencing instability, and it does not promote children's welfare. Two children have recently moved on from the home at short notice. For one child this was in an unplanned way. At the time of the inspection, one child lived at the home.

When children are away from the home, staff do not ensure that they take what could be essential medication with them. For example, a child does not take his inhalers to school. In addition, staff do not have clear guidance from the prescriber about when a child's medication should be administered. When medication is administered to children, staff do not always record this accurately. One professional explained that staff had not supported the child with their mental health. These shortfalls compromise children's physical and emotional health.

Managers have challenged a child's placing authority about the suitability of a child's school. As a result, the child is now accessing a school that can meet his individual needs. Despite this, events at the home affect children's progress at school. For example, a teacher advised the inspector that a child's attendance and punctuality are poor because of disruptions at home. A child does not attend school in the correct uniform. Furthermore, he continues to take his mobile phone into school despite teachers requesting help from staff for him not to do so because it has an impact on his learning. At this home, children do not receive consistently good support to help them to achieve their potential.

On one occasion, a manager who has since left failed to share plans with staff about a significant visit for a child and his brothers and sisters. As a result, the child missed out on seeing all of his brothers and sisters together before some moved on to adoption. On another occasion, a professional received conflicting information about a child visiting a parent. The lack of communication caused unnecessary distress to the child and parent.

The social worker for a child who recently moved out of the home expressed concerns about the quality of clothing and footwear the child had. Consequently, at times, this child did not have their basic care needs met.

Staff encourage children to attend regular children's meetings, and this provides children with an opportunity to share their views and contribute to decisions about the home. Children enjoy a range of activities. Staff encourage children with their interests, and one child continues to attend a local football academy. As a result, some children have some positive experiences.

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

Managers do not identify and respond appropriately to all safeguarding concerns. On three occasions, the manager has not informed relevant people about allegations made against staff members. This has led to key information not being reviewed as part of investigations. In addition, staff do not appropriately supervise children all of the time. As a result, on two occasions, children have been in each other's bedrooms without staff knowledge. Managers fail to share the potential seriousness of safeguarding concerns effectively with professionals, to enable them to make informed decisions about children's care. At times, managers have not followed the organisation's and local authority's safeguarding procedures. This places children at risk of harm.

Managers and staff do not understand their responsibilities for keeping children safe. One child has been accessing inappropriate websites and speaking to an unknown individual on social media. Managers have not provided staff with clear guidance on monitoring children's internet use. Despite concerns about a child's vulnerability and risks relating to internet use, staff did not share relevant information with his teachers so that they could support him in school. These significant shortfalls increase the risk of children being exploited.

Physical intervention is used by staff to prevent children hurting themselves or others. However, incident records lack detail. For example, there is no detailed description of holds used by staff. It cannot be established if the person providing debriefs to staff and children has been involved in the incident and is able to provide an independent and objective review. Managers do not speak to staff and children about incidents involving physical intervention. This hinders the manager's ability to monitor the appropriateness of physical intervention practice and learn from incidents that happen.

Ineffective consequences do not help children to develop socially aware behaviour. Consequences are not implemented quickly and so lose their impetus. In addition, multiple consequences are imposed, which are not always proportionate. For example, one child had their electrical devices removed at the time of the incident and also had to 'earn privileges' to attend a planned trip taking place two days later. One parent feels that their child's behaviour has deteriorated since moving to the home. As a result of staff's inability to manage behaviours effectively, there has been an increase in incidents, and children's positive experiences are limited.

Some improvements have been made to the condition of the home, but the environment still requires improvement to be safe and homely for children. Children can still access a first-floor roof, despite some measures being implemented to restrict access. This poses a risk of significant injury to children should they fall. Damaged walls are poorly repaired and remind children of incidents that have taken place. One bedroom door does not close independently and would not be effective in reducing the spread of fire.

The quality of children's risk assessments is poor. For example, information is out of date and misleading. Plans do not reflect information recorded in other documents. In addition, incident records do not always reflect what has happened. As a result, managers and staff do not fully understand and act on risks, which impacts on children's safety and experiences.

Managers do not fully assess and review risks associated with the location of the home. Known risks related to gang related concerns and issues relating to the misuse of drugs are prevalent in the area in which the home is situated. It is not clear if and how managers and staff have worked with the police to understand and manage potential risks to children who reside at the home.

Recruitment of staff is managed well. This ensures that children are cared for by staff who are assessed by managers as suitable.

The effectiveness of leaders and managers: inadequate

Managers do not communicate effectively with professionals and parents. For example, information received by a previous manager was not shared with staff and this led to a child missing a significant event with his family. One professional, who is responsible for independently reviewing allegations against people in a position of trust, was not made aware of all relevant information. Poor communication and lack of effective partnership working mean that children do not receive coordinated and consistent care. In turn, this has an impact on their safety, experience and progress.

Systems and processes to review the quality of care are poor. Managers do not identify safeguarding concerns recorded by staff in children's records, and gaps and inaccuracies in records are not identified by managers. As a result, managers do not evaluate information effectively, challenge poor practice in a timely way and escalate concerns to relevant professionals.

Two complaints from professionals had been received by managers but not properly recorded. As a result, it is not clear what action has been taken in response to these concerns and whether managers are using feedback to improve the quality of care.

Staff do not receive regular supervision from managers. This is a missed opportunity to review safeguarding practices, staff development and children's progress and experiences.

Training needs for staff are not always identified and actioned by managers. Two staff members have not completed basic training to support them in their role. This does not ensure that children receive care from staff who have the knowledge and skills to meet their individual needs.

Managers do not have high expectations for children and do not provide the quality of care and accommodation outlined in the home's statement of purpose. As a result, children's needs are not being met well, and placing authorities are not receiving the services they have commissioned.

Managers do not always notify Ofsted of serious incidents and the outcome of investigations into staff practice. This prevents the regulator having full and timely information to monitor the home.

The senior manager and responsible individual found the concerns during internal audits and took swift action. The provider has voluntarily cancelled the home's registration after the child living at the home moved on quickly, although the move was in a planned way in line with his wishes.

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>	17 June 2021
<p>The quality and purpose of care standard is that children receive care from staff who—</p> <p>understand the children's home's overall aims and the outcomes it seeks to achieve for children;</p>	17 June 2021

<p>use this understanding to deliver care that meets children's needs and supports them to fulfil their potential.</p> <p>In particular, the standard in paragraph (1) requires the registered person to—</p> <p>ensure that staff—</p> <p>understand and apply the home's statement of purpose;</p> <p>protect and promote each child's welfare;</p> <p>treat each child with dignity and respect. (Regulation (6) (1)(a)(b) (2)(a)(b)(i)(ii)(iii))</p>	
<p>The education standard is that children make measurable progress towards achieving their educational potential and are helped to do so. (Regulation 8(1))</p>	17 June 2021
<p>The health and well-being standard is that—</p> <p>the health and well-being needs of children are met; children receive advice, services and support in relation to their health and well-being. (Regulation 10 (1)(a)(b))</p>	17 June 2021
<p>The positive relationships standard is that children are helped to develop, and to benefit from, relationships based on—</p> <p>an understanding about acceptable behaviour.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure—</p> <p>that staff—</p> <p>encourage each child to take responsibility for the child's behaviour, in accordance with the child's age and understanding. (Regulation 11 (1)(b) (2)(a)(iii))</p>	17 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>	17 June 2021

<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>take effective action whenever there is a serious concern about a child's welfare; and</p> <p>are familiar with, and act in accordance with, the home's child protection policies;</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 designed, furnished and maintained so as to protect each child from avoidable hazards to the child's health. (Regulation 12 (1) (2)(a)(i)(ii)(vi)(vii)(b)(d))</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> <p>helps children aspire to fulfil their potential; and</p> <p>promotes their welfare.</p> <p>In particular, the standard in paragraph (1) requires the registered person to—</p> <p>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;</p> <p>ensure that staff have the experience, qualifications and skills to meet the needs of each child;</p> <p>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;</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)(c)(f)(h))</p>	<p>17 June 2021</p>

The registered person must make arrangements for the handling, recording, safekeeping, safe administration and disposal of medicines received into the children's home. (Regulation 23 (1))	17 June 2021
<p>The registered person must ensure that—</p> <p>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—</p> <p>the date, time and location of the use of the measure;</p> <p>a description of the measure and its duration;</p> <p>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 (3)(a)(iii)(iv)(c))</p>	17 June 2021
The registered person must maintain records ("case records") for each child which— are kept up to date. (Regulation 36 (1)(b))	17 June 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))	17 June 2021
<p>The registered person must notify HMCI and each other relevant person without delay if—</p> <p>there is any other incident relating to a child which the registered person considers to be serious. (Regulation 40 (4)(e))</p>	17 June 2021
<p>The registered person must review the appropriateness and suitability of the location of the premises used for the purposes of the children's home at least once in each calendar year taking into account the requirement in regulation 12(2)(c) (the protection of children standard).</p> <p>When conducting the review, the registered person must consult, and take into account the views of, each relevant person. (Regulation 46 (1)(2))</p>	17 June 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: 2497156

Provision sub-type: Children's home

Registered provider: Compass Children's Homes Ltd

Registered provider address: Mountfields House, Epinal Way, Off Squirrel Way, Loughborough, Leicestershire LE11 3GE

Responsible individual: Mark Ryder

Registered manager: Post vacant

Inspectors

Helen Malanaphy, Social Care Inspector
Jackie Line, Regional Inspector Manager

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