

SC425985

Registered provider: Autism Initiatives (UK)

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This children's home is run by a private organisation. It provides care for up to seven disabled children.

The manager has been registered with Ofsted since 31 March 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.

Inspection dates: 18 to 19 May 2021

Overall experiences and progress of children and young people, taking into account	inadequate
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How well children and young people are helped and protected	inadequate
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The effectiveness of leaders and managers	inadequate
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There are serious and widespread failures that mean children are not protected, their welfare is not promoted or safeguarded, and their care and experiences are poor.

Date of last inspection: 30 May 2019

Overall judgement at last inspection: Good

Enforcement action since last inspection: None

Recent inspection history

Inspection date	Inspection type	Inspection judgement
30/05/2019	Full	Good
05/03/2019	Interim	Improved effectiveness
20/06/2018	Full	Good
30/01/2018	Interim	Sustained effectiveness

Inspection judgements

Overall experiences and progress of children and young people: inadequate

Poor care planning and insufficient and unstable staffing arrangements have significantly affected children's overall experiences and progress.

Children do not receive care from a consistent team of staff. There is a reliance on temporary staff to cover gaps in the staff roster. This means that children are not able to form lasting and trusting relationships with the staff who care for them.

Staff have been unable to establish consistent routines and boundaries with children. As a result, some children are choosing not to clean their bedrooms or to regularly undertake personal care tasks. There is little intervention from staff to challenge this. In addition, staff do not plan evening meals, and as a result, some children are choosing to frequently eat unhealthy options such as highly processed foods.

Care planning is poor, and there is a lack of effective action to ensure children make good progress. For example, one child has not attended school for a considerable period and is currently not in education, employment or training (NEET).

Arrangements to support the child to overcome his barriers to learning and take part in education have been ineffective. In addition, there is no cohesive plan in place for his day-to-day care. The child frequently plays games on his computer until the early hours of the morning and does not get up until late in the day. This child's welfare is not being promoted, and he is making poor progress.

Children's care plans are not consistently followed by staff. For example, one child should receive care and support from two members of staff during the day to keep him safe. The manager has not always ensured that there are sufficient staff on the rota to enable this to happen.

Transition planning is poor. Two children are due to leave the home shortly and move to adult services. Despite this, there are no firm plans in place regarding their future provision, and children have not received sufficient support to prepare them for this move. The manager has not effectively challenged the relevant placing authorities or escalated her concerns about the lack of progress with transitional planning.

The home has not been maintained to a standard that protects children from avoidable hazards to their health and well-being. For example, two of the children's bedrooms were dirty; there were loose wires in some communal areas and one fire exit was blocked by clutter.

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

The day-to-day care of children is not being delivered in a manner that protects them from harm. The arrangements to identify and reduce risks to children's safety and well-being are not sufficient.

The manager has failed to adequately identify and assess significant risks to the safety and well-being of children. For example, two children spend considerable amounts of unsupervised time using the internet. No checks have been made in relation to the internet sites they are accessing and no agreement about usage has been made with the child or their relevant professionals. One child is known to be speaking to people online, but staff have not undertaken any checks to ascertain the identity of these people. In addition, children are not being supported to understand how to keep themselves safe online. This fails to safeguard children.

The manager has failed to adequately assess and document the significant risks that one child may pose to another child living at the home. This means that staff are not provided with the clear instructions they need to safeguard the children in their care. Staff were not able to demonstrate sufficient knowledge about these risks and any actions they would take to protect children from each other.

The manager has not ensured that all risk assessments are updated following significant events. For example, one child has changed the password on their phone, which prevents staff from checking his online activity. The manager has not assessed the risks this may present to the child, and no additional measures have been put in place to reduce the risk.

The manager did not take sufficient or effective action when an allegation was made about a member of staff. The manager did not instigate a formal investigation and made no record of her actions or the rationale for her decision making. In addition, the manager did not notify relevant safeguarding professionals or Ofsted of the allegation.

Staff demonstrate a lack of understanding of the home's safeguarding policies and their roles and responsibilities in relation to safeguarding children. For example, there was a delay in staff informing the manager of an allegation about a colleague.

This lack of knowledge and lack of effective action do not protect children from harm.

The manager has failed to ensure that there are sufficient experienced staff in place to meet the needs of all the children who live at the home. For example, during the inspection, a child who should be supported on a staffing ratio of 2:1 was being supported on a ratio of 1:1 by an agency member of staff he was unfamiliar with. This child has been supported on a 1:1 on previous occasions despite the child's risk assessment determining he requires 2:1 staffing.

The effectiveness of leaders and managers: inadequate

Poor leadership and shortfalls in management oversight are having an adverse impact on the well-being of children and the progress they are making. The registered manager is not leading the home in a way that enables children to achieve their full potential. This is because she has not ensured that staff balance the children's right of choice and control over their lives with what is healthy and safe for children to do. For example, one child frequently stays up all night playing games on his computer, and then he sleeps during the day. Staff do not challenge this behaviour, and as a result, this child is making poor progress.

The manager demonstrates a lack of knowledge and oversight of the progress children are making. For example, she does not know why a child has been turned down for a college place and has not taken steps to ascertain whether the child's Education, Health and Care Plan (EHCP) could be reviewed. Furthermore, she has not recognised the impact that the lack of routines and boundaries is having on the progress children are making.

The manager has failed to ensure continuity of staffing structures at the home. There has been significant usage of bank and agency staff to cover gaps in the staff roster. One child said, 'I don't know who will be supporting me from one day to the next, and that is really confusing.'

The manager has failed to ensure that all restrictions on the liberty of children are regularly reviewed. Staff lack knowledge about how any restriction of liberty for children should be agreed and applied. As a result, staff have not challenged whether a restriction is necessary or proportionate. For example, the door to the back garden is kept locked, and children can only access the garden when staff allow them to do so. This means that the rights of disabled children are not safeguarded effectively.

Shortfalls were identified in the training provided to staff to ensure they can meet the needs of children. For example, not all staff have been trained on how to use a non-verbal child's communication device. This compromises the child's ability to communicate with those caring for him.

The manager has failed to notify Ofsted of a number of incidents that have occurred within the home. This hinders Ofsted's ability to ensure that the provider has taken

the necessary action. It also raises concerns about the manager's understanding of the regulations.

Internal and external monitoring systems are not sufficiently robust to identify the shortfalls in the quality of care provided to children. Where shortfalls have been identified, the manager has been ineffective in prioritising, challenging and making improvements. In addition, the manager is regularly working on shifts to cover gaps on the rota, and this is compromising her capacity to make improvements.

10 requirements have been made to address the shortfalls identified during the inspection. Three requirements are subject to a compliance notice, and the progress the provider is making will be closely monitored by Ofsted.

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 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>understand the roles and responsibilities in relation to protecting children that are assigned to them by the registered person;</p>	04 July 21

<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; and</p> <p>that the effectiveness of the home's child protection policies is monitored regularly.</p> <p>(Regulation 12 (1) (2)(a)(i)(ii)(iii)(v)(vi)(vii)(b)(d)(e))</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 work as a team where appropriate;</p> <p>ensure that staff have the experience, qualifications and skills to meet the needs of each child;</p> <p>ensure that the home has sufficient staff to provide care for each child;</p> <p>ensure that the home's workforce provides continuity of care to 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>04 July 21</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)(d)(e)(f)(h))	
<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 arrangements are in place to—</p> <p>plan for, and help, each child to prepare to leave the home or to move into adult care in a way that is consistent with arrangements agreed with the child’s placing authority.</p> <p>that each child’s relevant plans are followed. (Regulation 14 (1)(a)(b) (2)(b)(iii)(c))</p>	22 August 21
<p>The education standard is that children make measurable progress towards achieving their educational potential and are helped to do so.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure—</p> <p>that staff—</p> <p>help each child to achieve the child’s education and training targets, as recorded in the child’s relevant plans;</p> <p>promote opportunities for each child to learn informally;</p> <p>help a child who is excluded from school, or who is of compulsory school age but not attending school, to access educational and training support throughout the period of exclusion or non-attendance and to return to school as soon as possible. (Regulation 8 (1) (2)(a)(i)(v)(viii))</p>	22 August 21
The registered person must ensure that—	22 August 21

<p>children can access all appropriate areas of the children's home's premises; and</p> <p>any limitation placed on a child's privacy or access to any area of the home's premises—</p> <p>is intended to safeguard each child accommodated in the home;</p> <p>is necessary and proportionate;</p> <p>is kept under review and, if necessary, revised; and</p> <p>allows children as much freedom as is possible when balanced against the need to protect them and keep them safe. (Regulation 21(b)(c)(i)(ii)(iii)(iv))</p>	
<p>The registered person must make arrangements for the handling, recording, safekeeping, safe administration and disposal of medicines received into the children's home.</p> <p>In particular the registered person must ensure that—</p> <p>a record is kept of the administration of medicine to each child. (Regulation 23 (1) (2)(c))</p>	22 August 21
<p>The registered person must ensure that all employees—</p> <p>undertake appropriate continuing professional development;</p> <p>receive practice-related supervision by a person with appropriate experience. (Regulation 33 (4)(a)(b))</p>	22 August 21
<p>The registered person must maintain records ("case records") for each child which—</p> <p>are kept up to date.</p> <p>Case records must be kept—</p> <p>securely in the children's home during the period when the child to whom the case records relate is accommodated there;</p> <p>(Regulation 36 (1)(b)(2)(c))</p>	22 August 21
<p>The registered person must notify HMCI and each other relevant person without delay if—</p>	22 August 21

<p>there is an allegation of abuse against the home or a person working there; or</p> <p>there is any other incident relating to a child which the registered person considers to be serious. (Regulation 40 (4)(c)(d)(e))</p>	
<p>The registered person must ensure that an independent person visits the children's home at least once each month.</p> <p>When the independent person is carrying out a visit, the registered person must help the independent person—</p> <p>if they consent, to interview in private such of the children, their parents, relatives and persons working at the home as the independent person requires; and</p> <p>to inspect the premises of the home and such of the home's records (except for a child's case records, unless the child and the child's placing authority consent) as the independent person requires. (Regulation 44 (1) (2)(a)(b))</p>	22 August 21

* These requirements are subject to a compliance notice.

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: SC425985

Provision sub-type: Children's home

Registered provider: Autism Initiatives (UK)

Registered provider address: Sefton House, Bridle Road, Bootle, Merseyside L30 4XR

Responsible individual: Katharine Silver

Registered manager: Anna Elliott

Inspectors

Sophie Thomson, Social Care Inspector
Rachel Springford, Social Care Inspector

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