

1258091

Registered provider: Cambian Childcare Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

The home is privately owned and provides care for up to five children who have suffered early life trauma. The home provides therapeutic support from an in-house clinical team. There is a registered manager in post.

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 8 to 9 December 2020 to carry out an assurance visit. The report is published on our website.

Inspection dates: 4 to 5 August 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 or their welfare is not promoted or safeguarded, and the care and experiences of children are poor, and they are not making progress.

Date of last inspection: 8 May 2019

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
08/05/2019	Full	Good
31/07/2018	Interim	Declined in effectiveness
11/04/2018	Full	Good
12/12/2017	Full	Requires improvement to be good

Inspection judgements

Overall experiences and progress of children and young people: inadequate

Five children live in the home. Since the last inspection, one child has transitioned on from the home in a planned way. Two children have moved into the home and settled well.

One child lives with a complex, life-threatening, long-term health condition. They have undergone a serious operation and, as a result, they need a high level of care. The registered manager and staff have failed to provide them with such. There have been several errors when giving this child their medication. For example, staff have not provided the child with the correct dose at the correct time. If this had continued, then this could have had a serious and detrimental impact on the child's health.

On one occasion, the manager did not correctly record the child's medication dose. When the child returned home from the hospital, the manager relied on a verbal handover from staff. The manager did not check the child's discharge papers. As a result, this child received an overdose of their medication for seven days.

The impact of this medication error has delayed the child's recovery. Health professionals have had to review and amend the child's medication. This is to compensate for any potential damage to the child's health. Professionals say it is a 'wait and see' approach to check if there will be any long-term effects. An internal investigation is being undertaken into these significant errors.

Staff do not always follow the steps outlined in children's health plans. For example, when a child was displaying signs that they were unwell, staff did not follow medical advice. This child is particularly vulnerable to infection. Staff contacted the hospital who advised them at the time to take the child to hospital. Staff did not do so. Staff took the child to hospital the next day. The child was then admitted with a suspected urinary tract infection. This infection could have had a significant impact on their health.

The home has a homely feel, but the décor requires improvement. Damage caused by children's behaviour is not always repaired quickly and could present a risk to children. During the inspection repairs were undertaken to rectify this.

One child's bedroom environment has significantly improved since the last inspection. Staff help this child to recognise and respond to feelings safely. The child no longer damages furniture, toys or clothes. They now understand that they deserve them. As a result, their self-esteem and self-image has significantly improved. Plans are now in motion for this child to transition to a long-term foster placement. The independent reviewing officer described their progress as 'most fantastic'.

All children have good attendance at school. One teacher reported 'good communication' between the school and the home. One child, who has global developmental delay, has achieved age related expectations. This is good progress as they completed their learning at home during the summer term due to the restriction in place relating to Covid-19.

At the time of the inspection, staff had taken the children on holiday to the seaside. The inspector saw and spoke to all the children during a video call arranged by staff. During the call, children gave 'thumbs up' when asked how they felt about living at the home. They said they like the staff and were able to identify staff who they trust. Children said they were having fun. Some children had been to the beach for the first time.

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

Staff do not always follow safeguarding procedures. They fail to report allegations and disclosures made by children to managers. Managers fail to investigate this poor safeguarding practice effectively or take sufficient action to protect children while investigations take place. As a result, the measures in place to keep children safe are inadequate.

Children are not helped to feel safe in the home. On two occasions, children have raised concerns to staff, including an allegation about a staff member 'slamming' a child on the floor and a disclosure to staff of possible abuse. On both occasions, children did not receive a response from the registered manager for a significant period of time after the concerns were raised. Children also did not receive any emotional support from the manager or staff. As a result, children are not supported after raising concerns and they are not provided with the reassurance that they are safe.

Managers do not always share accurate information with external professionals. Safeguarding notifications do not match with information recorded in the home. An allegation shared with the designated officer was missing information. Therefore, professionals make decisions without being aware of important detail. As a result, some of these decisions may not always be in children's best interests.

Some staff do not have the skills to effectively respond to children's needs and behaviours. During one incident, staff thought a child had gone missing. Three members of staff 'scoured the streets' looking for them. However, the child was hiding behind a curtain in the home. Staff failed to notice where they were, despite them being in the home. This incident resulted in the child being physically restrained. This was due to staff being unable to de-escalate the child's behaviours. Some recordings of physical interventions are poor and contain errors.

Staff help children to recognise and manage their feelings safely. They use creative key work to help them to do so. As a result, incidents in the home have significantly reduced. There is also a dramatic decrease in the use of physical intervention.

The effectiveness of leaders and managers: inadequate

Management oversight in the home is inadequate. Their response to poor staff practice is inconsistent. There is often a delay and actions are ineffective. As a result, children are cared for by incompetent staff who do not keep them safe.

The registered manager has made serious errors when monitoring children's health needs. One of these children has a complex and life-threatening condition. An internal investigation of these errors is underway. Leaders and managers have implemented additional measures to prevent the errors from reoccurring. However, the long-term effectiveness of these measures is not yet known.

The manager has continued to prepare medication without adequate oversight. For example, there is no contingency plan in place when senior managers are absent from the home. Another manager recorded that they had forgotten they were on-call twice in one week. This resulted in additional medication checks not being carried out. This is poor management oversight and increases the likelihood of further errors. Therefore, significant concerns remain in respect of children's health needs. This includes children who require a high level of care.

The manager completes monthly audits as well as other forms of monitoring and reviewing. These audits identify some shortfalls. However, actions to rectify them are insufficient and are not reviewed effectively.

The responsible individual is absent from work. Leaders have implemented additional management oversight and are undertaking audits of practice in the home. They are scrutinising the care children receive. Leaders and managers are aware of the shortfalls and have identified the areas in need of improvement.

Staff do not receive regular supervision. When they do, the quality of this is variable. The manager does not always challenge poor practice. However, senior managers are now monitoring this. Staff do not receive appraisals. This hinders the progress of staff practice and the quality of care provided in the home.

The quality-of-care review does not fully reflect on the shortfalls in the home. The action plan in place does not address these shortfalls either. This hinders improvements in the quality of care children receive.

The manager sometimes completes a 'lessons learnt' exercise with the staff team. This helps staff to reflect on their practice. It also encourages them to develop professional curiosity. Staff receive some training which is pertinent to the needs of children living in the home. However, they do not receive training in relation to how they respond to allegations. As a result, staff are not equipped with the information they need to respond to safeguarding concerns effectively.

Due to the significant concerns identified during this visit, Ofsted has issued two compliance notices under regulations 10 (The health and well-being standard) and 12 (The protection of children standard).

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> <p>the health and well-being needs of children are met;</p> <p>children receive advice, services and support in relation to their health and well-being;</p> <p>and children are helped to lead healthy lifestyles.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure —</p> <p>that staff help each child to —</p> <p>achieve the health and well-being outcomes that are recorded in the child's relevant plans;</p> <p>take part in activities, and attend any appointments, for the purpose of meeting the child's health and well-being needs;</p> <p>that each child has access to such dental, medical, nursing, psychiatric and psychological advice, treatment and other services as the child may require.</p> <p>(Regulation 10 (1)(a)(b)(c) (2)(a)(i)(iii)(c))</p> <p>This specifically relates to managers and staff ensuring that they understand and follow guidance provided by children's medical and health professionals.</p>	19 September 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 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</p>	19 September 2021

<p>necessary, make arrangements to reduce the risk of any harm to the child;</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> <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. (Regulation 12 (1) (2)(a)(i)(iii)(v)(vi)(vii)(b)(d)(e))</p> <p>This specifically relates to the manager's and staff's understanding of their safeguarding responsibilities. This includes responding in a timely manner to any allegations and/or disclosures children may make. Thereafter implementing the necessary safeguarding measures to ensure that children are safe.</p> <p>This also relates to leaders and managers ensuring that the home environment is safe and that hazards which could be a fire risk are rectified as soon as possible.</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;</p> <p>and promotes their welfare.</p>	<p>29 September 2021</p>

<p>In particular, the standard in paragraph (1) requires the registered person to—</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>demonstrate that practice in the home is informed and improved by taking into account and acting on—</p> <p>feedback on the experiences of children including complaints received; and</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)(c)(f)(g)(ii)(h))</p> <p>This specifically relates to leaders and managers ensuring that children are cared for by staff who have the skills, knowledge, experience and ability to meet their needs.</p> <p>Leaders and managers should ensure that any shortfalls, identified when monitoring and reviewing the care children receive, are responded to promptly. This includes the investigation of poor staff practice during which stringent measures should be in place to ensure that children remain safe.</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>medicine which is prescribed for a child is administered as prescribed to the child for whom it is prescribed and to no other child; and</p> <p>a record is kept of the administration of medicine to each child.</p> <p>In this regulation, "prescribed" means—</p>	<p>29 September 2021</p>

<p>ordered for a patient, for provision to the patient, under or by virtue of the National Health Service Act 2006 or section 176(3) of the Health and Social Care (Community Health and Standards) Act 2003. (Regulation 23 (1) (2)(b)(c) (4)(a))</p> <p>This specifically relates to the manager and staff ensuring that children's medication is stored, recorded and administered safely.</p>	
<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; and</p> <p>have their performance and fitness to perform their roles appraised at least once every year. (Regulation 33 (4)(a)(b)(c))</p> <p>This specifically relates to managers ensuring that staff receive regular and good quality supervision which enables them to reflect upon their practice and identify improvements. This is in addition to staff receiving an appraisal at least yearly.</p>	<p>29 September 2021</p>
<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>details of the child's behaviour leading to the use of the measure;</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>details of any methods used or steps taken to avoid the need to use the measure;</p> <p>the name of the person who used the measure ("the user"), and of any other person present when the measure was used;</p>	<p>29 September 2021</p>

<p>the effectiveness and any consequences of the use of the measure;</p> <p>a description of any injury to the child or any other person, and any medical treatment administered, as a result of the measure;</p> <p>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")</p> <p>has spoken to the user about the measure;</p> <p>has signed the record to confirm it is accurate;</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)(ii)(iii)(iv)(v)(vi)(vii)(viii)(b)(i)(ii)(c))</p> <p>This specifically relates to leaders and managers ensuring that children are only physically restrained as a last resort. In the event of such, that children receive the appropriate support afterwards and that any measure used is recorded appropriately.</p>	
<p>The registered person must notify HMCI and each other relevant person without delay if—</p> <p>there is an allegation of abuse against the home or a person working there. (Regulation 40 (4)(c))</p> <p>This specifically relates to the manager providing Ofsted and other relevant agencies with accurate information regarding serious incidents.</p>	<p>29 September 2021</p>
<p>The registered person must complete a review of the quality of care provided for children ("a quality of care review") at least once every 6 months.</p> <p>In order to complete a quality of care review the registered person must establish and maintain a system for monitoring, reviewing and evaluating—</p> <p>the quality of care provided for children;</p>	<p>29 September 2021</p>

any actions that the registered person considers necessary in order to improve or maintain the quality of care provided for children.

(Regulation 45 (1) (2)(a)(c))

This specifically relates to the manager ensuring that the quality-of-care review effectively evaluates the care children receive. In addition, that clear actions are identified to rectify any shortfalls in order to improve the care children receive.

* These requirements are subject to a compliance notice.

Recommendations

- The registered person should ensure that improvements are made to provide young people with a more homely environment. In particular, ensuring that any damage is repaired as soon as reasonably practicable. (Guide to the Children's Homes regulations, including the quality standards page 15, paragraph 3.7).

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: 1258091

Provision sub-type: Children's home

Registered provider: Cambian Childcare Limited

Registered provider address: Cambian Childcare Limited, Metropolitan House, 3 Darkes Lane, Potters Bar, Hertfordshire EN6 1AG

Responsible individual: Clare Hadfield

Registered manager: Bethany Sutherland

Inspector

Sarah Berry, Social Care Inspector

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