

Chariteens Residential Family Centre

10 Khartoum Road, London E13 8RF
Monitoring visit

Inspected under the social care common inspection framework

Information about this residential family centre

This centre is registered to provide care for up to six families. Alongside parenting assessments, the centre facilitates psychological assessments, drug and alcohol testing and counselling.

The manager registered with Ofsted in March 2015. There are currently three families undergoing assessment at the residential family centre.

Inspection date: 18 November 2021

Date of previous inspection: 15 May 2019

This monitoring visit

This monitoring visit was triggered after Ofsted received a complaint about the residential family centre. The concerns raised in the complaint include:

- Managers and staff do not provide families with a good level of care and that there is a lack of support.
- Managers and staff do not take concerns shared with them seriously and are dismissive of families' views.
- Staff lack empathy and do not understand the needs of parents and how these affect their parenting of their children.
- Staff's level of supervision is inadequate. In one case, this led to the poor weight gain of a baby which resulted in their overnight stay in hospital.
- Staff failed to notice that a mother was feeding her baby formula milk that was inappropriate for use with her baby. Staff also failed to notice that the mother was using the wrong-sized bottle teat while feeding her baby.

- Staff do not record detailed observations of childcare tasks undertaken. The recording form used does not allow for sufficient information to be recorded.
- Staff and managers do not work in an open or transparent way with other professionals.

The monitoring visit found that:

- Managers and staff provide families with an acceptable level of care and support.
- Managers and staff are not dismissive of what parents say and take on board their concerns.
- Families say that most staff are caring and have empathy, but that this is not the case for all staff.
- Staff's supervision of families is not consistently vigilant.
- Records of parents undertaking basic care tasks are sometimes incomplete. This makes it difficult to confirm that tasks such as feeding have been completed properly.
- Managers and staff generally work in partnership with other professionals.
- Case records are poorly managed. Some key records are not updated or available on file. Managers have difficulty locating requested information.

The inspectors examined documents and interviewed the registered manager, a member of staff, a health visitor and a child's guardian. Discussions were held with four parents.

Parents interviewed reported that generally they found most staff helpful and supportive. However, some parents said that this was not the case for all staff, and that some staff were less empathetic about families' complex situations and needs. The registered manager acknowledged that some staff found managing the behaviour of some parents challenging. This issue was highlighted at the previous monitoring visit and is one that the registered manager continues to address. Positive relationships between families and staff are important, so that assessments are fair and effective.

Staff involve parents in the assessment process and encourage their full participation. Some parents do not engage with assessment activities or follow staff guidance. As a result, some placements are not effective in supporting parents to provide safe care to their children. Staff listen to what parents tell them. However, the recording of staff observations of families is not always balanced and does not consistently use supportive language. This does not help to motivate parents to reflect on and improve their parenting skills.

The supervision of some families is inconsistent. For example, staff failed to notice that a mother was feeding her child baby formula designed for use with babies who had colic. The baby did not have colic. Similarly, staff failed to promptly notice that

the mother was using the wrong-sized bottle teat. This resulted in the baby having difficulties in feeding. This did not promote the baby's well-being.

The complaint indicated that staff were responsible for a baby's admission to hospital due to poor feeding. However, it is clear that staff acted on the differing advice of health professionals. A health visitor confirmed that health professionals do at times share differing opinions about children's weight gains and losses, and that this is what occurred on this occasion.

Staff recording of parents' completion of care tasks requires improvement. For example, a chart that detailed a parent's feeding schedule for her baby did not consistently include staff signatures to confirm that staff had observed the baby being fed. In other records, the mother's signature was omitted, and the amount of time taken to feed the baby was missing. This does not provide assurance that the parent was providing her child with safe care.

Records of the baby's nappy changes are also a cause for concern. These charts do not include staff signatures to confirm that staff had observed all nappy changes. It is noted that there was a gap of one week when there were no records of any nappy change being observed. The registered manager could not locate these records or account for why these records were missing. This does not demonstrate that staff are robust in evidencing parents' ability to provide their children with safe care.

The recording of information on case files is inconsistent. For example, the minutes of a placement planning meeting and children in care review were not available on files. Consequently, the purpose and progress of families' placements are not clear to staff and the professional network.

The management of key documents that relate to the staff team is poor. The registered manager had difficulty locating and producing information of a specified staff weekly rota and the staff training programme. This does not demonstrate that the management of records is orderly and efficient.

Managers have recently reintroduced face-to-face staff training opportunities facilitated by senior staff. This had been halted during the restrictions imposed due to the COVID-19 pandemic. The first training session was held the week prior to this monitoring visit. On this occasion, the focus of the training was safeguarding and child protection. However, children and their parents would benefit from staff increasing their knowledge and skills in child development and effective recording. This will also support the direct work that staff complete with families.

The complainant, a placing authority, said that working in partnership with staff and managers is not effective. The registered manager acknowledges that there were difficulties between the two parties, which she had tried to resolve. However, other external professionals spoken to confirmed that managers and staff are effective and consistent in their communication with them. This ensures that professionals are aware of any issues and placement development.

Some requirements and recommendations raised at the previous monitoring visit were not reviewed during this visit and are repeated. These relate to informing Ofsted of key events, the recording of complaints, maintaining clear records of allegations, staff completing formal training and ensuring that staff have a clear understanding of the purpose of each placement.

Shortfalls in staff training opportunities and the quality of some records were identified again at this monitoring visit.

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What does the residential family centre 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, the Residential Family Centres Regulations 2002 and the national minimum standards. The registered person(s) must comply within the given timescales.

Requirement	Due date
<p>The registered person shall ensure that all persons employed by him—</p> <p>receive appropriate training, supervision and appraisal; and</p> <p>are enabled from time to time to obtain further qualifications appropriate to the work they perform. (Regulation 17 (5)(a)(b))</p> <p>In particular, staff training should include a focus on child development, managing allegations against staff and managing challenging behaviour.</p>	1 February 2022
<p>The registered person shall establish and maintain a system for—</p> <p>reviewing at appropriate intervals; and</p> <p>improving, the quality of care provided at the residential family centre. (Regulation 23 (1)(a)(b))</p> <p>In particular, the provider should monitor the quality of the recording of basic care task observations, risk assessments, key-work sessions, placement plans and records of reviews. Case files should be up to date and orderly.</p> <p>Other records, such as staffing rotas and staff training programmes, should be reviewed to ensure that these meet the needs of families.</p>	31 December 2021
<p>If, in relation to a residential family centre, any of the events listed in column 1 of the table in Schedule 5 takes place, the registered person shall without delay notify the persons indicated in respect of the event in column 2 of the table.</p>	31 December 2021

<p>The registered person shall without delay notify the parent accommodated in the residential family centre with a child of any significant incident affecting the child's welfare unless to do so is not reasonably practicable or would place the child's welfare at risk.</p> <p>Any notification made in accordance with this regulation which is given orally shall be confirmed in writing.</p> <p>References in column 1 of the table in Schedule 5 to a centre shall be construed as references to a residential family centre.</p> <p>References in column 2 of the table to a local authority shall be construed as references to the local authority in whose area the residential family centre is situated. (Regulation 26 (1) (2) (3) (4) (5))</p>	
<p>The registered person must ensure that a written record is made of any complaint or representation, the action taken in response, and the outcome of the investigation. (Regulation 20 (6))</p>	31 December 2021
<p>The procedure under paragraph (1)(b) must in particular provide for—</p> <p>written records to be kept of any allegation of abuse or neglect, and of the action taken in response. (Regulation 12 (2)(d))</p>	31 December 2021
<p>The registered person shall ensure that—</p> <p>unnecessary risks to the health or safety of residents are identified and so far as possible eliminated.</p> <p>The registered person shall make arrangements, by training persons working at the residential family centre or by other measures, to prevent residents being harmed or being placed at risk of harm or abuse. (Regulation 11 (4)(c) (5))</p> <p>This relates to staff monitoring the feeds and feeding equipment that parents bring to the centre when they first arrive.</p>	31 December 2021

Recommendations

- The registered person should ensure that all new care staff have a minimum level 3 Children and Young People's Workforce Diploma, which must include mandatory social care units, or be working towards the relevant qualifications within six months of confirmation of employment. Staff may also find it helpful to have a level 3 award or certificate in Work with Parents or level 4 award in Work with Parents. ('Residential family centres: national minimum standards', 16.5)
- The registered person should ensure that the individual programme for each resident family is based on the placing authority's assessment of their need which identifies the purpose and scope of the residential assessment of parenting skill and capacity and any support which will be provided. This programme is set out in the family placement plan. ('Residential family centres: national minimum standards', 7.4)
- The registered person should ensure that where parents are being supported to develop parenting skills, they are enabled to build and sustain constructive relationships with staff so that, where possible, they are able to resolve conflicts themselves in a positive manner. ('Residential family centres: national minimum standards', 4.3)

Information about this inspection

The purpose of this visit was to monitor the action taken and the progress made by the residential family centre since its last Ofsted inspection.

This inspection was carried out under the Care Standards Act 2000.

Residential family centre details

Unique reference number: SC474728

Registered provider: Chariteens Residential Family Centre Ltd

Registered provider address: 10 Khartoum Road, London E13 8RF

Responsible individual: Eveline Serwadda

Registered manager: Rita Isingoma

Inspectors

Sandra Jacobs-Walls, Social Care Regulatory Inspector

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