

# 2654620

Registered provider: Montage Services Limited

Interim inspection

Inspected under the social care common inspection framework

## **Information about this children's home**

This privately owned children's home provides care and accommodation for up to two children. The home's statement of purpose states that the home cares for children with emotional and/or social difficulties and/or learning disabilities.

The home and the manager were registered with Ofsted on 17 September 2021. The first child was admitted to the home on 13 October 2021.

There was one child living in the home at the time of this inspection.

Due to COVID-19, at the request of the Secretary of State, we suspended all routine inspections of social care providers carried out under the social care common inspection framework (SCCIF) on 17 March 2020. We returned to routine SCCIF inspections on 12 April 2021.

**Inspection date: 9 February 2022**

**Date of last inspection:** 15 December 2021

**Judgement at last inspection:** requires improvement to be good

**Enforcement action since last inspection:** none

## **This inspection**

### **The effectiveness of the home and the progress and experiences of children and young people since the most recent full inspection**

This home was judged requires improvement to be good at the last full inspection.

At this interim inspection, Ofsted judged that it has sustained effectiveness.

Most requirements and recommendations from the last full inspection are either met or being implemented and are starting to make a difference. A detailed daily rota setting out expectations is now ensuring that staff consistently record their activities throughout the day. The quality of records is improving. There are now better systems to ensure that safer recruitment practice is in place. Supervision, team meetings and key-worker sessions now take place routinely.

The experiences and progress of the child are showing some improvement, but this is from a very low base. Managers accept that further time is needed to embed the recent changes so that staff can evidence that they are making a difference to the child's day-to-day experience. The trajectory of improvement is positive.

Persistent work by staff to engage the child in activities and develop trust has had some limited success, for example short trips outside the home. The child continues to spend most of their time in their bedroom regardless of the efforts made by staff to encourage them to participate in different activities. The child's preferred method of communicating with staff is via text and telephone. Staff are working hard to try and reduce this dependency of communication but recognise that this is a slow process. Staff have supported the child to stop smoking cigarettes; the child has now moved on to using a vape.

Records show that daily activity of staff and the child centres around the purchase and consumption of highly processed unhealthy fast food. The child chooses to have most of their meals in their bedroom. Staff prepare healthier meal options in an agreed menu, but progress is slow as the child will choose unhealthy options that are readily available and prepared.

There is too much delay, despite relentless efforts by the manager, to access specialist mental health support for the child. Staff acknowledge that they also require ongoing specific expert advice if they are to make and sustain the requisite changes. A review by the looked after children's nurse practitioner is planned. Registration with the local GP is in place but a full health assessment has not happened.

The child has not attended school for several years. The child is currently receiving four hours' tuition support a week, but often refuses to engage. Staff offer additional educational activities and have reduced access to the internet during school hours,

but this is compromised by access to previously downloaded programmes on the child's mobile phone.

Better behaviour management strategies and training for staff are leading to safer physical interventions. Two physical restraints in response to violent incidents were necessary, appropriate and proportionate. Records of these incidents are detailed and there is a comprehensive debrief for the staff and the child. Risk assessment is anticipated and assessed by staff for activities in and outside the home. Action to remove implements from the kitchen is intended to reduce injuries to staff.

Spending time with important family members is well supported and encouraged by staff.

The communal areas of the home are suitable, warm and clean. However, the child's bedroom is very messy, the carpets are stained and there are marks on the wall where the manager believes the child has in the past stubbed out cigarettes. The challenges faced to improve the child's bedroom are ongoing due to the child choosing to spend most of their time there.

Managers and staff are actively liaising with other professionals to secure the specialist services that can help them meet the child's needs. Accessing these services has been affected by the COVID-19 pandemic. This has left the home isolated and at times struggling to help the child thrive physically, educationally, emotionally and socially.

## Recent inspection history

| <b>Inspection date</b> | <b>Inspection type</b> | <b>Inspection judgement</b>     |
|------------------------|------------------------|---------------------------------|
| 15/12/2021             | Full                   | Requires improvement to be good |

## 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>if the registered person considers, or staff consider, a placing authority’s or a relevant person’s performance or response to be inadequate in relation to their role, challenge the placing authority or the relevant person to seek to ensure that each child’s needs are met in accordance with the child’s relevant plans; and</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.</p> <p>(Regulation 5 (a)(c)(d))</p> <p>This particularly relates to securing specific child expert mental health assessments and ongoing intervention to inform longer-term care planning.</p> | <p>8 April 2022</p> |
| <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 who is above compulsory school age to participate in further education, training or employment and to prepare for future care, education or employment;</p> <p>help each child to attend education or training in accordance with the expectations in the child’s relevant plans; and</p>   | <p>8 April 2022</p> |

|   |                     |
|---|---------------------|
| <p>that each child has access to appropriate equipment, facilities and resources to support the child’s learning.</p> <p>(Regulation 8 (1) (2)(a)(ix)(x)(b))</p> <p>This particularly relates to enabling access to educational activity tailored to the specific assessed needs of the child.</p>  |                     |
| <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; and</p> <p>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>understand the child’s health and well-being needs and the options that are available in relation to the child’s health and well-being, in a way that is appropriate to the child’s age and understanding;</p> <p>take part in activities, and attend any appointments, for the purpose of meeting the child’s health and well-being needs; and</p> <p>understand and develop skills to promote the child’s well-being;</p> <p>that each child is registered as a patient with a general medical practitioner and a registered dental practitioner; and</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 (a)(b)(c) (2)(a)(i)(ii)(iv)(c))</p> | <p>8 April 2022</p> |

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| <p>This is with specific reference to the children receiving services and support in relation to their health and well-being, and being helped to lead healthy lifestyles.</p> |  |
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## **Information about this inspection**

This inspection focused on the effectiveness of the home and the progress and experiences of children and young people since the most recent full 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:** 2654620

**Provision sub-type:** Children's home

**Registered provider:** Montage Services Limited

**Responsible individual:** Anthony McKenzie

**Registered manager:** Liam McDermott

## **Inspector**

Brenda McLaughlin, Social Care Inspector

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Piccadilly Gate  
Store Street  
Manchester  
M1 2WD

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Textphone: 0161 618 8524  
E: [enquiries@ofsted.gov.uk](mailto:enquiries@ofsted.gov.uk)  
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