

# SC1247670

Registered provider: West Cumbria Care and Support

Full inspection

Inspected under the social care common inspection framework

## Information about this children's home

The home is registered by a charitable organisation to provide care under shortbreak arrangements for up to five children at a time. The home is registered for children with learning disabilities.

There is a registered manager in post. He registered with Ofsted in December 2016.

### Inspection dates: 10 and 11 October 2022

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 promoted or safeguarded.

Date of last inspection: 8 March 2022

### Overall judgement at last inspection: good

### Enforcement action since last inspection: none



## **Recent inspection history**

Inspection type	Inspection judgement
Full	Good
Full	Outstanding
Full	Outstanding
Interim	Improved effectiveness
	Full Full Full



## **Inspection judgements**

## **Overall experiences and progress of children and young people:** inadequate

Children are not making good progress at this short-breaks service.

There is a lack of management oversight, with very limited strategies in place for staff to use to manage children's feelings and to reduce risks associated with these emotions. The manager told inspectors about the work he has completed with a specialist team. However, this work is not included in children's plans. Also, staff do not always follow strategies in children's plans. These shortfalls are compromising children's welfare and progress significantly.

Transition planning for a recent child coming to stay at the home has been poor. The manager has not completed a holistic review or considered the needs of the child alongside those of children already enjoying their short-break stay. In addition, the experience and training of staff have not been considered to ensure that they have sufficient skills to meet the needs of the child. These shortfalls place children at risk.

Children's plans do not contain detailed, up-to-date information on how staff are expected to meet children's needs. Targets set for some children have not been revisited for several months and risk assessments have not been regularly reviewed. As a result, staff are not provided with sufficient information about how they are to meet children's needs or support their development.

One parent discussed how they had to support and educate the home in meeting the complex health needs of their child. Therefore, this parent is not confident that their child's health needs are being met.

Not all children who enjoy overnight stays at the home are able to access all areas of the building. Inspectors identified that the outside area is not suitable for children with limited mobility or those who use wheelchairs. Examples of poor practice were identified, and records detail children who use wheelchairs watching their more mobile peers play in the garden space. This does not promote equal opportunities for children and could have a significant impact on their emotional health and wellbeing. The manager accepted that changes need to be made in the garden area.

Children are supported to attend a range of leisure activities. These include kayaking, using treetop nets, playing with inflatables, and going bowling and magnet fishing. Such activities are enjoyed by children and support them with their social development.

Children are supported to attend school, and the manager and staff regularly attend meetings to support children and families. When faced with travel difficulties, the manager, and staff transport children to school to ensure that education remains consistent for children. Parents and professionals praised this element of support.



The service has maintained some positive relationships with parents and professionals. Feedback from professionals was positive and parents were also complimentary about the service and the support delivered by the staff team.

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

There are significant shortfalls in the safeguarding of children at this short-breaks home.

Risk-management plans do not provide staff with clear information about how to manage children's risks and vulnerabilities safely and effectively. For example, the plans for one child have not been updated since they began to access the service over 12 months ago, despite their risks changing during this time. For another child, there is no guidance in place regarding the use of a camera to monitor their health conditions during the night.

Inspectors identified that a child had accessed the service without a local authority plan in place. The child was on a child protection plan and had complex health needs. The manager and staff had no knowledge of the child protection plan and were not adequately trained to support the child's health needs. Such practice places children at significant risk.

Concerns about children are not always dealt with effectively in line with the safeguarding guidance. When children have told staff they are in discomfort, staff have not demonstrated appropriate curiosity or shared this information with other services. Body maps demonstrate that staff have identified unexplained bruising to children; yet, similarly, no further action has been taken, despite children's vulnerabilities. This practice does not ensure that children's safety is promoted.

Shortfalls were identified in relation to the administration of children's medication. Staff did not have one child's prescribed medication for the duration of their stay. This had not been identified by staff and shared with relevant professionals. This does not protect children from potential harm.

Physical intervention practice is not safely supporting children with complex needs. Inspectors identified that restrictive practice has taken place, but records have not been completed as required by regulation. As a result, children and staff do not have the opportunity to reflect on incidents that have occurred or speak to someone independent. This is a missed opportunity to seek children's views about physical intervention and for staff to learn from incidents to prevent them from reoccurring.

Health and safety in the home is inadequate. An independent fire risk assessment was completed, which raised several actions to improve fire safety in the home. The assessment has not been reviewed since it was undertaken, and a number of these actions remain outstanding. Repairs are not always carried out swiftly and damage was observed in a number of children's bedrooms. This does not promote the safety, health and well-being of children or provide a homely environment.



### The effectiveness of leaders and managers: inadequate

Leadership and management in this home are poor. The manager and responsible individual have not adequately monitored and reviewed the operation of the home, or the quality of care that children receive.

There are shortfalls in the manager's oversight of incidents. Leaders and managers have not responded effectively to safeguarding incidents in the home. This leaves children at risk of further harm.

There are shortfalls in care planning. For example, a number of children's local authority plans and education, health and care plans are out of date. The manager has not challenged the local authority or education professionals when information is not received. This does not ensure that children receive the support that they need or that the home has the essential paperwork to safeguard children and inform their care.

The manager, leaders and staff have not been given the opportunity to reflect on their practice, performance and development. Supervision has not taken place for a number of months. This prevents managers, leaders and staff from reflecting on their practice and the needs of the children. Effective supervision is of vital importance to improving the quality of care provided to children.

Not all staff have received the training they need to care for children effectively. This includes mandatory training in health and safety, food hygiene and medication administration. In addition, staff have not completed specialist training to support children with complex needs, including training around communication, attention deficit hyperactivity disorder and cerebral palsy. This means that staff do not adequately understand the needs of all children and how to care for them.

Staff duty rotas do not accurately detail the actual hours when the manager and staff are on duty. The lack of transparency about who is on duty potentially places children at risk and compromises the continuity of care.

The manager has completed an internal review of the quality of care. However, the report does not improve the quality of care delivered to children and the objectives identified for improvement are not specific or measurable. This reduces the capacity of the management team to reflect on and secure improvement in the home.

An independent person visits the home and consults with children and professionals. The visitor has failed to recognise safeguarding concerns and risks identified during this inspection. A lack of effective monitoring does not help the manager and staff improve the quality of care provided to children.

As a result of this inspection, requirements set at the previous inspection in relation to care planning, leadership and management and regulation 45 remain in place. New requirements in relation to the quality of care, safeguarding and fire safety have been added.



### 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
The positive relationships standard is that children are helped	13 November
to develop, and to benefit from, relationships based on—	2022
mutual respect and trust;	
an understanding about acceptable behaviour; and	
positive responses to other children and adults.	
In particular, the standard in paragraph (1) requires the registered person to ensure—	
that staff—	
meet each child's behavioural and emotional needs, as set out in the child's relevant plans;	
help each child to develop socially aware behaviour;	
encourage each child to take responsibility for the child's behaviour, in accordance with the child's age and understanding;	
help each child to develop and practise skills to resolve conflicts positively and without harm to anyone;	
communicate to each child expectations about the child's behaviour and ensure that the child understands those expectations in accordance with the child's age and understanding;	
de-escalate confrontations with or between children, or potentially violent behaviour by children;	
understand and communicate to children that bullying is unacceptable; and	



have the skills to recognise incidents or indications of bullying and how to deal with them; and	
that each child is encouraged to build and maintain positive relationships with others. (Regulation 11 (1)(a)(b)(c)	
(2)(a)(i)(ii)(iii)(iv)(v)(xi)(xii)(xiii)(b))	
This relates specifically to the inconsistent behaviour management support in the home and the manager's failure to ensure that effective behaviour management plans are in place to support the staff. In addition, this relates to the management of children and incidents of violence.	
*The protection of children standard is that children are protected from harm and enabled to keep themselves safe.	13 November 2022
In particular, the standard in paragraph (1) requires the registered person to ensure—	
that staff—	
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;	
have the skills to identify and act upon signs that a child is at risk of harm;	
manage relationships between children to prevent them from harming each other;	
understand the roles and responsibilities in relation to protecting children that are assigned to them by the registered person;	
take effective action whenever there is a serious concern about a child's welfare;	
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;	
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)(iii)(iv)(v)(vi)(b)(d))	



This relates directly to the manager and staff not identifying and escalating safeguarding concerns to the relevant professionals; the use of surveillance in the home without relevant risk assessments and guidance in place for staff; and the poor condition of the home, the lack of maintenance, and the use of locks on children's bedroom doors.	
*The leadership and management standard is that the registered person enables, inspires and leads a culture in relation to the children's home that—	13 November 2022
helps children aspire to fulfil their potential; and	
promotes their welfare.	
In particular, the standard in paragraph (1) requires the registered person to—	
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;	
ensure that staff work as a team where appropriate;	
ensure that staff have the experience, qualifications and skills to meet the needs of each child;	
ensure that the home's workforce provides continuity of care to each child;	
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;	
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)(e)(f)(h))	
This relates directly to managers and leaders' lack of oversight and monitoring in the home. The manager has not demonstrated that he understands the needs of all children, and there has been a failure to ensure the regular supervision of managers, leaders and staff. In addition, the manager has not ensured that staff working with children have the relevant training to meet their needs.	



The care planning standard is that children—	13 November 2022
receive effectively planned care in or through the children's home; and	
have a positive experience of arriving at or moving on from the home.	
In particular, the standard in paragraph (1) requires the registered person to ensure—	
that arrangements are in place to—	
manage and review the placement of each child in the home;	
that each child's relevant plans are followed. (Regulation 14 (1)(a)(b) (2)(b)(ii)(c))	
This relates specifically to the poor management of admissions to the service, the manager admitting a child into the home without local authority documentation in place and a number of children's plans and risk assessments being out of date.	
The registered person must compile in relation to the children's home a statement ("the statement of purpose") which covers the matters listed in Schedule 1.	13 November 2022
The registered person must—	
keep the statement of purpose under review and, where appropriate, revise it; and	
notify HMCI of any revisions and send HMCI a copy of the revised statement within 28 days of the revision. (Regulation 16 (1) (3)(a)(b))	
This relates directly to the manager's failure to submit the home's statement of purpose in line with regulations.	
If the Regulatory Reform (Fire Safety) Order 2005(27) applies to the home—	13 November 2022
the registered person must ensure that the requirements of that Order and any regulations made under it, except for article 23 (duties of employees), are complied with in respect of the home.	

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(Regulation 25 (2)(b))	
This relates directly to the manager's failure to ensure the effective monitoring, maintenance and safety of fire doors.	
*The registered person must ensure that—	13 November 2022
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—	2022
the name of the child;	
details of the child's behaviour leading to the use of the measure;	
the date, time and location of the use of the measure;	
a description of the measure and its duration;	
details of any methods used or steps taken to avoid the need to use the measure;	
the name of the person who used the measure ("the user"), and of any other person present when the measure was used;	
the effectiveness and any consequences of the use of the measure; and	
a description of any injury to the child or any other person, and any medical treatment administered, as a result of the measure;	
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")—	
has spoken to the user about the measure; and	
has signed the record to confirm it is accurate; and	
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)(i)(ii)(iii)(iv)(v)(vi)(vii)(viii)(b)(i)(ii)(c))	



This relates directly to leaders and managers failing to record restrictive practice on the relevant records to enable a review of safe practice.	
Schedule 4 sets out the other information that the registered person must keep in relation to a children's home.	13 November 2022
The registered person must—	
maintain in the home the records in Schedule 4;	
ensure that the records are kept up to date. (Regulation 37 (1) (2)(a)(b))	
This relates specifically to managers and leaders failing to ensure that rotas in the home are accurate and records are regularly updated.	
In order to complete a quality of care review the registered person must establish and maintain a system for monitoring, reviewing and evaluating—	13 November 2022
the quality of care provided for children;	
any actions that the registered person considers necessary in order to improve or maintain the quality of care provided for children.	
After completing a quality of care review, the registered person must produce a written report about the quality of care review and the actions which the registered person intends to take as a result of the quality of care review ("the quality of care review report"). (Regulation 45 (2)(a)(c) (3))	
This relates specifically to the manager ensuring that objectives identified for improvement are specific and measurable and improve the quality of care delivered to children.	

\*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: SC1247670

Provision sub-type: Children's home

Registered provider: West Cumbria Care and Support

**Registered provider address:** West Cumbria Care and Support, 26 Stanley Street, Workington CA14 2JD

Responsible individual: Catherine Parker

Registered manager: Mark Swanston

## Inspector's

Kelly McCurdy, Social Care Inspector Genevieve O'Reilly, Social Care Inspector



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