

SC040500

Registered provider: Salford City Council

Full inspection

Inspected under the social care common inspection framework

Information about this secure children's home

This secure home is operated by a local authority and is approved by the Secretary of State to restrict young people's liberty. The home accommodates up to 27 children aged between 10 and 18 years. The home was accommodating 20 children at the time of the inspection.

All places available at this home are commissioned on a contractual basis by the Youth Custody Service. The Youth Custody Service may, under certain circumstances, permit local authority children's services to spot purchase a vacant bed at the home to enable a local authority to place a child under section 25 of the Children Act 1989. The admission of any child aged under 13 years under section 25 of the Children Act 1989 requires the approval of the Secretary of State.

The commissioning of health services in this home is the statutory responsibility of NHS England under the Health and Social Care Act 2012. Education is provided on site, in dedicated facilities.

An experienced manager is in post and is in the process of registering with Ofsted.

Inspection dates: 13 to 15 December 2022

Overall experiences and progress of children and young people, taking into account **good**

Children's education and learning **good**

Children's health **good**

How well children and young people are helped and protected **good**

The effectiveness of leaders and managers **good**

The secure children's home provides effective services that meet the requirements for good.

Date of last inspection: 18 January 2022

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
18/01/2022	Full	Good
03/08/2021	Interim	Sustained effectiveness
07/01/2020	Full	Outstanding
21/05/2019	Interim	Sustained effectiveness

Inspection judgements

Overall experiences and progress of children and young people: good

There is a strong principle of 'child first' in this home. Staff take a non-judgemental approach when supporting the children in their care. They understand how past experiences have shaped children's lives and provide lots of opportunities for them to make sense of their lives and move forward. Children clearly benefit from their time at this home and make good progress overall.

Children's needs are rigorously assessed at the point of admission. Multi-disciplinary plans are quickly developed and shared centre wide. These plans are regularly reviewed and adapted to ensure that each child's diverse care, health and education needs are routinely met. A professional said, 'I work with two children who have benefited from high levels of care at this home. They have been supported well to access education, healthcare services and stimulating activities that have influenced positive changes to their lives.'

Children benefit from individualised support, and their needs are well understood by staff. When children have specific needs, such as mental health, suicide ideation and self-harm, timetables and routines are adjusted to maximise support and keep children safe.

Care practice is underpinned by strong and meaningful relationships between children and staff. Many children identified staff as the best thing about the home. One child said, 'I like most staff, but have those that I can talk to about anything. Nobody likes being locked up, but this is probably as good as it gets. It can be hard at times, but staff do their best to care and keep me safe.'

Children benefit from well-planned and effective interventions. While there is a healthy focus on offence-based work, this is delivered in the context of the wider influences that may have contributed to children needing a secure placement. As a result, children develop an increased sense of responsibility that enables them to make better choices going forward.

There is a good focus on preparing children for leaving the home. Children are encouraged to develop basic life skills such as budgeting, menu planning and cooking. Risk-assessed opportunities for children to spend time in the community are promoted wherever possible. This helps children prepare for their return to the community.

Children enjoy spending time with staff, who make every effort to make children's time at the home as stimulating as possible. Children can access a broad range of purposeful and fun activities. These are used help children pursue their hobbies and interests and develop new skills. It was a real pleasure for inspectors to join the Christmas party and see children simply being children.

Consultation with children is part of everyday life in this home. Children are encouraged to make choices in their daily lives and are supported well to be involved in and influence care planning. Grumbles and complaints are taken seriously and resolved quickly. Consultation is further strengthened by children having frequent access to an independent advocate.

Staff recognise the importance of helping children keep in touch with the important people in their lives. Children have good access to telephones, and visitors are welcomed into the home. However, children expressed dissatisfaction that video calls had been stopped. While the rationale for doing this is understandable, face-to-face calling is an essential component of helping children keep in touch with parents and family members, especially those who may live a long distance away from the home.

Children's education and learning: good

Leaders and managers offer an appropriate curriculum. Children study a suitable range of academic subjects to GCSE level, as well as vocational subjects. They also benefit from plentiful opportunities for personal and social development.

Since the last inspection, leaders have improved the curriculum offer for children who already have GCSE qualifications. They develop children's academic strengths and employability skills through individualised learning programmes. Leaders use carefully selected external providers to teach these courses.

In a small number of cases, lengthy staff absences cause disruptions to children's studies, such as in information and communication technology. Leaders rightly acknowledge the need to address this rapidly.

Teachers plan their curriculums well. They check children's starting points carefully, including psychological issues that could affect their learning, and plan their teaching based on these. Teachers also plan additional one-to-one support for those children with very low starting points.

During lessons, teachers teach their subjects well. They use a variety of relevant and appropriately challenging resources and activities. Children engage well with the activities that teachers plan, and, because of skilful teaching, they learn more and remember more about new topics.

In a few cases, teachers do not plan enough time to check that children remember, in the long term, the knowledge they learn. As a result, in these subjects, children recall little of key topics that they recently studied.

Teachers mostly use feedback effectively to help children gain a deeper knowledge of the topics they study. Through feedback, teachers identify accurately children's areas for development. However, children do not consistently use this information to make necessary improvements to their work.

Children make good progress in their studies and produce a high standard of work. They produce well-crafted pieces of creative writing in English classes, and those that study mathematics master challenging topics such as index notation. Children that live at the home in the longer term attain accredited qualifications useful for their futures, such as high grades in GCSE mathematics and English.

Children attend lessons at high rates. They mostly behave well, work hard, and have respectful relationships with teaching staff. As a result, there is a studious atmosphere during lessons. Children quickly modify their behaviour when teachers identify that it does not meet agreed expectations. However, in a very small number of cases, teachers do not challenge offensive language that children use.

Most teachers and teaching assistants have considerable experience of working with children that have complex needs. They use appropriately the array of information available to them, such as education, health and care plans, and support from healthcare professionals to plan learning activities. A few teaching assistants do not use this information to help them support children. They are less proactive than their peers when offering in-class support.

Teachers have suitable qualifications and professional experience for their roles. Where leaders identify gaps in knowledge, teachers benefit from useful opportunities to develop their subject knowledge. For example, English teachers increase their knowledge of phonics to help them better support those with low-level reading abilities.

Children participate in a broad array of after-school clubs, where they learn about topics such as healthy living, cookery and personal finance. These activities take place in a caring and inclusive environment. Children with varying levels of reading ability enjoy a reading club, which helps them to develop a love of reading and to understand others' points of view.

When they are close to leaving the home, children receive helpful support for their next steps. For example, through well-planned external activities, children build the confidence to successfully visit their future schools. Children comment that staff support is integral in helping them to reach this point.

Children do not consistently benefit from high-quality careers information, advice and guidance. Whereas some clearly identify how support from staff helps them to plan their career goals, in other cases children receive little input. They have an unclear picture of their future work and study plans.

Teachers support children who are too vulnerable to attend classroom sessions by providing them with work to complete on their units. These children also benefit from attending after-school clubs.

Children complete very little work for their core subjects of study when they are not in class, for example when on residential units. This is because there is no delegated

person with the right knowledge to supervise and support children with completing this work.

Children's health: good

Children are supported by an experienced and skilled healthcare team that is wholly invested in improving the health outcomes for each child. There is a good focus on collaborative working across the centre. Staff sickness and vacancies, such as the speech and language therapist post, have presented some level of challenge. However, senior leaders and staff have taken every opportunity to access support from community services to enable children's complex needs to be met.

Plans are in place to restart the formal delivery of trauma-informed practice training, which has been delayed because of staffing challenges. The multi-disciplinary health team has been dynamic in its response to this shortfall. For example, the team has taken a lead in reviewing children's ever-changing needs, and in working with care and teaching staff to ensure they are emotionally resilient in the face of challenging behaviours.

Staff are motivated and passionate to deliver the very best healthcare to children, and work is undertaken to make the best possible use of expertise held within the team. They have played a significant role in developing a wide range of interventions including pathways relating to better sleep, sexual health and neurological development. Care and education staff are supported well in the implementation of these interventions that provide children high levels of support around mental health and emotional well-being.

Children's health needs are quickly assessed on admission and individualised plans are developed in consultation with each child. There is good access to the GP, immunisations and vaccinations, the optician and dentist. Staff are creative in considering best ways to encourage children to engage in health interventions.

There is strong partnership working when supporting children to leave the home. Early conversations with children take place, and post-release meetings with the receiving health professionals are held. This ensures that the positive healthcare outcomes for children are not lost when they leave.

Medicines management processes require strengthening. While the investigation of two significant medicines administration incidents resulted in the improvements being made, there is insufficient oversight to ensure that revised procedures are reinforced and embedded in practice.

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

Managers and staff understand and take seriously their responsibilities for keeping children safe. They know what action to take when allegations are made or safeguarding concerns emerge. The safety and well-being of the child is given a high priority and information is shared quickly with external agencies. The local authority

designated officer confirmed this, describing the manager as being open and transparent.

Staff collate information prior to a child's admission in relation to any known risks. Additionally, staff are skilled at developing trusting relationships with the children and this enables a deeper understanding of any other risks or behaviours. As a result, strategies are put in place promptly which reduce risk.

Close collaboration between different professionals who work across the home ensures that children in crisis or in need of additional support can have this delivered effectively and quickly. This promotes children's emotional and physical well-being and a feeling that staff genuinely care. A child said, 'I can talk to them when I am worried, and they really help.'

Staff take an educational approach to helping children understand the consequences of risk-taking behaviours. They encourage children to reflect on past experiences and provide guidance and advice about risk-taking behaviours such as substance misuse, risks of exploitation and anger management. This raises children's awareness and knowledge and provides them with strategies to avoid these risks in their future lives.

Staff are skilled at reading and responding to the ever-changing and complex group dynamics in the home. They promote a culture of tolerance and respect and are quick to respond to conflict or bullying behaviour. When possible, mediation is used to repair relationships and help children develop tolerance and respect.

Behaviour management plans are developed using each child's input and views. Children say that they feel involved and responses to their behaviour are fair and proportionate. They are motivated by the reward system and understand how good behaviour is valued. Several children told inspectors about how they enjoy the extra privileges and success this enables them to achieve.

The effective use of de-escalation techniques and positive relationships means that the use of physical restraint is low. When incidents do occur, they are safe and proportionate. Children's views are sought and taken seriously post incident. Children are seen promptly by health professionals to ensure that the child's physical and emotional well-being is safeguarded.

All incidents of restraint are reviewed by managers and the local authority designated officer. On the whole, incidents are examined and monitored to a good standard, and opportunities for learning are identified and shared across the centre to improve practice. However, on one occasion, the points of learning were not shared in a timely manner. This was addressed during the inspection, with managers taking steps to improve monitoring oversight.

The use of single separation and incidents of being 'managed away' are used appropriately. Management oversight and permissions to continue ensure that these measures are fair and proportionate.

Searching of children and their possessions is carried out to reduce risk. Searches are intelligence and behaviour led and are implemented in a way that is non-intrusive and respectful of children and their belongings. Children told inspectors that their experience of searches was not upsetting. They said that they understood why they had been carried out because the staff had explained this clearly to them.

Staff recruitment is safe. All staff are carefully vetted before they start working in the home. This ensures that children are cared for by people who are safe to work with vulnerable children.

The effectiveness of leaders and managers: good

Leaders and managers centre-wide show ambition and an unquestionable commitment to making sure that children have the best possible experiences at this secure children's home. The manager, who is in the process of registering with Ofsted, has a good understanding of the home's strengths and areas for development. She is clear about what she wants to achieve, and highly focused on implementing a well-thought-out improvement plan that seeks to build on the good progress made since the last full inspection.

Staff are highly complimentary about the manager, who provides strong leadership and effective management. Staff express a confidence in the manager and the wider management team, who are described as being visible, always available, and highly supportive.

There is a real sense of multi-disciplinary collaboration across the centre. Staff spoke positively about change and progression made over the last year and feel empowered and involved in influencing the home's direction of travel.

Staffing continues to be a challenge. However, staff vacancies are reducing, with an overall improvement in the management of the home and the continuity of care for children. Although there are still occasions when it is necessary to restrict children to their bedrooms, these have reduced significantly in terms of frequency and length of time.

Staff spoken to during the inspection feel valued and express high levels of job satisfaction. They show a genuine pride in how they contribute to improving the lives of the children. Children are equally as positive about staff, and the ethos of care is underpinned by a culture of mutual respect. It was a pleasure to see happy children and smiling staff throughout the inspection.

New staff are inducted well into the home. They say that they feel supported in their efforts to acclimatise to working in this high pressure and challenging environment. They benefit from working with experienced staff who mentor and help them develop the necessary skills for working in a secure setting.

Staff benefit from regular and purposeful supervision, an area that has improved significantly. Sessions focus on how children are best supported, professional

development and emotional well-being. In addition, staff benefit from regular clinical supervision that encourages them to reflect and understand how their work can impact on their personal well-being. This helps build resilience and enables managers to provide additional support as required.

There is a healthy focus on ensuring that staff have the necessary skills to understand and respond to the known and emerging needs of children. They have suitable access to a range of mandatory training opportunities, with dedicated time set aside to facilitate learning in the form of team development days.

Needs-specific training is planned as quickly as possible and interim measures are put in place until this can be provided, for example videos that show staff how to safely use ligature cutters. There has been some delay in providing formal training in working with children who self-harm. However, staff are being supported by mental health clinicians, who take responsibility for developing and ensuring the safe implementation of self-harm management plans. This training is imminent.

Leaders and managers are focused on ensuring that high standards are maintained throughout all aspects of service delivery and there is a healthy culture of professional challenge. A range of systems are used well to quality assure staff practice and care planning. Overall, these systems have been effective in identifying areas for improvement and have brought an improved accountability for middle managers and staff generally.

External scrutiny from the regulation 44 visitor has further strengthened quality assurance processes. The current visitor has a comprehensive understanding of secure settings and is insightful in identifying the strengths and areas for improvement in the home. This level of critique is openly encouraged by the manager.

Working relationships with partner agencies are used effectively to promote and develop a team around the child approach. Managers and staff hold professionals to account and offer appropriate levels of challenge. This ensures that children receive high levels of support throughout their time at the centre, but also in preparation for their return to the community. Feedback from professionals supports this premise. Indeed, feedback from partner agencies is extremely positive, with everybody recognising the benefits of children spending time at this home.

What does the children's home need to do to improve?

Recommendations

- The registered person and education leaders should ensure that all children benefit from highly effective careers advice and guidance, which they can use to plan their future work and study goals. They should set clear expectations for the completion of core curriculum work on the residential units, and support staff with the implementation of this. They should also ensure that children consistently study a full curriculum in all subject areas. ('Guide to the Children's Homes Regulations, including the quality standards', page 29, paragraph 5.18)
- The registered person must ensure that suitable medicines management processes are delivered in line with policy, including the administration of time-specific medicines and the requirement for second checker. ('Guide to the Children's Homes Regulations, including the quality standards', page 35, paragraph 7.15)
- The registered person should ensure that any lessons learned because of the scrutiny of physical restraints are shared and used to improve practice in a timely manner. ('Guide to the Children's Homes Regulations, including the quality standards', page 46, paragraph 9.36)
- The registered person should consider the reintroduction of face-to-face video calling to enable children to keep in contact with the important people in their lives. ('Guide to the Children's Homes Regulations, including the quality standards', page 58, paragraph 11.18)

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'.

Secure children's home details

Unique reference number: SC040500

Provision sub-type: Secure Unit

Registered provider: Salford City Council

Registered provider address: Civic Centre, Chorley Road, Swinton, Manchester
M27 5DA

Responsible individual: Zoe Fearon

Registered manager: Kay Davidson

Inspectors

Paul Scott, Social Care Inspector

Paul Taylor, Social Care Inspector

Debbie Foster, Social Care Inspector

Saul Pope, His Majesty's Inspector, Further Education and Skills

Helen Lloyd, Health and Justice Inspector, Care Quality Commission

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