

Ohana Parental Assessment Centre

Ohana Parental Assessment Centre Limited

53 Palmers Drive, Grays RM17 5RA

Inspected under the social care common inspection framework

Information about this residential family centre

The centre is owned by a private organisation. It provides care, accommodation and residential parenting assessments for two families. The centre can provide Parent Assessment Manual assessments. Parenting assessments take a minimum of 12 weeks.

The manager registered at the same time as the centre, in December 2021.

Inspection dates: 1 and 2 February 2023

Overall experiences and progress of children and parents, taking into account	requires improvement to be good
How well children and parents are helped and protected	requires improvement to be good
The effectiveness of leaders and managers	requires improvement to be good

The centre is not yet delivering good assessments of parenting capacity and/or is not delivering good care and help. The weaknesses identified need to be addressed to fully support children's and parents' progress through the assessment process and to mitigate risk in the medium and long term. However, there are no serious or widespread failures that mean children's welfare is not safeguarded and promoted.

Date of last inspection: 26 April 2022

Overall judgement at last inspection: inadequate

Enforcement action since last inspection: Following a full inspection in April 2022, Ofsted served a compliance notice and a restriction of accommodation notice in relation to the serious shortfalls identified in the leadership and management of the home. On 24 June 2022, Ofsted conducted a monitoring visit and found that the

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provider had not taken sufficient action to meet the steps set out in the compliance notice. On 26 July 2022, a further monitoring visit took place which found the provider had not taken sufficient action to meet five of the eight steps in the compliance notice. Further enforcement action was undertaken, and the remaining shortfalls were raised as statutory requirements. The restriction of accommodation notice was lifted in October 2022.



Inspection judgements

Overall experiences and progress of children and parents: requires improvement to be good

At the time of this inspection, there were no families being accommodated at the centre. The last family left in June 2022. Managers have made some improvements in relation to addressing the previously identified shortfalls. However, the improvements in procedural systems and managerial monitoring activities have not yet been tested. Consequently, it is not known whether the centre can deliver good help and protection for children and parents or offer good assessments of parenting capacity.

The management team has adapted frameworks for placement planning. There is now scope for staff to use referral information to identify individual family needs and form clear aims based on court instructions. An experienced and qualified social worker is in post to oversee parenting assessments, in accordance with the methodology outlined in the centre's statement of purpose. The staff understand this assessment framework.

The centre is a detached house on a residential road and is close to shops and other amenities. The house provides family bedrooms and adequate living spaces. There have been some improvements made to the rear garden, which is now more appealing for children, with more resources and play equipment for them. Overall, the centre provides a pleasant environment which is decorated to an appropriate standard.

The manager has maintained contact with local health and children's services, despite the centre not accommodating any families. Managers have reviewed the parents' handbook which now offers clearer guidance for families to register at children's centres and take advantage of community parenting support groups.

There are now systems to capture and act on parents' views. This is more likely to support parents to contribute to areas of improvement in regard to the day-to-day running of the centre.

How well children and parents are helped and protected: requires improvement to be good

The management team has taken action to address the previous shortfalls found in safeguarding practice. Procedures are now more likely to safeguard children and parents, however, they are not yet tested.

The manager monitors health and safety arrangements weekly. However, at the time of inspection, three fire doors did not self-close and another two fire doors were being propped open by door wedges. This poses a risk to children, parents and staff in the event of a fire.



The management team has reviewed the safeguarding policy. This now includes local authority procedures and clear guidance for staff to follow in the event of an allegation being made. Systems to record and act on safeguarding concerns are in place. Staff are aware of their safeguarding responsibilities and understand these procedures.

The management team has reviewed frameworks for assessing risk. There is now scope to evaluate the combined and individual risks of families living communally.

Since the last inspection, the manager has undertaken safer recruitment training. Improvements have been made in the recruitment checks for new staff. The checks that take place now sufficiently reduce the potential of unsuitable people gaining employment at the centre.

The effectiveness of leaders and managers: requires improvement to be good

The manager is working towards her level 5 qualification. An experienced and qualified responsible individual has recently been appointed. The deputy manager remains in post. Together, they are providing consistent managerial oversight. Managers have recognised and reflected on previous shortfalls. A clear action plan for improvement has been devised and managers have implemented this. However, there continue to be areas of weakness identified in the leadership and management of the centre.

The management team has not yet completed a full review of the quality of care and support provided since the opening of the centre in December 2021. This is a missed opportunity to evaluate the wider effectiveness of staff practice in relation to the intended aims.

At the time of the inspection, the annual development plan, including business continuity arrangements, was not provided.

All staff, including the manager, receive regular and reflective supervision. However, the manager has not yet received an appraisal, despite the required timescales passing. This limits the manager's opportunity to reflect on their annual work objectives.

An independent consultant with relevant expertise has been undertaking monthly monitoring visits. This form of monitoring offers a good level of scrutiny and positively complements the quality assurance systems at the centre.

The management team has ensured staff access a wide range of training. A clear staff induction plan is now in place. Staff are suitably trained to provide support that is likely to meet family's needs and contribute to parenting assessments.



Three recommendations that were raised at the last inspection were not reviewed. There are no families currently accommodated at the centre. As a result, these recommendations are restated.



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, Residential Family Centre Regulations 2002 and the national minimum standards. The registered person(s) must comply within the given timescales.

Requirement	Due date
The registered person shall after consultation with the fire authority—	3 March 2023
take adequate precautions against the risk of fire, including the provision of suitable fire equipment. (Regulation 22 (1) (a))	
The registered person shall establish and maintain a system for—	3 March 2023
reviewing at appropriate intervals; and improving, the quality of care provided at the residential family centre.	
The registered person shall supply to the Commission a report in respect of any review conducted by him for the purposes of paragraph and make a copy of the report available to residents.	
The system referred to in paragraph (1) shall provide for consultation with residents. (Regulation 23 (1)(a)(b) (2) (3))	

Recommendations

- The registered person should take into account, record and monitor parents' views and wishes about the operation of the centre, including any concerns they may have. (Residential family centres: NMS 2.1)
- The registered person should ensure that the placement plan incorporates the requirements of any referring agency and, when applicable, the court. Ensure that, when required, a letter of instruction from court is used to inform family placement planning. (Residential family centres: NMS 9.3)
- The registered person should ensure a written development plan is completed, which is reviewed annually and confirms the continuation of the centre's current operation and resource. (Residential family centres: NMS 13.2)



- The registered person should ensure all staff are suitably appraised and understand who they are accountable to. (Residential family centres: NMS 17.2)
- The registered person should ensure that the manager regularly monitors, in line with the Residential Family Centre Regulations 2002, as amended, all records kept by the centre, to ensure compliance with the centre's policies, to identify any concerns about specific incidents and to identify patterns and trends. Immediate action should be taken to address any issues raised by this monitoring. (Residential family centres: NMS 19.2)

Information about this inspection

Inspectors have looked closely at the experiences and progress of children and parents 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 Residential Family Centre Regulations 2002 and the national minimum standards.



Residential family centre details

Unique reference number: 2647771

Registered provider: Ohana Parental Assessment Centre Limited

Registered provider address: 53 Palmers Drive, Grays RM17 5RA

Responsible individual: Nikki Micheal

Registered manager: Olutoyin Olutade

Telephone number: 07947 647692

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Inspector

Mark Anderton, Social Care Inspector



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