

# SC038719

Registered provider: Hampshire County Council

Full inspection

Inspected under the social care common inspection framework

## Information about this secure children's home

This secure children's home is managed by a local authority. It is approved by the Department for Education to restrict children's liberty.

The children's home can accommodate up to 10 children who are aged between 10 and 17 years. At the time of the inspection, six children were living at the home.

The secure children's home provides accommodation for children placed by local authorities under section 25 of the Children Act 1989. Admission of any child under section 25 of the Children Act 1989 who is under 13 years of age 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.

The manager registered with Ofsted in March 2022.

### Inspection dates: 25 to 27 April 2023

**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:** 5 April 2022

**Overall judgement at last inspection:** good

**Enforcement action since last inspection:** none

## Recent inspection history

<b>Inspection date</b>	<b>Inspection type</b>	<b>Inspection judgement</b>
05/04/2022	Full	Good
22/02/2022	Interim	Sustained effectiveness
06/07/2021	Full	Requires improvement to be good
22/10/2019	Interim	Improved effectiveness

## Inspection judgements

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

Children are looked after by highly committed, passionate, and caring staff, which helps children to make good progress. Staff work well together as a team and act in the best interests of the children. They have an excellent understanding of children's needs and any risks. Staff are non-judgemental and show empathy. They understand that the children's presenting behaviours are linked to their past experiences and trauma.

Staff build and maintain supportive relationships with each child. Staff get to know children exceptionally well and they adapt their approach and interactions to the needs of each child. Consequently, children start to feel safe and learn to trust the adults who support them. Children become more able to understand and reflect on their past, and they develop new strategies and coping mechanisms. This helps them to make better decisions and choices.

Each child's admission to the home is well considered. A social worker stated, 'Communication has been amazing from the start; formulation and planning meetings have taken place, and key information has been shared. We have been able to set the placement goals. Staff have been able to answer all of my questions. My view is that this is the right placement for the child at this point in time.'

Placement plans are developed quickly, reviewed regularly, and provide clear targets for children to work towards. Care staff work closely with education and health staff to ensure that each child receives an individualised programme of care and support.

Plans for children leaving the home are equally well considered. From the point of admission, staff are thinking about transition planning, and they work closely with other professionals to ensure children feel prepared and supported. Wherever possible, staff work with the children to develop these plans, and as a result, children move on in a positive way. Scrutiny meetings have been introduced to keep placing authorities focused on the next step for the child and to ensure that other professionals are fulfilling their responsibilities in relation to discharge planning.

Children know how to make a complaint. Complaints are acknowledged and responded to quickly. Weekly chats are used well to help children share their views about their care, think about what has gone well and discuss any difficulties. Children contribute to their placement plans and other records. This ensures that they are well supported to have a voice. As a result, children feel listened to by the staff who care for them.

Children's parents speak positively about the commitment of staff, the quality of care, support and interactions and the staff team's understanding of the children. One parent said, 'It is the staff that make all the difference. They really care; they keep her safe and act in her best interests.' Feedback from professionals is also

positive. One social worker stated, 'I have always found staff to be very child centred, approachable and reflective. Most importantly, everyone has worked so hard to ensure that the child's needs are being met as best they can be, given her complex issues.'

Children benefit from living in an environment that is as homely as it can be. Staff go to great lengths to ensure that children have items in their bedrooms to make them highly personalised, but this is balanced with keeping children safe from known risks.

Staff undertake regular key-work conversations with children, but the quality of key-work records is variable. There are some good examples that demonstrate how staff support children to understand their risks and behaviours using a reflective and supportive approach. However, most key-work sessions are impromptu rather than planned pieces of work. The views of children are not reliably recorded, meaning that significant conversations are not always captured.

### **Children's education and learning: good**

A broad and bespoke curriculum is in place to meet the individual needs and interests of the children. There are strong education partnership arrangements through the local authority to provide an effective oversight of the quality of the curriculum and drive improvement.

Managers and tutors assess thoroughly what children know and can do on their arrival at the home. Most children's previous learning is well below expectations for their age. Through well-planned and innovative lessons, children make good progress.

Tutors have high expectations of what children can achieve. They work creatively to encourage children who do not want to attend school to develop literacy and numeracy skills based on topics that interest them, such as hair, beauty and art. Displays in classrooms and corridors are stimulating, regularly updated and reflect the variety of learning and activities in which children take part.

Tutors skilfully provide effective feedback to children that celebrates their success and helps them understand what they can do to improve their work while maintaining their motivation. Children successfully achieve a variety of accredited units across a wide range of subjects, including in independent and life skills, that will benefit them in their next steps.

Children work effectively towards developing personal skills, such as resilience, confidence, self-management, and communication skills, to help them overcome previous barriers in their lives. Records of achievement help children to be proud of what they have achieved, and this increases their self-esteem and self-worth.

Children develop positive relationships with education staff. Education, health, and care staff work successfully together to support children in their learning, including

those with very complex needs. Leaders deploy support staff and tutors flexibly to ensure that children receive the support they need when they need it.

Teaching staff are highly qualified and experienced. They receive appropriate staff training that helps them to teach children with complex needs effectively. Managers and tutors de-escalate and resolve potential issues sensitively to ensure that children continue to focus on their learning. On a few occasions, staff do not routinely challenge children's use of inappropriate language robustly enough.

Children with special educational needs and/or disabilities receive the support they need to be successful. They benefit from specialist support, such as access to sensory therapy that helps them when they are in crisis to return to learning.

All staff have a strong focus on the development of children's reading skills. However, while staff use appropriate strategies to help children develop fluency in their reading, they do not yet focus routinely on phonics to help the few children with low-level reading skills to learn to develop further.

Children participate fully in a variety of extra-curricular activities, such as the celebration of world days, charity events and cultural days. They enjoy events run by external organisations, such as art sessions and handling animals. These activities help to develop children's academic skills and broaden their understanding of the wider world in which they live. Managers create effective enrichment programmes that provide fun activities in education holidays while continuing to support children's learning and development.

### **Children's health: good**

All children are involved in their care planning and develop their own formulation to help with their understanding of their needs. The trauma recovery model is evident throughout each child's journey, with an emphasis on supporting them to feel safe. The integrated team continuously reviews and adapts practice in formulation meetings to support children's ever-changing needs. This multi-disciplinary approach is used to agree a consistent team approach to support children following any significant change in their transition plans.

Staff turnover and unfilled vacancies have presented some challenges in the healthcare team since the last inspection. Strong clinical leadership and a passionate and dedicated team have ensured that this has not had a negative impact on children. Each child has continued to receive a comprehensive healthcare service that supports them to progress during their stay. Most vacancies have now been appointed to, and a new family therapist role aims to further enrich services available to the children and their families.

In line with the increasing complexities that some children present, senior leaders have reviewed the staffing model and provided an additional psychology resource. This has enabled a renewed focus on the delivery of trauma-informed training to care staff. There is strong investment in reflective practice. This is highly valued by

staff in support of their work with the children, and a culture of psychologically-informed care is embedded across the centre.

Staff are highly motivated and creative in their work with the children. Each child receives personalised interventions that fully consider their wishes and feelings. Social workers report that individual children's self-esteem and trust improve as a result of the positive work that takes place.

A recovery worker engages with the children creatively, helping to educate and inform them about the dangers of alcohol and drug misuse. In addition, an external substance misuse service works closely with the healthcare team, supporting children receiving an opiate withdrawal treatment plan.

The healthcare nurse coordinates the delivery of a range of physical health services that are mostly flexible and delivered to children without undue delay. Work continues in support of the development of a pathway to the GP service to ensure that children can be seen in a timely way. Children can see an optician, dentist, sexual health practitioner nurse and substance misuse worker. There are many examples of services providing timely visits to the home in response to children's specific needs and vulnerabilities.

The nurse is informed about significant incidents involving children in a timely manner, seeing the children as soon as practically possible afterwards. Further visits are made by the health team to ensure a child's well-being at the same time as support being readily offered to care staff.

Transition planning is impressive, with staff working creatively with children, their social workers, families and community services to provide the very best chance of success. 'Ending letters' provide children with a visual picture of their work, while beginning and end formulation plans enable them to see first-hand the progress they have achieved during their stay at the home.

Governance processes have remained robust despite a gap in the operational service management role. This includes systems to ensure that key assessments and the completion of healthcare plans are timely in support of children's ever-changing needs. Mandatory training and staff appraisals are just below targets; however, this is an improving picture.

Recording processes have been strengthened to ensure that the paper-based medicines administration is safe. As a result of learning from recent medicine errors, enhanced oversight supports the ongoing safe and effective administration of medicines. This makes certain that children get the medicines they need when required to maintain and support their health and well-being.

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

Children say that they feel safe, which is because of the strong and meaningful relationships that they have with staff. Staff understand children well and demonstrate a good understanding of their complex needs. A culture of respect and acceptance is promoted, and there is good evidence of staff supporting children to address their difficulties and minimise bullying.

Staff understand their safeguarding roles and responsibilities. They know what to do in the event of safeguarding concerns arising. Following an allegation or safeguarding concern, full and transparent investigations are undertaken by the appropriate professionals. Children's safety is integral to these processes.

Formulation meetings are used well to promote a trauma-informed and team around the child approach to managing risk and behaviour. Detailed risk assessments and safety plans are understood and implemented by staff effectively. This ensures that children are given the right support at the most critical time, such as during incidents of self-harm and physical restraint.

Children benefit from good routines, boundaries, and expectations. Positive behaviour is encouraged and promoted through the home's incentive and reward programme. Children are mostly positive about this system, which is under review in consultation with the children.

Challenging behaviour is responded to in a calm manner, and physical restraint is only used when necessary. A review of CCTV during the inspection confirmed this. Incidents that were reviewed evidence high levels of compassionate care when supporting children in crisis, sometimes for a prolonged period.

All incidents of restraint are subject to high levels of management oversight and scrutiny. There is a positive focus on identifying trends and patterns. This information is being used effectively to reduce the use of ground holds in prone position and to reduce the number of restraints overall. There is some evidence that this approach is starting to be effective.

Restraint records are of variable quality. Of the sample reviewed, the majority were of a good standard and provided a detailed picture of events. However, a small number of records, particularly those relating to prolonged incidents, are lacking in detail and do not fully describe the specific actions that staff took during incidents. As a result, children do not have a full and accurate record of their time in care. Additionally, when incidents occur in areas where there is no CCTV, a lack of clarity in records would make it difficult to protect children or staff in the event of an allegation being made.

There is appropriate use of single separation (where children are locked in an area when they meet the legal criteria of being a significant risk to themselves or others) and of incidents being managed away (where children spend time with staff away from other children). Good levels of supervision and support are offered



by staff who make every effort to end the child's time away from the group as quickly as possible. Effective management oversight ensures that the imposition of these measures is proportionate and time-limited.

### **The effectiveness of leaders and managers: good**

The registered manager has a strong vision for the service. Members of the senior leadership team, which includes managers from the care, education, health and business support team, have high aspirations to provide the very best care to children.

The manager and leaders exhibit a strong understanding of the service's strengths. The development plan sets out clear aims to further improve the quality of care and outcomes for children. Children are at the centre of all decision-making. There is commitment to drive improvement.

The current staff complement is sufficient to support, care for and meet the complex needs of the six children living in the home. Managers are actively recruiting to vacant posts. When they are filled, the home will be able to reach full capacity and provide care for 10 children.

Staff are committed to their roles and enjoy coming to work, despite the frequent challenges. Staff feel well supported and benefit from reflective practice sessions, which give them a better understanding of children's behaviours. Staff morale has improved.

A wealth of well-planned and purposeful meetings helps to unify the health, education, care and business support teams. Examples include integrated management meetings, team meetings, debriefs and shift handovers. The meetings also provide staff with clarity about the decisions made to assist them to carry out their roles and duties. As a result, there is a clear dissemination of information that informs staff and supports them to provide consistent care and review and monitor the progress and achievements of children.

All staff, including agency staff, benefit from routinely receiving good-quality formal supervision. There is a strong focus on well-being, resilience, good practice, training needs, setting of target goals and, importantly, the care of the children. When practice issues are identified, these are swiftly addressed.

Safe recruitment practices mean that all appropriate checks are being undertaken. This helps to make sure that the staff working with children are safe to do so. There has been significant attention to improving the recruitment and the retention of staff, including the implementation of a clear strategy. This work is ongoing.

Staff build on their knowledge and skills through the induction and training opportunities that they receive. More recently, there has been the reintroduction of workshop training. A large proportion of the staff have the necessary qualification as required by the Children's Homes (England) Regulations (2015). There has been

a conscious drive to support staff to complete this qualification. This provides staff with the framework in which to learn how to provide appropriate care for the children.

A rigorous monitoring system maintains high standards that benefit the children. The requirements and recommendations made at the last inspection have been met, ensuring improvement in the care of children.

## What does the secure 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>The registered person must ensure that—</p> <p>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—</p> <p>a description of the measure and its duration. (Regulation 35 (3)(a)(iv))</p> <p>Specifically, ensure that all records of physical restraint give a detailed account of the actions staff take during any incident of restraint.</p>	<p>30 June 2023</p>

### Recommendations

- The registered person should ensure that records of key-work sessions are detailed and capture children’s contributions. (‘Guide to the Children’s Homes Regulations, including the quality standards’, page 62, paragraph 14.5)
- The registered person should ensure that staff understand the specialist support children may need to be able to engage positively and achieve in education. In particular, leaders and managers should continue their well-considered plans to introduce phonics into their reading curriculum to help children become skilled readers. (‘Guide to the Children’s Homes Regulations, including the quality standards’, page 26, paragraph 5.4)

### 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:** SC038719

**Provision sub-type:** Secure Unit

**Registered provider:** Hampshire County Council

**Registered provider address:** 3rd Floor, Elizabeth II Court North, The Castle,  
Winchester, Hampshire SO23 8UG

**Responsible individual:** Kieran Lyons

**Registered manager:** Sarah Herbert

## Inspectors

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