

# SC033362

Registered provider: Peterborough City Council

Full inspection

Inspected under the social care common inspection framework

## Information about this secure children's home

This home is operated by a local authority and is approved by the Secretary of State to restrict children's liberty.

The home provides care for up to five girls aged between 10 and 17 who are placed by local authorities, under section 25 of the Children Act 1989. At the time of this inspection, four children were living at the home.

Admission of any child who is under 13 years old requires the approval of the Secretary of State, under section 25 of the Children Act 1989.

The commissioning of health services at 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.

The registered manager has been in post since May 2013.

### Inspection dates: 25 and 26 July 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:** 29 November 2022

**Overall judgement at last inspection:** requires improvement to be good

**Enforcement action since last inspection:** none

## Recent inspection history

<b>Inspection date</b>	<b>Inspection type</b>	<b>Inspection judgement</b>
29/11/2022	Full	Requires improvement to be good
13/09/2022	Full	Inadequate
10/03/2022	Interim	Declined in effectiveness
13/10/2021	Full	Requires improvement to be good

## Inspection judgements

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

Children make good progress in all areas of their lives. They are able to express themselves and are supported to develop and grow. They have good relationships with the staff, which supports their progress and ensures that they have positive experiences.

Children are consulted about their care and life at the home. Their wishes and feelings are taken seriously and acted on. Key-work sessions take place regularly with children so they can develop trusting, supportive relationships with staff. This supports the children's progress and development.

Children's needs are thoroughly assessed when they arrive at the home. The staff develop care plans that show how their needs will be met. Plans are reviewed and updated regularly. These updates include the effective use of structured multi-disciplinary case management meetings that detail children's progress and highlight further support they may need.

When there is racist language used or discriminatory behaviour from children, staff address this quickly. They work with children to help them understand the impact this has on others and that it is not acceptable.

Staff ensure that children are able to make telephone calls and have visits from the people who are important in their lives.

Since the last inspection, improvements have been made to the home's interior. In the main, the home provides a nice place for children to live. However, external perimeter areas are a little unkempt with weeds growing and some discarded items, which impacts on the homely feel for the children.

Although children have access to a range of activities, staff are not always proactive in using the resources available to fully engage children.

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

Children make good progress in most subjects, developing and consolidating their knowledge and skills. This enables them to achieve accredited qualifications in English, mathematics, art, biology, child development and personal, social, health and economic education(PSHE).

Attendance is high, and children enjoy their learning. Lessons are calm and children behave well. They participate enthusiastically in well-planned activities that inspire and engage them in learning.

Since the previous inspection, the curriculum has been redesigned, and most teachers now plan learning that is ambitious for all children. The quality of teaching has improved in most subjects. However, in a few subjects, such as PSHE and cooking, teachers do not have high enough expectations of what children can achieve. Teaching does not follow a logical sequence or challenge the children well enough. Leaders have identified and recognise that further improvements are needed.

There are well-equipped specialist areas such as science classrooms, kitchens and a hair and beauty salon. However, leaders have been unable to recruit a hair and beauty teacher due to local authority constraints. This means that they are unable to provide a broad vocational curriculum as specifically requested by the children.

Most teachers' assessment of children's work is detailed and developmental. This helps children to understand what they have done well and what they need to do to improve their work. Children revisit their work to correct their errors, which helps them to make good progress.

Children benefit from a coordinated and cohesive careers programme. Leaders work closely with external careers providers to ensure that children receive information about their future options in education, employment and apprenticeships for when they leave the home.

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

Children's health improves while they are at the home. Good-quality health assessments are undertaken and reviewed regularly. These help to ensure that children's existing and emerging health needs are identified when they arrive.

Children's health benefits from partnership working between the healthcare team, education staff and care staff, who share information well. Together, they identify children's health needs and devise suitable plans. Health plans include children's views and services are delivered to meet their needs, resulting in highly individualised care and improved health.

Children have access to age-appropriate services, including visiting the GP and in-house nurse-led clinics, emotional and well-being services and occupational therapist services. Despite attempts to recruit, there continues to be a vacant speech and language therapist position. However, the children can access this service if a need is identified.

The health and well-being team work effectively to build relationships with children. Each child is supported by a named health professional. Children spoke positively about the team and welcomed the recent introduction of extended hours provided by the healthcare team, including evenings.

The healthcare team embraces the ethos of trauma-informed care. It recognises further work is needed, including ensuring that all care staff have received appropriate training. Each child has a detailed psychological plan in place to support all staff in their work.

Medication processes have been improved, helping to ensure safe administration and storage. When medication errors occur, these are investigated and appropriate action is taken. These errors have not resulted in any negative impact on children.

Leaders ensure that there are systems to monitor the delivery of health services. There is a programme of auditing to underpin developments and improvements to the services provided. Healthcare staff feel well supported. Clinical supervision and appraisals are up to date, as is mandatory training, which supports staff in their roles.

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

Staff show patience and resilience when caring for the children who have complex needs and vulnerabilities. Staff work hard to help keep children safe. Risk assessments and behaviour support plans guide staff to provide a good quality of care, which reduces risks and meets children's individual needs.

Work has started to support staff's understanding of children's behaviours. CCTV is used well as part of this work to support reflection and evaluation of staff practice. This helps staff to identify and respond to children's non-verbal cues and support them.

'Functional analysis meetings' are still in their infancy and are being used effectively. These meetings provide opportunities for a multi-disciplinary approach to understanding children's behaviour and agreeing the best strategies to care for them safely. Leaders and managers are instilling a child-focused learning culture throughout the staff team.

The use of physical restraint is proportionate and is applied appropriately. Records of interventions are, for the most part, clear, and evidence from CCTV corroborates the written records.

Single separation is used appropriately. Children do not remain in single separation for prolonged periods of time, and there is a clear rationale for decision-making. Staff complete regular checks on children in line with risk assessments to help keep children safe.

Leaders and managers have a good understanding of safeguarding. Any concerns are clearly recorded along with the actions taken. A minority of recorded incidents were not dated, and this has been identified through internal audits. Information is shared with other agencies in a timely manner.

Safe recruitment processes ensure that the right staff are employed to work with vulnerable children.

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

Since the last inspection, the home has been limited to looking after a maximum of five children as set out in the conditions of registration. Managers have focused on improving the quality of care provided to children. Management monitoring and oversight systems provide managers with effective ways of scrutinising staff performance. They take decisive action when they identify shortfalls.

Managers have engaged staff in developing a positive culture that inspires them to deliver good-quality care to children, including through difficult times.

Recruitment remains an ongoing challenge. Managers have been creative in their approach to recruiting and retaining staff. There has been some success, resulting in fewer vacancies. There is not currently a full staff complement, and the use of agency staff continues, which managers are working on reducing.

Managers are very aware of the areas that need development and improvement, and they have systems in place that assist their understanding so that they can drive positive change. They are aware that some processes have not yet been fully tested because there has been a low number of children living at the home.

The induction of new staff equips them to meet the complex needs of the children that they are looking after. A new staff member spoken to during the inspection demonstrated sound awareness of children's strengths and vulnerabilities. They were also able to reflect empathetically on the challenges that are faced by children living in a secure environment.

Staff are inducted well and receive regular training and supervision. The staff focus on delivering good-quality care to children. Records of supervision vary in quality, but this is understood and is being addressed.

Approximately half of the staff team have the necessary required qualifications. Some are working towards achieving the required qualification but are not on track to do so within the required timescales. Managers are aware of this and have measures in place to address it.

Children know how to make a complaint if they are unhappy about any aspect of their care. Complaints are taken seriously, investigated and acted on. Children receive feedback about their complaints in a timely way. Children are given information about how to escalate their concerns if they are unhappy about the outcome.

The most recent review of the quality of care undertaken by managers does not contain feedback from children, staff and other professionals. This is a missed opportunity to demonstrate the effective consultation that is evident in practice.

## 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, The 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 leadership and management standard is that the registered person enables, inspires and leads a culture in relation to the children’s home that—</p> <p>helps children aspire to fulfil their potential; and</p> <p>promotes their welfare.</p> <p>In particular, the standard in paragraph (1) requires the registered person to—</p> <p>ensure that staff have the experience, qualifications and skills to meet the needs of each child. (Regulation 13 (1)(a)(b) (2)(c))</p>	<p>31 August 2023</p>
<p>The registered person must complete a review of the quality of care provided for children (“a quality of care review”) at least once every 6 months.</p> <p>In order to complete a quality of care review the registered person must establish and maintain a system for monitoring, reviewing and evaluating—</p> <p>the quality of care provided for children;</p> <p>the feedback and opinions of children about the children’s home, its facilities and the quality of care they receive in it; and</p> <p>any actions that the registered person considers necessary in order to improve or maintain the quality of care provided for children.</p> <p>The system referred to in paragraph (2) must provide for ascertaining and considering the opinions of children, their parents, placing authorities and staff. (Regulation 45 (1) (2)(a)(b)(c) (5))</p>	<p>31 October 2023</p>



## Recommendations

- The registered person should ensure that staff make the children's home an environment that supports children's physical, mental and emotional health, in line with the approach set out in the home's statement of purpose. ('Guide to the Children's Homes Regulations, including the quality standards', page 33, paragraph 7.3)
- The registered person should ensure that the ethos of the home supports each child to learn. In particular, they should plan learning logically in all subjects to help children develop their knowledge, skills, behaviours and confidence so that they make the progress of which they are capable. Additionally, they should ensure that all teachers accurately assess children's work and provide feedback that helps children to improve the quality and standards of their work. ('Guide to the Children's Homes Regulations, including the quality standards', page 29, paragraph 5.18)
- The registered person should ensure that children are encouraged to participate in a range of activities. ('Guide to the Children's Homes Regulations, including the quality standards', page 31, paragraph 6.5)

## 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:** SC033362

**Provision sub-type:** Secure unit

**Registered provider:** Peterborough City Council

**Registered provider address:** Sand Martin House, Bittern Way, Fletton Quays,  
Peterborough, PE2 8TY

**Responsible individual:** Alison Bennett

**Registered manager:** Jeannette Winson

## Inspectors

Helen Simmons, Social Care Regulatory Inspection Manager

Dawn Parton, Social Care Inspector

Thirza Smith, Social Care Inspector

Anita Pyrkotsch-Jones, HMI Further Education and Skills

Catherine Raycraft, Health and Justice Inspector (CQC)

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