

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: 16 and 17 October 2023

Overall experiences and progress of children and parents, taking into account	requires improvement to be good
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How well children and parents are helped and protected	requires improvement to be good
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The effectiveness of leaders and managers	requires improvement to be good
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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 previous inspection: 1 February 2023

Overall judgement at last inspection: requires improvement to be good

Enforcement action since last inspection: not applicable

Inspection judgements

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

At the time of this inspection, two families were living at the centre. Both sets of parents were spoken to during the inspection.

Leaders and managers continue to oversee improvements in relation to addressing the shortfalls identified at the inspection in February 2023. However, these improvements are not fully embedded. Shortfalls remain in the leadership and management of the centre and the manager's implementation of appropriate safeguarding procedures. This means that parents and children are not yet receiving good help and protection at the centre.

Since the last inspection, there have been no family assessments completed. Two families have moved on before their final assessment could be completed due to immediate concerns identified in their parenting capacity. However, mid-way assessment reports are formulated using sound evidence-based methods and have been submitted within agreed timescales. There is a qualified independent social worker in post to oversee the parenting assessments.

Leaders and managers have improved the general quality of placement planning. Most plans include full referral information and court instructions from the local authority. This is to help staff to consider children's and parents' individual needs. However, full information was not received for one family. This resulted in an agreement being made with the parent and the manager around family visits that could not be fulfilled. This caused the parent unnecessary distress, which could have been avoided.

The parents spoken with during the inspection were positive about the quality of parenting sessions, the support from staff and their overall experiences. However, parents do not receive regular written feedback. This means that they feel ill-equipped to reflect on their parenting skills during the assessment process.

Staff's interactions with families are warm and respectful. Staff encourage parents to attend external groups with their children. Parents' independence is strengthened through planned one-to-one parenting sessions. Families' health is supported, and appropriate registrations and referrals are made to healthcare services.

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

Leaders and managers have failed to refer two serious allegations about staff to the local authority designated officer within an appropriate time frame. This means that the manager's initial investigation took place without the required external oversight. The management of these safeguarding concerns does not reflect the centre's

safeguarding policy or provide the necessary safeguards for parents and children who are undergoing assessment.

Leaders and managers have not ensured that a shortfall identified at the last inspection has been addressed. Three self-closing mechanisms continue to be defective in the fire doors. Staff regularly monitor health and safety arrangements at the centre. However, the checking systems have failed to enable staff to identify and resolve these fire hazards promptly. This poses a risk to families and staff in the event of a fire.

Leaders and managers have not ensured that all staff have completed their principal safeguarding training within a reasonable time frame during their induction. Ineffective monitoring by managers during staff induction does not provide full assurance that staff are promptly supported to develop their knowledge and skills related to their safeguarding responsibilities.

Most risk assessments are detailed and identify families' individual risks. They guide staff by providing clear strategies to reduce their risks. However, one family's assessment has not been reviewed and updated to reflect the most up-to-date guidance around a parent's risk of substance misuse. This could lead to inconsistencies in staff's approach to this concern.

Leaders and managers review each new family's vulnerabilities and associated risks to ensure that families are compatible to live communally. When conflicts between parents occur, the staff support parents to resolve their differences.

There are occasions when staff have provided effective support for children's safety and welfare. When parents are at increased risk, staff respond and take the necessary action to reduce this. Working-together agreements are made between parents and staff, resulting in clear unified behavioural expectations.

Leaders and managers maintain safer recruitment processes for staff. All staff have appropriate suitability checks before working at the centre.

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

The manager is finalising her level 5 qualification; all modules have been completed, with the award awaiting independent verification before being issued. The deputy manager is also undertaking a level 5 qualification. An experienced responsible individual remains in post. Although there are some improvements in the quality of service provided for families, several weaknesses remain in the leadership and management of the centre.

Leaders and managers have not ensured that written communication is carefully compiled and consistently professional. This has resulted in an unclear outcome and response to a parent's complaint. Written communication in statutory notifications to

Ofsted is not always objective. This means that actions to reduce risk have not been immediately clear.

The manager has responded to serious concerns raised by parents against staff. Staff have also responded to safeguarding concerns with parents appropriately. However, leaders and managers have failed to notify the placing authorities and Ofsted of these concerns as required and without delay. This means that the placing authorities and Ofsted's are not able to monitor safeguarding arrangements.

An independent consultant continues to undertake monthly monitoring visits with an appropriate level of scrutiny. The manager's internal review of the quality of care evaluates staff's practice and parents' views well. However, goals identified to oversee continuous improvement are not specific or measurable. This could hinder further progress and improvements that are necessary in the working practices of the centre.

Staff receive reflective supervision sessions from the manager. A suitable staff appraisal system is now in place. This provides opportunities for staff to develop and work towards their learning objectives. Staff say that they feel well supported. Improved staff retention levels and reduced use of agency staff provide appropriate continuity for families throughout their parenting assessments.

Feedback from external professionals is positive. Social workers generally identify good communication and support for families. Staff work well with health visitors and ensure that parents attend important appointments.

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

Requirement	Due date
<p>The registered person shall prepare and implement a written child protection policy which—</p> <p>is intended to safeguard children accommodated in the residential family centre from abuse or neglect; and sets out the procedure to be followed in the event of any allegation of abuse or neglect. (Regulation 12 (1)(a)(b))</p> <p>In particular, ensure that any allegation of abuse or staff neglect is promptly referred to the local authority designated officer.</p>	30 November 2023
<p>The registered provider and the registered manager shall, having regard to the size of the residential family centre, the statement of purpose, and the number and needs of the residents, carry on or manage the centre (as the case may be) with sufficient care, competence and skill. (Regulation 8 (1))</p> <p>In particular leaders and managers must:</p> <p>ensure all written communication is professionally compiled;</p> <p>ensure that families' individual risk assessments are updated, when necessary, to reflect current agreed guidance;</p> <p>ensure responses to parents' concerns are logical and provide a clear outcome;</p> <p>ensure improvement objectives identified in quality of care reviews are specific and measurable.</p>	30 November 2023
<p>The registered person shall after consultation with the fire authority—</p> <p>take adequate precautions against the risk of fire, including the provision of suitable fire equipment.</p>	30 November 2023

<p>(Regulation 22 (1) (a))</p> <p>This requirement was made at the last inspection and has been restated.</p>	
<p>If, in relation to a residential family centre, any of the events listed in column 1 of the table in schedule 5 takes place, the registered person shall without delay notify the persons indicated in respect of the event in column 2 of the table. (Regulation 26 (1))</p>	<p>30 November 2023</p>
<p>The registered person shall, before providing a family with accommodation in the residential family centre, or if that is not reasonably practical, as soon as possible thereafter, draw up in consultation with the placing authority a written plan (in these Regulations referred to as "the placement plan") setting out, in particular—</p> <p>the facilities and services to be provided during the course of the placement.</p> <p>the objectives and intended outcomes of the placement. (Regulation 13 (1)(a)(b))</p>	<p>30 November 2023</p>

Recommendations

- The registered person should ensure that safeguarding training is completed by staff during their induction period. (Residential family centres: NMS 16.2)
- The registered person should ensure that parents and children understand the nature of records maintained and, where possible, read their files, correct errors and add personal statements. In particular, parents should have opportunity to provide comments on weekly and monthly update reports. (Residential family centres: NMS 20.3)

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: 07947647692

Email address: ohanacarecentre@outlook.com

Inspector

Mark Anderton, Social Care Inspector

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