

SC046524

Registered provider: Sheffield 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 10 children. Up to five children can be placed by the Youth Custody Service and up to five children placed by local authorities under section 25 of the Children Act 1989. Five children were living at the home at the time of the inspection.

The admission of any child under section 25 of the Children Act 1989 who is under 13 years old 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.

The manager of the home registered with Ofsted in August 2023.

Inspection dates: 31 October to 2 November 2023

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

Children's education and learning requires improvement to be good

Children's health requires improvement to be good

How well children and young people are helped and protected inadequate

The effectiveness of leaders and managers inadequate

There are serious and/or widespread failures that mean children and young people are not protected or their welfare is not promoted or safeguarded and/or the care

and experiences of children and young people are poor and they are not making progress.

Date of last inspection: 28 February 2023

Overall judgement at last inspection: requires improvement to be good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
28/02/2023	Full	Requires improvement to be good
01/02/2022	Full	Outstanding
01/09/2021	Interim	Sustained effectiveness
10/03/2020	Interim	Improved effectiveness

Inspection judgements

Overall experiences and progress of children and young people: inadequate

The judgement on children's experiences and progress is impacted by the failings in how children are helped and protected and the leadership and management of the home. These failings include the unlawful use of measures of control that unnecessarily restrict children's liberty.

Children are able to build trusting relationships with the staff who are caring for them. The atmosphere in the home is relaxed and children are mostly settled. One child said, 'Being in this home has helped me to press pause on my life and deal with my issues in a safe way.'

Children have regular one-to-one time with staff in keywork sessions. However, it is not always clear how these sessions support children's wider plans. Staff do not consistently record the work that they do with children around key issues in their life, such as exploitation and developing independence skills. This is not helpful to children as they are not able to reflect on the work that they have done or the progress they have made.

There is a lack of clarity about where children's records are kept. Some records, such as local authority care plans and statutory information, could not be located during the inspection. This does not provide confidence that managers and staff are clear about children's individualised needs and how to meet these.

Children have opportunities to spend time in the community as part of their preparation to move on from the home and to develop their independence skills. However, children do not have written transition plans that set out a clear timetable and the responsibilities of all professionals to work together to help children move on in a positive way.

Children said that they are able to talk to staff about any concerns or worries they may have. Children have access to an independent advocate who visits the home regularly and knows the home and children well. This provides an additional layer of independent advice and support for children.

Children are supported to maintain important ties with family and friends. Families visit and are welcomed into the home and children also benefit from having regular telephone and video calls.

Feedback from professionals and parents is positive, and parents feel more optimistic for their children. Parents said that they are secure in the knowledge that their child is safe and well-cared for.

The environment is tired looking and some areas of the home require deep cleaning and maintenance. Required improvements have not been addressed in a timely manner. Wall displays in the home are old. They do not reflect the activities and achievements of the children currently living in the home.

Children's education and learning: requires improvement to be good

The judgement for children's education is impacted by the failings in how children are helped and protected and the leadership and management of the home. These failings include the unlawful use of measures of control that unnecessarily restrict children's liberty.

Education staff work flexibly and teach across a wide range of subjects. This enables children to access a well-designed and sequenced curriculum. Staff use children's starting points well to plan a curriculum for each child that meets their individual needs. Children can study towards and achieve a good range of accredited and non-accredited qualifications.

Staff promote the benefits of reading both during lessons and for pleasure. They ensure that children can access a good range of books relevant to their interests and reading ability.

Education staff have good levels of knowledge and skill which they use well when teaching and supporting children who often have complex needs. They plan lessons well and use a range of teaching strategies to support children to make good progress.

Leaders and staff have addressed the recommendation from the previous inspection to better monitor children and help them to understand the progress that they are making. Teachers set clear targets for children and provide them with verbal and written feedback. This confirms the progress that they are making and what they could do to improve their work.

Education staff set high expectations. Children develop positive relationships with staff and gain in confidence. Children have good attendance and their behaviour in lessons is good.

Education staff liaise effectively with other professionals to plan and teach a curriculum that meets children's needs and future plans. For example, the head of year at one child's school has discussed with the child and education staff at this home how the curriculum the child follows can be planned and implemented to support their possible return to the school in the future.

The curriculum helps children to develop personal and practical skills to support their long-term independence and employability. Leaders and staff ensure that children receive appropriate impartial careers guidance that helps them to prepare for their next stages in education or future employment.

The head of learning is heavily involved in the wider management of the home. This limits their available time to lead on improvements in education. Leaders have not addressed the recommendation from the previous inspection to ensure that teaching staff receive more focused continual professional development to further develop their teaching practice.

The head of learning is due to leave at the end of 2023. Leaders recognise the importance of putting in place suitable transitional arrangements to ensure the ongoing oversight and management of children's education.

Children's health: requires improvement to be good

There is an experienced and well-resourced multi-disciplinary health care team on site. The team provide timely access for children to a range of health services during the 9am to 5pm working week. There are suitable arrangements in place for children to access health care out of hours should they need to.

Timely assessments using the comprehensive health assessment tool (CHAT) are quickly completed when a child comes to live at the home. However, these assessments are not updated using existing plans such as education, health and care plans and looked after children's health assessments. This may mean that not all of children's health care needs are being captured.

All children are registered with a local general practitioner, a dentist and an optician. Advance nurse practitioners offer children any missed immunisations and sexual health screening. There is good evidence of targeted child-centred work that leads to children's known health needs being met.

Health care staff receive regular supervision and have completed all mandatory training requirements. This supports them to deliver individualised health care interventions to children.

Children's medication is reviewed on admission to ensure that it is appropriate and required. However current arrangements for the dispensing and recording of medication are ineffective. Errors were noted with the system used to document medication, which appear confusing and unnecessarily complex. This results in a lack of clarity as to whether children have received their prescribed medication.

Health care staff see children following incidents of restraint. However, there has been one occasion when health care staff were not informed when a child was subjected to a period of prolonged single separation (where a child was locked into their room alone – see help and protection section of this report). This could have compromised the well-being of the child.

The model of care is not well embedded throughout the home. Only one child has a multi-disciplinary formulation plan. Care planning for children is not informed by health assessments including therapeutic interventions and advice. Plans are in place

to support care staff with additional training to help them to respond to children's emotional needs, however this work is yet to be established.

Integrated working, including the sharing of information with other key professionals in the home, is weak. Therefore, not all staff understand the health needs of each child. This means that staff cannot respond to children's individual needs in the most effective way.

The healthcare team has audited itself against the Healthcare Standards for Children and Young People in Secure Settings 2023 and the Secure Stairs framework. However, these audits have been conducted in isolation and not as part of the overall quality and governance strategy.

Health care staff are not routinely involved in contributing to transition planning to identify what support services are needed when a child is ready to leave the home. This does not give confidence that community health services are accessible to children when they move on.

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

There are significant failings that mean children are not appropriately helped and protected.

Children are subject to measures of control when they neither present a risk to themselves or others. Single separation, where children are locked into an area alone and managing away, where children are locked into an area but with staff present at all times, are used inappropriately. These measures are not always used proportionately or for the minimum time necessary. This means that children's rights are breached and they are unnecessarily further deprived of their liberty. Leaders and managers have failed to implement monitoring systems to ensure effective oversight of these measures of control.

There have been low level restraints that have been both reasonable and proportionate. However, when children have raised concerns about staff behaviour during these incidents, leaders and managers have not acted to investigate this further. This does not reassure children that their concerns are taken seriously.

The risks relating to children are understood by staff. However, risk assessments and other recording activity, such as handover records, are conflicting and not kept up to date. This leads to inconsistencies in staff practice and may place children at risk of harm.

The manager is beginning to build working relationships with relevant safeguarding agencies. However, this practice is in its infancy and needs to be embedded further to ensure independent scrutiny and oversight.

The effectiveness of leaders and managers: inadequate

There are significant failings in the leadership and management of the home. The registered manager is relatively new to managing a secure setting. She recognises the gaps in her knowledge and is continuing to work to develop her expertise in these areas.

Managerial oversight and monitoring systems are either non-existent or ineffectual. They do not pick up on practice that fails to take account of the lack risk to self or others for example, when children have been kept in single separation or managed away for extended periods of time when the legal criteria is not met. This lack of effective monitoring means that poor practices continue and prevents opportunities for learning.

The home has been running on reduced numbers of children living there for some considerable time. This is due to staff shortages at all levels including delays in the appointment of a manager. There is a high staff attrition rate and staff sickness levels remain of concern. A number of vacancies in the senior leadership team impacts on the managers ability to effectively manage this service.

There is no formal development plan for the home and staff said that they are unclear how leaders and managers intend to begin to move the service forward. Quality of care reviews have not been completed. This impedes the ability of the manager to evaluate the progress and experiences of the children, and make essential improvements.

There are significant gaps in staff supervision and annual performance development reviews. This has been raised as a shortfall in previous inspections. As a result, staff do not receive regular support, guidance or constructive challenge around their practice.

The lack of a multi-disciplinary approach across the service in care and formulation planning means that there are missed opportunities for collaborative working. The absence of a shared ownership hinders the implementation of a trauma informed model of care. This contradicts the ethos and approach as set out in the home's statement of purpose.

Training and induction programmes have improved to provide staff with increased skills and knowledge. This gives new staff the foundation to meet the specific needs of children they are looking after.

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>* Restraint in relation to a child is only permitted for the purpose of preventing—</p> <p>injury to any person (including the child);</p> <p>serious damage to the property of any person (including the child).</p> <p>Restraint in relation to a child must be necessary and proportionate. (Regulation 20 (1)(a)(b)(2))</p> <p>In particular, the registered person must ensure that all staff and managers fully understand the legal criteria that determines the circumstances when single separation and managed away can be used with children.</p>	<p>31 December 2023</p>
<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 promotes their welfare.</p> <p>In particular, the standard in paragraph (1) requires the registered person to—</p> <p>lead and manage the home in a way that is consistent with the approach and ethos, and delivers the outcomes, set out in the home’s statement of purpose;</p> <p>ensure that staff work as a team where appropriate;</p> <p>ensure that the home has sufficient staff to provide care for each child;</p> <p>ensure that the home’s workforce provides continuity of care to each child;</p>	<p>14 January 2024</p>

<p>demonstrate that practice in the home is informed and improved by taking into account and acting on—</p> <p>research and developments in relation to the ways in which the needs of children are best met; and</p> <p>feedback on the experiences of children, including complaints received; and</p> <p>use monitoring and review systems to make continuous improvements in the quality of care provided in the home; and</p> <p>ensure that the home’s workforce provides continuity of care to each child. (Regulation 13 (1)(a)(b)(2)(a)(b)(d)(e)(g)(i)(ii)(h))</p>	
<p>* The registered person must ensure that all employees—</p> <p>receive practice-related supervision by a person with appropriate experience; and</p> <p>have their performance and fitness to perform their roles appraised at least once every year. (Regulation 33 (4)(b)(c))</p>	14 January 2024
<p>The care planning standard is that children—</p> <p>receive effectively planned care in or through the children’s home; and</p> <p>have a positive experience of arriving at or moving on from the home.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure—</p> <p>that arrangements are in place to—</p> <p>manage and review the placement of each child in the home; and</p> <p>plan for, and help, each child to prepare to leave the home or to move into adult care in a way that is consistent with arrangements agreed with the child’s placing authority; and</p> <p>that each child’s relevant plans are followed. (Regulation 14 (1)(a)(b) (2)(b)(ii)(iii)(c))</p>	14 January 2024

<p>The registered person must make arrangements for the handling, safe keeping, safe administration and disposal of medicines received into the children’s home.</p> <p>in particular the registered person must ensure that—</p> <p>a record is kept of the administration of medicine to each child. (Regulation 23 (1)(2)(c))</p>	<p>14 January 2024</p>
<p>The registered person must complete a review of the quality of care provided for children at least once every 6 months. (Regulation 45 (1))</p>	<p>14 January 2024</p>

* These requirements are subject to a compliance notice.

Recommendations

- The registered person should ensure that there is a workforce plan in place which can fulfil the workforce-related requirements of regulation 16, schedule 1 (paragraphs 19 and 20). In particular, establish suitable transitional arrangements to ensure effective oversight and management of children’s education provision when the current head of learning leaves the service. (‘Guide to the Children’s Homes Regulations, including the quality standards’, page 53, paragraph 10.8)
- The registered person should ensure that teaching staff have access to focused continual professional development to further develop their teaching practice. (‘Guide to the Children’s Homes Regulations, including the quality standards, page 29, paragraph 5.18)
- The registered person should ensure that the home makes available suitable facilities, equipment and resources for learning. In particular, ensure that the head of learning has the time to manage and support the teaching team effectively. (‘Guide to the Children’s Homes Regulations, including the quality standards, page 29, paragraph 5.18)
- The registered person should ensure that staff provide a nurturing environment that is welcoming, supportive, and is personalised to children and celebrates their achievements. (‘Guide to the Children’s Homes Regulations, including the quality standards’, page 15, paragraph 3.7)
- The registered person should ensure that staff are familiar with the home’s policies on record keeping and understand the importance of careful, objective, and clear recording. Information about the child must always be recorded in a way that will be helpful to children. (‘Guide to the Children’s Homes Regulations, including the quality standards’, page 62 paragraph 14.4)

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: SC046524

Provision sub-type: Secure Unit

Registered provider address: Town Hall, Pinstone Street, Sheffield S1 2HH

Responsible individual: Sally Williams

Registered manager: Joanne Peebles

Inspectors

Cath Sikakana, Social Care Inspector (lead)

Thirza Smith, Social Care Inspector

Dawn Parton, Social Care Inspector

Lea Pickerill, Health and Justice Inspector, Care Quality Commission

Malcolm Fraser, His Majesty's Inspector, Further Education and Skills

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Piccadilly Gate
Store Street
Manchester
M1 2WD

T: 0300 123 1231
Textphone: 0161 618 8524
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