

The Groves

Green Harvest Family Assessment Ltd

125 Grove Road, Sutton SM1 2DB

Inspected under the social care common inspection framework

Information about this residential family centre

The Groves is a privately owned company that specialises in providing parenting assessments. This residential family centre provides care and support for up to five families. The residential family centre and the manager were registered with Ofsted on 17 February 2023.

This was the centre's first inspection. There were two families in placement at the centre at the time of this inspection.

Inspection dates: 27 to 29 November 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	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 last inspection: not applicable

Overall judgement at last inspection: not applicable

Enforcement action since last inspection: none

Inspection judgements

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

This judgement is influenced by shortfalls highlighted in the leadership and management of the centre. Parents say that they share good relationships with some members of staff, but not with all. They share positive relationships with their key workers, but have poor relationships with managers of the service, who they say do not listen to them.

Some parents say that they have little faith in the centre's complaints procedure and, as a result, they largely do not bring complaints or concerns to the attention of managers. This is not in the best interests of children and parents. The management of complaints is identified as an area for improvement.

The management of written complaints is appropriate and there are clear records that indicate that complainants received feedback about action taken by staff to resolve their complaint. This is not the case when parents raise concerns verbally with staff but do not wish to follow up in writing. In these situations, it is less clear that parents have been informed of how their complaint has been resolved. At times, therefore, parents feel that their concerns have not been addressed and that they have not been listened to.

Final assessment reports are not consistently of a high quality. Some are not sufficiently qualitative or comprehensively evidence based. One final report failed to include a conclusion and recommendations for the child's future, as required. Managers say that these are available as separate documents and that this model of final assessment reports is used by staff. Parents are required to read a number of documents, some of which are essentially repeat versions of the final assessment report.

Managers explain that key staff working with families, including support staff and qualified social work staff, all contribute to midway and final assessment reports. However, not all final reports are written by qualified social workers as required.

Families who are new to the centre are welcomed sensitively. Staff ensure that there is careful and considered planning. Pre-placement planning meetings are routinely held and families understand the purpose of the centre and what is expected of them. Families receive good information about the centre, usually before they arrive, which helps them to settle in. Staff, the local authority and parents sign agreements to establish what areas of work are to be carried out. Parents are clear about what parenting skills are being assessed and they receive regular feedback from staff on the progress of their assessment.

The assessment process has an appropriate focus on safeguarding children and identifying their needs and on parents' views. Assessments are tailored to meet the

specific needs of each family member. The identity needs of families are well met by the centre, for example, staff encourage fathers to participate in programmes geared solely to men. Staff work well with parents who have a learning disability or substance misuse or mental health support needs. Staff encourage families to practise their faith and attend places of worship if they wish.

Staff encourage families to lead healthy lifestyles. Parents receive support that ensures that they and their children receive good primary healthcare services. There is effective communication between the centre's staff and key healthcare professionals, such as health visitors and GPs.

Children have appropriate and carefully assessed supported contact with family and friends. Children and parents have access to a range of social, educational and recreational opportunities which families choose and enjoy.

How well children and parents are helped and protected: good

Staff protect children and their parents from abuse, neglect and harm. The centre's child and adult protection policies and procedures are clear and staff are familiar with them. Staff complete regular safeguarding training. The protection of children remains the central focus of their work.

Assessment information is focused on the welfare and protection of children and their parents' ability to care for them safely. Risk assessments address the specific needs of each family member. They highlight known and potential risks to children and others, and include strategies that help to limit risks. Staff review risk assessments regularly to consider any change in families' safe parenting abilities.

Staff supervision and monitoring of families are consistent. There have been no allegations made against staff or any incidents of families going missing from the centre. Staff work with parents to explore the impact of risks posed to them and their children by offending behaviour, drug and alcohol misuse, and domestic abuse. Parents participate in relevant programmes that help them to reflect on their past experiences. Staff work closely with other safeguarding agencies. Working in this way helps to ensure that there is a joined-up approach to safeguarding children and parents.

The centre's physical environment is safe and secure. The use of CCTV is appropriate and provides an additional level of scrutiny in the evaluation of parents' safe care of their children. Families are aware of the centre's use of CCTV and audio monitoring devices. There are no health and safety concerns in relation to the building.

The recruitment of staff is robust and in line with safe recruitment practices. New staff undergo a thorough vetting process and participate in an induction programme, ensuring that they are suitable to work with families.

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

The leadership and management of the centre are not consistently strong. Since the centre registered with Ofsted, the registered manager has resigned and is due to leave the service soon. A senior manager in the organisation is to apply to become the centre's new registered manager.

There has been a significant level of discord in the management team and this has hampered the extent to which the service has developed and improved. This is not in the best interests of children and parents. Some management decisions have contributed to this discord, for example, a decision to provide accommodation for a member of staff on the centre's premises. This was done without consultation with key external partners, such as relevant local authorities or Ofsted. During the inspection, this staff member remained living on the centre's premises. This does not promote and make proper provision for the health and welfare of residents. Managers indicated that this arrangement is due to end in the near future.

The staff team works collaboratively. However, not all managers are clear about their responsibilities and accountability and there is evidence of continued disharmony in the management team. This does not help to promote the development and improvement of the centre.

Some service development plans, for example, the workforce development plan, are not effective, as they fail to include action to be taken to remedy areas identified for improvement.

Leaders and managers monitor the quality of assessment, care and help provided. Monitoring systems include feedback from staff through individual supervision sessions and weekly staff meetings. Senior managers complete monthly monitoring reports. However, leaders and managers are yet to complete and share with Ofsted any quality of care reports, as required.

Staff training, development and induction activities are generally effective and focus on assessments that meet the needs of families. However, the staff training matrix is incomplete and managers are yet to provide baseline training to staff in key areas that are relevant to their work, for example, training focused on child development and attachment.

Staff say they are well led and managed. They receive regular and effective supervision that is focused on children's and parents' experiences, needs, assessments and feedback. One staff member said, 'The team work well together. We work collaboratively, we're adaptable, flexible and communication is consistent.' Staff and leaders receive support and challenge, including through team and management meetings. Supervision is recorded effectively.

Case records are completed to a good standard. Records reflect the work conducted with families. They provide good insight and evaluation of parents' ability to care for their children safely. Records are available to parents.

Staff and managers have regular and effective contact and plan together with local authority social workers, guardians and court staff. Feedback from external partners is positive. A local authority social worker said, 'The staff team are welcoming, friendly, as is the centre's environment. Communication is amicable. Staff worked in a balanced way, providing weekly feedback, which highlighted mum's strengths and areas for improvement.'

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 ensure that the residential family centre is conducted so as to—</p> <p>promote and make proper provision for the health [(including physical, mental and emotional health)] and welfare of residents. (Regulation 10 (1) (a))</p>	1 January 2024
<p>The registered person shall establish and maintain a system for—</p> <p>reviewing at appropriate intervals; and</p> <p>improving,</p> <p>the quality of care provided at the residential family centre.</p> <p>The registered person shall supply to the [Chief Inspector] a report in respect of any review conducted by him for the purposes of paragraph (1), and make a copy of the report available to residents. (Regulation 23 (1)(a)(b) (2))</p>	1 February 2024
<p>The registered person must ensure that conclusions or recommendations are made as a result of the assessment or monitoring and that—</p> <p>the evidence on which they are based is capable of being presented in a manner that is clear, accessible and appropriate to the persons who will need to consider them. (Regulation 13A (3)(b))</p>	1 February 2024
<p>The registered person shall ensure that any complaint made under the complaints procedure is fully investigated. (Regulation 20 (2))</p>	1 February 2024

Recommendations

- The registered person should ensure that parents can take up issues in the most appropriate way and without fear that this will result in any adverse consequences. Also, that they receive prompt feedback on any concerns or complaints raised. (Residential family centres: NMS 2.4)
- The registered person should ensure that the final report is evidence based and contains clear recommendations for follow-up care, to ensure the smoothest possible transition to further care or return to the home environment. (Residential family centres: NMS 1.12 and 1.13)
- The registered person should ensure that managers and staff are clear about their roles and responsibilities and that the level of delegation and the lines of accountability are clearly defined. (Residential family centres: NMS 19.3)
- The registered person should ensure that there are good-quality staff learning and development opportunities, including training on key relevant subject matters such as child development and attachment. (Residential family centres: NMS 16.2)
- The registered person should ensure that there are clear and effective procedures for monitoring and controlling the activities of the centre. In particular, that the workforce development plan details action to be taken to address areas identified for improvement. (Residential family centres: NMS 19.1)

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: 2713934

Registered provider: Green Harvest Family Assessment Ltd

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Responsible individual: Helen Hoggins

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Inspector

Sandra Jacobs-Walls, Social Care Inspector

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