

SC025733

Registered provider: Friends Therapeutic Community Trust

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

A charitable community trust runs this home, which provides a therapeutic programme of care for up to 17 children and young people. The home caters for a specific range of needs, as detailed in the statement of purpose. The facilities include a registered on-site school and vocational workshops to support accredited work-based learning courses. The community is jointly registered with the Care Quality Commission (CQC).

The manager registered in October 2019.

Due to COVID-19 (coronavirus), at the request of the Secretary of State, we suspended all routine inspections of social care providers on 17 March 2020.

Inspection dates: 26 to 27 April 2021

Overall experiences and progress of children and young people, taking into account **requires improvement to be good**

How well children and young people are helped and protected **requires improvement to be good**

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

The children's home is not yet delivering good help and care for children and young people. However, there are no serious or widespread failures that result in their welfare not being safeguarded or promoted.

Date of last inspection: 14 November 2019

Overall judgement at last inspection: good

Enforcement action since last inspection: not applicable

Recent inspection history

Inspection date	Inspection type	Inspection judgement
14/11/2019	Full	Good
05/02/2019	Full	Good
04/10/2017	Full	Outstanding
23/03/2017	Interim	Improved effectiveness

Inspection judgements

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

There are currently eight children and young people living at the home. Since December 2020, four children have had to move on from the home unexpectedly. Two of these children did not successfully complete their initial assessment, one child required a specialist placement and another child moved to an alternative placement to ensure the safety of others.

The management team has assessed and accepted children into the home without fully understanding how their individual risks and needs will interact with the needs and risks of the children already at the home. Consequently, new admissions have resulted in group dynamics that have been very difficult to manage. Some of the children and staff have described the atmosphere at times as violent. This has not supported a sense of security and stability for the children.

The staff have not maintained the internal or external environment. Parts of the home and surroundings were not clean, and rubbish had not been fully disposed of. Some internal and external furniture required repair. Further to this, there was a broken Perspex window in an external greenhouse and broken glass visible on the floor in the children's games room. By not addressing these hazards, the staff had not protected the children from the potential harm that they could cause.

Twice-daily community meetings underpin the therapeutic work of the home. The children said that staff listen to them and that they feel that the staff care. This supports the children to commit to engaging in individual sessions and attending on-site education. Consequently, children are making good progress in their learning.

A strength of the home is the range of activities and targeted work to develop the children's independence. An outreach programme ensures that children have support for up to 18 months after they move on. The staff link with the children's families and wider network of professionals to provide a joined-up approach to preparing children to move on.

The manager knows the children well. She is child centred and a strong advocate for children. When children have needed specialist support, she has been able to access the services that they need.

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

Due to the group dynamics, some of the relationships between the children have been unhealthy and harmful. This has led to the staff managing a high number of serious incidents. Despite safety plans being in place, the lack of clarity and detail has meant that staff have not understood how best to ensure the children's safety.

This has led to further harmful incidents that may have been avoided.

Risk management plans do not contain sufficient guidance for staff to help mitigate all risks to the children. The focus on risks being addressed in community meetings and through the work by the clinical team meant that some staff did not consider children's individual triggers and risk-management strategies. Consequently, some staff are not equipped to de-escalate situations effectively when they arise.

Physical intervention records do not consistently include all the required information. The records do not always contain the details of other strategies used before the intervention or the effectiveness of the intervention. Timely management oversight is also limited. This lack of comprehensive review means that managers cannot identify strategies for reducing the potential for, or preventing, these incidents arising.

Potential safeguarding matters have not always been managed appropriately. For example, following an incident with a member of staff, the manager failed to notify and share the incident with the designated officer or Ofsted. The manager later resolved the issue. However, this delay meant that she did not follow the home's safeguarding policy.

The staff's recording of consequences to manage the children's behaviours is not always accurate or reviewed. Records are not always reflective of the restorative work undertaken in community meetings. This makes it difficult for staff to monitor and plan for the children effectively.

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

Following the departure of the long-standing chief executive officer of the home, the manager has had an increased workload, together with further resource challenges due to the COVID-19 lockdown restrictions. Specifically, there have been significant staffing shortfalls despite recruitment strategies. This has affected the manager's ability to provide effective monitoring and review of the care that is being provided at the home. Although she has recognised the high number of physical interventions used, she has not been able to provide an analysis that can suggest strategies for reduction. The lack of management oversight has led to a deterioration in practice.

The manager has not created a workforce development plan. The current staff induction does not contain details of all aspects of the role and timescales for inducting staff. This means that the staff do not benefit from a comprehensive or consistent approach to learning the responsibilities and duties of their roles.

The current training offer does not include specialist training to meet the children's individual learning needs. This means that the staff may not fully understand the children's behaviours and how to respond to them appropriately.

The staff hold the registered manager in high regard and feel positive about their

roles. Staff receive supervision. However, this is not always in accordance with the supervision policy. Staff therefore miss the opportunity to regularly reflect on, and consider, how to improve their practice.

The manager has reviewed and updated the home's statement of purpose. However, this was not shared with Ofsted, therefore limiting effective monitoring of the home.

The manager has begun to take steps to raise the standards of care. She has made decisions to move some children from the home to support the stability of the group. The senior management team has undertaken a strategic review of all aspects of the service. The managers are aware of the shortfalls identified and were able to share some of their ideas about how they will drive the necessary improvements forward.

What does the 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 quality and purpose of care standard is that children receive care from staff who—</p> <p>understand the children's home's overall aims and the outcomes it seeks to achieve for children;</p> <p>use this understanding to deliver care that meets children's needs and supports them to fulfil their potential.</p> <p>In particular, the standard in paragraph (1) requires the registered person to—</p> <p>ensure that the premises used for the purposes of the home are designed and furnished so as to—</p> <p>meet the needs of each child. (Regulation 6 (1)(a)(b) (2)(c)(i))</p> <p>This particularly refers to ensuring that the repairs to the home's furniture, outside wall, shed roof, fencing and glass are completed.</p>	<p>28 May 2021</p>
<p>The protection of children standard is that children are protected from harm and enabled to keep themselves safe.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure—</p> <p>that staff—</p> <p>assess whether each child is at risk of harm, taking into account information in the child's relevant plans, and, if necessary, make arrangements to reduce the risk of any harm to the child;</p> <p>have the skills to identify and act upon signs that a child is at risk of harm;</p>	<p>14 May 2021</p>

<p>understand the roles and responsibilities in relation to protecting children that are assigned to them by the registered person;</p> <p>that the home’s day-to-day care is arranged and delivered so as to keep each child safe and to protect each child effectively from harm;</p> <p>that the premises used for the purposes of the home are designed, furnished and maintained so as to protect each child from avoidable hazards to the child’s health. (Regulation 12 (1) (2)(a)(i)(iii)(v)(b)(d))</p> <p>This particularly refers to:</p> <p>improving the detail and quality of the risk assessments and safety plans;</p> <p>ensuring that staff have training in managing self-harm and understand their responsibilities to de-escalate incidents effectively and keep children safe;</p> <p>ensuring that all potential hazards, such as broken exposed glass, are removed from the site and that staff regularly clean the grounds, ensuring that all rubbish is safely disposed of.</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</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;</p> <p>understand the impact that the quality of care provided in the home is having on the progress and experiences of each child and use this understanding to inform the development of the quality of care provided in the home;</p> <p>use monitoring and review systems to make continuous improvements in the quality of care provided in the home.</p>	<p>28 May 2021</p>

<p>(Regulation 13 (1)(a)(b) (2)(c)(f)(h)) In particular:</p> <p>ensure that all staff have training to meet the children’s individual needs, such as autism spectrum conditions and learning disabilities;</p> <p>ensure that managers use monitoring and review systems to analyse and evaluate serious incidents and take necessary action to keep children safe;</p> <p>implement an effective system to assess the potential admission of children into the home to establish whether the staff can meet their needs and to assess the impact on any children already living at the home.</p>	
<p>The registered person must—</p> <p>notify HMCI of any revisions [to the statement of purpose] and send HMCI a copy of the revised statement within 28 days of the revision. (Regulation 16 (3)(b))</p>	28 May 2021
<p>The registered person must ensure that—</p> <p>details of any methods used or steps taken to avoid the need to use the measure;</p> <p>the effectiveness and any consequences of the use of the measure;</p> <p>within 5 days of the use of the measure, the registered person or the authorised person adds to the record confirmation that they have spoken to the child about the measure. (Regulation 35 (3)(a)(v)(vii)(c))</p>	28 May 2021

Recommendations

- The registered person should ensure that any potential safeguarding issue is addressed in line with the home’s child protection policy. In particular, act in accordance with the home’s safeguarding policy. (‘Guide to the children’s homes regulations including the quality standards’, page 44, paragraph 9.17)
- The registered person should have a workforce plan which can fulfil the workforce-related requirements of regulation 16, schedule 1 (paragraphs 19 and 20). The plan should:

- detail the necessary management and staffing structure (including any staff commissioned to provide health and education), the experience and qualifications of staff currently working within the staffing structure and any further training required for those staff, to enable the delivery of the home's statement of purpose;
- detail the processes and agreed timescales for staff to achieve induction, probation and any core training (such as safeguarding, health and safety and mandatory qualifications). ('Guide to the children's homes regulations including the quality standards', page 53, paragraph 10.8)
- The registered person should have systems in place so that all staff receive supervision of their practice which allows them to reflect on their practice and the needs of the children assigned to their care. ('Guide to the children's homes regulations including the quality standards', page 61, paragraph 13.2)
- 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. Specifically, ensure that all staff record full details of the consequences of behaviour used and the work undertaken in community meetings. ('Guide to the children's homes regulations including the quality standards', page 62, paragraph 14.4)
- The registered person should ensure that Ofsted is notified if one of the situations specified in regulation 40 (4)(a)-(d) occurs, or if there is an incident relating to the protection, safeguarding or welfare of a child living at the home which the registered person considers to be serious (40 (4)(e)). ('Guide to the children's homes regulations including the quality standards', page 63, paragraph 14.10)

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'.

Children's home details

Unique reference number: SC025733

Provision sub-type: Children's home

Registered provider: Friends Therapeutic Community Trust

Responsible individual: Peter Sorrell

Registered manager: Karen Parish

Inspectors

Leemya McKeown, Social Care Inspector
Amy Miles, Social Care Inspector

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