

1244287

Registered provider: Roc Northwest Ltd

Interim inspection

Inspected under the social care common inspection framework

Information about this children's home

The children's home is one of a number of homes operated by a private organisation. It is registered to provide care and accommodation for up to five young people who may have emotional and/or behavioural difficulties.

Inspection date: 11 January 2018

Judgement at last inspection: Good

Date of last inspection: 9 May 2017

Enforcement action since last inspection: Not applicable

This inspection

The effectiveness of the home and the progress and experiences of children and young people since the most recent full inspection

This home was judged good at the last full inspection.

At the interim inspection, Ofsted judges that it has declined in effectiveness.

The registered manager is suitably qualified and experienced. A recently appointed deputy manager supports the registered manager. The home operates in line with the aims and objectives of the statement of purpose. The team has had a number of staff changes since the last inspection. This means that young people have not benefited from having a stable and consistent team to care for them. Shift leaders are not always identified on staff rotas and, consequently, it is not always clear who the decision maker for the shift is. This means that roles and responsibilities are not always clear and, therefore, key processes are overlooked. For example, Ofsted did not receive notifications about two serious events in line with regulation. Following one serious event, it was a number of weeks before Ofsted received notification of a significant safeguarding incident.

Two requirements and three recommendations were made at the last inspection. The registered manager has failed to meet the majority of these. The two requirements have

not been met. Furthermore, two out of the three recommendations have not been met. These areas of practice, therefore, are still not meeting regulations. In response to these shortfalls, further requirements have been made.

There have been four new residents since the last inspection, two of which have moved on to a new placement. In addition, two young people that were resident at the last inspection have also moved to new placements. The assessment and planning for new admissions is not sufficiently robust. The impact that a new admission may have on young people and staff is not fully considered. Consequently, placements break down and young people have to move on to a new placement. In addition to placement breakdown for young people, staff morale is also affected.

The care that young people receive is not always in line with their care plans. Care plans do not always reflect the need and risks of the young people. Furthermore, risk assessments fail to identify key risk factors, and therefore strategies to manage risk-taking behaviour are not clear. For example, an assessment to understand and manage a relationship between two young people was not completed. Recording relating to this relationship was not available which meant that not all staff were aware of the issues; subsequently, they did not monitor the young people appropriately. Thus, safeguarding practice is not consistently good enough.

Staff do not always have the necessary knowledge and skills to completely understand all young people's health needs and risks. As a result, the assessments and plans are not clear. Furthermore, the day-to-day management of these presenting needs and risks are varied. In some instances, this leads to an increase in risk-taking behaviour and young people then require acute specialist intervention. In an emergency such as this, staff react in a timely way to safeguard young people.

All young people are accessing education. However, their attendance and attainment is varied. When young people engage positively with their education, they progress well. For example, one young person has made a successful transition from school to college; they are enjoying their college course and doing well. In addition, staff are supporting this young person to secure a part-time job. Where there are challenges with young people accessing and engaging in education, staff actively work with partner agencies to explore options that will meet young people's needs. One school said that staff are supportive of young people. They go on to say that staff are proactive and work with the school to encourage young people to engage in their education.

The quality of recording has not improved since the last inspection. Records are inaccurate and ambiguous. For example, there was a fire in the home. While the emergency services attended and young people and staff were safe, the records regarding this incident were incomplete and the records of the event were inaccurate. Furthermore, after the fire, the review and revision of the fire risk assessment was not completed. Not only does this mean that the fire risk assessment is void and out of date, but this lack of recording also fails to demonstrate any learning identified by the home following the event.

Young people make varied progress living here. They benefit from a staff team that, despite recent challenges, works hard to provide stability and reassurance for young people. Staff aim to provide young people with a safe environment where they can share

their wishes and feelings. When young people do disclose sensitive information, staff respond in a caring and supportive way. As a result, young people can be honest about their wishes and feelings, and feel supported when they do this. For example, a young person recently made a historical disclosure. In response to this, staff followed safeguarding procedures, and offered reassurance and continuous support.

Young people do not receive consistent support to understand their behaviour and take responsibility for this. Behaviour management strategies to support young people are not clear. Nor do they reflect the young people's assessments and plans. Subsequently, staff do not routinely identify with young people's triggers and use the required de-escalation techniques. Therefore, behaviours heighten and lead to physical interventions. While physical interventions have reduced since the last inspection, the use of physical intervention is still relatively high. When physical interventions do take place, staff manage these in line with procedure and the recording is to a good standard.

The manager and staff work well with other agencies. Agencies report that communication is effective and partnership working is good. Agencies provide a number of examples of this. In one example, an independent reviewing officer said that staff communicated effectively and kept them up to date with the young person's progress. They also said that staff had been particularly supportive in a recent sensitive situation, which involved a young person and his family.

Young people receive support to have regular contact with their families and friends. They speak positively about this. Staff encourage young people to access activities and young people say that they enjoy these activities. Young people develop interests and hobbies and they receive encouragement and support to take part in these regularly. For example, one young person attends horse-riding lessons and another young person has joined a local football club.

The monitoring and reviewing of practice is weak. Limited management oversight means that young people's records are not always accurate and relevant. There are limited internal systems in place to review and evaluate practice. This means that managers are not routinely identifying ineffective practice. Thus, the learning and development needs of staff are not identified. Furthermore, the training that is on offer to staff does not reflect the needs of the young people living in the home. Therefore, staff do not always receive the support that they need to develop their practice and enhance their knowledge and skills.

Recent inspection history

Inspection date	Inspection type	Inspection judgement
09/05/2017	Full	Good

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>In order to meet the health and well-being standard the registered person should ensure that children receive advice, services and support in relation to their health and well-being. (Regulation 10(1)(a))</p> <p>In particular, young people's health needs are assessed, recorded and monitored accurately. Furthermore, that specialist training and services are accessed in a timely way.</p>	02/03/2018
<p>In order to meet the protection of children standard the registered manager should ensure 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. (Regulation 12(2)(b))</p> <p>In particular, that all risk assessments must reflect identified need and risk. In addition, safeguarding and risk management strategies must be robust and have a clear link to behaviour management plans.</p>	02/03/2018
<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 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 ensure that staff have the experience, qualifications and skills to meet the needs of each child; use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13(1)(a)(b) and (2)(c)(h))</p> <p>In particular, ensure that staff have training to meet the needs of individual young people. The management and monitoring of case recording must be robust so that young people's assessments, plans and daily records are accurate. In addition, ensure that behaviour management practice is consistent and is in line with young people's assessed needs and plans.</p>	02/03/2018

<p>The care planning standard is that children receive effectively planned care in or through the children's home;</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure—</p> <p>that there are arrangements in place to ensure the effective induction of each child into the home; manage and review the placement of each child in the home. (Regulation 14(1)(a)(2)(b)(i)(ii)).</p> <p>In particular, that all young people's needs are fully assessed and considered when placing new young people in the home. Furthermore, that staff have the required knowledge and skills to meet young people's identified needs.</p>	02/03/2018
<p>After consultation with the fire and rescue authority, the registered person must—</p> <p>take adequate precautions against the risk of fire, including the provision of suitable fire equipment in the children's home; make arrangements for persons working at the home to receive suitable training in fire prevention. (Regulation 25(1)(a)(c))</p> <p>In particular, the fire risk assessment must be reviewed and revised as per the policy requirements. Furthermore, staff have the relevant training in relation to fire safety and that fire safety equipment is readily available.</p>	02/03/2018
<p>The registered person must maintain records ("case records") for each child which—</p> <p>include the information and documents listed in Schedule 3 in relation to each child; are kept up to date and are signed and dated by the author of each entry. (Regulation 36(1)(a)(b)(c))</p> <p>In particular, that staff understand the importance of careful, objective and clear recording that is accurate and not ambiguous.</p>	02/03/2018

Recommendations

- The registered person should have a system in place so that all serious events are notified, within 24 hours, to the appropriate people. The system should cover the action that should be followed if the event arises at the weekend or on a public holiday. Notification must include details of the action taken by the home's staff in response to the event. ('Guide to the children's homes regulations including the quality standards', page 63, paragraph 14.13)

Information about this inspection

Inspectors have looked closely at the experiences and progress of children and young people. Inspectors considered the quality of work and the differences made to the lives of children and young people. They watched how professional staff work with children and young people and each other and discussed the effectiveness of help and care provided. Wherever possible, they talked to children and young people and their families. In addition, the inspectors have tried to understand what the children's home knows about how well it is performing, how well it is doing and what difference it is making for the children and young people whom it is trying to help, protect and look after.

This inspection focused on the effectiveness of the home and the progress and experiences of children and young people since the most recent full inspection.

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: 1244287

Provision sub-type: Children's home

Registered provider: Roc Northwest Ltd

Registered provider address: Roc Northwest Ltd, Roc House, Ward Green Lane, Ribchester, Preston, Lancashire PR3 3YB

Responsible individual: Katie Stephens

Registered manager: Peter Whitworth

Inspectors

Lisa Gregoire-Parker, social care inspector
Mandy Williams, social care inspector

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