

SC448209

Registered provider: Amberleigh Care Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This private home provides long-term specialist therapeutic care and education for up to 12 young males who have displayed inappropriate or harmful sexualised behaviours.

Inspection dates: 6 to 7 September 2018

Overall experiences and progress of children and young people, taking into account **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 provides effective services that meet the requirements for good.

Date of last inspection: 15 May 2018

Overall judgement at last inspection: inadequate

Enforcement action since last inspection:

This children's home was judged inadequate on 15 May 2018. Nine requirements were raised, three of which were subject to compliance notices. A restriction notice was also issued.

Recent inspection history

Inspection date	Inspection type	Inspection judgement
15/05/2018	Full	Inadequate
17/01/2018	Full	Inadequate
04/10/2017	Full	Inadequate
01/03/2017	Interim	Sustained effectiveness

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 positive relationships standard is that children are helped to develop, and to benefit from, relationships based on an understanding about acceptable behaviour; and positive responses to other children and adults.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure that staff help each child to develop socially aware behaviour. (Regulation 11 (1)(b)(c)(2)(ii))</p>	17/11/2018
<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 that staff 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. (Regulation 12 (1)(2)(i))</p>	17/11/2018
<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 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. (Regulation 13 (1)(2)(a))</p>	17/11/2018
<p>The quality and purpose of care standard is that children receive care from staff who understand the children's home's overall aims and the outcomes it seeks to achieve for children, 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 ensure that staff have the experience,</p>	17/11/2018

knowledge and skills to deliver that care. (Regulation 6(1)(2)(3)(c)(ii))	
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Inspection judgements

Overall experiences and progress of children and young people: good

Staff try hard to get to know each child and are increasingly enthusiastic in making a positive difference to each child's life. This has led to children feeling more stable and reporting that they feel happy.

Staff respond well to children's health needs. Children are now engaging in therapy and, as a result, are making progress. Children reported that they are being supported to manage their emotions, which is helping them to make safer decisions.

Children are being supported to take part in their care. For example, they are encouraged by staff to contribute to their care plans and risk assessments. Children reported that staff listen to them and respect their wishes. Children have access to a good range of activities and trips. Some children recently went on holiday and were eager to tell inspectors about their experiences.

Staff promote education and want children to succeed. Staff encourage children to attend school and college. Some significant breakthroughs have been made for individual children, including one child starting at college and another child securing a job interview.

New children are sensitively welcomed. Staff make sure that they gain as much information as possible from children's previous placements, their parents and social workers. This helps staff to begin meeting children's needs from the moment they arrive.

Children are developing their independence skills. They learn how to cook and to budget and help with the household chores.

Staff are increasingly challenging placing authorities, especially when decisions are required for children's future moves.

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

Therapy and key-working sessions allow children to explore their history and to put this history in context against their feelings and behaviours. However, this good practice has not extended to the management of children's meetings where children are involved with deciding sanctions for their peers without an awareness of their peers' current issues. This can frustrate children and has compromised some staff in regard to being able to develop meaningful relationships with some of the children.

Staff have worked hard to improve children's risk assessments. However, staff have made changes to children's risk assessments without providing the rationale of why the change has been made. For example, one risk assessment was changed to reflect an adjustment in the number of staff required to supervise a child in the community. This lack of clarity risks placing children at a potential risk of harm.

Children now have an improved standard of privacy. For example, they now have their own keys for their bedrooms. Children now understand how and why closed-circuit television (CCTV) is used within the home. Door alarms on children's bedroom doors are now only used when there is an identified risk and only switched on when permission from the placing authority has been obtained.

Safeguarding concerns and complaints are responded to quickly and thoroughly by the staff team. Detailed records show that children are listened to in this respect.

Staff work well with safeguarding professionals. For example, staff secured the help of a wide range of professionals when a child went missing from the home. This demonstrates that staff have developed their skills and knowledge in working in partnership with other professionals. Because of this ability to work together, the child has been safeguarded. Despite this good practice, staff still do not ensure that children are an integral part of the care planning process and understand why particular actions are necessary to keep them safe.

Managers ensure that safe recruitment practice is in place and this contributes to keeping children safe.

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

There has been no registered manager since August 2018. A suitably experienced interim manager who has completed a level 5 qualification in leadership and management is in post. This change in management has caused some inconsistencies in staff practice. However, despite these changes, feedback from different professionals and children is, overall, positive.

During the last few months, progress has started to make a difference to children's experiences. For example, at a monitoring inspection on 7 August 2018, inspectors found that the quality of care had significantly improved. As a result, Ofsted was sufficiently assured that the restriction of accommodation notice was no longer required.

The interim manager has an awareness of areas that still require further development and is using his knowledge of the children to start implementing improvements. These are still in their infancy.

The six-monthly assessment of the quality of care appropriately reflected on the difficulties the home has experienced. This transparency has helped the organisation to implement necessary improvements.

Staff are supported through regular supervision sessions that enable them to reflect on their daily practice. A new appraisal system has also been introduced. This now includes the views of other members of staff, professionals who are involved in the care of children and children's views. This is helping to give each member of staff a better assessment of their own practice and performance and how this influences the care that children receive. Regular staff meetings are also helping to share information about the development of the home and the quality of care. Staff are now receiving a better range of training. A specialist nurse comes into the home to deliver training to staff on managing diabetes so that they can support young people's needs. However, records do not clearly show which staff have completed this training.

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.

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: SC448209

Provision sub-type: Residential special school

Registered provider: Amberleigh Care Limited

Registered provider address: Golfa Hall, Golfa, Welshpool, Powys SY21 9AF

Responsible individual: Kevin Gallagher

Registered manager: Post vacant

Inspectors

Andrew Hewston, social care inspector

Gareth Leckey, social care inspector

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