

SC482294

Registered provider: Cambian Asperger Syndrome Services Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This privately owned home provides care for up to 29 children with learning disabilities. Children are accommodated in five houses, and all the children attend the school that is located on the same site. Care is provided to children with a primary diagnosis of an autism spectrum condition. The home offers a flexible package and provides care on a weekly, termly or annual boarding basis, depending on the child's needs. There were 10 children living across the homes at the time of this inspection.

The registered manager has been in post since 24 April 2023.

The education provision was not inspected during this inspection.

Inspection dates: 4 to 6 July 2023

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: 20 June 2022

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
20/06/2022	Full	Good
28/09/2021	Full	Good
07/06/2021	Full	Inadequate
03/07/2019	Full	Good

Inspection judgements

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

Children enjoy living at this home. Staff provide child-centred care and support, which has a positive impact on children's lives. However, weaknesses in how the managers have addressed medication errors have undermined the overall safety and quality of care that the children receive.

Children enjoy their day-to-day experiences as staff plan the children's free time well. They encourage and support the children to have a range of positive experiences in the home and the local community.

Children particularly enjoy the on-site outdoor swimming pool, and take part in an array of fun activities that follow the children's interests, such as football and sailing clubs. This helps children to develop social skills and builds their confidence.

The vast majority of children are making good progress from their starting points, especially in developing their communication and independence skills. For example, one child who is new to the home now sleeps in nightwear rather than wearing his day clothes to bed. This is a significant step for this child.

Plans for when children move in to and on from the home are effective and informed and led by their individual needs. Staff build strong relationships with the children who they care for and their families. Staff interactions with children are kind and caring. They take time to help children to make choices and gather their views. Consequently, children build self-esteem and improve their problem-solving skills.

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

There have been a number of medication errors as a result of staff not following medication procedures. Managers have implemented changes to prevent mistakes, but these have been ineffective and medication errors have continued. Two members of staff have repeatedly not followed medication procedures even when they have received retraining and further assessment of their medication administration competency. This places children at risk. Consequently, immediate assurances were provided to Ofsted during the inspection.

The ethos of the home is one of encouraging positive behaviour, kindness, and respect between the children and the staff. Staff records relating to the use of physical intervention show timely manager review, the children's well-being being checked, and debriefs with the staff. However, some plans relating to physical intervention do not show enough consideration for the children's age and understanding, health needs, or relevant past experiences. This runs the risk of the

physical intervention being used without a full understanding of the implications for each child.

There is good communication across the care homes, school, and clinical team. The home's multi-disciplinary team approach means that any new or emerging risks for children are flagged up early through daily managers' meetings. This ensures that children's safety and well-being needs are prioritised and responded to.

Children's risk management plans are detailed and include clear strategies for staff to follow to reduce levels of risk. Children are supported by staff to take appropriate risks in line with their age and level of understanding. This helps children to develop their understanding of risk and helps them to learn about what is safe and socially acceptable.

Staff spoken to are clear about what to do and who to tell if they had a concern or worry about a child. There is a good safeguarding focus throughout the culture of the home. This is reflected particularly well in team meetings, where the staff are regularly encouraged and tested to further develop their knowledge of child protection matters.

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

The home is managed by a suitably experienced and newly appointed registered manager, who is on track to complete his childcare management qualification within the required timeframes.

Leaders and managers have identified medication errors and implemented changes to prevent mistakes. However, medication errors have continued. There is no overarching management review to identify thematic patterns. As a result, it is not clear what is currently in place to reduce the risk of future medication errors.

Managers have not ensured that all safeguarding incidents have been notified to Ofsted. This includes information about medication errors and allegations about staff conduct. This has hindered the regulator's ability to monitor the service.

Leaders and managers continue to face significant challenges in the recruitment of suitable staff. Nevertheless, the homes are appropriately staffed and resourced to meet the needs of children, who, for the most part, are cared for by the staff who they are familiar with.

Several overseas workers have recently been employed to help mitigate the shortages of care staff. The registered manager has ensured a good level of support for the new staff. This includes differentiated training, cultural and pastoral care support, alongside a well-designed induction programme. Staff recruitment is robust and in line with safer recruitment practices, which safeguards children effectively.

Leaders and managers ensure ongoing investment and maintenance of the children's homes. Overall, they are welcoming, homely and reflect the children's tastes and preferences. However, this is not the experience for one child who lives separately from the other children due to his specific needs. In his home, the kitchen cupboards are locked, as are some parts of the home. Damage to the decor is not always quickly repaired. Therefore, the child is not experiencing living in a nurturing environment. Alternative plans are currently being addressed between the home, parents and the local authority.

The newly appointed registered manager shows enthusiasm and determination to provide a high-quality service that enhances the experience of the children. The registered manager and staff promote an inclusive and child-centered ethos at the home. Staff's practice towards children reflects these values. The previous requirement and recommendations have been met.

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 registered person must make arrangements for the handling, recording, safekeeping, safe administration and disposal of medicines received into the children’s home.</p> <p>In particular the registered person must ensure that—</p> <p>medicine which is prescribed for a child is administered as prescribed to the child for whom it is prescribed and to no other child. (Regulation 23 (1) (2)(b))</p>	10 August 2023
<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>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. (Regulation 13 (1) (2)(c))</p> <p>In particular, ensure that staff have sufficient competency to administer medicines in line with the home’s procedures.</p>	10 August 2023
<p>The registered person must notify HMCI and each other relevant person without delay if—</p> <p>there is an allegation of abuse against the home or a person working there;</p> <p>there is any other incident relating to a child which the registered person considers to be serious. (Regulation 40 (4)(c)(e))</p> <p>In particular, ensure that serious or repeated medication errors are reported to Ofsted.</p>	10 August 2023

Recommendations

- That registered manager should ensure that written guidance to staff provides information to the risks that restraint carries. These include causing physical injury, psychological trauma or emotional disturbance. When considering whether restraint is warranted, staff in children's homes need to take into account:
 - the age and understanding of the child;
 - the size of the child;
 - the relevance of any disability, health problem or medication to the behaviour in question and the action that might be taken as a result;
 - the relative risks of not intervening;
 - the child's previously sought views on strategies that they considered might de-escalate or calm a situation, if appropriate;
 - the method of restraint which would be appropriate in the specific circumstances;and
 - the impact of the restraint on the carer's future relationship with the child.(Guide to the quality standards, including the Children's Homes Regulations', page 49, paragraph 9.55)

- The registered person should ensure that the children's home is a nurturing and homely, domestic environment, and should seek as far as possible to maintain a domestic rather than 'institutional' impression. In particular, they must ensure that the environment is consistently maintained and furnished to a high standard. (Guide to the Children's Homes Regulations, including the quality standards', page 15, paragraph 3.9)

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: SC482294

Provision sub-type: Residential special school

Registered provider: Cambian Asperger Syndrome Services Limited

Registered provider address: Metropolitan House, 3 Darkes Lane, Potters Bar
EN6 1AG

Responsible individual: Alison Priddle

Registered manager: Jack Murphy

Inspectors

Anne-Marie Davies, Social Care Inspector
Kelly Marchmont, Regulatory Inspection Manager

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