

# SC485423

Registered provider: The Serendipity Centre Limited

Full inspection

Inspected under the social care common inspection framework

## Information about this children's home

The home is registered to provide care for up to five children. It is privately owned by an organisation which has other homes and an educational setting in the vicinity.

The manager was registered with Ofsted in February 2018.

**Inspection dates:** 13 to 14 November 2019

**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:** 10 July 2019

**Overall judgement at last inspection:** inadequate

### Enforcement action since last inspection:

This children's home was judged inadequate at the full inspection on 10 July 2019. At that time, two compliance notices were issued. At a monitoring visit on 21 August 2019 a compliance notice in relation to regulation 25 was deemed to be met. A compliance notice in relation to regulation 13 was judged to be not met and was reissued. At a monitoring visit on 30 September 2019 the compliance notice in respect of regulation 13 was again judged to be not met and was reissued, and a restriction notice was issued.

## Recent inspection history

<b>Inspection date</b>	<b>Inspection type</b>	<b>Inspection judgement</b>
10/07/2019	Full	Inadequate
08/11/2018	Full	Requires improvement to be good
06/03/2017	Interim	Sustained effectiveness
13/07/2016	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>The health and well-being standard is that— the health and well-being needs of children are met; children receive advice, services and support in relation to their health and well-being; and children are helped to lead healthy lifestyles.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure— that staff help each child to— understand the child's health and well-being needs and the options that are available in relation to the child's health and well-being, in a way that is appropriate to the child's age and understanding. (Regulation 10 (1)(a)(b)(c)(2)(a)(ii))</p>	31/01/2020
<p>The positive relationships standard is that children are helped to develop, and to benefit from, relationships based on— mutual respect and trust; 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— meet each child's behavioural and emotional needs, as set out in the child's relevant plans. (Regulation 11(1)(a)(b)(c)(2)(a)(i))</p> <p>In particular, review 'keep safe' plans and risk assessments to ensure that they give staff clear and effective guidance.</p>	31/01/2020
<p>The care planning standard is that children— receive effectively planned care in or through the children's home. (Regulation 14 (1)(a))</p>	31/01/2020
<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— medicines kept in the home are stored in a secure place so as to</p>	31/01/2020

prevent any child from having unsupervised access to them. (Regulation 23 (1)(2)(a))	
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## Recommendations

- Staff should seek to meet the basic needs in the way that a good parent would, recognising that many children in residential care have experienced environments where these needs have not been consistently met - doing so is an important aspect of demonstrating that the staff care for the child and value them as an individual. ('Guide to the children's homes regulations including the quality standards', page 15, paragraph 3.7)

In particular, review the policy that agrees to children being left in the home on their own.

- Children should be able to maintain and develop their cultural or religious beliefs as far as practicable. ('Guide to the children's homes regulations including the quality standards', page 17, paragraph 3.22)
- Expectations of standards of behaviour should be high for all staff and children in the home. These standards should be clear and unambiguous. ('Guide to the children's homes regulations including the quality standards', page 39, paragraph 8.11)

In particular, ensure that any chore charts are appropriate and that children are consulted fully.

- Staff should understand what they must do to prevent bullying of children by other children or adults. ('Guide to the children's homes regulations including the quality standards', page 39, paragraph 8.16)

## Inspection judgements

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

Positive changes are evident, although it was recognised by leaders and managers that these need to be embedded in practice. Improvements made are not yet consistent in all areas.

Children are generally well cared for and have good relationships with the staff. However, staff are not always consistent in setting boundaries. This has contributed to negative relationships forming between some children. Leaders and managers are addressing this as part of the staff's development. Children's meetings and one-to-one time with staff are used to address the children's relationship difficulties.

Senior managers assessed a child's placement which identified the issues for this child effectively, and the actions needed. However, they have not assessed the needs of the other children. The impact on the children of the shortfalls which led to the inadequate judgement and enforcement action has not been considered. Consequently, the relevant therapy and support services have not been identified.

Staff have not considered a child's cultural needs or explored her belief systems. This is a missed opportunity to learn about her history.

All the children are now attending education. The staff work closely with school and college staff to identify the best educational provision. An initiative of rewarding children for completing a week's homework has had positive results. Children are now more willing to engage in learning outside of formal education.

One area of development has been in staff's consultations with children, who have been fully involved in writing their 'All About Me' information sheets and designing their files.

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

Risk assessments and care plans are reviewed and updated to reflect changes. However, information is not easily accessible to the staff. These are long documents which include historical information which is no longer relevant. This risks important details being missed.

The 'Keep Safe Plans' do not state all actions staff need to take to minimise the reoccurrence of an unsafe behaviour. Leaders and managers have not evaluated and analysed the effectiveness of these plans.

A discussion with leaders and managers in relation to a child's home alone policy identified that the child rarely chose to be left in the home on his own. Managers have

not reviewed whether this practice remained in his best interests.

Controlled drugs are not stored securely. They are in a lockable cabinet in a coded locked box. However, the key for the lockable cabinet is placed by the side of it. This risks children being able to access these drugs if they found the code.

Children's health needs are not regularly evaluated. One child's use of a non-prescribed drug was not adequately reviewed following him reporting that he had taken an overdose. Staff did not seek advice in regard to whether the drug was still needed. Another child refuses to wear glasses. The manager was not aware of the impact on the child of making this choice. Another child was regularly taking an allergy medication, and staff have not sought advice as to whether this is still necessary.

Children are now able to use the home's portable telephone. Well-thought-out agreements are devised in conjunction with children. The safety measures to follow and consequences for misuse are clear.

Children develop trusting relationships with the adults who care for them. They can discuss any concerns or worries, confident that staff listen to them and respond appropriately.

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

The registered manager is no longer in day-to-day charge of the home but has not yet informed Ofsted. A new manager has been appointed. Senior managers have acknowledged previous failings and are taking an effective but measured approach to improving the service. They recognise that improvements are ongoing and need to be consistently applied across the organisation.

The newly appointed manager has made some positive changes, which have been well received by staff. Staff spoken to report that the home is more professional now.

Leaders and managers have assessed the competence of all staff, and found gaps in the knowledge and skills of some staff. They have also identified that some staff failed to escalate concerns about decisions which they felt were unsafe. These areas are being addressed in supervisions, team meetings and personal development plans. Managers have identified clear, measurable targets for staff to work towards.

Training has improved and areas of development for the staff team have been identified. Shortfalls remain in understanding the purpose of risk assessments and accurate recording.

Children's chore reward charts include social interactions and are ambiguous. For example, 'treat staff with respect'. In addition, children had agreed to these targets without understanding how they could achieve them. Managers failed to review these charts and explore why the children have not challenged them.

Some staff fail to understand the regulations in regard to restrictive practices such as the use of door alarms. The responsible individual intervened to ensure that staff did not use a door alarm following an incident. This was not a proportionate response and was addressed immediately.

Recruitment has improved, and only staff with the necessary checks work directly with children. A review of pay structures has been effective in improving recruitment and retention of staff.

Monitoring processes have been improved by senior managers. All incidents are quality assured by senior managers, who evaluate and review records of incidents to ensure that they are accurate and that agreed actions are acted on.

## **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:** SC485423

**Provision sub-type:** Children's home

**Registered provider:** The Serendipity Centre Limited

**Registered provider address:** 1st Floor, Goodlands House, St. Lukes Close, Hedge End, Southampton SO30 2US

**Responsible individual:** Sean Maguinness

**Registered manager:** Carly Hodge

## Inspector

Suzy Lemmy, social care inspector

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