

## IMPROVING LIVES SELECT COMMISSION

**Venue:** Town Hall, Moorgate  
Street, ROTHERHAM.  
S60 2TH

**Date:** Wednesday, 4th November, 2015

**Time:** 1.30 p.m.

### A G E N D A

1. To consider whether the press and public should be excluded from the meeting during consideration of any part of the agenda.
2. To determine any item(s) the Chairperson is of the opinion should be considered later in the agenda as a matter of urgency.
3. Apologies for absence.
4. Declarations of Interest.
5. Questions from members of the public and the press.
6. Communications.
  - The Council has agreed that Councillor Currie will leave this Select Commission and that Councillor Elliot will join.
7. Minutes of the previous meeting held on 23rd September, 2015. (Pages 1 - 12)
8. Early Help. (Pages 13 - 18)
  - David McWilliams, Assistant Director, Early Help and Family Engagement, Children and Young People's Services Directorate.
  - Background papers – Early Help storyboard – attached.
9. Children's Residential Care Issues. (Pages 19 - 30)
  - Ian Thomas, Strategic Director, Children and Young People's Services Directorate to report.
10. Improving Lives Select Commission - work programme. (Pages 31 - 37)
  - Deborah Fellowes, Scrutiny Manager, Legal and Democratic Services, Resources and Transformation Directorate, to report.

11. Date and time of the next meeting: -

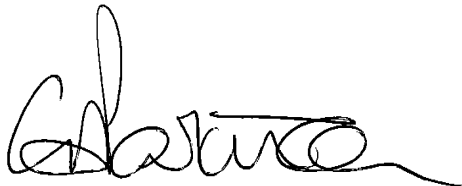
- Wednesday 16<sup>th</sup> December, 2015, to start at 1.3 p.m. in the Rotherham Town Hall.

**Improving Lives Select Commission membership:-**

Chair – Councillor J. Hamilton  
Vice-Chair – Councillor Pitchley

Councillors Ahmed, Astbury, Beaumont, Clark, Cutts, Elliot, Hague, Hoddinott, Jepson, Jones, Reeder, Rose, Rosling, Taylor, Tweed and M. Vines (18).

Co-opted members:- Ms. Jones (Voluntary Sector Consortium), Mr. Smith (Children and Young Peoples' Voluntary Sector Consortium), Mrs. Clough (ROPF: Rotherham Older Peoples Forum) for agenda items relating to older peoples' issues.



Interim Director for Legal and Democratic Services

**IMPROVING LIVES SELECT COMMISSION  
23rd September, 2015**

Present:- Councillor Hamilton (in the Chair); The Mayor (Councillor M.Clark), Councillors Astbury, Beaumont, Cutts, Hoddinott, Jones, Rose, Taylor and M. Vines.

Apologies for absence were received from Councillors Ahmed, Currie, Jepson and Pitchley and from co-opted members Ms. J. Jones (GROW) and Mr. M. Smith.

**14. DECLARATIONS OF INTEREST**

No Declarations of Interest were made.

**15. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS**

There were no members of the public or the press in attendance.

**16. COMMUNICATIONS**

Nothing was raised under this item.

**17. SECOND IMPROVING LIVES SELECT COMMISSION REPRESENTATIVE TO THE CORPORATE PARENTING PANEL**

Resolved: - That Councillor S. Ahmed be the second Improving Lives Select Commission representative to the Corporate Parenting Panel.

**18. MINUTES OF THE PREVIOUS MEETING HELD ON 22ND JULY, 2015**

The minutes of the previous meeting of the Improving Lives Select Commission held on 22<sup>nd</sup> July, 2015, were considered.

On page 8, the minutes recorded that a scorecard was being developed in respect of creating a CSE profile and would allow progress tracking. The scorecard had not been forwarded to the Improving Lives Select Commission and it was hoped that it would soon be available for consideration.

On page 10 of the minutes covering the conclusions and next steps for the Improving Lives Select Commission, the areas that the Commission had highlighted were noted. Councillor Hoddinott emphasised the need for recommendations to be made following consideration of the Delivery Plan.

Resolved: - That the minutes from the previous meeting held on 22<sup>nd</sup> July, 2015, be approved as a correct record.

**19. TACKLING CSE - DELIVERY PLAN**

Councillor Hamilton, Chair of the Improving Lives Select Commission, welcomed the Officers in attendance to present the Rotherham Local Safeguarding Children Board's Child Sexual Exploitation Delivery Plan (2015-2018).

In attendance were: -

- Gary Ridgeway, Assistant Director for CSE Investigations and Chair of the Child Sexual Exploitation Sub-Group of the Rotherham Local Safeguarding Children Board (GR);
- Phil Morris, Business Manager of the RLSCB;
- Sue Cassin, Chief Nurse, Clinical Commissioning Group;
- Linda Harper, Interim Director for Commissioning and Performance, Children and Young People's Services Directorate;
- Jo Smith, Post-Abuse Co-ordinator, Children and Young People's Services Directorate.

Consideration of this item formed part of the Improving Lives Select Commission's focus on the work to tackle Child Sexual Exploitation (CSE), including the strategic plans and documents agencies had created. The previous meeting held on 22<sup>nd</sup> July, 2015, had considered the overarching work to tackle CSE (Minute Number 12: - 'Child Sexual Exploitation – The Way Forward for Rotherham'). The CSE Delivery Plan was referred to at that meeting and had now been submitted for consideration.

Councillor Hamilton invited members of the Improving Lives Select Commission to ask questions on each section of the Delivery Plan document.

**1. Prevent – prevent children and young people from becoming sexually exploited through effective leadership, governance and a wider culture embedded within organisations that recognise the root causes of CSE, the signs and risk indicators and do all they can to tackle them (pages 20- 23): -**

Councillor Jones referred to the intention to produce a problem profile and annually update it. Surely this needed to be more regular at the present time. – Gary Ridgeway agreed that the document would need to be more regularly refreshed in the short term and confirmed that it was being refreshed in 'real time' whilst all of the strategy work was underway.

Councillor Beaumont referred to 1.2 and how it related to engaging a PR/marketing company to ensure that messaging was well constructed and targeted. – GR confirmed that it was an action to consider the feasibility/appropriateness of using a PR/marketing company, and this included exploring how this would be funded and the sustainability of the option.

Councillor M. Vines asked whether schools were taking part in CSE training. – GR explained that the levels of influence varied. Some schools were completely engaged, whilst others were determining their position. All headteachers would be brought together in the Autumn to discuss the curriculum work needed and the resources that were available. Gary confirmed that a school connected to live operations had responded well to working with the Council.

Councillor Hoddinott spoke about relationship education. Was the priority to engage with all primary schools as well as secondary schools? - GR confirmed that it was an aspiration and would be coupled with early help planning.

Councillor Beaumont – referred to the pilot awareness campaign and how it intended to engage one school from each phase. – GR confirmed that this had not happened yet and would form part of the discussion with schools this Autumn.

Councillor Hoddinott asked what has been learnt from previous campaigns and from speaking to victims and survivors? What had worked and what had not worked? - GR explained how it was important for the material to strike a chord with individuals and help them to come forward. Schools involved with the operations had been supportive and open and honest. Agencies were still learning what the nature of victims and exploitation in Rotherham looked like. There was no 'off-the-shelf' response available for marketing/promotional resources.

Councillor Hoddinott asked how victims and survivors were feeding in to developing promotional resources and training materials? – GR explained that he had witnessed victims and survivors sharing their experiences and it had caused them to re-live the experiences. Gary was clear that he did not want any victims to re-visit their exploitation for these ends. It was important that the voices of many survivors were heard to represent the range of victims, and also to ensure that it was a complete and cross-cutting part of the process.

Councillor Hoddinott reported feedback that the 'Spot the Signs' poster pictures did not reflect what happened to victims and, as such, did not resonate with what happened. Officers working on the campaigns really needed to hear the feedback so that campaigns helped to remove barriers to reporting not least for victims and survivors. Jo Smith – outlined an assertive outreach service programme of work to include CSE prevention. There would be two levels to the work, one at junior school level and the second aimed at comprehensive schools. The Services were talking to individuals and a range of groups. Influence was coming from more than one voice.

Sue Cassin explained the drama/theatre groups that were to be offered to Key Stages 3 and 4. Councillor Hamilton emphasised how important it was for the theatre groups to differentiate between age-groups and provide age-appropriate material.

Councillor Clark challenged the commonly-held view that CSE only happened in certain areas of the Borough. Evidence showed that this was wrong. How were Schools selected to participate? – GR explained that there must be a clear evidence for engagement. It would be wrong to pick schools only on their willingness to engage.

Councillor M. Vines asked whether the Local Authority could make a school engage? – GR would never want to be in that position. However, from the statutory position of an Academy, and that of a Safeguarding Board, there were no powers to enforce this. There were no schools in Rotherham not wanting to do their best for their children.

Councillor Hoddinott asked if the RLSCB had evaluated the pilot? - GR explained that this was a current issue and work was not at that stage yet.

There was confusion on the number of pilots that were taking place and which stage they were at.

Councillor Hoddinott referred to Section 1.7 that stated that the Improving Lives Select Commission would undertake an annual review of community engagement activity. – GR explained that it had been put forward by the ILSC as part of the work to produce the delivery plan.

Councillor Hamilton acknowledged how the Jay report paid reference to BME communities being victims of CSE. She did not feel that the Prevent area gave much time to the issues. – GR did not agree with this. The Delivery Plan was a live document and a detailed action plan. All victims, regardless of label, would show some form of vulnerability so it was better to refer to vulnerabilities in the plan.

**2. Protect – protecting children and young people who are at risk of sexual exploitation as well as those who are already victims and survivors (pages 24-27): -**

Councillor Hoddinott asked about Regulation 44 reports. How many had there been in the last year and where were they reported to? - GR did not know this personally but agreed to forward the information to the ILSC.

Councillor Beaumont noted that 2.5 was rated Amber. – GR confirmed that as of September 2015 the strategic objective had been judged to be amber because there was a risk of failing to achieve it and remedial work was required. It had not been rated as Red, which was for significantly off-track objectives.

Councillor Beaumont asked about funding. – GR confirmed that funding cuts were not being felt by the team, although this was causing pressures elsewhere.

Councillor Hoddinott asked what would be the procedure if a family was not happy? Was there an independent complaints procedure? How would issues be flagged? - GR – Confirmed that a complaints procedure existed, which included a multi-agency significant third sector organisation. There were Command and Operational groups providing a strong voice and advocate for victims and families.

Councillor Clark asked how looked after children complained if they were not happy with the support they were receiving? - GR explained that there was a review of support for Looked After Children, including the role that the Review Team played. Looked after children would be supported through multi-agency challenge to any issues in post-abuse support.

Councillor Beaumont asked whether there was evidence that schools were not reporting children and young people who missed education because of the pressure to avoid Ofsted scrutiny on falling attendance rates? – GR explained in order to have a practical multi-agency response it would be difficult to distinguish between missing and absent. Missing overnight was a clear trigger for CSE, although children missing for just an hour at a time could also be at risk. If a child was missing for an hour there was every chance that this would not be picked up. There was a dedicated Missing Persons Officer co-located with the CSE team. The IYSS Service undertook a return interview within 72 hours of a young person returning. It was important that agencies increased their ability to respond to missing.

**3. Pursue – pursue, relentlessly, perpetrators of child sexual exploitation, leading to prosecutions of those responsible (pages 28-29): -**

Gary spoke about the prosecution of offenders for other offences they had committed. Although it was positive because it disrupted activities, it did not deliver justice to victims of CSE. This ethos was a tangible presence within command groups, they wanted to pursue and prosecute CSE crimes.

Councillor Beaumont referred to the pending reduction in PCSOs and their re-location – would this have an impact on intelligence, community safety and so on? - GR acknowledged that PCSOs had a presence and role within communities. His view was that PCSOs were one element of the community able to spot and articulate risks and signs. There were lots of other professionals on the ground who should be keeping their eyes open to signs. It was also crucial for all members of the public to be able to report their concerns.

Councillor Hamilton asked about progress made on the witness support strategy. - GR explained how the RLSCB was keen for third sector agencies to be integral in providing links and support. This would support the police and social care. All meetings had an agenda item on how to identify the best support for victims. Cultural beliefs that responsibility sat squarely with statutory agencies needed to be challenged. Statutory partners could not afford to support that myth.

Jo Smith agreed that third sector organisations had a critical role to play in ensuring that the victim was the focus, regardless of whether or not a prosecution was pending. She was working on a new service specification for a tender process in November, 2015, to be up and running by 1<sup>st</sup> April, 2016. There were already services in place, but needs were changing.

Councillor Hoddinott referred to sections in Prevent and in Pursue on how people reported concerns. Was ringing 101 the right route to do this? Was there a better way of reporting? Adult Safeguarding had text and email reporting mechanisms. This did not seem to be in place for Children's Services. Were partners making it easier to report concerns? - GR agreed that this was a good suggestion. There was enhanced information sharing between the police, children's social care and licensing. Members of the public were asked to raise concerns through 101. Email and internet templates were being looked at by the CSE Sub-Group. Neighbours used this approach. There were issues relating to the treatment of different types of concerns: - urgent concerns that needed to be picked up immediately, and pieces of intelligence information that needed to be shared. It was possible that with electronic reporting an urgent piece of information may not be picked up quickly. Agencies would need to give the right guidance about what was urgent and what needed to be shared.

Councillor Hoddinott asked whether Health Services were involved in data sharing? - GR explained that there were always more challenges for Health due to their confidential relationship with patients and their legal requirements around confidentiality.

#### **4. Proving Support – providing support for survivors of CSE, ensuring that their needs are met (pages 29 – 31): -**

Councillor Rose referred to the Transition/Adult Survivor Board at 4.3 and asked how it was progressing. She had heard from survivors that they were not getting support from 18 and feeling they had reached a 'cut off' point. - Linda Harper outlined work, along with partners' statutory responsibility to LAC until they were 25.



Councillor Hoddinott asked how voice and influence work was contributing to the design of support packages. – Jo Smith explained that the voluntary and community sector had been commissioned and this would feed into the needs analysis. Jo reported monthly on the work that had been undertaken and offered to report this to the next meeting.

Councillor Hamilton noted that section 4.1 concerned mental health services and an annual needs analysis to be undertaken to identify any gaps. It was known that mental health services were under strain, how sure were partners that they could provide the help and treatment that was really need? – GR stated the importance of recognising the full picture of mental health requirements so that services could be designed accordingly.

Councillor Hamilton asked what the reviews into service improvement partnerships referred to? - Linda Harper explained that it was a review of the current services that were being funded. The field work completed at the end of August and the report would be released at the end of September. The field work had involved Rotherham's Young Inspectors and voice and influence work. The aim of the review was to improve quality by sharing good practice and the focus had been to support providers to work together without competing.

**5. Ensure the participation of all children and young people and families – ensuring that the voices of children and young people are heard and listened to at all times (pages 31- 32): -**

Councillor Hoddinott stated that this also needed to include the involvement of adult survivors and also to ensure there was no cut off at the age of 18. It was important to reassure survivors that they are involved, whichever stage they were at. – GR explained about the RLSCB's Community Reference Group.

Councillor Beaumont asked for more quantitative information. – GR said that this would be provided through the Scorecard and the Thematic Reviews.

Councillor M. Vines saw that the Rotherham Standing Together Campaign was judged to be Amber. How far behind were they to completing? - GR outlined the ongoing discussions with a wide range of stakeholders on issues like: should the posters about CSE be visible to every person coming into Rotherham?; was this appropriate to victims and other groups like businesses and tourists?; should the posters be displayed in every public building?. It was important to listen to all stakeholders' opinions.

Councillor Hamilton asked whether the staff changes referred to at 5.3 were now sorted, and were the staff in place? – GR said this was a priority to take forward, along with decisions needing to be made around commissioning. This was expected to be delivered in November, 2015, and there would be one person who would be held accountable from then.

Councillor Hoddinott asked whether there was any update on Elected Members being involved in audit activities? - GR described the role as part of the thematic CSE audit and understood that the ILSC were to have a Lead Member for CSE audit.

Councillor Taylor referred to 5.2 as he felt the language could be complacent as meetings with schools were not yet confirmed. - GR agreed that listening to victims and survivors was important in preventing future cases of CSE.

Gary thanked the Improving Lives Select Commission for the guidance, comments and questions that had been shared with him.

#### **The Improving Lives Select Commission's summary and next steps:-**

Deborah Fellowes, Scrutiny Manager, outlined the areas of discussion that she felt were a priority and prime for future investigation. She invited contributions from the Elected Members present.

The following future lines of enquiry were agreed: -

- A report would be provided to the next meeting on the work with the third sector in supporting victims;
- Schools – what activities were taking place? Which pilots were running? Was there more than one? Who was doing what? Was there a gap in primary school provision?;
- Raising awareness;
- Offender profile;
- Support for BME groups;
- Voice and Influence – The importance of the Improving Lives Select Commission in speaking with victims and survivors and progress monitoring of this work overall;
- Performance;
- Gaps in delivery plan around health partners – challenges with health around data sharing;

- Allocation of a Lead Member to work with the RLSCB on Audit;
- Transition issues and the 'drop off' that had been described by victims and survivors at the age of 18 between Children and Adult Services.

Councillors Clark and Rose had met and worked with victims and survivors and explained how keen the individuals were for their voices to be heard so that their individual stories were out there. There were issues to be considered relating to where the meetings would take place, respecting the victim and survivors' need for confidentiality and their need for safe spaces and potential on-going criminal proceedings. Councillor M. Vines endorsed the Women Against Grooming conference where two victims and three parents attended to give their accounts of living with CSE. It had been interesting to hear from family member perspectives.

Resolved: - (1) That the development of a multi-agency CSE Delivery Plan to deliver the strategic objectives of the new CSE Strategy be noted.

(2) That the next steps discussed for future scrutiny review into Child Sexual Exploitation be noted, and the Improving Lives Select Commission's work programme be developed accordingly.

## **20. IMPROVING LIVES SELECT COMMISSION SCRUTINY REVIEW OF DOMESTIC ABUSE - UPDATE**

Deborah Fellowes, Scrutiny Manager, introduced this item by outlining the history of the Scrutiny Review into Domestic Abuse. The scrutiny review had most recently been considered by the Improving Lives Select Commission on 5<sup>th</sup> November, 2014 (Improving Lives Select Commission's Scrutiny Review of Domestic Abuse - Update to Response Presented in November, 2013, Minute Number 33).

It was important to consider the length of time since the fieldwork was undertaken, and since that time there had been austerity measures and changes within Rotherham's social care and the overall Domestic Abuse sector.

Domestic Abuse had been a key priority within the Improving Lives Select Commission's work programmes in the 2013/2014 and 2014/2015 municipal years.

The Scrutiny Review into Domestic Abuse had been very thorough and considered a lot of evidence. Following completion of the review it had been subject to a six month monitoring report and then an annual review. By the eighteen month mark, most reviews were signed-off.

Submitted to the Improving Lives Select Commission was the recommendations made by the Scrutiny Review, the Cabinet decisions on each recommendation, and the updates on progress at November, 2014, and August, 2015.

Councillor Clark explained that she was on the review group; the work on the review had been long and complex, but very good. Also on the group were Councillors Russell, Ahmed, Burton and Lelliott, supported by Caroline Webb. Councillor Clark felt that it would be more effective to send the update to original Members for their feedback, given their greater knowledge of the process the review had taken.

Councillor Clark asked for an update on recommendation one. She felt that this was a key recommendation as it related to the Independent Domestic Violence Advocates (IDVAs) being funded through mainstream budgets, rather than twelve monthly fixed-term contracts.

Jan Bean, Domestic Abuse Manager, confirmed that this recommendation had been achieved in November, 2014, through the retention of current service capacity. Two permanent IDVAs had been secured. She thanked the Improving Lives Select Commission on behalf of her team; it was much appreciated that the review had identified this as an issue. Additional temporary funding had been received from the Police and Crime Commissioner for a further two IDVAs for one year.

Councillor Clark referred to recommendation 5 that related to the creation of a golden number and/or a one stop shop for domestic abuse support, as in neighbouring authorities. She was aware of issues preventing this, including different risk assessments being used by different agencies. The review group felt strongly about the importance of this recommendation.

Councillor Clark also referred to the importance of dentists being engaged and understanding how and when they should refer patients as the review group heard that patients presenting with tooth loss and jaw problems could be due to domestic violence. It was found that dentists were not regularly referring in the same way that GPs did.

Councillor Clark was happy that the two IDVAs were not worried about losing their jobs every twelve months. This was a coup for the process of scrutiny reviews. She had attended training and open day sessions with the Domestic Abuse service and would recommend the experience.

Jan thanked the review group and said how appreciated it was. She also confirmed that GPs continued to be involved and refer, and Dentists had processes in place to refer their concerns about potential domestic violence.

Councillor Hoddinott was also pleased about the additional security for the IDVAs. She was concerned that the commentary to recommendation five stated that it had been completed whereas there was no golden number or one stop shop for domestic abuse support. This was misleading.

Jan explained that the Multi-Agency Safeguarding Hub (MASH) would act as the golden number.

Richard Liversage, Detective Inspector in the Reputation Unit, explained about the restructure that had taken place in the Public Protection Unit. It included a Safeguarding Adult Team that responded to allegations of rape, care homes issues, neglect, so called 'Honour-Based' violence and so on. In high risk cases Domestic Violence Officers worked with IDVAs. The Officers in the Unit were all detectives and experienced investigators. In addition to responding to reports of domestic violence incidents, the Unit sought to reduce the risk as a whole by working with perpetrators.

Jan explained how co-location within the MASH meant improved information sharing at meetings and the ability to respond and refer quickly. Being co-located with the Police meant that they could be cited immediately.

Councillor Hamilton asked whether individuals and families at risk of/experiencing CSE could be identified easily by the Domestic Abuse team.

Jan explained that the focus of the Domestic Abuse team was Adult Safeguarding, however, risks were always assessed and the voice of the victim was always represented.

Councillor Hamilton asked for more information in relation to recommendation 17 where it stated that a pilot in perpetrator management had reduced domestic abuse reports to the police by 75%. Richard and Jan both confirmed that they had struggled to quantify the figure or identify where it had come from. It is possible that it related to a transcription error.

Richard explained funding bids that had been made and were unsuccessful. These decisions were appealed and rejected. Management of cases were now assigned wholly to one officer, rather than splintered to a number as in the past. Integrated Offender Management included working with offenders to address their behaviour and reduce the risks to victims and children.

As one document providing the MASH storyboard had not been included in the information that was sent to members, it was agreed that consideration of the sign-off of this report should be deferred to a future meeting of the Improving Lives Select Commission. This would also allow the members of the original review group to see the updates and make any comments or ask any questions. Deborah Fellowes confirmed this

information had been received from the Domestic Abuse Team but due to administration issues this information had not been sent out with the update.

Councillor Beaumont referred to so called 'honour-based' violence and asked whether this should remain a focus of the Select Commission. Deborah Fellowes confirmed that it remained on the list of priorities and she would programme consideration of a report on the issue.

Councillor Hamilton thanked the officers for attending the meeting and for contributing to the discussion and answering questions. She felt that a deferral for further information and wider comment would be beneficial for all stakeholders.

Resolved: - (1) That the information shared be noted.

(2) That consideration of signing off the scrutiny review be deferred to allow the original review group members to comment and the MASH story board attachment to be forwarded.

**21. DATE AND TIME OF THE NEXT MEETING: -**

Resolved: - That the next meeting of the Improving Lives Select Commission take place on Wednesday 4<sup>th</sup> November, 2015, to start at 1.30 p.m. in the Rotherham Town Hall.

## Early Help

### What was the issue

#### OFSTED found in September 2014 that:

"Family support is delivered through 22 children's centres, the very large majority of which were judged to be good or better in their most recent Ofsted inspections. In the past year, 717 families (with 1,402 children) received early help, which prevented the need for more intensive support."

"The Integrated Youth Support Service (IYSS) provides good support for older children and young people, resulting in a steady drop in the number of young people who are not in education, employment or training, a reduction in teenage pregnancies and an increase in young people accessing sexual health services."

"The number of young people subject to anti-social behaviour orders is reducing."

"The Families for Change programme, funded through the Troubled Families initiative, has achieved effective change with 435 (65%) of the 730 families worked with. The Family Recovery Programme (FRP) has had a positive impact on families, which include adults with problematic substance misuse, mental ill- health and who are subject to domestic abuse. Since August 2013, 13 out of 75 families have successfully completed year-long interventions and have been stepped down to universal services."

Ofsted also noted the following areas for improvement:

"Too many Family CAFS do not meet a good enough standard and fail to capture the views of children and their families, or to include clear action plans."

"Data and information on cases which step down to universal services or step up to children's social care are not collated."

"The single assessment, introduced in April 2014, is not ensuring that children and young people's needs are met in a timely way."

"The authority has failed to act upon the recommendation from previous inspections to improve the consistency and quality of referrals, including notifications from the police."

"The threshold for intervention by children's social care is not understood by all partner agencies."

"The quality of many referrals is poor and not all agencies complete the multi-agency referral form (MARF). This results in a significant number of inappropriate contacts to children's social care."

### Our journey since the last Ofsted inspection

In the first 7 months after inspection progress was slow in addressing the key findings from Ofsted. A Draft Early Help Strategy and Action Plan had been previously developed

Early Help Storyboard – September 2015 I1D3

and presented to the Board in April 2015, but due to limited consultation and engagement with partners, staff and children and young people, this action was re-opened at the June 2015 Improvement Board. The lack of real progress was further exacerbated by a protracted recruitment process to Team Manager and Head of Service posts.

### **In response:**

Since then we have picked up the pace significantly;

- The Assistant Director for Early Help took up post on the 1st July 2015.
- The three Heads of Service were subsequently appointed and began on the 17th September.
- Eight of the 9 Team Manager posts have been filled with the interviews for the remaining two posts taking place in October. (We are currently looking to fill the remaining post through a secondment opportunity in partnership with South Yorkshire).
- In addition, the Strategic Director has secured the services of the Assistant Director for Prevention and Early Intervention Services in Sheffield, Dawn Walton, to offer support for 2 days per week until the 31st March 2016.

These appointments will provide the leadership and capacity to drive forward the improvements required. This Team now meets weekly and with the extended Early Help Team every two weeks.

We have now **completed a whole service review of all Early Help staff** and locked down our final staffing establishment with HR and Finance sign off. **Staff were relocated into the new teams on the 5<sup>th</sup> October with subsequent briefings to staff and Trade Unions taking place on the 5<sup>th</sup>, 15<sup>th</sup> and 19<sup>th</sup> October.**

We also completed a vacancy review and this has also been validated and signed off. **We now have a weekly vacancy control in place, a 100% PDR completion rate and 100% budget out-turn rate.**

**We now have a tight grip and oversight of all HR and financial matters** across Early Help.

**As a result establishing and chairing a weekly property meeting** we have also **finalised our Locality Team structures across 3 Teams (North, South & Central) and 9 Areas.**

**We have completed a major review of all property** that provides office space and delivery points. **We have identified our integrated locality bases and are now in the process of facilitating our managed moves with Property and IT.** Sites include collocating with social care, Health, Schools and a range of partners.

**We have undertaken a review of the role of the Early Help Assessment Team (EHAT) within the MASH** and produced a set of proposals for a service redesign to secure more efficient business processes that are safe and effective. The current model does not maximise our ability to understand need at the earliest opportunity and impacts negatively upon the re-referral rate to Children's Social Care.

We have established a **multi-agency task and finish group to develop an Early Help Assessment & Request for Early Help Support** based on the Strengthening Families model and a one family, one worker, one plan principle. **The drafts of both of these critical forms is now completed and currently being piloted in the Pupil Referral Unit and Wingfield School. Both forms are being simultaneously developed as on-line assessments to make pathways into early help easier, quicker and more efficient and effective.**



We have developed and introduced a **new (electronic) Case Audit tool** and all managers and Heads of Service to routinely undertake **x2 Case Audits per month**.

**We are making good progress with our 0-19 Pathway** with real engagement from partners moving this forward with enthusiasm and pace. This will also be available as interactive on-line tool for all partners and practitioners as part of our **Early Help Offer website**.

**We have made rapid progress in developing an on-line Early Help Offer**, with over **76 services and agencies** having completed a service synopsis of what they offer and how it can be accessed.

We will be reporting **Early Help performance** measures for the first time in October (September 15 data). Until we move to the new (Liquid Logic) Case Management System this will continue to be an inefficient process with 7 different data bases and systems to interrogate to extract data. **As a result we have established a Task & Finish group to rationalise our databases in readiness for data migration and to enable existing data information sharing and reporting more efficient and effective**. We have arranged for a **demo of the Early Help module to take place on the 22<sup>nd</sup> October and a visit to Sandwell for a service demonstration**.

At the September Improvement Board **15 immediate priorities** were agreed to increase the pace of improvement. **These are being worked up into a detailed Action Plan and risk register**.

**We intend to undertake a significant engagement piece with the Early Help Strategy. This began with a presentation to the Safer Rotherham Partnership on the 8<sup>th</sup> October** and will continue with a **briefing to the Youth Cabinet on the 14<sup>th</sup> October** and a series of staff, partner and **Early Help Head Teacher briefings on the 24<sup>h</sup>, 25<sup>th</sup> November and 7th December**.

**The Early Help Strategy will be coproduced with Children, Young People and Families and all of our partners and Stakeholders**. We will also undertake an **Equalities Impact Assessment** and look for a **final sign off at the December Improvements Board**.

We have also just begun to scope a **development programme** to support the new managers to move from a single service / professional discipline role to an integrated, early help leadership role. **On the 12<sup>th</sup> October I identified a workforce development lead to take this work forward with the Principal Social Worker, building on our Early Help Workforce Workshop on the 26<sup>th</sup> August 2015**. I have also agreed that we will **work collaboratively with Sheffield City Council Children's Services to enable, shadowing, buddying and peer development opportunities**.

Work is also underway to provide assurance on **Inspection readiness** for our Children Centres and Youth Offending Service. This includes inspections and mystery shopping exercises from our Young Inspectors.

In October I requested a **review of the Education Welfare Service** and we will be working with Members, partners and stakeholders in a review of our Youth Services.

### What difference has this made?

Whilst the new appointments have only been in place a matter of weeks they are making a significant contribution. We now have the capacity and the right mix of skills, experience and leadership to pick up the pace of change. Progress and impact will be measured through our Action Plan and Monthly reporting.

## Areas for Improvement

Whilst securing our Heads of Service and 7 Team Managers we have yet to fill our remaining 2 Team Manager posts within our target date.

We have taken a different approach to the production of our Early Help Strategy. This will be developed over a series of engagement sessions throughout October and November. This includes three Head Teacher Briefings in November and a series of consultation roadshows across the borough with staff, partners and service users. The Final Early Help Strategy will come to the December Improvement Board for sign off.

Preliminary October figures are showing our “Not Known” post 16 figures as much higher than expected at 26.5%. I have actioned an urgent response to address this.

Current FCAF figures are low. However, this does not account for the true number of Early Help Assessments and targeted interventions across early help. This is due to the current reporting and recording arrangements (seven different systems and over 30 different assessment and referral processes). As we pull this data into one recording system we expect to see a month on month increase in the number of Requests for Early Help, Early Help Assessments completed and the number of cases stepped down to Early Help.

## Progress this period (since the last board)

- We have identified 15 immediate priorities to be achieved by December 2015.
- 3 Heads of Service appointed and in post.
- 8 Team Managers appointed and process in place to appoint the remaining 2 in October.
- Additional support secured from the Assistant Director for Prevention and Early Intervention Services in Sheffield.
- 100% PDR completion rate. (59% at the beginning of September).
- £1million pounds of proposed savings identified over the next 3 years.
- 100% of Budget Outturns completed in October.
- Due to better financial grip and new spend controls, our current projected overspend reduced by £100k to £150k.
- Every post within the Early Help establishment reviewed and validated with HR and Finance.
- Education Welfare Review underway.
- All posts transferred to the new locality teams on 5<sup>th</sup> October.
- Early Help Quality Standards in place (including 2 Case audits per month by each Team Manager, Head of Service and Assistant Director).
- We have developed and implemented an on-line Quality Audit Tool with monthly reporting to the Early Help SMT.
- Bi-Weekly Early Help SMT Meetings in place.
- Weekly Early Help Leadership Team Meetings in place.
- Review of business support across the whole of Early Help underway.

- Established and lead a weekly property meeting.
- New locality bases identified and managed moves of staff now underway.
- Early Help Offer website underway with over 70 services and agencies already responded.
- Development of Monthly reporting on key Early Help performance measures completed with reporting commenced in October.
- Review of the Early Help Assessment Team and interface with MASH completed.
- Multi agency working group established to develop the Single Assessment process across Early Help.
- Request for Early Help Support and Early Help Assessment forms developed and being piloted in the borough.
- Engagement on the Early Help Strategy underway with Head Teaching briefings booked for 24<sup>h</sup>, 25<sup>th</sup> November and 7th December.

## Improvement Actions for next month

- Secure the **permanent structures** for Early Help: All Heads of Service and Team Managers to be appointed and inducted with regular supervision and up to date PDR's.
- Refresh the **Early Help Strategy** and re-engage with staff, partners, members and Children, young people throughout October and November.
- Identify **savings and efficiencies** as part of the All Service Reviews (ASR's) and identify future savings and cost avoidance using the EIF Cost benefits analysis tool by the end of September 2015.
- Refresh the **Early Help Action Plan** and ensure alignment with the Corporate Improvement Plan and the refreshed Children and Young People's Improvement Plan by the end of October 2015.
- Implement the Early Help **Performance Scorecard & Monthly Reporting** by the end of September, with the first report delivered in October 2015.
- Development of a set of '**Quality Standards**' to be adhered to across all Early Help provision by end September 2015.
- Strengthen the arrangements for **children who go missing and return home interviews** by end September 2015.
- Develop a coproduced **Early Help Pathway** with partners, including Children & Young People by end October 2015.
- Strengthen the **Step Down arrangements** between Early Help and Social Care by end October 2015.
- Confirm the **governance arrangements** for Early Help through the Children & Young People's Strategic Partnership by end October 2015.
- Ensure the development needs of the **Early Help workforce** are incorporated into the CYPS Workforce Strategy in partnership with the Principal Child and Family Social Worker by end October 2015.
- **Rationalise the current Family Support services** (Family Recovery Programme, Targeted Family Support, Family Engagement and Families for Change) by end

November 2015.

- **Undertake a review of Education Welfare**
- Implementation of the Early Help and Family Engagement **locality model**: North, South and Central Teams with 9 locality clusters across the borough by November 2015.
- Develop a co-produced **Early Help Offer** with partners, including Children & Young People by end November 2015.
- Implementation of an **Early Help Assessment and Request for Early Help** process by November 2015.
- Early Intervention Foundation Maturity Matrix completed with all managers to inform priority actions by the end of November 2015.
- Implement the Quality Assurance Framework across Early Help by the end of November 2015.

## Highlights

In the few weeks that the Early Help Leadership Team has been in place. I believe that the achievements in this report demonstrate that the pace has picked up at that real progress is being made against our key priorities.



Public/Private Report  
Council/or Other Formal Meeting

Identify clearly if the report is open or confidential at first glance. If the report is private it needs to quote both the clause from legislation and a plain English explanation e.g. 'Commercially confidential'

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### **Council Report**

Improving Lives Select Commission 4/11/15

### **Title**

Report on the Children's Residential Service Ofsted Judgements and Regulation 44 Reports

### **Is this a Key Decision and has it been included on the Forward Plan?**

No

### **Strategic Director Approving Submission of the Report**

Ian Thomas – Strategic Director for Children & Young People's Service

### **Report Author(s)**

Dana Marrett – Interim Improvement & Development Manager

Children and Young People's Service

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Michelle Whiting Interim Head of Looked After Children

### **Ward(s) Affected**

All

### **Executive Summary**

Rotherham Metropolitan Borough Council had five mainstream children's homes until the recent closure of Woodview. Three of these were long-term homes for young people with emotional and behavioural difficulties. The remaining two are for young people with disabilities; one is a long term home and the other a short breaks provision.

Subsequent to three Ofsted Inspection Judgements between June and October 2015; the Service Director and Responsible Individual applied to Ofsted for voluntary closure. The three young people at the home were moved to suitable alternative accommodation judged to be either good or outstanding and the home closed on 13 October 2015. Staff were advised to remain at home, on full pay, pending investigation.

St Edmunds children's home is one of the two remaining mainstream homes. Ofsted inspected the home on 12 October 2015 and judged it to be inadequate.

### **Recommendations**

This report is for information only.

**List of Appendices Included**

Appendix A – Woodview Ofsted Inspection Report – 9/10 June 2015  
Appendix B – Woodview Ofsted Inspection Report – 29/30 July 2015  
Appendix C – Woodview Ofsted Inspection Report – 12 August 2015  
Appendix D – St Edmunds Ofsted Inspection Report – 12 October 2015  
Appendix E – St Edmunds Ofsted Response

**Background Papers**

Not Applicable

**Consideration by any other Council Committee, Scrutiny or Advisory Panel**

No

**Council Approval Required**

No

**Exempt from the Press and Public**

No

## **Report on the Children's Residential Service Ofsted Judgements and Regulation 44 reports**

### **1. Recommendations**

1.1 This report is for information.

### **2. Background**

#### **2.1 The Children's Residential Service**

Rotherham Metropolitan Borough Council had five mainstream children's homes until the recent closure of Woodview. Three of these were long-term homes for young people with emotional and behavioural difficulties. The remaining two are for young people with disabilities; one a long term home and the other a short breaks provision.

#### **2.2 Woodview Children's Home**

Woodview was one of the three mainstream homes prior to recent closure. The maximum number of placements was five and there were three young people living there at the point of closure.

2.3 The home had already been judged by Ofsted to be 'declining in effectiveness' when a number of complaints from young people, residential care staff and various other professionals were received during the early months of 2015; highlighting a number of core concerns directly related to poor leadership and management at Woodview since around 2009 which had resulted in an entrenched negative culture within the home that included the following:

- a. A lack of safeguarding to a good enough standard which is particularly related to non-identification of risk and poor quality Risk Assessments.
- b. Poor relationships between staff and young people, with a detrimental impact on the quality of care being provided.
- c. Deficiency in child centred practice, 'team around the child' and collaborative partnership working with key professionals and support services.
- d. An accepted context of bullying and blame, preventing effective team work and consistency in good practice.
- e. Insufficient training and development to support individual managers/staff to fulfil their roles and identify/meet the needs of young people successfully
- f. Unacceptable quality of recording, reporting and auditing, particularly in relation to Care Plans and Risk Assessments.

## 2.4 Management Response

The above detailed context led to a number of immediate management actions:

- a. Initiating the council's Capability Procedure in respect of the Registered Home Manager prior to her sickness absence.
- b. Recruitment of an experienced Interim Home Manager who was praised for the excellent work he is doing and the positive things he has already achieved in Ofsted's Report. This includes bespoke/specialist training and development, team building, and increased levels of individual Supervision.
- c. The Operations Manager supported the Interim Home Manager since first Inspection and was subsequently based at the home on a full-time basis to support/cover the Interim Home Manager in meeting Ofsted notifications and recommendations.
- d. Recruitment of an experienced Interim Deputy Home Manager who commenced in post on 17.9.15.

## 2.5 Ofsted Inspection Judgements

The above detailed context was reflected in Ofsted's Inspection findings:

- 2.6 Ofsted carried out a full inspection at Woodview children's home on 9<sup>th</sup> and 10<sup>th</sup> of June 2015 and judged the provision to be inadequate.
- 2.7 This decision related specifically to historical findings in respect of the poor leadership and management of the home by the permanent Registered Home Manager and Deputy Home Manager; and is particularly related to substandard management pertinent to risk/safeguarding, people management, fractured relationships between staff and young people, and the quality of care provided.
- 2.8 Ofsted praised the Interim Registered Home Manager who had been in post for four weeks at the point of Inspection - since June 2015; for the improvement actions he had already achieved and for future plans for continuous improvement.
- 2.9 The home was issued with a compliance notice and a detailed action plan was completed in direct response to this.
- 2.10 When a home is judged to be inadequate by Ofsted, they return within six weeks to undertake a further Full Inspection to review progress.
- 2.11 The follow up inspection took place on the 29<sup>th</sup> and 30<sup>th</sup> of July 2015 and the home was again judged to be inadequate. Whilst there was an acknowledgement of significant progress in some areas there had not been sufficient progress in relation to the quality of care/practice; safeguarding and protection; taking the wishes and feelings of young people into account in decision making; staff relationships with young people; the Statement of Purpose; Risk Assessments and significant incidents. A further action plan was completed in direct response to this.



- 2.12 This led to Ofsted instigating an urgent meeting with the Strategic Director which took place on Wednesday 12 August 2015. Subsequent to holding an internal Case Review, Ofsted were clear that they were not going to prosecute the local authority or take any other type of legal action but left no doubt about how seriously they viewed the non-compliance, particularly related to meeting the needs of young people and improving their outcomes.
- 2.13 The Compliance Notice was fully accepted, however Ofsted were asked to take into consideration when determining timescales for completion of actions the nature of the change required, for example, changing the culture of a service requires substantial ongoing activity. Ofsted did acknowledge/accept this however we clearly need to address as a matter of urgency, improving the level of care these children are receiving.
- 2.14 On Tuesday 22 September 2015, the Ofsted Inspector and the Regional Manager completed a further Full Inspection. The home was judged to be inadequate for a third time. This decision was based largely on concerns regarding safeguarding, managing risk, a poor level of reporting/recording.
- 2.15 Ofsted reported that they would be issuing a closure notice to the Responsible Individual [Jane Parfremment, Director] unless a Voluntary Closure Application was submitted no later than Wednesday 23 September 2015.
- 2.16 Jane Parfremment completed and submitted the required C13 Form for Voluntary Closure Application within the required deadline. The agreement with Ofsted included a definitive plan to move all of the young people living at Woodview by Tuesday 6 October 2015. This has been successfully achieved with alternative placements to meet the assessed individual needs of each young person in either good or outstanding provisions. The home closed Tuesday 13 October 2015.
- 2.17 The Service Director (Responsible Individual) met with the staff team from Woodview on Friday 2 October 2015 with representatives from HR and the unions. Detailed feedback from Ofsted was shared and the process of applying for voluntary closure was shared. Staff were informed that they would not be required to report for work from Wednesday 14 October 2015 pending investigation. Letters were sent to individual staff who were absent due to long-term sickness and those who were otherwise unable to attend. A suitably experienced/qualified consultant has been identified to undertake the Investigation. This will include a process to assess which staff are confident and competent enough to remain within the service and which are not. Full details are to be determined.

#### 2.18 **St Edmunds Children's Home**

St Edmunds is one of the two remaining mainstream homes. The maximum number of placements is six and there are currently five young people living there.

### 2.19 Ofsted Inspection Judgement

St Edmunds children's home was judged by Ofsted to be 'declining in effectiveness' in September 2014.

### 2.20 The home was inspected by Ofsted on 12 October 2015 and judged to be inadequate based on the following findings:

- a. Safeguarding practice is poor and procedures are not followed.
- b. Analysis, evaluation and actions to address risks to young people is insufficient.
- c. Risk Assessments are not up to date. They contain conflicting information to Missing from Home Risk Assessments.
- d. Information is lacking relating to young people missing from home. It does not adhere to the Protocol.
- e. The kitchen areas are dirty.
- f. Young people's health is not adequately monitored.

2.21 A detailed Action Plan was submitted to Ofsted following the Inspection and this led to Ofsted deciding that they would not issue a Compliance Notice as intended.

2.22 A further Inspection will take place within six to eight weeks. Ofsted have advised that a second judgement of inadequate will result in the closure of the home; and that application for voluntary closure from the Responsible Individual will not be an option.

2.23 The young people currently living at St Edmunds children's home are being 'looked after' in a provision which is judged to be inadequate by Ofsted. Rotherham Metropolitan Borough Council would never place or leave a young person in an inadequate residential home. If the young people remain at the home they are experiencing inadequate care; requiring a decision from their corporate parents about whether they remain there or whether alternative placements are sought in their best interests.

## 3. Overarching Service Improvement Strategy

Senior managers also responded by implementing the following:

- a. Recruitment of an expert management consultant as Interim Improvement & Development Manager for the Children's Residential Service. The Improvement Plan being implemented includes ethnographic research looking at behaviour, culture and relationships within homes [awaiting final report] and consultation with young people about their care and what they would like to improve [see below]. Findings from each of these pieces of independent work will influence the overarching Improvement Strategy.

- b. A Staffing Restructure is currently being developed in order to ensure that employees are confident and competent to improve the experience, progress and outcomes of the young people we look after.
- c. Subsequently, all staff within the restructured service will be trained in Social Pedagogy [planning almost completed] and this will form the fundamental basis for developing positive/meaningful relationships with young people, meeting their needs and improving their outcomes. It will also drive continuous service improvement.

Social Pedagogy is a practice discipline of care and education based on the well-being, learning and growth of young people. It focusses on the relationship with the young person.

- d. There are a significant number of other service projects within the Improvement Strategy including [but not exclusively] the following:
  - e. Ethnographic research has been completed by ESRO which is an award winning organisation; looking at culture, relationships and behaviour in all children's homes. We are awaiting a report of findings which will objectively inform the Improvement Strategy.
  - f. Independent consultation with young people has been completed by Jenny Molloy who is a nationally recognised care leaver, author, adviser to Ofsted and Patron of BASW [British Association of Social Workers]; and provides consultation to various local authorities and independent providers. This will culminate in a high profile 'reveal'/presentation by young people about their experience of care and what they feel needs to be different, which will strongly influence the Improvement Strategy in an authentic and meaningful way.

The Report on Consultation written by Jenny Molloy emphasises the poor quality of this provision and includes the following comments and conclusions specifically in relation to Woodview:

'The building inside is stark, unloved and institutional looking, the young people appeared to have a total lack of emotional and practical connection with this home, as their 'home', and the complacent attitude from the staff towards the young people was sad to witness.'

'There was no sense of love, care, compassion or empathy within this home, with the exception of one member of staff, the Interim Manager.'

'There appeared to be a lack of any emotional investment and aspiration on behalf of the children in this home, sadly, it is one of the worst examples I have seen.'

- g. Recruitment of a Therapeutic Intervention worker who is supporting all staff teams in children's homes and will deliver an innovative model for Therapeutic Care Planning for individual young people prior to their admission to care. This and a model of

therapeutic parenting which is responsive to trauma and attachment, will complement/strengthen social pedagogy.

- h. A programme of the full refurbishment of all homes is being implemented in consultation with young people and staff. [Woodview has been prioritised.]
- i. Training and Development Audit and resulting Service Training Matrix which increases both mandatory and specialist training requirements for all staff.
- j. Staffing Audit reviewing staffing levels required in each home related to meeting the specific needs of young people, reviewing capacity/costs and an innovative approach to recruitment, for example recruitment of a service specific Clinical Psychologist and/or Occupational Health Consultant. This will strengthen in-house provision and the ability to meet the needs of Rotherham children and avoid out of authority placements.
- k. Policy development including Referral and Matching, Risk Assessment, Care Planning and Preparation for Independence.
- l. This plan had was put in place prior to Woodview failing the inspection. Following this Senior managers felt that the changes required a more robust approach. A highly experienced Interim Head of Residential Service was appointed on 16/10/15 to lead an intensive improvement programme focusing on the Regulatory requirements and the experience of children together with the Interim Service Manager for Disability.
- m. Jane Parfremment Service Director has met with all the Residential Home Managers to look at the reasons why Woodview and St Edmunds failed and required that these matters are dealt with in the other homes.
- n. St Edmunds has a detailed action plan which has been agreed by Ofsted. They will be visiting in 4 to 6 weeks to evaluate whether this plan has been successful and the home now meets the required standards.
- o. An experienced residential homes managers has examined Silverwood's files and a similar exercise will take place at all of the Children's Homes.
- p. The Children and Young People Senior Leadership team approved a report for a proposed Review of Residential, Leaving Care ,SEN respite and Homelessness Provision. This proposal will be coming before members.

### **3.2 Notification of Members**

Ofsted met with the responsible person Jane Parfremment at the conclusion of each inspection to share their findings and these were relayed to senior managers the lead member and the commissioner within 12 hours. Woodview's status as inadequate was discussed at Corporate Parenting panel on 20/7/15.

A detailed briefing note on the outcome of recent inspections has been placed on the agendas for Improving Lives Select Commission on 4/11/15 and Corporate Parenting Panel on 10/11/15.

### **3.3 Regulation 44 reports formally Regulation 33 reports**

These detailed monthly reports on each of the homes are undertaken by the independent visitor Margaret Rowley. Her reports are sent to the Registered Manager of the home the Responsible Person who is Jane Parfremment the Service Director and Ofsted. These reports include a detailed look at all aspects of the home including meetings with staff and young people which are triangulated by contacting parents social workers and Independent Review Officers. They are designed to pick up any issues within the home.

The Interim Head of Residential is now meeting with the independent visitor on a monthly basis to consider her findings and ensure that recommendations are actioned.

The role of councillors in visiting children's homes and regulation 44's was discussed in detail at Corporate Parenting Panel on 20/7/15 and the need for this and LAC champions within the member group was raised again at Corporate Parenting Panel on 22/9/15

Present at both of those meetings was Councillor Watson (chair) and Councillors Hamilton and Vines. Councillor Watson informed the September meeting that other Councillors wished to become members but couldn't make a day time meeting. It was agreed to change the time of the Corporate Parenting Panel to 5pm to accommodate more members.

Jane Parfremment Service Director and Michelle Whiting, (then interim Lac Advisor) met with Councillor Watson on 16/10/15 to discuss recruitment of volunteers for these roles and he agreed to send out an email to be drafted by officers.

### **3.5 Rotherham Residential Children's Homes current Ofsted status:-**

- Woodview –Inadequate closed until further notice.
- St Edmunds - Inadequate
- Silverwood - Good
- Cherry Tree (disability) - Requires Improvement
- Liberty House (short breaks) - Adequate

## **4. Key Issues**

This report is for information only. The decision maker is not required to approve anything.

**5. Options considered and recommended proposal**

Not Applicable

**6. Consultation**

Not Applicable

**7. Timetable and Accountability for Implementing this Decision**

Not Applicable

**8. Financial and Procurement Implications**

The Woodview property will be upgraded and used for St Edmunds and Silverwood to decant during refurbishment. Subsequently, the property will be considered for either disposal or alternative use.

**9. Legal Implications**

All residential children's homes are subject The Children's Homes (England) Regulations 2015. These strengthen regulations came into force in on the first of April 2015

**10. Human Resources Implications**

Post investigation, the staff at Woodview will either be deemed confident and competent to return to work within the Directorate, or will be subject to appropriate processes (e.g. Disciplinary) or could be made redundant with associated costs.

**11. Implications for Children and Young People**

The young people currently living at St Edmunds children's home are being 'looked after in a provision which is judged to be inadequate by Ofsted. Rotherham Metropolitan Borough Council would never place or leave a young person in an adequate residential home. If the young people remain at the home they are experiencing inadequate care; requiring a decision from their corporate parents about whether they remain there or whether alternative placements are sought in their best interests.

**12. Equalities and Human Rights Implications**

None

**13. Implications for Partners and Other Directorates**

The need for substantial refurbishment or new accommodation is under consideration the relevant directorates

**14. Risks and Mitigation**

It is within Ofsted's power to close any residential children's home which is not meeting the required regulatory standard. As with Woodview the Local Authority would be required to source alternative appropriate accommodation for those children.

**15. Accountable Officer(s)**

Ian Thomas – Strategic Director for the Children and Young People’s Service

Jane Parfremment – Responsible Individual and Director for the Children and Young People’s Service.

## **16. Approvals Obtained**

**Strategic Director of Finance and Corporate Services Named Officer:**

**Director of Legal Services Named Officer:**

**Head of Procurement (if appropriate):**

This report is published on the Council's website or can be found at:-

<http://moderngov.rotherham.gov.uk/ieDocHome.aspx?Categories=>

## Children's homes inspection - Full

<b>Inspection date</b>	<b>09/06/2015</b>
<b>Unique reference number</b>	<b>SC375540</b>
<b>Type of inspection</b>	<b>Full</b>
<b>Provision subtype</b>	<b>Children's home</b>
<b>Registered person</b>	<b>Rotherham Metropolitan Borough Council</b>
<b>Registered person address</b>	<b>Riverside House, Main Street, Rotherham, South Yorkshire, S60 1AE</b>

<b>Responsible individual</b>	<b>Ms Jane Parfremment</b>
<b>Registered manager</b>	<b>Ms Karen Kennedy</b>
<b>Inspector</b>	<b>Ms Richardson</b>



<b>Inspection date</b>	<b>09/06/2015</b>
<b>Previous inspection judgement</b>	<b>Adequate</b>
<b>Enforcement action since last inspection</b>	<b>None</b>
<b>This inspection</b>	
<b>The overall experiences and progress of children and young people living in the home are</b>	<b>Inadequate</b>
There are serious and widespread failures that mean children and young people are not protected and their welfare is not promoted or safeguarded. Their care and experiences are poor and they are not making good progress.	
<b>how well children and young people are helped and protected</b>	<b>Inadequate</b>
<b>the impact and effectiveness of leaders and managers</b>	<b>Inadequate</b>

## SC375540

### Summary of findings

#### **The children's home provision is inadequate because:**

- This home is inadequate because young people are not kept safe.
- Young people's risk assessments do not reflect their current risks. They lack detail of risk management and reduction. Young people continue to engage in criminal activity, substance misuse and going missing.
- Young people's plans do not include their current care or health needs. All young people continue to smoke in their bedrooms. They are restricted at certain times of the day from moving freely around their home by locked doors. Their behaviour is not effectively managed resulting in frequent calls to the police to assist staff to do this. Young people do not always have access to meaningful activities that motivate and build on their strengths.
- Staffing levels during the night shift are not sufficient to ensure young people are safeguarded. Night staff do not receive regular quality supervision. Not all staff are trained to meet young people's specific needs. Effective multi-agency working to support young people specialist needs is not in place.
- The home is not maintained to a suitable standard inside and out.

#### **The children's home strengths**

- There is a new manager in place who recognises the strengths and weaknesses of this home. He has plans in place to address the issues in this home.

## What does the children's home need to do to improve?

### Statutory Requirements

This section sets out the actions which must be taken so that the registered person/s meets 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 with the given timescales.

Requirement	Due date
<p>The leadership and management standard 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;</p> <p>Uses monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13 (2)(a)(h)) Specifically ensure consistency and clarity in the recording of risk assessments and unauthorised absences</p>	24/07/2015
<p>Engaging with the wider system to ensure children's needs are met In meeting the quality standards, the registered person must, and must ensure that staff- seek to develop and maintain effective professional relationships with such persons, bodies or organisations as the registered person considers appropriate having regard to the range of needs of children for whom it is intended the children's home is to provide care and accommodation (Regulation 5(d)) Specifically in relation to working with other agencies such as psychology and therapeutic services in the best interest of young people</p>	24/07/2015
<p>The children's views, wishes and feelings standard The children's views, wishes and feelings standard is that children receive care from staff who- develop positive relationships with them; engage with them; and take their views, wishes and feelings into account in relation to matters affecting the children's care and welfare and their lives (Regulation 7 (1)(a)(b)(c))</p>	24/07/2015
<p>The enjoyment and achievement standard The enjoyment and achievement standard is that children take part in and benefit from a variety of activities that meet their needs and develop and reflect their creative, cultural intellectual,</p>	

physical and social interests and skills (Regulation 9(1))	
<p>The protection of children standard</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 child; (Regulation 12(2) (a)(i)). Specifically ensuring that young people's risk assessments are up to date. Staff are evaluating risky situations such as ligature and self-harm risks, young people under the influence of alcohol and substances and how this impacts with the medication they are taking. Arrangements are made, such as extra staffing to ensure young people's welfare is monitored to ensure they are safe.</p>	24/07/2015
<p>The leadership and management standard</p> <p>In particular, the standard in paragraph (1) requires the registered person to- ensure staff have the experience, qualification and skills to meet the needs of each child; (Regulation 13 (2)(c)). Specifically in relation to staff receiving training to meet young people's specific needs for example alcohol and substance misuse, Legal highs, self-harm and ligature training.</p>	24/07/2015
<p>Privacy and access</p> <p>The registered person must ensure that- any limitation placed on a child's privacy or access to any area of the home's premise- allows children as much freedom as possible when balanced against the need to protect them and keep them safe (Requirement 21(c)(iv)). This is specifically in relation to the kitchen being locked at night, unless it is in the specific plans for young people in order to safeguard them.</p>	24/07/2015
<p>Fire precautions</p> <p>After consultation with the fire and rescue authority, the registered person must- take adequate precautions against the risk of fire, including the provision of suitable fire equipment in the children's home; (Regulation 25(1)(a)). This is in relation to stopping young people from smoking in bedrooms.</p>	24/07/2015
<p>Fire precautions</p> <p>After consultation with the fire and rescue authority, the registered person must- ensure, by means of fire drills and practices at suitable intervals, that the person working at the home and, so far as reasonably practical, children are aware of the procedure to be followed in case of fire (Regulation 25(1)(d))</p>	24/07/2015

<p>The care planning standard The care planning standard is that children- receive effectively planned care in or through the children's home; (Regulation 14 (1)(a))</p>	24/07/2015
<p>*The protection of children standard In particular, the standard in paragraph (1) requires the registered person to 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)). Specifically this relates to; minimising the risk of fire by encouraging children and young people to reduce their use of cigarettes and ensuring that young people do not smoke in their bedrooms; ensuring that staff build positive relationships with young people enabling them to manage behaviour effectively; addressing the practice of locking doors and restricting access to parts of the home; ensuring that rationale for locking doors is recorded; and ensuring that the restriction of specific parts of the home is limited to those that young people should not have access to.</p>	24/07/2015

## Full report

### Information about this children's home

The children's home is run by a local authority. It is registered to accommodate up to six young people of either gender. The home provides care and accommodation to young people with emotional or behavioural difficulties on a long-term basis.

### Recent inspection history

Inspection date	Inspection type	Inspection judgement
17/02/2015	Interim	Declined in effectiveness
23/09/2014	Full	Adequate
11/02/2014	Interim	Inadequate progress

## Inspection Judgements

	Judgement grade
<p><b>The overall experiences and progress of children and young people living in the home are</b></p>	<p><b>inadequate</b></p>
<p>This home is not well maintained. The grass requires cutting and the garden gate has fallen off. Areas of the garden are littered with cigarette ends and rubbish. This conflicts with the home's Statement of Purpose which states, 'The property has a front, rear and side garden providing space for badminton, picnics and barbecues. Young people are encouraged to look after the garden'.</p> <p>Inside the property some décor is dated and certain paint work is damaged. Carpets are stained and the stairs light broken. This does not match the home's Statement of Purpose which states, 'the house if furnished to a high standard'. This does not provide the young people with a sense of value and belonging. It does not provide them with high standards to aspire to now or in the future.</p> <p>During the night the young people are prevented from going into the kitchen as the door is locked. This is not part of any young person's plan. It is not accepted by the management team, however some staff continue to lock the door. One young person commented, 'I cannot even get a drink. You would not have this in your home would you?'. This restricts young people from moving freely around their home. It does not fit with the home's Statement of Purpose which states, 'a homely environment comparative to any conventional family home'.</p> <p>There are basic activities in place for young people. Forty per cent of young people report they never take part in activities they like. One young person commented, 'we should get more things to do in the home on a night time'. Other young people commented, 'it's boring'. This does not promote young people's life experiences or adding to their skills. It does not build on their strengths and motivate them to engage with staff and other young people positively.</p> <p>Some young people continue to engage in risk taking behaviour such as smoking, substance misuse, crime and going missing from home. Some staff and young people do not have strong relationships. As a result, despite staff efforts to support young people, they are unsuccessful in doing so and this behaviour continues. One young person commented, 'some staff are good, some are not, some just come for the money, you can tell '. Three young people reported not feeling welcomed back by staff when they have been missing. They did not feel staff do not try and understand why this has happened. There is no independent organisation completing return home interviews at this time.</p> <p>Positive behaviour management strategies are not consistent in this home. Staff</p>	

frequently ring the police to assist them to manage young people's behaviour. Young people now expect this in times of crisis. This does not promote positive relationships between staff and young people. It is not helping young people to make positive changes to their behaviour.

	Judgement grade
<b>How well children and young people are helped and protected</b>	<b>inadequate</b>
<p>Young people's risk assessments do not reflect the current situation. For example, some individual's current level of alcohol and substance misuse is not clear. The assessments do not provide staff with strategies to manage or reduce the risk. This potentially leaves young people at risk of harm as there are no strategies in place to monitor young people who return under the influence of a substance.</p> <p>Not all staff are trained in meeting young people's specific needs. Six out of 14 staff have had no drugs and alcohol training or training in self-harm. None have had training in specific risks some young people present, such as use of ligatures or the dangers of legal highs. Consequently despite staff efforts to protect young people they are not equipped with the training to do so. This does not match with the home's Statement of Purpose which states, 'A management and caring team fully trained in keeping young people safe from harm'.</p> <p>Care plans, missing person records, health and risk assessments lack detail and information about young people. Information varies on each form. For example for one young person the sexual exploitation risks are briefly mentioned in his risk assessment but are not identified in his care plan or missing records. This does not allow staff to easily identify young people's needs to enable them to keep young people safe. This creates risk that key information such as a young person's risk of suicide may get missed. This could potentially result in a young person coming to serious harm.</p> <p>Staffing levels at night do not keep young people safe. When young people come home under the influence of substances or alcohol, no plans are in place to assess and monitor them. This does not ensure their safety through the night. Young people have accessed each other's bedrooms. This potentially leaves young people unsupervised for long periods of time when they could come to harm.</p> <p>Risk of fire is an issue in this home. All young people smoke in their bedrooms. Despite staff efforts this behaviour continues. The risks have not been robustly addressed. This leaves young people vulnerable to harm from fire. Three staff have never experienced a fire evacuation at this home. In the event of a fire not all staff have the experience to get young people and themselves out safely.</p>	



	Judgement grade
<b>The impact and effectiveness of leaders and managers</b>	<b>inadequate</b>
<p>Staff are not supported by effective regular supervision. Three out of four staff who have recently started have not received supervision in line with local authority policy. This leaves staff feeling unsupported by managers. Staff have little guidance on positive practice which leaves young people exposed to an inadequate quality of care.</p> <p>The staff team are not working together to support young people effectively. One professional commented, 'the staff team here do not necessarily support each other. They have the same goal but do things differently. They want the best for young people but there is no consistency. It does not feel that the team has been managed effectively. Difficulties have never been looked at or resolved'. This impacts of the effectiveness of staff to manage young people's behaviour. As a result continuous police calls are made to help manage challenging situations.</p> <p>Multi-agency working at this home is not effective. For some young people there is a lack of consultation with health professionals and their health needs are not addressed. For example, one young person is taking illegal substances but there has been no assessment of the effect on the prescribed drugs they take. Other services report finding it difficult to implement support for young people due to the lack of management encouragement. As a result, the staff team functions inconsistently and young people do not benefit from specialist support which could enhance their care and progress.</p> <p>There is a new manager in place in this home, he has been in post four weeks. He is suitably qualified and experienced to undertake this position. Despite the short time he has been in post he has a clear understanding of the strengths and weaknesses of this home. He has a clear vision and robust plans to support staff to assist young people to a good standard. He is enthusiastic about effecting change in the best interests of young people and strives to lead by example.</p>	

## What the inspection judgements mean

The experiences and progress of children and young people are at the centre of the inspection. Inspectors will use their professional judgement to determine the weight and significance of their findings in this respect. The judgements included in the report are made against *Inspection of children's homes: framework for inspection*.

An **outstanding** children's home provides highly effective services that contribute to significantly improved outcomes for children and young people who need help and protection and care. Their progress exceeds expectations and is sustained over time.

A **good** children's home provides effective services that help, protect and care for children and young people and have their welfare safeguarded and promoted.

In a children's home that **requires improvement**, there are no widespread or serious failures that create or leave children being harmed or at risk of harm. The welfare of looked after children is safeguarded and promoted. Minimum requirements are in place, however, the children's home is not yet delivering good protection, help and care for children and young people.

A children's home that is **inadequate** is providing services where there are widespread or serious failures that create or leave children and young people being harmed or at risk of harm or result in children looked after not having their welfare safeguarded and promoted.

## **Information about this inspection**

Inspectors have looked closely at the experiences and progress of children and young people living in the children's home. Inspectors considered the quality of work and the difference adults make to the lives of children and young people. They read case files, watched how professional staff work with children, young people and each other and discussed the effectiveness of help and care given to children and young people. Wherever possible, they talked to children, 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 who it is trying to help, protect and look after.

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## Children's homes inspection - Full

<b>Inspection date</b>	<b>29/07/2015</b>
<b>Unique reference number</b>	<b>SC375540</b>
<b>Type of inspection</b>	<b>Full</b>
<b>Provision subtype</b>	<b>Children's home</b>
<b>Registered person</b>	<b>Rotherham Metropolitan Borough Council</b>
<b>Registered person address</b>	<b>Riverside House, Main Street, ROTHERHAM, South Yorkshire, S60 1AE</b>

<b>Responsible individual</b>	<b>Jane Parfremment</b>
<b>Registered manager</b>	<b>Karen Kennedy</b>
<b>Inspector</b>	<b>Jamie Richardson</b>

<b>Inspection date</b>	<b>29/07/2015</b>
<b>Previous inspection judgement</b>	<b>Inadequate</b>
<b>Enforcement action since last inspection</b>	<b>A compliance notice was issued at the last inspection</b>
<b>This inspection</b>	
<b>The overall experiences and progress of children and young people living in the home are</b>	Inadequate
There are serious and widespread failures that mean children and young people are not fully protected and their welfare is not promoted. Their care and experiences are poor.	
<b>how well children and young people are helped and protected</b>	Inadequate
<b>the impact and effectiveness of leaders and managers</b>	Inadequate

## SC375540

### Summary of findings

#### **The children's home provision is inadequate because:**

- A compliance notice set at the last inspection to ensure young people are safe has not been fully met. Risk assessments do not reflect young people's current risks. Ineffective communication of information to safeguard young people and others remains.
- Four out of ten requirements set at the last inspection have not been met, remaining shortfalls include:
  1. Unsatisfactory recording of significant incidents and poor clarity of information.
  2. Some staff have negative relationships with young people.
  3. Lack of engagement with young people resulting in their wishes and feeling not being ascertained.
  4. Poor care planning and evaluation resulting in some young people's basic care need not being addressed.
- Some staff lack qualifications which do not reflect information contained in the Statement of Purpose.
- Not all staff are following safeguarding procedures such as whistle blowing to protect young people.

## **The children's home strengths**

- The acting manager of this home continues to work tirelessly to improve this setting. He has been able to address some shortfalls in a limited space of time. However he remains without any middle management support which limits the progress he can make in isolation, given the challenges this home presents.



## What does the children's home need to do to improve?

### Statutory Requirements

This section sets out the actions which must be taken so that the registered person/s meets 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 with the given timescales.

Requirement	Due date
<p>7: The children's views, wishes and feelings standard</p> <p>In order to meet the children's views, wishes and feelings standard the registered person must–</p> <p>(1) ensure that children receive care from staff who–</p> <p>(a) develop positive relationships with them;</p> <p>(b) engage with them; and</p> <p>(c) take their views, wishes and feelings into account in relation to matters affecting the children's care and welfare and their lives.</p>	21/09/2015
<p>12: The protection of children standard</p> <p>In order to meet the protection of children standard the registered person must–</p> <p>(2) (a) ensure that staff–</p> <p>(i) 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 child.</p> <p>Specifically ensuring that young people's risk assessments are up-to-date. Staff are evaluating risky situations such as young people obtaining knives and slashing furnishings and waving them at other people.</p>	21/09/2015
<p>12: The protection of children standard</p> <p>In order to meet the protection of children standard the registered person must–</p> <p>(2) (a) ensure that staff–</p> <p>(vi) take effective action whenever there is a serious concern about a child's welfare; and</p>	21/09/2015

<p>(vii) are familiar with, and act in accordance with, the home's child protection policies. This is in relation to staff reporting any concerns about a child and following safeguarding procedures such as whistle blowing.</p>	
<p>13: The leadership and management standard</p> <p>In order to meet the leadership and management standard the registered person must–</p> <p>(2) (a) 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.</p>	21/09/2015
<p>13: The leadership and management standard</p> <p>In order to meet the leadership and management standard the registered person must–</p> <p>(2) (h) use monitoring and review systems to make continuous improvements in the quality of care provided in the home. Specifically ensure consistency and clarity in the recording of risk assessments and significant incidents.</p>	21/09/2015
<p>13: The leadership and management Standard</p> <p>In order to meet the leadership and management standard the registered person must–</p> <p>(2) (b) ensure that staff work as a team where appropriate. Specifically in relation to ensuring all are working consistently together in the best interests of young people. Any negative staff relationship with each other and young people should be addressed.</p>	21/09/2015
<p>The Registered Person must recruit staff using recruitment procedures that are designed to ensure children safety. (2) The registered person may only – (a) employ an individual to work at the children's home, if the individual satisfies the requirements in paragraph (3). (3) The requirements are that– (b) the individual has the appropriate experience, qualifications and skills for the work that the individual is to perform. (Regulation 32 (1) (2)(a) &amp; (3)(b))</p>	21/09/2015

## Full report

### Information about this children's home

The children's home is run by a local authority. It is registered to accommodate up to six young people of either gender. The home provides care and accommodation to young people with emotional or behavioural difficulties on a long-term basis.

### Recent inspection history

Inspection date	Inspection type	Inspection judgement
09/06/2015	Full	Inadequate
17/02/2015	Interim	Declined in effectiveness
23/09/2014	Full	Adequate
11/02/2014	Interim	Inadequate Progress

## Inspection Judgements

	Judgement grade
<p><b>The overall experiences and progress of children and young people living in the home are</b></p>	<p>Inadequate</p>
<p>Despite efforts to improve the quality of care planning, a number of serious shortfalls remain. Some young people's needs have not been successfully addressed and their progress has not been effectively evaluated. Consequently some young people have not made progress with tasks such as self-care. This has caused others to comment how they look and smell. As a result young people's basic care needs are not being met or helping them preparing for independence. Their social relationships and self-esteem are likely to be effected.</p> <p>At the last inspection a requirement was raised to ensure young people do not smoke in bedrooms. This has been achieved. Overall efforts to help young people to stop smoking have been unsuccessful. They continue to smoke outside the home and litter the grounds with cigarette ends. Staff efforts to encourage good health have had little impact. Some young people continue to use substances and fail to attend much needed medical appointments.</p> <p>Young people can now move freely around this home at all times of day. No doors are locked. The requirement made for this has been met. The addition of waking night staff ensures that young people are safe. Staff report, 'It's easier to relax. We are sleeping better and now we can work with young people better.' There is no permanent waking night staff and therefore they are not always known to young people. Young people do not like this and one young person reported, 'Waking night staff, I don't even know them. They just sit up in my home all night.'</p> <p>A requirement was made at last inspection to reduce the number of times police are called to the home to manage young people's behaviour. This has been met. However consistent behaviour management strategies are still not fully embedded. The staff team do not always work together and still have varying views on consequences for young people. As a result young people experience different approaches and attitude towards them and their behaviours. This makes them feel that not everyone is treated equal.</p> <p>More meaningful activities for young people are now on offer. Two out of three young people have enjoyed a summer holiday. One young person travelled abroad for the first time and one young person reported, 'We went on holiday to the log cabin. I liked it in the hot tub.'</p>	

	Judgement grade
<b>How well children and young people are helped and protected</b>	Inadequate
<p>Verbal communication between some staff and management is weak. As a result vital information regarding young people's behaviours and risks are missed. This leaves not only the individual vulnerable, other young people and staff are exposed to potential harm because risks remain unaddressed.</p> <p>Recording of behavioural incidents are poor. Risk assessments are not updated and do not reflect young people's present risks. Consequently management knowledge and oversight about what has happened is limited. The requirement to improve this area of practice has not been met.</p> <p>Not all young people and staff enjoy positive relationships. One young person commented to the independent visitor, 'I am okay but angry sometimes as staff do not listen to me when I ask for things.' Varying care approaches from staff has significant impact for individuals. They feel they are treated differently to others. One young person reported, feeling they are refused requests or need to ask several times. Consequently some young people choose not to engage with staff and have chosen not to go on holiday with them. The requirement set around young people's wishes and feelings has not been met.</p> <p>Safeguarding procedures are not being put into practice. Staff are not taking effective action when they have a concern about a young person's welfare. Consequently young people remain fully unprotected. This was immediately addressed during inspection with the Senior Manager. The lack of safeguarding is not fulfilling the Statement of Purpose which states, 'Young people have the right to stay safe and protected from harm and neglect the manager and staff will ensure this.'</p> <p>Young people continue to go missing from this home. Some young people's missing episodes have recently increased. The evaluation of these incidents is insufficient. As a result the possible reason why this is happening remains unknown. This leaves young people exposed to on-going risks such as substance and alcohol misuse. There is no current evidence of child sexual exploitation.</p>	

	Judgement grade
<b>The impact and effectiveness of leaders and managers</b>	Inadequate
<p>The acting manager of this home is suitably qualified and experienced to undertake this role. He is fully aware of the weakness in this setting. He is dynamic and committed to ensuring issues are addressed at the root. However there is no deputy or middle management to support him. Consequently progress is limited because issues are widespread.</p> <p>Despite management efforts to strengthen relationships between young people and staff, problems remain. Relationships between some staff are still negative, despite management efforts to address this. Some staff feel others have a different role to them. Some staff are in positions which they do not hold the qualification to fulfil the role. Some staff do not have basic qualifications and are not up to date with some communication systems which are vital to the running of this home. This affects the relationship within the staff team and the overall functioning of the home.</p> <p>The Statement of Purpose is not fulfilling its commitment to young people in this home. It is not currently 'Meeting individual need and improving outcomes for young people whatever it takes.'</p> <p>A requirement set at last inspection to ensure staff are trained to meet individual needs has been met. All staff have now undertaken training around self-harm and ligature risks. Staff have now received up to date training around the use of substances to be able to support individuals.</p> <p>Multi-agency working is improving. One professional commented, 'The new manager has given it a new lease of life. He's keen to know about what's going on in the consultations and is driven by it. I have noticed some staff have been seeking support and advice. Some are accessing the service more. There are still odd staff that are struggling to engage.'</p> <p>Effective supervision is lifting some staff confidence and morale. One member of staff commented, 'When I was coming into work it was like going back 20 years in care work practice and now its brilliant we are heading back the right way. I love coming to work. It's exciting now.' Another member of staff commented, 'Supervision is brilliant now. My supervision needs have not been met here before, now they have. Supervision and the quality is excellent.'</p>	

## What the inspection judgements mean

The experiences and progress of children and young people are at the centre of the inspection. Inspectors will use their professional judgement to determine the weight and significance of their findings in this respect. The judgements included in the report are made against *Inspection of children's homes: framework for inspection*.

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A children's home that is **inadequate** is providing services where there are widespread or serious failures that create or leave children and young people being harmed or at risk of harm or result in children looked after not having their welfare safeguarded and promoted.

## **Information about this inspection**

Inspectors have looked closely at the experiences and progress of children and young people living in the children's home. Inspectors considered the quality of work and the difference adults make to the lives of children and young people. They read case files, watched how professional staff work with children, young people and each other and discussed the effectiveness of help and care given to children and young people. Wherever possible, they talked to children, 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 who it is trying to help, protect and look after.

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## Children's homes inspection - Full

<b>Inspection date</b>	<b>22/09/2015</b>
<b>Unique reference number</b>	<b>SC375540</b>
<b>Type of inspection</b>	<b>Full</b>
<b>Provision subtype</b>	<b>Children's home</b>
<b>Registered person</b>	<b>Rotherham Metropolitan Borough Council</b>
<b>Registered person address</b>	<b>Riverside House, Main Street, ROTHERHAM, South Yorkshire, S60 1AE</b>

<b>Responsible individual</b>	<b>Jane Parfremment</b>
<b>Registered manager</b> <b>Acting manager</b>	<b>Karen Kennedy</b> <b>Tyrel Simpson</b>
<b>Inspector</b>	<b>Jamie Richardson</b>

<b>Inspection date</b>	<b>22/09/2015</b>
<b>Previous inspection judgement</b>	<b>Inadequate</b>
<b>Enforcement action since last inspection</b>	<b>None</b>
<b>This inspection</b>	
<b>The overall experiences and progress of children and young people living in the home are</b>	Inadequate
<b>Children and young people are not protected or their welfare is not promoted or safeguarded. Their care and experiences are poor and they are not making progress.</b>	
<b>how well children and young people are helped and protected</b>	Inadequate
<b>the impact and effectiveness of leaders and managers</b>	Inadequate

## SC375540

### Summary of findings

#### **The children's home provision is inadequate because:**

- Children and young people are not kept safe
- Risks of young people exposed to child sexual exploitation are not always recognised. They remain poorly assessed and reviewed.
- Missing procedures are ineffective. Local missing from home protocol is not followed. Assessments and young people's individual information is not up to date. Not all staff can access young people's essential information relating to missing.
- Injuries to young people are not robustly investigated. Safeguarding procedures are not consistently implemented by staff. Whistle blowing procedures are not being used.
- Some staff lack awareness of young people's risks.
- Medication recording and administration is poor.
- Young people's offending behaviour continues in this home.
- Some young people make no progress with their self-care skills or health. This leaves some health issues unassessed.
- Lack of management monitoring leaves safeguarding issues unaddressed and problems unrecognised.
- Agency staff recruitment is weak. Staff skills and experience matching young people's needs is unknown to management. Agency staff receive no oversight or supervision.
- Notification of serious incidents and safeguarding matters are not consistently reported to Ofsted.
- Four out of six requirements were not met from the last inadequate inspection.

## What does the children's home need to do to improve?

### Statutory Requirements

This section sets out the actions which must be taken so that the registered person/s meets 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 with the given timescales.

Requirement	Due date
<p>12: The protection of children standard</p> <p>In order to meet the protection of children standard the registered person must–</p> <p>(2) (a) ensure that staff–</p> <p>(i) 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 child.</p> <p>Specifically ensuring that,</p> <ul style="list-style-type: none"> <li>▪ Young people’s information regarding them going missing from home is up to date and all staff can access this.</li> <li>▪ Child Sexual exploitation risks are assessed and are subject to regular review</li> <li>▪ All staff are aware of young people's risks</li> <li>▪ Any injuries to young people are fully investigated and assessed following safeguarding procedures.</li> </ul>	09/10/2015
<p>12: The protection of children standard</p> <p>In order to meet the protection of children standard the registered person must–</p> <p>(2) (a) ensure that staff–</p> <p>(vi) take effective action whenever there is a serious concern about a child’s welfare; and</p> <p>(vii) are familiar with, and act in accordance with, the home’s child protection policies.</p> <p>This is in relation,</p>	09/10/2015

<ul style="list-style-type: none"> <li>▪ To staff reporting any concerns about a child and following safeguarding procedures such as whistle blowing.</li> <li>▪ Any injuries to young people are fully investigated and assessed following safeguarding procedures</li> </ul>	
<p>13: The leadership and management standard In order to meet the leadership and management standard the registered person must–</p> <p>(2) (h) use monitoring and review systems to make continuous improvements in the quality of care provided in the home. Specifically ensure consistency and clarity in the recording of risk assessments, significant incidents and outcomes of child protection enquires for example involving injury to young people.</p>	09/10/2015
<p>The Registered Person must recruit staff using recruitment procedures that are designed to ensure children safety. (2) The registered person may only – (a) employ an individual to work at the children’s home, if the individual satisfies the requirements in paragraph (3). (3) The requirements are that– (b) the individual has the appropriate experience, qualifications and skills for the work that the individual is to perform. (Regulation 32 (1) (2)(a) &amp; (3)(b)) Specifically in relation to agency staff</p>	09/10/2015
<p>The registered person must make arrangements for the positive handling, recording safekeeping and safe administration and disposal of medicines received into the children's home (Regulation 23 (1))</p>	09/10/2015
<p>The registered person must notify HMCI and each other relevant persons without delay if there is any other incident relating to a child which the registered person considers to be serious (Regulation 40( e))</p>	09/10/2015

## Full report

### Information about this children's home

The children's home is run by a local authority. It is registered to accommodate up to six young people of either gender. The home provides care and accommodation to young people with emotional or behavioural difficulties on a long-term basis.

### Recent inspection history

Inspection date	Inspection type	Inspection judgement
29/07/2015	Full	Inadequate
09/06/2015	Full	Inadequate
17/02/2015	Interim	Declined in effectiveness

## Inspection Judgements

	Judgement grade
<p><b>The overall experiences and progress of children and young people living in the home are</b></p>	<p>Inadequate</p>
<p>Procedures for recording and administering medication are not robust. It is not evident on occasions that young people have been offered medication. When medication has been given it is not clear young people have actually taken it. Prescribed vitamins have not been administered to a young person even though they have an identified deficiency. Safety procedures of two staff administering controlled drugs are not always being followed. Large amounts of painkilling drugs have been signed into young people's care, with no risk assessment, or clear rationale. As a result young people could be at risk of overdose.</p> <p>Some young people do not enjoy good health. Staff attempts are unsuccessful in helping young people to stop smoking and using illegal substances. Some young people do not attend medical appointments. Consequently they experience ongoing health issues, which are not well controlled. Some health issues remain unassessed and diagnosed. This leaves young people at risk of ongoing infection or illness.</p> <p>Despite staff efforts to promote independence skills, some young people are making no progress with their personal hygiene. Support and monitoring of this is inconsistent. This is not promoting positive self-care now or providing young people with the skills they need for the future.</p> <p>All young people have appropriate educational placements. Some young people achieve well in their exams. For others educational attendance is poor. This leaves them without structure to their day. It does not help them prepare for employment in the future.</p> <p>Young people benefit from a range of leisure activities. They enjoy go karting, swimming, football matches and trips to the spa. This helps young people to structure their time positively and promotes their life experiences.</p>	



	Judgement grade
<b>How well children and young people are helped and protected</b>	Inadequate
<p>Missing from home protocol is not followed. Young people are not reported as absent. Staff do not actively look for young people when they are missing. Information is not shared effectively with the police. It leaves significant periods of time where young people's whereabouts are unknown.</p> <p>Information surrounding young people going missing from home does not reflect their current risks. Some staff cannot access information about young people because they do not have access to computer systems. As a result poor information is shared with the police. This potentially hinders the police in looking for young people. It can affect the police risk assessment, which would leave young people vulnerable. On return from missing episodes young people are welcomed back by staff, however a lack of independent return interviews, does not give young people the chance to share any worries. It does not allow triggers and risk to be effectively assessed.</p> <p>Despite staff efforts to update risk assessments, some staff are not fully aware of young people's risks. This leaves young people vulnerable as staff are not able to identify potential hazards or make sound assessments of situations. Some risk assessments give conflicting information. For example it is unclear how the risks of sexual exploitation are identified, assessed, and reviewed. This is a significant risk to young people's safety as potentially this issue remains unknown. A requirement set around risk assessments and evaluating risk has not been met.</p> <p>Young people are not protected by safeguarding procedures. Some injuries to young people are not robustly investigated. Some staff are not following whistle blowing policy and reporting concerns. This potentially leaves young people without support and vulnerable to harm. A requirement around staff taking effective action to protect young people has not been met.</p> <p>Despite staff efforts young people continue to engage in ongoing risk taking behaviour. Two out of three young people have gained criminal records whilst living in this home. Consequently offending behaviour presents ongoing risks and could affect chances of employment and opportunity in later life.</p>	

	Judgement grade
<b>The impact and effectiveness of leaders and managers</b>	Inadequate

The acting manager of this home is suitably qualified and experienced to undertake this role. This home is suffering significant issues in all areas of its functioning. It is now inadequate for the third time. The acting manager is aware of the weakness in this setting; however it is proving a vast role for a single person. A deputy manager has been recruited, but is not yet in post. Consequently management monitoring and oversight is insufficient. Issues which include safeguarding concerns have gone unidentified and addressed. This potentially leaves young people at risk of harm.

Notifications of significant incidents are not always reported. This does not allow the regulatory body to have oversight of staff practice and to analyse safety and risk management.

The recruitment and management of agency staff is poor. Although relevant checks for identification and criminal offences are undertaken the management have no assessment of their skills and experience to meet the young people's specific needs. Agency staff are not receiving supervision. As a result this does not allow the manager any oversight of their practice and it does not give staff support to voice any concerns.

Supervision of the permanent staff team has significantly improved. Regular quality and reflective supervision allows staff to share positive practice, concerns and ideas. As a result they report feeling well supported by the manager. It has improved some staffs confidence and lifted morale.

Regular team meetings provide a forum where information is shared effectively and care practice is reflected on. As a result staff report having more understanding of young people's needs and what is expected. Consequently some staffs relationships are now developing more positively with young people. Other areas such as activities for young people have improved.

## What the inspection judgements mean

The experiences and progress of children and young people are at the centre of the inspection. Inspectors will use their professional judgement to determine the weight and significance of their findings in this respect. The judgements included in the report are made against *Inspection of children's homes: framework for inspection*.

An **outstanding** children's home provides highly effective services that contribute to significantly improved outcomes for children and young people who need help and protection and care. Their progress exceeds expectations and is sustained over time.

A **good** children's home provides effective services that help, protect and care for children and young people and have their welfare safeguarded and promoted.

In a children's home that **requires improvement**, there are no widespread or serious failures that create or leave children being harmed or at risk of harm. The welfare of looked after children is safeguarded and promoted. Minimum requirements are in place, however, the children's home is not yet delivering good protection, help and care for children and young people.

A children's home that is **inadequate** is providing services where there are widespread or serious failures that create or leave children and young people being harmed or at risk of harm or result in children looked after not having their welfare safeguarded and promoted.

## **Information about this inspection**

Inspectors have looked closely at the experiences and progress of children and young people living in the children's home. Inspectors considered the quality of work and the difference adults make to the lives of children and young people. They read case files, watched how professional staff work with children, young people and each other and discussed the effectiveness of help and care given to children and young people. Wherever possible, they talked to children, 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 who it is trying to help, protect and look after.

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## Children's homes inspection - Full

<b>Inspection date</b>	<b>12/10/2015</b>
<b>Unique reference number</b>	<b>SC033587</b>
<b>Type of inspection</b>	<b>Full</b>
<b>Provision subtype</b>	<b>Children's home</b>
<b>Registered person</b>	<b>Rotherham Metropolitan Borough Council</b>
<b>Registered person address</b>	<b>Riverside House, Main Street, ROTHERHAM, South Yorkshire, S60 1AE</b>

<b>Responsible individual</b>	<b>Jane Parfremment</b>
<b>Registered manager Acting manager</b>	<b>Shaun Scales Glyn Brown</b>
<b>Lead Inspector Inspector</b>	<b>Jamie Richardson Rachel Holden</b>

<b>Inspection date</b>	<b>12/10/2015</b>
<b>Previous inspection judgement</b>	<b>Declined in effectiveness</b>
<b>Enforcement action since last inspection</b>	<b>None</b>
<b>This inspection</b>	
<b>The overall experiences and progress of children and young people living in the home are</b>	Inadequate
There are serious and widespread failures that mean children and young people are not protected and their welfare is not promoted or safeguarded. Their care and experiences are poor and they are not making progress.	
<b>how well children and young people are helped and protected</b>	Inadequate
<b>the impact and effectiveness of leaders and managers</b>	Inadequate

## **SC033587**

### **Summary of findings**

#### **The children's home provision is inadequate because:**

- Safeguarding practice is poor and procedures are not followed
- Analysis, evaluation and actions to address risks to young people is insufficient
- Risk assessments are not up to date. They contain conflicting information to missing from home risk assessments
- Information is lacking relating to young people missing from home. It does not adhere to local protocol
- The kitchen areas are dirty
- Young people's health is not adequately monitored.



Requirement	Due date
<p>12: The protection of children standard</p> <p>(2) In Particular, the standard in Paragraph (1) requires the registered person to ensure-</p> <p>(a) that staff–</p> <p>(i) 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 child.</p> <p>Specifically ensuring that,</p> <ul style="list-style-type: none"> <li>▪ Young people’s information regarding them going missing from home is up to date. All individuals' details and historical information including favoured places and addresses are included in line with local protocol.</li> <li>▪ Child Sexual exploitation risks are assessed and are subject to regular review</li> <li>▪ Any injuries to young people are fully investigated and assessed following safeguarding procedures.</li> </ul>	30/10/2015
<p>12: The protection of children standard</p> <p>(2) In Particular, the standard in Paragraph (1) requires the registered person to ensure-</p> <p>(2) (a) that staff–</p> <p>(vi) take effective action whenever there is a serious concern about a child’s welfare; and</p> <p>(vii) are familiar with, and act in accordance with, the home’s child protection policies.</p> <p>This is in relation,</p> <ul style="list-style-type: none"> <li>▪ To staff reporting any concerns about a child and following safeguarding procedures.</li> <li>▪ Any injuries to young people are fully investigated and assessed following safeguarding procedures</li> <li>▪ Any issues relating to internet safety are followed through, investigated appropriately and online safety is monitored</li> </ul>	30/10/2015

<p>12: The protection of children standard</p> <p>In order to meet the protection of children standard the registered person must ensure</p> <p>(d) That the premises used for the purpose of the home are designed, furnished and maintained so as to protect each child from avoidable hazards to the child's health. Specifically in relation to ensuring that kitchen and their contents are clean. To prevent any hygiene issues and risks to children's health.</p>	30/10/2015
<p>13: The leadership and management standard</p> <p>(2) in particular, the standard in paragraph (1) requires the registered person to-</p> <p>(2) (h) use monitoring and review systems to make continuous improvements in the quality of care provided in the home.</p> <p>Specifically ensure consistency and clarity in the recording of risk assessments, significant incidents and outcomes of child protection enquires for example involving injury to young people.</p>	30/10/2015
<p>10: The health and wellbeing standard</p> <p>(1)The health and well-being standard is that-</p> <p>(a) the health and well-being needs of children are met.</p> <p>Specifically in relation to,</p> <ul style="list-style-type: none"> <li>▪ Staff having knowledge of indicators of risk in relation to individual's health needs. This includes potential eating disorders or nutrition deficiencies.</li> <li>▪ This specifically relates to young people's emotional health needs being met and consistently supported. Their requests for support to be listened to.</li> <li>▪ Staff know where to access appropriate advice and treatment for individual health needs.</li> </ul>	30/10/2015
<p>The independent person must produce a report about a visit ("the independent persons report") which sets out, in particular, the independent persons opinion as to whether</p> <p>(a) Children are effectively safeguarded</p> <p>(b) The conduct of the home promotes the children's well- being (Regulation 44 (4) (a)(b))</p>	30/10/2015

## Recommendation

Regulation 11(2) sets out the expectations on staff in building a positive relationship with each Child and helping the child to have a positive relationship with others. (The Guide to the Quality Standards page 38, paragraph 8.6) This is specifically in relation to staff not allowing young people to overhear adult conversation.

## Full report

### Information about this children's home

The children's home is run by a local authority. It is registered to accommodate up to six young people. The home provides long-term residential care to young people with emotional and behavioural difficulties.

### Recent inspection history

Inspection date	Inspection type	Inspection judgement
22/09/2014	Interim	Declined in effectiveness
04/07/2014	Full	Good
24/01/2014	Interim	Inadequate Progress

## Inspection Judgements

	Judgement grade
<p><b>The overall experiences and progress of children and young people living in the home are</b></p>	<p>Inadequate</p>
<p>Some young people's health needs are not fully recognised. Indicators of problems, such as eating disorders, are not identified, explored or monitored. This leaves young people with on-going health issues. Young people's health have suffered through poor food intake and lack of nutrition.</p> <p>Young people do not benefit from consistent support with their emotional health. Some individuals who have requested care coordinators have not been supported to access this service. As a result some young people continue to suffer poor mental health and remain anxious.</p> <p>The kitchen areas of this home are dirty. In certain cupboards there are hairs and crumbs of old food. Some kitchen surfaces and floors are unclean. There are dirty ovens and unclean pans. This raises potential health and hygiene issues. It is not setting high standards for young people to aspire to now or in the future.</p> <p>On occasions young people overhear staff conversation and views. For example they overhear staff discussion about changes to the home. At other times young people have been given information about potential admissions. The information is un-confirmed and does not actually transpire, resulting in undue stress. This influences their thinking and raises anxiety for young people as they do not always have full understanding of adult issues. Despite this some young people enjoy relationships with staff. One young person commented 'I like the staff.'</p> <p>Education for young people in this home is variable. All young people attended their examinations. Despite staff commitment to supporting young people to attend education, some currently remain without placement. For others there has been a recent decline in attendance. Lack of education is likely to affect young people's employment and life chances in the future.</p>	

	Judgement grade
<b>How well children and young people are helped and protected</b>	Inadequate
<p>Safeguarding procedures are not being followed. As a result, injuries to young people, such as bruises and scratches have not been investigated. This does not protect young people from immediate and future harm. It also leaves injuries without medical attention.</p> <p>Assessment and analysis of risk is poor. Evidence of consultation and decision making which involves appropriate professionals is lacking. Consequently decision making in the best interests of young people is unclear. For example the decision to remove night staffing and cease room searches for some individuals was not evidenced or evaluated. This potentially leaves young people at risk of harm.</p> <p>Some individual risk assessments are not up to date. They do not contain recent risk taking behaviours. This does not provide staff with the necessary information to analyse incidents and to protect young people from future harm. The information on general risk assessments and missing from home assessments is inconsistent. For example, in relation to child sexual exploitation, information and grading of risk varies. As a result understanding of risk is not demonstrated. It does not assist staff to make informed decisions and protect the vulnerable young people in this home.</p> <p>The local missing from home protocol is not being followed. Individual information relating to young people going missing from home is insufficient. Details such as favoured places, relatives and friends are not documented. This is likely to hinder efforts to find young people who are missing, because staff and police have no information where to look. This leaves young people vulnerable to associated risks such as child sexual exploitation and abuse.</p> <p>Risks around young people's internet use are not fully known. Concerns about who young people are contacting via the internet are not robustly monitored and assessed. This leaves young people vulnerable to inappropriate adults and potential abuse.</p> <p>Staff have not been effective, in helping young people to understand others individual needs. Consequently bullying has been an issue in this home over the last six months. This remains closely monitored but has had a negative impact on some young people's behaviour.</p>	

	Judgement grade
<b>The impact and effectiveness of leaders and managers</b>	Inadequate
<p>The registered manager has been in post since June 2011. He is suitably qualified and experienced to undertake this role. He has been covering a vacant post as Operation's Manager since September 2014. An acting manager has been overseeing the home since this date.</p> <p>Internal monitoring systems have failed to identify issues raised at this inspection. External monitoring processes have identified some themes; however vital safeguarding issues have been overlooked. As a result significant child protection concerns remained unassessed. This leaves young people vulnerable to significant harm. External monitoring services have failed to provide opinion regarding, if young people are safeguarded and their wellbeing is promoted. This does not comply with regulation.</p> <p>The senior external management as well as internal management do not demonstrate an understanding of the strengths and weakness of this home. Despite having increased capacity in the external oversight from senior managers no shortfalls have been identified or addressed before this inspection. They have failed to recognise or demonstrate in-depth understanding of young people's health needs, safeguarding and missing from home protocol. Consequently vital procedures which help to keep young people safe are not imbedded in practice.</p> <p>The matching process for young people to enter this home, has on occasion failed to identify conflicting needs and risks of young people. Consequently some young people have been inappropriately placed. This has resulted in safeguarding issues, which have caused young people to be moved on without planning and preparation.</p> <p>Regular supervision of staff ensures they feel well supported by management. It helps staff to feel valued and confident about their role. One Member of staff commented 'We get on with managers, I have regular supervision but I can ask anything anyway'. The acting manager receives regular supervision from his line manager; this helps him feel valued and supported. However the evidence to assess supervision quality was unavailable at the time of the inspection.</p> <p>Staff benefit from regular training. One member of staff reported 'We have had more training recently. This has been good.' This increases staff knowledge in supporting young people's needs.</p>	

## What the inspection judgements mean

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**For the attention of Rachel Holden and Jamie Richardson**

**The following immediate actions have been taken today by St Edmunds Avenue Children's home following an inadequate inspection carried out 12<sup>th</sup> of October 2015.**

**Further to the inspection the following evidence has been located that we do not believe was made available to you yesterday. Whilst we fully understand this does not address all the issues raised that contributed to the judgement we wish to make you aware of the fact that it has been located.**

- **TH Completed trigger plan and CSE risk assessment was on the CCM system however was not placed on the young person's file within the home.**
- **TH- An e mail sent to the Social Worker dated 2<sup>nd</sup> of September was found which reported the scratches and bruises. Staff had discussed how these happened with TH at the time and expressed an opinion about this suggesting it could be self- inflicted. Staff did not follow this e mail up when they did not get a response and should have made this report via a direct discussion with the social worker or the social workers manager. We accept that in this case procedures were not followed.**

	<b>Action taken</b>	<b>Date completed</b>
<b>Safeguarding of young people</b>	<ul style="list-style-type: none"> <li>• Immediate reinstatement of waking night staff between the hours of 11.00pm to 7.00am. These are covered by substantive St Edmunds staff. Agency staff will be used where own staff are unable to cover these should be agency staff familiar with the home.</li> <li>• Advice has been sought from CAMHS in relation to TH with regard to welfare checks throughout the night. Advice given was for waking night staff not to disturb TH during the night by repeated checks, but to advise her that should she feel the need to talk to someone, a member of staff is available.</li>   <li>Care plan has been updated to this effect.</li>   <li>• Room searches have been reinstated with immediate effect specifically in relation to TH due to associated risks of self-harm. A record sheet has been placed on file to record reason/concern requiring the need to search, any items found and removed, detail of dialogue with SW/other relevant parties and any agreed follow up required, following completion of the search. These are to be carried out only by residential care workers.</li>   <li>• Missing from Home – Co-ordinator visited today and confirms the 2015 protocol is on site. The aide memoire on site is current and checked with missing coordinator</li> </ul>	<p>13.10.15</p> <p>13.10.15</p> <p>14.10.15</p> <p>14.10.15</p> <p>13.10.15</p> <p>13.10.15</p>

	<ul style="list-style-type: none"> <li>• Missing From Home Trigger plans-             TH- a missing from home Assessment and trigger plan dated 31.7.15 was found today associated onto CCM which was not on the young person's file at inspection which details protective factors, identified risks and vulnerabilities (including-History of absconding, current situation, Mental health/Self harm, Relationships, Risk of CSE, associates and previous places she has or may be at and places frequented.) This has been updated today with the social worker.             A plan detailing actions when the young person goes missing including timescales, is also attached.             An overall risk assessment covers Missing from Home, CSE, Self harm and Emotional wellbeing.             Description including photograph.             2 CSE risk assessments were found on CCM today relating to TH dated 25.7.14 and updated 25.3.15. These were not on the young person's file at the inspection. The social worker is to check with the Evolve Team and make any updates that are required.             Discussed with the Social Worker to request updated CSE risk assessment with the EVOLVE team.</li> </ul>	<p>13.10.15</p> <p>14.10.15</p>
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	<p>MA- a missing from home Assessment and trigger plan was completed today by the manager and was placed on the young person's file which details protective factors, identified risks and vulnerabilities (including-History of absconding, current situation, Mental health/Self harm, Relationships, Risk of CSE, associates and previous places she has or may be at and places frequented.) An action plan when the young person goes missing including by whom and timescales is also attached.</p> <p>An overall risk assessment covers Missing from Home, CSE, Self -harm and Emotional wellbeing. Description, including photograph.</p> <p>This sent to the Social Worker today by the manager for immediate review.</p> <p>This has been returned with a few minor amendment's. Now on the residential homes file.</p> <p>CS- a missing from home Assessment and trigger plan was completed today by the manager and was placed on the young person's file which details protective factors, identified risks and vulnerabilities (including-History of absconding, current situation, Mental health/Self harm, Relationships, Risk of CSE, associates and previous places she has or may be at and places frequented.) An action plan when the young person goes missing including timescales is also attached.</p> <p>An overall risk assessment covers Missing from Home, CSE, Self harm and Emotional wellbeing. Description, including photograph.</p> <p>This has been sent today to the Social Worker by the manager for immediate review. We are awaiting a reply from the Team Manager</p>	<p>13.10.15</p> <p>13.10.15</p> <p>14.10.15</p> <p>13.10.15</p> <p>13.10.15</p> <p>13.10.15</p> <p>14.10.15</p>
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	<ul style="list-style-type: none"> <li>• Reporting procedures The manager has discussed today at a staff meeting the immediate need to ensure that all concerns involving self-harm, injuries and any other child protection concerns are reported to the appropriate agencies without delay. The manager has instructed the staff to read the Child Protection reporting procedures and sign to say they have done this and understand them.</li>   <li>In relation to TH (Scratches/Bruises)- A Strategy meeting booked and is to be held 1.00pm 15<sup>th</sup> October 2015.</li>   <li>A disclosure made 14.10.15 by a young person regarding Face book and inappropriate images has been reported to relevant parties and will be discussed at a Strategy meeting being held 1.00pm 15<sup>th</sup> October 2015.</li>   <li>• Monitoring of bullying The manager has discussed at a staff meeting today the immediate need to ensure that all concerns relating to bullying are recorded and action taken to address this.</li>   <li>• Internet safety The manager has instructed all keyworkers at a staff meeting to book individual key work sessions this week to discuss keeping safe in relation to accessing social networking sites and the sharing of person mobile phones. Staff have been instructed to access the CEOP website resources.</li>   <li>• Food monitoring sheets have been reviewed to capture what has been offered on the menu and what has been consumed. The manager has discussed the need to record effectively in young people's files.</li> </ul>	<p>13.10.15</p> <p>14..10.15</p> <p>14.10.15</p> <p>13.10.15</p> <p>13.10.15</p> <p>13.10.15</p>
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<p><b>Cleanliness of the kitchens</b></p>	<p>The current menu was discussed and amended following a young person's meeting 23.9.15. This will be reviewed again in consultation with young people 22.10.15. The manager has instructed key workers to carry out specific discussions in relation to healthy eating with all young people prior to the young people's meeting.</p>	
	<p>Food shopping took place on the day of the inspection and fresh fruit was again purchased locally the following day. The manager has instructed staff to ensure that items of food are checked daily. Any items found to be "tired" will be replaced.</p>	13.10.15
	<p>Fruit, fresh vegetables and salad although already offered daily, have now been added to the menu.</p>	
	<p>Weight Up (More life) have been contacted to deliver healthy eating sessions for the young people and carers. First session : 26.10.15 3-3.30pm and 3.30-4pm. This will be in relation to healthy eating and services young people can access.</p>	14.10.15
	<ul style="list-style-type: none"> <li>• The manager has reviewed the cleaning regime of both the domestic and the staff.</li> </ul> <p>Sunday- Clean ovens. (This is in addition to oven cleaning during the week by the domestic)</p> <p>Tuesday- Clean all cupboards in both kitchens. (This is in addition to cleaning during the week by the domestic)</p> <p>Daily checks of both kitchens to be carried out by staff during the day and clean as required.</p>	13.10.15

<b>Staff discussions in front of young people</b>	<ul style="list-style-type: none"> <li>The manager has discussed in a staff meeting today issues raised regarding information discussed in front of or within ear shot of young people. Staff have been reminded about professional boundaries and appropriate content of information discussed.</li> </ul>	14.10.15
	<ul style="list-style-type: none"> <li>All risk assessments to be reviewed and cross referenced to care plans.</li> </ul>	14.10.15
	<ul style="list-style-type: none"> <li>E mail has been sent to Nutrition and Dietetics department RDGH to discuss current Feeding plan for TH as dated July 2015. The manager is also to discuss issues/concerns in relation to weighing scales/bucket found in room. The bucket has since been removed.</li> <li>Discussion held with Social Worker today. She is aware of the issues. The Social Worker will attend the meeting with dieticians when arranged to discuss these concerns.</li> <li>Awaiting a return call from the dieticians.</li> </ul>	14.10.15
	The Registered Manager to return to St. Edmunds to resume duties from week commencing 19.10.15	14.10.15

**Signed: G Brown**

**Job title: Acting Manager**

**Setting: St Edmunds Ave URN: SC033587**

**Date: 13/10/2015**





### **Summary Sheet**

Improving Lives Select Commission – 4<sup>th</sup> November 2015

### **Title**

Improving Lives Work Programme November 2015 to April 2016

### **Is this a Key Decision and has it been included on the Forward Plan?**

No

### **Strategic Director Approving Submission of the Report**

Stuart Booth, Resources

### **Report Author(s)**

Deborah Fellowes, Scrutiny Manager  
01709 822769  
Deborah.fellowes@rotherham.gov.uk

### **Ward(s) Affected**

All

### **Executive Summary**

The report provides members of the Improving Lives Select Commission with a proposed work programme for the rest of the municipal year of 2015/16. This takes into account work already done by the Commission on the strategy and delivery plan to tackle CSE and following on from this, to determine which areas Scrutiny is best placed to focus on. The work programme reflects these discussions.

### **Recommendations**

That the Improving Lives discuss and agree their forward work programme

### **List of Appendices Included**

Appendix A – draft work programme

**Background Paper**

None

**Consideration by any other Council Committee, Scrutiny or Advisory Panel**

None

**Council Approval Required**

No

**Exempt from the Press and Public**

No

## **Improving Lives Work Programme November 2015 to April 2016**

### **1. Recommendations**

- 1.1 That the Improving Lives Select Commission discuss and agree the work programme

### **2. Background**

- 2.1 As part of the Scrutiny work programme for 2015/16, it was agreed between Commissioners and Elected Members that the Improving Lives Select Commission focus on the scrutiny of partnership plans to tackle Child Sexual Exploitation (CSE) in Rotherham.
- 2.2 To date this has focused on the developing strategy and delivery plans that provide the overarching strategic framework for tackling CSE. Improving Lives have received detailed reports on these matters and have used these discussions to determine the proposed work programme for the rest of the municipal year.

### **3. Key Issues**

- 3.1 Having discussed and agreed the key areas for the Select Commission to focus on these are as follows:
  - 3.1.1 On going monitoring of the CSE Strategy and Delivery Plans implementation.
  - 3.1.2 Input to the LSCB Audit process via a nominated Champion
  - 3.1.3 Support to victims and survivors, focusing on both preventative work with schools and on transition issues for adults
  - 3.1.4 Progress updates on operational investigations
  - 3.1.5 Work with Health Partners on tackling CSE
  - 3.1.6 Awareness raising and preventative work, including Early Help.
- 3.2 In addition there are a number of issues that the Commission would like to address as part of its ongoing work commitments and that are complementary to the CSE agenda.
- 3.2 These include the annual safeguarding reports for both Adults and Children and Young People, follow up to the Domestic Abuse review and other education related matters.

### **4. Options considered and recommended proposal**

- 4.1 The proposed work programme attached at Appendix A represents an accurate summary of these work commitments and Members are therefore recommended to approve this, subject to any changes discussed at the meeting.

**5. Consultation**

5.1 This has been carried out with the Improving Lives Select Commission at previous meetings.

**6. Timetable and Accountability for Implementing this Decision**

6.1 The work programme can be implemented immediately as the theme of Tackling CSE has already been approved by Full Council.

**7. Financial and Procurement Implications**

7.1 There are none.

**8. Legal Implications**

8.1 There are none.

**9. Human Resources Implications**

9.1 There are none.

**10. Implications for Children and Young People and Vulnerable Adults**

10.1 The work programme focuses on plans to tackle CSE which is a high priority issue for the Council and particularly for vulnerable Children and Young People.

10.2 In looking at transition issues for Adult survivors and also the Annual Adults Safeguarding Plan, the work programme will also seek to address issues for vulnerable adults too.

**11. Equalities and Human Rights Implications**

11.1 Children and Young People and Vulnerable Adults both have protected characteristics in equalities terms and therefore the work programme will help to address some of these inequalities

**12. Implications for Partners and Other Directorates**

12.1 The work programme will focus on the work of the CYPS and Adults Services directorates and of partners including the Police and Health.

**13. Risks and Mitigation**

13.1 The main risk is that accurate and timely information in the form of presentations and reports will not be available for effective scrutiny to take place. The work programme will be managed flexibly and scrutiny staff will work with lead officers across the departments and agencies to ensure this is kept to a minimum.

**14. Accountable Officer(s)**

Deborah Fellowes,  
Scrutiny Manager  
01709 822769 [deborah.fellowes@rotherham.gov.uk](mailto:deborah.fellowes@rotherham.gov.uk)

## Appendix A

### Improving Lives Select Commission – Draft work programme

November 2015 to March 2016:

Meeting: 4<sup>th</sup> November 2015

- Children's Home closure
- Work programme
- Nominate rep to work with LSCB on audits
- Early Help

Meeting: 16<sup>th</sup> December 2015

- Children's Safeguarding annual report and the work of the LSCB
- Domestic Abuse update
- Work with Victims and Survivors
  - Report from CYPS
  - Projects on preventative work with schools
  - Work with Adults survivors and transition issues

Meeting: 3<sup>rd</sup> February 2016

- Adults Safeguarding annual report
- Progress monitoring report – performance data
- Joint Operational update – current joint investigations by SYP and CYPS

Meeting: 23<sup>rd</sup> March 2016

- Work with Health Partners to tackle CSE
- Education and schools role – children missing from Education
- Outcomes for Looked After Children

Work to take place in between meetings:

- Visits to other authorities
- Discussions and evidence from witnesses and survivors

This will programme will run up to the all-out elections in 2016. Thereafter future work will need to be determined.

It is also proposed for work to take place in small working groups outside of the main meetings based around the 4 themes of the Strategy. They will provide report backs at each of the meetings and some of the specific issues identified for the full

meetings above will fall under these categories also. The programme is flexible enough to allow additional issues which need more public scrutiny to be added to the agenda should either the full Select Commission or the sub groups identify any.

Questions arising from pre-briefing: -

1. Does the Deputy Director sufficient progress is being made in tackling the issues associated with CSE? How does she know this and what evidence is there of this?
2. Does the Deputy Director feel sufficient improvement has been made with regard to services to support victims and survivors of CSE, again how does she know and what evidence is there?
3. Last year a Research and Intelligence post was created in the South Yorkshire Police dedicated to Rotherham. What can you tell us about how this is working and how it relates to the Evolve team?
4. Can you update Members on the CSE Outreach Service, in terms of its establishment and resourcing etc..?
5. How is the cultural aspect of CSE being tackled, given the criticism previously and the sensitivity of the issues?
6. Please tell us about the Prevent element of the strategy and how this is being developed?