

CHILDREN AND YOUNG PEOPLE OVERVIEW AND SCRUTINY

5 DECEMBER 2017

OFSTED INSPECTION OF AUT EVEN

Report from: Ian Sutherland, Director of Children and Adults
Author: Linda Jackson, Interim Assistant Director Adult Care Services

Summary

Ofsted carried out an unannounced inspection at Aut Even on Tuesday 25 and Wednesday 26 of July 2017 and was rated inadequate. A report providing an overview of the inspection findings and consequent action plan for implementation was shared with the Committee on 31 August 2017. A further report on 5 October 2017 gave an update on the progress of actions that had been acknowledged to improve the Service.

Ofsted returned and carried out a monitoring visit on 26 September 2017 and published their findings in a report on 20 October 2017, attached at Appendix A. This report provides the Committee with a further update on progress to improve the Service.

1. Budget and Policy Framework

- 1.1 This is within the Council's Policy Framework.
- 1.2 On 5 October 2017 at the meeting of the Children and Young People Overview and Scrutiny Committee, the Committee noted an update report would be provided to the Committee at the December meeting.

2. Background

- 2.1 Aut Even is a residential respite unit for young people with disabilities, based in Twydall.
- 2.2 Ofsted carried out an unannounced inspection at Aut Even on Tuesday 25 and Wednesday 26 of July 2017 and was rated inadequate. As a result, a comprehensive action plan was put in place and Ofsted carried out a further Monitoring Inspection of progress on 26 September 2017, the findings are set out in Appendix A.

2.3 The Council had until 25 September 2017 to respond to and take action in accordance with Ofsted's Compliance Notice and inspection judgements. The Compliance Notice has been satisfied and closed. The majority of the requirements have been completed and Ofsted extended the period to meet the remaining requirements until 10 November 2017.

3. Options

3.1 To note the content of the report, and acknowledge the actions that have taken place to date to improve the service.

4. Advice and analysis

4.1 A considerable amount of work has taken place to improve the standards within Aut Even. A revised action plan has been submitted to Ofsted and work on completion is underway, Appendix B sets out the current status of actions, last updated 14 November 2017.

4.2 Families have been kept fully informed and involved in the changes during this time and have remained complementary about the services offered to their children.

4.3 There has been significant amount of team work between the Interim Manager and the Human Resource's Team to ensure that all regulations in respect of the workforce have been met.

4.4 An audit of all recruitment practices across the Children and Adult's Directorate, found the directorate to be 100% compliant with regulations.

4.5 Investigations continue in relation to the lack of compliance by previous managers, this is also being supported by an internal audit.

4.6 The safety and wellbeing of children continues to remain a priority for the Department and the Portfolio Holder. The progress of these services is closely monitored by the Senior Leadership Team.

4.7 Consultation in ongoing regarding the possible move of the Aut Even service to the Parklands site. It is envisaged that it will support the service to maintain Ofsted environmental standards.

5. Risk management

Risk	Description	Action to avoid or mitigate risk
1. Not achieving the required standards.	There is potential of enforcement action, should corrective action not be put in place.	A detailed action plan is in place to improve on all areas.
2. Parents stop using Aut Even.	Due to the Ofsted rating there is a potential that there will be a decline in use of the service.	The interim Manager and deputy manager are in close communication with all parents, with support or the 0-25 team.

- 5.1 The detailed action plan which accompanies this report, at Appendix B outlines corrective action taken to date, to improve standards and mitigate against any further risks.

6. Consultation

- 6.1 All parents have been contacted and informed of the inspection outcomes and to be provided reassurance if required.
- 6.2 The Parent Carer Forum has been contacted, as have Ward Councillors.

7. Implications for Looked After Children

- 7.1 There are no looked after children supported in this Service and therefore no implications arising from this report.

8. Financial implications

- 8.1 The improvement plan identified a need to recruit staff both on a temporary and permanent basis, which has happened. This has led to an increased overspend position for 2017/18. The quarter 2 budget monitoring position that was reported to Cabinet on 21 November 2017 was a combined overspend on Aut Even/Parklands of £197k. The overspend on Aut Even has increased by £155k since the quarter 1 forecasts due to the increased levels of staffing. Work is continuing to reduce the level of overspend while maintaining the required standards of service provision.

9. Legal implications

- 9.1 The Services which are found to be inadequate and which do not make sufficient effort or progress to improve can be subject to enforcement action by the regulators.

10. Recommendation

- 10.1 The Committee are asked to note the work to date on the service improvements, as set out in Appendix B to the report, in response to the Aut Even Ofsted Inspection on 25 and 26 July 2017 and that an update report will be provided to the Committee in March 2018.

Lead officer contact

Linda Jackson, Interim Assistant Director Adult Care Services, 01634 331212,
Linda.Jackson@medway.gov.uk

Appendices

Appendix A - Ofsted Monitoring Visit Report, published in October 2017

Appendix B - Aut Even Improvement Action plan updated 14 November 2017

Background papers

None

SC066166

Medway Council
Monitoring visit

Inspected under the social care common inspection framework

Information about this children's home

The home provides short breaks for up to five children at a time who have severe learning disabilities, and who may have an associated physical disability and/or present challenging behaviour. Currently, there are 49 children registered with the service. The local authority, primary care trust and clinical commissioning group fund the home.

Inspection date: 26 September 2017

This monitoring visit

This visit was carried out following the children's home being judged inadequate at the full inspection on 25 July 2017. One compliance notice and six requirements were made, and the focus of this visit was to assess the progress in meeting these.

Following the previous inspection, the organisation undertook a full review of the relevant staff personnel records and took steps to ensure that all existing staff meet the standards for safer recruitment. Procedures have been revised and changed to strengthen the practice of safer recruitment and safeguarding practice.

Staff development and training has been undertaken, and all existing staff are adequately equipped to meet the needs of the children. Staff deployment has been revised to ensure that all staff teams are able to meet the care and safety needs of the children. Tensions between staff have reduced and team working has improved. Plans are in place to ensure that the induction, probation and supervision of staff meet requirements. The actions taken have been appropriately prioritised, and a measured approach has been applied to addressing the failings and shortfalls. A 'quick fix' approach has been avoided, and there has been a focus on the long-term health of the service.

The compliance notice has been met and clear action has been taken for the meeting of all requirements. However, only three have been met, leaving two unmet and one untested.

A compliance notice was issued under regulation 32 (1), (2)(a)(b) and (3)(a)(b)(c)(d) in relation to the fitness of workers.

The steps required were to ensure that all persons working in the service meet the requirements for fitness; to ensure that there are systems in place to monitor and audit the implementation of recruitment policies and procedures; to ensure that unchecked staff do not have unsupervised contact with children; and to ensure that personnel records contain the required information.

The organisation has conducted a detailed audit of all staff recruited. Only those meeting the requirements for fitness have been retained. The records of these staff all contain the required information.

A full personnel record for each member of staff is held by the organisation's human resources department, which is now responsible for the verification of all references. Managers are required to undergo training in safer recruitment before becoming involved in recruitment activities. These arrangements enable the organisation to monitor and audit the implementation of recruitment policies and procedures, and to ensure that these are met.

This compliance notice has been met.

A requirement was issued under the protection of children standard (regulation 12 (1) and (2)(a)(i)(ii)(iii)(v)(vi)(vii))

The action required was to ensure that each staff team working with a group of children has the capacity to keep them safe, to recognise when they may be at risk of harm and to take appropriate action when concerns arise.

All new and existing staff have undergone safeguarding training as well as other key training aimed at ensuring the proper and safe care of children with complex needs. Further training to continue upgrading the skills and knowledge of new staff is scheduled.

New staff feel more confident and competent to meet the needs of the children who use the service, and their knowledge base is being strengthened.

This requirement has been met.

A requirement was issued under the leadership and management standard (regulation 13 (1)(a)(b) and (2)(a)(b)(c)(d)(e))

The required action was to ensure that the staff work together as a team, and to ensure that each shift has sufficient staff with the knowledge and skills necessary to care for the children staying at that time.

Staff now say that they feel supported by the new management team and report a substantial reduction in divisions and tensions within the staff group. They display a focus on the children, as well as a healthy team ethic in supporting each other in meeting the needs of the children.

The current planning of rotas takes the skill and experience of staff into account, to ensure that the staff teams for each group of children staying possess the collective knowledge and skills to meet the care and safety needs of those children.

This requirement has been met.

A requirement was issued under the employment of staff (regulation 33 (2)(a))

The required action was to ensure that any significant incidents that have occurred are reviewed, and that any applicable disciplinary measures are implemented.

The one significant incident has been fully investigated by the interim manager, and has been documented. Identified shortfalls in procedures and staff training have been addressed. From this investigation, no disciplinary actions were recommended.

This requirement has been met.

A requirement was issued under the employment of staff (regulation 33 (1)(a)(b))

The required action was to ensure that new staff complete an appropriate induction and a satisfactory period of probation.

The staff induction programme has been revised, and the probation period of new staff has been extended from six to nine months. The necessary structures are not yet in place, but managers say that the revised processes will enable them to address the failure in meeting the requirements for an appropriate induction and the completion of a satisfactory period of probation, for all staff.

This plan has not yet come to fruition, therefore the quality and content could not be evaluated at this stage.

The timescale for meeting this requirement has been extended to 10 November 2017.

A requirement was issued under the notification of serious events (regulation 40 (4)(a)(b)(c)(d)(e))

The action required was to ensure that incidents requiring notification to relevant persons be made within the required time frame.

The requirements of regulation 40 have been explained to the members of staff in a team meeting. However, there have been no notifiable incidents since the last inspection and, therefore, the staff's understanding of meeting this requirement is yet to be tested and demonstrated.

The timescale for meeting this requirement has been extended to 10 November 2017.

A requirement was issued under the employment of staff (regulation 33 (4)(b))

The action required was to ensure that each member of staff receives regular supervision, in accordance with the policy of the organisation. Significant shortfalls in this regard were identified at the last inspection. These were partly related to the absence of senior members of staff due to long-term sickness, and the organisation's failure to ensure sufficient management presence and oversight.

The management are in the process of appointing and training senior members of staff to act up as supervisors in order to increase the capacity to provide regular staff supervision. Although the importance of this need is recognised by the management and has been given a high priority, current supervision arrangements remain insufficient. The service is not yet demonstrating that staff are in receipt of the guidance, support, reflective practice opportunities and professional challenge that they require.

The timescale for meeting this requirement has been extended to 10 November 2017.

Recent inspection history

Inspection date	Inspection type	Inspection judgement
25/07/2017	Full	Inadequate
20/12/2016	Full	Good
01/06/2016	Interim	Improved effectiveness
02/02/2016	Interim	Declined in effectiveness

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

Statutory requirements

This section sets out the actions that the registered person(s) must take to meet the Care Standards Act 2000, Children's Homes (England) Regulations 2015 and the 'Guide to the children's homes regulations including the quality standards'. The registered person(s) must comply within the given timescales.

Requirement	Due date
<p>The registered person must—</p> <ul style="list-style-type: none"> (a) ensure that each employee completes an appropriate induction; and (b) ensure that each permanent appointment of an employee is subject to the satisfactory completion of a period of probation. (Regulation 33 (1)(a)(b)) <p>In particular, review the induction of recently appointed staff and ensure that all actions necessary to confirm completion of a satisfactory probation period are undertaken.</p>	10/11/2017
<p>The registered person must ensure that all employees— receive practice-related supervision by a person with appropriate experience. (Regulation 33 (4)(b))</p>	10/11/2017
<p>The registered person must notify HMCI and each other relevant person without delay if—</p> <ul style="list-style-type: none"> (a) a child is involved in or subject to, or is suspected of being involved in or subject to, sexual exploitation; (b) an incident requiring police involvement occurs in relation to a child which the registered person considers to be serious; (c) there is an allegation of abuse against the home or a person working there; (d) a child protection enquiry involving a child— <ul style="list-style-type: none"> (i) is instigated; or (ii) concludes (in which case, the notification must include the outcome of the child protection enquiry); or (e) there is any other incident relating to a child which the registered person considers to be serious. (Regulation 40 (4)(a)(b)(c)(d)(e)) 	10/11/2017

Information about this inspection

The purpose of this visit was to monitor the action taken and the progress made by the children's home since its last Ofsted inspection.

This inspection was carried out under the Care Standards Act 2000.

Children's home details

Unique reference number: SC066166

Provision sub-type: Children's home

Registered provider: Medway Council

Registered provider address: Gun Wharf, Dock Road, Chatham, Kent ME4 4TR

Responsible individual: Ian Sutherland

Registered manager: Post vacant

Inspector

John Pledger, social care inspector

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Store Street
Manchester
M1 2WD

T: 0300 123 1231
Textphone: 0161 618 8524
E: enquiries@ofsted.gov.uk
W: <http://www.gov.uk/ofsted>

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Home: Aut Even**Target Date for Completion:** 10/11/2017 **Plan Number:** 3**Aim of Plan:** Improved Effectiveness at Interim / Good at next Inspection**Compiled by:** David Ballard **Date:** 14/11/2017

Statutory Requirement This section sets out the actions that the registered person must take to meet the Care Standards Act 2000, Children's Homes (England) Regulations 2015 and the 'Guide to the children's homes regulations including the quality standards'. The registered person must comply within the given timescales.	Action Required	By Whom/ Person Responsible	Timescale For Completion	Comments and Signature to Confirm Completion of Action
Regulation 33. (1) The registered person must—				
(a) ensure that each employee completes an appropriate induction; and (b) ensure that each permanent appointment of an employee is subject to the satisfactory completion of a period of probation. In particular , review the induction of recently appointed staff and ensure that all actions necessary to confirm completion of a satisfactory probation period are undertaken.	All recently recruited staff are engaged in a comprehensive training programme. Induction records are in place for all staff and are reviewed in fortnightly supervision sessions. The induction process is linked to the Probationary period and all staff have been advised that the probationary period is to be extended by three months initially in order to be able to demonstrate that they have met the required competencies	D Ballard and Caren Smith D Ballard Caren Smith and HR	10.11.2017 10.11.2017	A comprehensive training plan is ongoing in partnership with the Organisational Development Team Relevant staff have had their probationary periods formerly extended in order to allow the process to be completed.

Statutory Requirement	Action Required	By Whom/ Person Responsible	Timescale For Completion	Comments and Signature to Confirm Completion of Action
<p>Regulation 33 <i>cont</i></p> <p>(4) The registered person must ensure that all employees—</p> <p>(b) Receive practice-related supervision by a person with appropriate experience.</p>	<p>Temporary Senior RSW's have been appointed to provide supervision and support. Managers are assisting in that process and all staff now receive regular supervision in accordance with Medway Council Policy</p> <p>Comprehensive monitoring of supervision is in place</p>	D Ballard	10.11.2017	<p>Temporary Senior RSW's are now in place. Managers have established a comprehensive supervision programme for all staff. All staff have now received formal, recorded, practice based supervision and have regular appointments.</p>
<p>Regulation 40.</p> <p>(4) The registered person must notify HMCI and each other relevant person without delay if—</p> <p>(a) a child is involved in or subject to, or is suspected of being involved in or subject to, sexual exploitation;</p> <p>(b) an incident requiring police involvement occurs in relation to a child which the registered person considers to be serious;</p> <p>(c) there is an allegation of abuse against the home or a person working there;</p> <p>(d) a child protection enquiry involving a child—</p> <p>(i) is instigated; or</p>	<p>All staff have been briefed on the requirements of notification of serious matters to Ofsted.</p> <p>Shift leaders will undertake a training briefing on how to complete an online notification as part of a revised notification procedure.</p> <p>Ensure any appropriate matter is notified to Ofsted within 24 hours</p>	D Ballard	10.11.2017	<p>Staff briefing has taken place.</p> <p>Shift Leaders and Seniors have received training in the completion of the Online Notification System. A procedure is in place which gives authority for any shift leader to submit a notification in accordance with the guidance in the absence of a manager. There have been no incidents or issues at Aut Even that require notification.</p>

<p>(ii) concludes (in which case, the notification must include the outcome of the child protection enquiry); or</p> <p>(e) There is any other incident relating to a child which the registered person considers to be serious.</p>				
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