

Oikos Family Assessment Centres

Office F06, First Floor, Dawson's House, Owlcotes Lane, Pudsey LS28 6PY

Inspected under the social care common inspection framework

Information about this residential family centre

This service is privately owned and managed and is registered to provide parenting assessments for up to four families.

The property is situated in a semi-rural setting with a large garden to the rear. The families have their own bedrooms and share the communal rooms. The communal space includes two kitchen/dining rooms, two lounges and bathrooms, with some of the bedrooms being ensuite.

The residential family centre was registered on 22 September 2020. The registered manager is currently undertaking her level 5 diploma in leadership and management.

Inspection dates: 27 and 28 July 2022

Overall experiences and progress of children and parents, taking into account	inadequate
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How well children and parents are helped and protected	inadequate
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The effectiveness of leaders and managers	inadequate
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There are serious and/or widespread failures that mean children and parents are not protected or their welfare is not promoted or safeguarded and/or the care and experiences of children and parents are poor.

Date of previous inspection: 8 December 2021

Overall judgement at last inspection: requires improvement to be good

Enforcement action since last inspection: none

Inspection judgements

Overall experiences and progress of children and parents: inadequate

There are serious and widespread failures regarding risk management, the quality of assessments and management oversight that, combined, do not promote the experiences and progress of children and their parents.

The quality of social work assessments produced by the centre to inform care planning for families is poor. They do not always accurately and competently reflect the parents' capacity to care for their children safely and effectively. There is no evidence of assessment plans being developed from the instruction of the court or local authority. This does not provide structure to the assessments that are completed. Furthermore, it does not keep parents informed of the nature of discussions that staff intend to complete with them.

Leaders and managers have failed to ensure the quality and accuracy of the midway and final parenting assessment reports for one family. These do not provide a detailed evaluation of the assessment work completed, or the ongoing risks for the family should they be rehabilitated into the community. Other midway reports are misleading, with contradictory dates of the assessment sessions. There are missed opportunities for staff to ensure that specific follow-up work is completed to address important issues with the parent.

The managers' lack of oversight and monitoring means that they have failed to ensure that the assessments are quality assured by a qualified social worker, to ensure that they reflect the work completed and provide a proper analysis of the work undertaken. Professionals involved with the families have raised concerns about the quality and content of some reports. One professional said, 'There is a remarkable difference to what they say they do to what they actually do.'

Children and parents have access to healthcare services to ensure that both the child's and parent's health needs are met. Where possible, the staff promote the parent's independence to administer their own medication. However, the poor management oversight of medication practices exposes vulnerable adults and children to the risk of harm. In one example, the manager was unaware what the medication had been prescribed for with respect to one parent. This gap could compromise the parenting assessment, because it does not consider the impact on the parent of taking the prescribed medication.

Families receive a warm welcome when they arrive at the centre. Parents receive essential shopping items based on their preferences, relieving them of the need to go out shopping immediately. Parents' engagement in key work and residents' meetings provide opportunities for them to express their wishes and feelings. Parents engage in activities, which helps them to socialise and build positive memories with their children.

The staff know the families and show a genuine interest in them. Parents speak positively about most staff and supportive relationships have developed. Not all parents say that their relationships are positive and have felt that some staff have acted unprofessionally. Parents have used the complaints procedure to ensure that their grievances are investigated. However, the manager has failed to maintain a written audit of all complaints.

The accommodation has deteriorated since the last inspection and does not always present as clean and homely throughout. Maintenance issues have not been addressed in a timely manner. This does not reflect the aspirational environment that the provider aims to achieve for children and parents.

How well children and parents are helped and protected: inadequate

Poor risk management fails to safeguard children and parents effectively. Leaders and managers have not completed written impact risk assessments to determine if they can meet each family's needs. This does not show how leaders and managers have reflected on each family's history, experiences and behaviours to mitigate the risks between them.

Leaders and managers have failed to ensure that risk assessments are updated regularly in line with the provider's own guidance. When risks have changed, or when additional family members have been admitted, records have not been updated. One family does not have a risk assessment, despite having lived at the centre for a few weeks. The strategies in the risk assessments do not make it explicitly clear for staff how to manage the risks. Information recorded in some children's risk assessments relate to the responsibilities of a parent and are not relevant to children.

Recruitment practice is not consistently safe. Not all references have been verified. When references are verified, managers have failed to explore whether there are any safeguarding concerns. There has been no exploration of the reason why a former employment or position ended. Interviews fail to explore staff's understanding of safeguarding practice.

One staff member has been employed without all of the required identification. This has been explored with the member of staff in supervision and continues to be requested several months after their start date. Not all staff involved in recruitment have completed training to ensure that their practice is safe and knowledge is current. These failures mean that children and parents could be exposed to adults who are not safe to work at the centre.

The failure to ensure that the premises are free from hazards exposes children and families to the risk of harm. Internal fire doors have been fitted to protect the occupants in the event of a fire. However, one of the bedroom fire doors does not close. This could present a risk of harm to families in the event of a fire. The ground-floor bathroom window can be opened fully because it has no window restrictors. This is an unassessed risk.

Staff are vigilant around families, and they have an improved awareness of safeguarding practices. Through further training and guidance, staff have been able to learn from incidents and respond appropriately to safeguarding concerns and accidents that involve children.

The effectiveness of leaders and managers: inadequate

The residential family centre has not been led and managed in a manner that is consistent with the aims outlined in its statement of purpose. An updated statement of purpose has not been sent to Ofsted since the last inspection.

The manager's knowledge of the relevant regulations, national minimum standards and the social care common inspection framework is limited. They have not implemented any formal monitoring systems. This seriously impacts on the manager's oversight of the service, provide reliable information, and address all of the previous requirements and recommendation. The monthly visits that are conducted by an independent person are weak. They do not support the provider to effect the changes necessary to improve the service.

The staff team has experienced instability in recent months. Social workers and other staff have changed several times, and staff have left and whistle-blown about the provider. While improvements have been made in recruiting new staff, they do not receive regular and quality supervision from a suitably qualified and experienced person. Some staff members have only received one or two supervisions during their probationary period since starting. One senior staff member has had no supervision. The new social worker has not had any supervision with someone who is suitably qualified, and there is no plan identified for them to receive clinical supervision.

The training gaps hinder staff development and capacity to fulfil their roles and responsibilities with competence and skill. This includes social work staff who are not trained in the use of the assessment tools that the centre uses with families.

Staff speak in positive terms about working with the families and for the provider. They understand the importance of balancing professional boundaries and developing relationships with families.

The quality of service and communication has received mixed views from professionals. Some professionals have raised their concerns regarding the quality of the assessments and communication, while others were overwhelmingly positive.

The provider has addressed previous recommendations about including parents' comments in the key work completed with them, and implementing a policy about family members working at the centre.

A restriction of accommodation notice, and two compliance notices, have been issued to the provider in response to the failures highlighted during this inspection. This prevents any further families from being admitted to the home.

What does the residential family centre 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, Residential Family Centre Regulations 2002 and the national minimum standards. The registered person(s) must comply within the given timescales.

Requirement	Due date
The registered person shall— keep under review and where appropriate revise the statement of purpose and resident's guide; and notify the Commission within 28 days of any such revision. Subject to paragraph (6) the registered person shall ensure that the residential family centre is at all times conducted in a manner which is consistent with its statement of purpose. (Regulation 4 (a)(b)(5))	2 October 2022
*The registered provider and the registered manager shall, having regard to the size of the residential family centre, the statement of purpose, and the number and needs of the residents, carry on or manage the centre (as the case may be) with sufficient care, competence and skill. (Regulation 8 (1))	2 October 2022
*The registered person shall, before providing a family with accommodation in the residential family centre, or if that is not reasonably practicable, as soon as possible thereafter, draw up in consultation with the placing authority a written plan (in these Regulations referred to as "the placement plan") setting out, in particular— an assessment of the risks, if any, which a resident at the residential family centre may present to their own health, safety and welfare, or that of other residents or staff at the centre. 13A. Assessments The methods of assessment or monitoring must be capable of evaluating the parents' capacity to change.	2 October 2022

The registered person must ensure that conclusions or recommendations are made as a result of the assessment or monitoring and that— such conclusions or recommendations are objective and based on verifiable evidence; and the evidence on which they are based is capable of being presented in a manner that is clear, accessible and appropriate to the persons who will need to consider them. (Regulation 13 (1)(c) and 13A (3)(4)(a)(b))	
The registered person must ensure that a written record is made of any complaint or representation, the action taken in response, and the outcome of the investigation. (Regulation 20 (6))	2 October 2022
The registered person shall ensure that— the premises to be used as the residential family centre are of sound construction and kept in a good state of repair externally and internally; all parts of the residential family centre are kept clean and reasonably decorated. (Regulation 21 (2)(b)(c))	2 October 2022

* These requirements are subject to a compliance notice.

Information about this inspection

Inspectors have looked closely at the experiences and progress of children and parents using the 'Social care common inspection framework'. This inspection was carried out under the Care Standards Act 2000 to assess the effectiveness of the service, how it meets the core functions of the service as set out in legislation, and to consider how well it complies with the Residential Family Centre Regulations 2002 and the national minimum standards.

Residential family centre details

Unique reference number: 2580756

Registered provider: Oikos Family Centres Limited

Registered provider address: Office F06, First Floor, Dawson's House, Owlcotes Lane, Pudsey LS28 6PY

Responsible individual: Rehana Akbar

Registered manager: Zahida Parveen

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Inspectors

Jacqueline Malcolm, Social Care Inspector
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