



## **SW RM Forum 19.07.22**

### **Ofsted session with Paula Lahey and Michelle Oxley**

We sent your comments, questions and themes over to Michelle and Paula ahead of the day, and here are some notes taken from their feedback session;

#### **SCIFF updates**

- Interim to assurance with clear judgements
- Care and safety of children
- Effectiveness of care
- All RIs – extra assurance
- Vacant RMs – it is an offence to not register- can't delay. Leadership and Management is a limiting judgement.

Going to set a specific email address for Reg Inspectors – to be confirmed.

#### **Reg40s**

Succinct report – do not copy and paste incident report, ensure copy in social worker for child and others in home. Send without delay, may not include conclusion at that point but a follow up email should be sent with extra conclusive details – do not send a further Reg40. This should be sent to the allocated inspector, could also include Kerry Fell (Compliance Inspector).

#### **Reg44s**

Must confirm that children are safeguarded – noting your specific opinion. Be concerned if Independent Person is not consulting with children. Also be concerned if copy and pasting of similar reports. Keep to timescales – latest report to Ofsted asap.

#### **Reg45s**

Permission to make them shorter from Ofsted. Regulation tells you to review and evaluate the quality of care, along with opinions and feedback of the children. Should also review and evaluate actions for the development of the home.

Should be 4 or 5 pages max. Be more evaluating in what is good and what are you doing about it?



### **Timeliness of reports (Ofsted visits)**

The systems are pedantic however lately there has been a delay in proof reading.

First draft from Ofsted to Providers within 18 days, then 5 days for providers to respond. There is another 5 days for final copy and then Ofsted hold the report for 5 days to allow for complaint to be raised, if needed.

The whole cycle should be 30 days from visit to publishing.

### **Agency Staffing**

What would an agency staff member see in order to work with the child?

Some visits that Paula and Michelle conduct often found that files are massive. Should be what is pertinent for the agency staff member and others to see. Needs to include needs, care and any risks, all underpinning and then others documents, with more immediate first.

Perhaps an extracted set of documents for the agency staff members.

### **Education**

Young people should be in education as soon as they reach the home.

Review publication here - [Promoting the education of looked-after and previously looked-after children - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/publications/promoting-the-education-of-looked-after-and-previously-looked-after-children)

Homes should be working with local authority and virtual school head.

There were concerns expressed in the room on the day in regards to Devon. Michelle and Paula will make the necessary links to follow up.

### **Young Person's Bedrooms**

Lots of things not explicit in regs – what constitutes as acceptable?

There is a balance to be had here – the environment should not feel regimented, and staff not cleaning every day etc. Children should be involved in decoration and items within their rooms.

An example was shared of the 3 box method used for helping a child to clear their room etc. Using a box for must keep items, another box for unsure, and another box for can go, and then reviewing the unsure box first next time.



It is important that you explain to visiting inspectors any items that may appear at first glance as unusual to keep in a child's room, so that the inspector understands the reasoning for these items being kept, and the significance of these to the child.

Working creatively and practically to reach an expectation of clean and tidy, so that the child can build to the expectation of owning and looking after their room.

Michelle clarified that under SCIFF/guidance, an inspector is enabled to go into all areas of the home and would expect inspectors to look in all areas of children's home.

### **Smoking**

Michelle was clear that children do not smoke in the home.

Issue raised of vaping on the increase, and this is harder to monitor without noticeable smell, so children can do this in their rooms or overnight without staff realising. Also need to provide a good role model and staff should not be allowed to vape in or around the home.

Paula and Michelle suggested networking with each other to provide support strategies.

**dialogue** offer a smoking cessation training course, with excellent feedback of strategies currently working in the homes that this training has been delivered to. Please visit [www.dialogueltd.co.uk/smoking](http://www.dialogueltd.co.uk/smoking) to find full details and dates of next course.

### **Unaccompanied children**

These children are an unknown and homes need to work with professionals more broadly to assess risk – starting from zero. The risk assessments should be large and detailed to include the child's networks, regional affiliations and birth dates.

Blank canvas – use wide ranging strategies and reduce as building knowledge of the child, so these can become less restrictive.

