

Khin Family Services

Khin Family Services Ltd

Southlands Rest Home, 7 Linkfield Lane, Redhill RH1 1JF

Inspected under the social care common inspection framework

Information about this residential family centre

This service is privately owned and is registered to carry out residential parenting assessments for up to 10 families. Assessments are usually commissioned by a local authority or the court. At the time of this inspection, 10 families were using the service. Not all were being actively assessed as these assessments had ended and families were waiting to move on. The inspectors reviewed in full two families' records, sampled others and spoke with several other families.

The service and the manager registered with Ofsted in March 2022.

The service's first full inspection was carried out on 17 August 2022.

Inspection dates: 10 and 11 May 2023

Overall experiences and progress of children and parents, taking into account	requires improvement to be good
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How well children and parents are helped and protected	requires improvement to be good
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The effectiveness of leaders and managers	requires improvement to be good
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The centre is not yet delivering good assessments of parenting capacity and/or is not delivering good care and help. The weaknesses identified need to be addressed to fully support children's and parents' progress through the assessment process and to mitigate risk in the medium and long term. However, there are no serious or widespread failures that mean children's welfare is not safeguarded and promoted.

Date of last inspection: 17 August 2022

Overall judgement at last inspection: good

Enforcement action since last inspection:

A compliance notice was served on 28 February 2023 regarding the use of surveillance, following a monitoring visit on 21 February 2023. Part of this full inspection was to monitor the compliance notice.

Inspection judgements

Overall experiences and progress of children and parents: requires improvement to be good

Assessments are individualised to each family and the service is clear on its assessment responsibilities. It uses the letter of instruction provided by the court or the local authority to inform the assessment process. However, this information is not shared as well as it could be with parents. While placement planning meetings are held and minutes recorded, there was no evidence of parents being provided with placement plans that detail the assessment process. As a result, parents are not as informed as they could be about the aims and objectives of their assessment.

Assessment reports are clear, detailed and balanced. The reports detail parental capacity and outline the strengths and areas of concern. Assessment review meetings are held at regular intervals throughout the assessment, with detailed reports written for each review. However, parents' views of the report are not recorded to evidence that the report has been shared and understood by parents prior to the meeting. This is a missed opportunity to demonstrate how staff are working collaboratively with parents and preparing them for review meetings. Parents' views are gained in the meeting and are well documented.

Feedback provided to parents in between the review meetings is not well documented or provided in writing to parents. Staff reported that feedback is given to parents daily when needed. Six families were spoken to during the inspection; five reported that they did not always receive feedback from staff and some parents were unhappy with how some staff speak to them. This has a negative effect on how parents feel about being in the service.

Some parents said that they did not receive adequate information about the centre before they moved in. In addition, some parents felt frustrated about how time away from the centre is managed. Parents must plan their time out of the centre with staff in advance. Parents reported that it was not possible to go out with staff outside of these planned times due to staff not being readily available. One parent did not raise these concerns and was happy with their experience at the centre.

Staff understand the assessment framework and spoke positively about this. They reported that they gained knowledge from the training, which broadened their understanding of working with people with learning difficulties. Because of this, assessment staff are confident in their roles and expectations of the assessment process. One social worker said they have, 'A close working relationship with the staff' and that 'The social worker is instrumental in the progress the family is making.'

Staff facilitate regular residents' meetings. Parents can express their views and wishes at these meetings. Overall, staff act on parents' views relating to the facilities in the centre, such as suggestions for extra pushchair storage and more play

equipment in the garden. There is a 'you asked for' and 'we did' noticeboard to show how staff are implementing families' ideas. One parent said that the agency was 'really helpful and supportive', and that they find the one-to-one sessions helpful.

Families are supported to see other family members who are important to them. This is discussed at the initial planning meeting and included in the assessment to show how parents can be supported by wider family members.

Parents and children are provided with a range of items to support their time at the service. Parents and children receive a 'Journey through the centre' booklet at the end of their stay. This charts their time at the service and the progress that they have made. This is a particular strength of the service.

The service provides parenting groups that parents can access to learn new skills, play with their children and learn about different risks. However, some parents expressed frustration when a group is cancelled at the last minute or is late starting. Staff take families out on day trips to the farm and the funfair, which they enjoy. Parents were also involved in the anniversary celebrations of the service. Families can relax and socialise in the evening when their children have settled to bed.

How well children and parents are helped and protected: requires improvement to be good

Some risks are well managed by the service. There is a good procedure in place where 'notes of concern' are sent to responsible authorities. Any concerns are raised, discussed and explored with parents. This is done through direct work or discussions at the time of an incident. The centre notifies relevant bodies of any safeguarding incidents.

Where necessary, the service has engaged external agencies to support parents, for example mental health services to help parents who are struggling with this aspect of their health.

Parenting assessments identify risks and clear recommendations are made to inform the courts and local authorities of the progress made by parents or any concerns that remain. Recommendations are clear and concise.

Risk assessments outline risks that need to be assessed as part of the assessment process and how these will be reviewed and assessed throughout the assessment. Risk assessments are reviewed and updated following each assessment review meeting.

Some family rooms are not maintained to a high standard. Good standards of cleanliness and hygiene were not observed in two families' rooms. This was rectified at the time of the inspection by staff. However, the condition of the rooms was not conducive to children's good health, safety and development.

The inspectors found that closed circuit television (CCTV) used to monitor families is not being continually monitored by staff to ensure that they can respond immediately should a concern arise. A new policy has been implemented since the last inspection and staff understand the policies and procedure in place. However, the current practices do not align with the regulations and published guidance relating to the use of CCTV. Staff monitor and assess risk in other ways, including direct observations, direct work and two-hourly checks of families' rooms, once supervision levels have been agreed to be reduced. However, the two-hourly checks do not consistently take place.

The positioning of CCTV cameras in families' bedrooms remains intrusive and does not protect the privacy and dignity of parents. Cameras still cover the parents' bedroom, including their bed. There are no risk assessments detailing why this is necessary.

The inspectors identified health and safety hazards related to a fire extinguisher that was standing on the floor in the hallway rather than hanging on the wall, and some baby stairgates that were a trip hazard, with one not properly secured to the door. There were some upstairs windows without restrictors. This was identified as an action to be completed in the centre's health and safety risk assessment and should have been completed by 16 April 2023. Managers have not recognised or addressed these safety issues.

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

Leaders and managers show ambition for the service, and this is a strength. They have realistic expectations of what parents can achieve and ensure that they provide detailed assessments to placing authorities.

Leaders and managers understand the progress that families make. There is regular auditing and quality assurance processes. This ensures that progress is recognised. The manager carries out reviews of the service and provides these to Ofsted.

Parents know how to complain and have made complaints. These are not always responded to in line with the centre's complaints procedure. This does not give parents confidence in making complaints, with some parents feeling that, if they did complain, their complaint would not be dealt with.

Leaders and managers provide a supportive environment for staff. Staff spoke positively about the support that they receive. They receive regular supervision and value this process. The induction process is detailed and well received. The service provides a good range and level of training. This is made available to all staff. Team meetings also include an element of training, which the staff team spoke positively about.

There is a strategic plan in place to improve the services. Leaders and managers are committed to continued improvement. They have responded to the compliance

notice issued at the last inspection regarding the use of surveillance. However, this has not been fully addressed and met. A new compliance notice was issued on 19 May 2023 to address this.

Leaders and managers have positive relationships with a range of professionals. They actively challenge when the response from other services is not effective, for example, pressing a placing authority to provide an interpreter for a family, which would in turn help to support the assessment. This also meant that the family could fully engage in the assessment process, helping them to feel valued and respected.

Leaders and managers are committed to promoting equality and diversity. They recognise difference. They take time to find out about each family and what might work for them while living in the centre. The service ensures that religious festivals are celebrated.

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

Requirement	Due date
*Subject to paragraph (6) and any requirements for electronic monitoring imposed by a court under any enactment, the registered person must ensure that electronic or mechanical monitoring devices for the surveillance of residents are not used in a residential family centre, except for the purpose of— safeguarding their welfare, or that of other residents accommodated in the centre; or assessment or monitoring carried out under regulation. The registered person must ensure that any use of such devices is subject to the following conditions: its use is no more intrusive than necessary. The registered person must ensure that staff at the residential family centre are appropriately trained and understand the requirements imposed by this regulation before they use any such devices. (Regulation 21A (1)(b) (2)(b) (4)) This particularly refers to the use of CCTV in the centre.	4 August 2023
Subject to regulation 4(6), the registered person shall not use premises for the purposes of a residential family centre unless— the premises are suitable for the purpose of achieving the aims and objectives set out in the statement of purpose. The registered person shall ensure that—	30 July 2023

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 (1)(a) (2)(b)(c)) This particularly refers to the condition of family rooms.	
The registered person shall establish a procedure ("the complaints procedure") for considering complaints made to the registered person by a resident or a person acting on behalf of a resident. The registered person shall ensure that any complaint made under the complaints procedure is fully investigated. The registered person shall, within 28 days after the date on which the complaint is made, or such shorter period as may be reasonable in the circumstances, inform the person who made the complaint of the action (if any) that is to be taken. 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 (2) (5) (6))	30 July 2023
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— the facilities and services to be provided during the course of the placement; the objectives and intended outcome of the placement. The registered person shall keep under review and revise the placement plan as necessary. In preparing or reviewing the placement plan the registered person shall, so far as practicable—	30 July 2023

seek and take account of the views of the members of the family. The registered person shall supply a copy of the placement plan and any revision of it to the placing authority and to the parent within the family to which it relates. (Regulation 13 (1)(a)(b) (2) (3)(a) (4)) This particularly refers to ensuring that a placement plan is held on all families and that they are consulted about the reviews of these plans.	
The registered person shall ensure that the residential family centre is conducted so as to— promote and make proper provision for the health and welfare of residents. (Regulation 10 (2)(a)) This particularly relates to relationships with staff and families' wishes and feelings.	30 July 2023
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. (Regulation 21 (2)(b)) This particularly refers to ensuring that all recommendations made as a result of a health and safety assessment are responded to within stated timescales.	30 July 2023

* This requirement is subject to a compliance notice.

Recommendations

- The registered person should ensure that parents are encouraged to communicate their views, wishes and feelings on all aspects of their placement, assessment and support. Staff should take account of these views, wishes and feelings in the day-to-day running and development of the centre. (Residential Family Centre NMS 2.1)
- The registered person should ensure that the overall number, competence and deployment of staff, both as a staff group and on individual shifts, can fulfil the centre's statement of purpose and meet the individual needs of all the parents and children resident at the centre. (Residential Family Centre NMS 15.1)

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: 2660019

Registered provider: Khin Family Services Ltd

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Responsible individual: Daniella Bissember

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Inspectors

Vevene Muhammad, Social Care Inspector
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