

SC022448

Registered provider: Nugent Care

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This secure children's home is operated by a voluntary organisation and is approved by the Secretary of State to restrict children's liberty. The children's home can accommodate up to 12 children who are aged between 10 and 17. The home provides for children accommodated under section 25 of the Children Act 1989, who are placed by local authorities.

Admission of any child who is under 13 years of age requires the approval of the Secretary of State, under section 25 of the Children Act 1989.

The commissioning of health services in this home is the statutory responsibility of NHS England under the Health and Social Care Act 2012. Education is provided on-site in dedicated facilities.

This inspection has the purpose of informing the Secretary of State on the continuing suitability for this provision to operate as a secure children's home to restrict children's liberty.

Inspection dates: 20 to 22 November 2018

Overall experiences and progress of children and young people, taking into account **requires improvement to be good**

How well children and young people are helped and protected **requires improvement to be good**

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

Outcomes in education and related learning activities **Inadequate**

The children's home is not yet delivering good help and care for children and young people. However, there are no serious or widespread failures that result in their welfare

not being safeguarded or promoted.

Date of last inspection: 23 January 2018

Overall judgement at last inspection: Sustained effectiveness

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
23/01/2018	Interim	Sustained effectiveness
04/04/2017	Full	Good
01/11/2016	Interim	Sustained effectiveness
10/05/2016	Full	Requires improvement

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 quality and purpose of care standard is that children receive care from staff who—</p> <p>understand the children's home's overall aims and the outcomes it seeks to achieve for children; and</p> <p>use this understanding to deliver care that meets children's needs and supports them to fulfil their potential.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure that staff—</p> <p>understand and apply the home's statement of purpose. (Regulation 6(1)(a)(b)(2)(b)(i))</p> <p>Specifically, implement the home's recently developed improvement plan to ensure that staff are clear about their roles and responsibilities, and that they are given the right support to enable them to deliver a care and education curriculum that supports children to achieve their full potential.</p>	11/01/2019
<p>The education standard is that children make measurable progress towards achieving their educational potential and are helped to do so.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure that staff—</p> <p>help each child to achieve the child's education and training targets, as recorded in the child's relevant plans;</p> <p>support each child's learning and development, including helping the child to develop independent study skills and, where appropriate, helping the child to complete independent study;</p> <p>understand the barriers to learning that each child</p>	11/01/2019

<p>may face and take appropriate action to help the child to overcome any such barriers;</p> <p>help each child to understand the importance and value of education, learning, training and employment;</p> <p>promote opportunities for each child to learn informally;</p> <p>help each child to attend education or training in accordance with the expectations in the child's relevant plans. (Regulation 8 (1)(2)(a)(i)(ii)(iii)(iv)(v)(x))</p>	
<p>The positive relationships standard is that children are helped to develop, and to benefit from, relationships based on mutual respect and trust; and an understanding about acceptable behaviour.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure that staff—</p> <p>help each child to develop and practise skills to resolve conflicts positively and without harm to anyone; and</p> <p>understand and communicate to children that bullying is unacceptable; and</p> <p>have the skills to recognise incidents or indications of bullying and how to deal with them. (Regulation 11(a)(b) and (2)(a)(iv)(xii)(xiii))</p>	11/01/2019
<p>The protection of children standard is that children are protected from harm and enabled to keep themselves safe.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure that staff—</p> <p>manage relationships between children to prevent them from harming each other. (Regulation 12(1)(2)(a)(iii)(iv))</p>	11/01/2019
<p>The leadership and management standard is that the registered person enables, inspires and leads a culture in relation to the children's home that helps children aspire to fulfil their potential.</p> <p>In particular, the standard in paragraph (1) requires the registered person to—</p> <p>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</p>	11/01/2019

<p>purpose;</p> <p>ensure that the home's workforce provides continuity of care to each child;</p> <p>understand the impact that the quality of care provided in the home is having on the progress and experiences of each child and use this understanding to inform the development of the quality of care provided in the home;</p> <p>use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13 (1)(a)(2)(e)(f)(h))</p>	
<p>The registered person must ensure that the employment of any person on a temporary basis at the children's home does not prevent children from receiving such continuity of care as is reasonable to meet their needs. (Regulation 31(1))</p> <p>Specifically, ensure that that staffing is arranged in such a way so as to reduce the over-reliance on agency staff.</p>	11/01/2019
<p>The registered person must ensure that each employee completes an appropriate induction. (Regulation 33(1)(a))</p> <p>Specifically, ensure that agency staff have the right skills, experience and knowledge prior to them working with children directly.</p>	11/01/2019
<p>The registered person must prepare and implement a policy which is intended to safeguard children accommodated in the children's home from abuse or neglect. (Regulation 34(1)(a))</p> <p>Specifically, ensure that associated internal operational policies and procedures are regularly reviewed and implemented.</p>	11/01/2019
<p>The registered person must ensure that within 24 hours of the use of a measure of control, discipline or restraint in relation to a child in the home, a record is made which includes the name of the child; details of the child's behaviour leading to the use of the measure; the date, time and location of the use of the measure; a description of the measure and its duration; details of any methods used or steps taken to avoid the need to use the measure; the name of the person who used the measure ("the user"), and of any other person present when the measure was</p>	11/01/2019

used; the effectiveness and any consequences of the use of the measure; and a description of any injury to the child or any other person, and any medical treatment administered, as a result of the measure. (Regulation 35(a)(i-viii))	
The registered person must ensure that within 48 hours of the use of the measure, the registered person, or a person who is authorised by the registered person to do so ("the authorised person") has spoken to the user about the measure; and has signed the record to confirm it is accurate. (Regulation 35(b)(i)(ii))	11/01/2019
The registered person must ensure that a record is made of any complaint, the action taken in response, and the outcome of any investigation. (Regulation 39(3))	11/01/2019

Recommendations

- For children's homes to be nurturing and supportive environments that meet the needs of their children, they will in most cases be homely. ('Guide to the children's homes regulations including the quality standards', page 15, paragraph 3.7)

Specifically, staff should make every effort to personalise communal areas to make the home appear more welcoming and child friendly.

- Children's bedrooms should only be searched if the child has been informed or asked for their permission. Immediate searching may be necessary where there are reasonable grounds for believing that there is a risk to the child's or another person's safety or well-being. ('Guide to the children's homes regulations including the quality standards', page 16, paragraph 3.20)

Specifically, ensure that the threshold for searching is met and that the search is carried out in a manner that is respectful of children's belongings.

- The home must aim to support full-time attendance at school unless the child's relevant plan indicates this is not in their best interest. ('Guide to the children's homes regulations including the quality standards', page 28, paragraph 5.14)

Specifically, ensure that the daily routine is organised in a way that encourages and supports children to attend and engage in school.

- The registered person should ensure that children are offered a wide range of activities both inside and outside of the home (where appropriate) and are encouraged to participate in those activities. ('Guide to the children's homes regulations including the quality standards', page 31, paragraph 6.5)

Specifically, review how the activity programmes are planned, organised and

delivered to children.

- Staff should work to make the children's home an environment that supports children's physical, mental and emotional health. ('Guide to the children's homes regulations including the quality standards', page 33, paragraph 7.3)

Specifically, ensure that staff complete regular infection control audits of the medical room.

- Any sanctions used to address poor behaviour are restorative in nature, to help children recognise the impact of their behaviour on themselves, other children, and the staff caring for them. ('Guide to the children's homes regulations including the quality standards', page 46, paragraph 9.38)

Specifically, ensure that sanctions are proportionate to the misdemeanour and that they serve as an opportunity for children to learn from their behaviour.

- A record should be made and kept of all uses of single separation in secure children's homes (regulation 17 of The Children (Secure Accommodation) Regulations 1991). Children should be offered the opportunity to read and add a comment to the record of their separation. ('Guide to the children's homes regulations including the quality standards', page 50, paragraph 9.65)

Specifically, ensure that single separation records and records of managing away demonstrate the rationale for, and the authorisation of, the continued use of this measure of control, and what action staff have taken to reintegrate the child back into the group.

- The registered person should support staff to be ambitious for every child in the home and to gain skills and experience that enable them to actively support each child to achieve their potential. ('Guide to the children's homes regulations including the quality standards', page 52, paragraph 10.5).

Specifically, ensure that all staff complete or refresh mandatory and role-specific training.

- Ensure that the ethos of the home supports each child to learn. ('Guide to the children's homes regulations including the quality standards', page 29, paragraph 5.18)

Specifically, ensure that all staff value the importance of education, have high expectations of what children can achieve, and set appropriate boundaries that motivate children to attend education and to want to learn.

- Ensure that the ethos of the home supports each child to learn. ('Guide to the children's homes regulations including the quality standards', page 29, paragraph 5.18)

Specifically, undertake an urgent review of the education provision to ensure that the curriculum offered meets the needs, interests and abilities of children and helps them to develop knowledge, skills and behaviours that improve their life chances.

- Ensure that the ethos of the home supports each child to learn. ('Guide to the children's homes regulations including the quality standards', page 29, paragraph

5.18)

Specifically, improve the quality of teaching, learning and assessment by ensuring that: lessons and activities are stimulating, well structured and engage all children so that they make good progress; the assessment of children's starting points is rigorous and accurate to enable children to follow individual learning programmes that are challenging, and help them to make the progress of which they are capable; oral and written feedback is constructive and helps children to understand what they have done well and how they can improve their work even further; and, assessment practices identify and correct spelling and grammatical errors and ensure that the work that children submit is commensurate with their abilities.

- Ensure that the ethos of the home supports each child to learn. ('Guide to the children's homes regulations including the quality standards', page 29, paragraph 5.18)

Specifically, improve the working relationship between education and care staff to ensure that children have a continuum of learning that is supported effectively on the residential units both outside education time and when they are justifiably unable to attend their lessons.

- Ensure that the ethos of the home supports each child to learn. ('Guide to the children's homes regulations including the quality standards', page 29, paragraph 5.18)

Specifically, implement rigorous quality-assurance and quality-improvement processes that eradicate weaknesses rapidly and ensure a high-quality provision.

Inspection judgements

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

A good proportion of the children that have spent time in this home since the last full inspection have made reasonable progress, relative to their starting point and time in placement. Notably, most children told inspectors that they were now much more aware of their vulnerabilities because of the work that staff have completed with them. One child said, 'When I first came here I couldn't see that what I was doing was wrong. Now I can't believe I was doing the things that I was.' Children confirmed that, because of the support from the core staff, and the relationships that they have developed, they now feel much more prepared to manage difficult situations in the future and, therefore, avoid replicating previous negative behaviours.

However, the overall levels of care have dipped since the last inspection. This decline is because staffing arrangements have not always promoted continuity of care. For example, there have been times when there have been insufficient numbers of permanent staff and an over-reliance on agency workers. Some agency staff have, in the absence of support from experienced

colleagues, at times found it difficult to manage the complex and diverse needs of this challenging group of children. As a result, good routines and expectations are not always consistent and care practices have become risk-averse, with children often being managed separately from other children when behaviours escalate. The unintended consequence of this approach is that some children are dictating their care. For example, inspectors watched several children escalate their behaviour to distract from the task in hand and to unduly influence which staff member works with them.

Children's needs, behaviour, risks and vulnerabilities are assessed and considered at the point of admission. This information is captured in detailed plans which benefit from the input of mental health practitioners. The plans are well thought out and are developed with multi-agency input. However, for some children the implementation of the plans is inconsistent. For example, staff may not deliver planned or targeted work because of the need to respond to immediate presenting behaviours. This shortfall is acknowledged in several forums, such as 'formulation meetings' in which children's emotional health and well-being are routinely discussed. However, the impact of missing these planned opportunities to engage the children in purposeful direct work is not always evaluated as thoroughly as it should be, or fully understood by managers.

Children's health and well-being assessments are completed within the required timescales. They are effective in promptly identifying children's emerging needs to inform their ongoing healthcare. Children access an appropriate range of primary care services at the home, without delay. The medical room provides a good resource for children to have their medical needs addressed in private. However, the full infection control audit of the room is overdue. The home's medicine management is good, and staff monitor children with specific health needs closely.

Health staff provide a very good level of physical and mental healthcare to children. Children are supported to access external services without delay for diagnosis and treatment. The multi-disciplinary mental health team provides good psychosocial and emotional well-being support to all children. Therefore, children make good progress in all areas of their health and feel well supported by the health staff.

Relationships between children and the permanent core staff are a notable strength. These staff are skilled at developing unconditional, positive and supportive relationships with the children in their care. Children are positive about these relationships and feel that they have key adults who they can talk to when necessary. A few children spoke about how specific staff had helped them to understand the reasons why they are in a secure home, and how the staff's advice and support is helping them to plan for their release. For example, one child had written to staff to share that she was very grateful to them for helping her to understand her circumstances better and, as a result, she now felt more confident about her future.

Children confirm that staff listen to them and take what they have to say

seriously. Consultation and representation are further strengthened by children having regular access to an independent advocate who visits the home. Children know how to complain and are confident in the use of the home's complaints process. They are provided with written confirmation that their complaint has been received, as well as correspondence that informs them of the outcome of any investigation. However, the home's complaints records are insufficiently detailed, and several do not include reference to the actions that have been taken to investigate the matter or the rationale for the outcome. In some instances, the outcomes were being logged inappropriately, such as in a daily log book. This means that, in too many cases, there is limited clarity about the actual outcome of the complaint.

Children say that they enjoy the activities on offer, but that there are times when they are bored. This is because the range of activities is sometimes limited due to staffing arrangements whereby the more experienced staff are called away to manage incidents. Consequently, activities become repetitive and are not sufficiently broad to enable some children to pursue their hobbies and interests.

Children are appropriately prepared and supported to leave the home. Staff make good purposeful use of mobility time to enable children to spend time in the community, which includes visits to potential placements where possible. The staff work in partnership with placing authorities to implement transition plans effectively. Managers and staff are good at presenting appropriate levels of challenge to placing authorities when placements are not identified promptly.

Staff, at times, are finding it difficult to maintain a balance between a homely and risk-free home. For example, anything freestanding, such as pictures hung on the wall, have been temporarily removed and curtains have been taken down in communal areas. This is because of the potential risk that these items may pose to some children. However, staff have been creative and replaced these items with alternatives, such as soft, colourful sofa throws, and they are looking to involve children in painting murals on the walls to create a more personalised environment.

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

Children say that they feel safe and cared for in the home. Positive relationships between staff and children enhance children's feelings of safety. Staff use these relationships well to help children to reflect on their previous experiences, which helps the children to plan and make positive life choices. One child said, 'I'm safe here, and I'm learning how to be safe for when I'm not here.'

Relationships between the children are not always positive. When staff note in daily records that there has been confrontation between children, they do not always record these behaviours as bullying when this would be relevant.

Although the behaviour is challenged by staff, they do not consistently help children to understand the effect that bullying has on others, nor do they implement effective strategies consistently to reduce bullying behaviour.

Staff work with the health team to devise comprehensive individual behaviour management plans and risk assessments. These plans highlight each child's challenging behaviours and vulnerabilities and the strategies to follow to respond and support children when they may be upset. However, the practice of staff managing difficult situations by separating the children does not provide opportunities for children to reflect on their behaviour and rebuild relationships. This approach also limits the extent to which children are given the opportunity to develop the necessary skills to resolve conflicts positively.

The use of 'enforced single separation' following incidents of extreme violence or aggression is appropriate. However, records of enforced single separation events do not always demonstrate when or how staff try to reintegrate children back into the group. The records do not consistently show that managers have authorised the continued use of this measure of control, or that children's behaviours deem this action necessary to promote their safety or the safety of others.

The permanent staff regularly refresh their physical restraint training. There has been an increase in the use of physical restraint over recent months. Most of these interventions relate to preventing children from harming themselves and are proportionate responses given the presenting risks. Some agency staff complete specific training sessions regarding the removal of ligatures, but this is not the case for all agency staff. Although this shortfall is potentially detrimental to children's safety, this risk is reduced because the permanent, experienced staff are suitably trained and are assigned to work with those children with the highest risk and always take the lead in responding to these situations. This approach is planned and managed effectively on a day-to-day basis.

Managers use closed-circuit television (CCTV) to review all incidents of physical restraint. Two of the incidents reviewed by inspectors, although lawful, did not demonstrate best practice. For example, there were occasions when staff did not use the home's chosen approved techniques. Managers were able to explain the rationale for not doing so and no children were reportedly harmed in the process. Managers and staff do not always record full information regarding the detail and decision-making for restraints and other measures of control. This means that they are unable to capture the level of detail that would be expected to evidence lessons learned. This limits the registered manager's ability to thoroughly scrutinise these incidents to improve practice continually, or to be able to identify any patterns or trends in the use of the measures.

In addition to a programme of incentives, staff use sanctions to help children to learn how to manage their behaviour. While some sanctions for children are well considered by staff, others are not restorative or relevant to the behaviour displayed. Consequently, the use of some sanctions does not help

children to develop socially aware behaviours or to recognise the effect that their actions may have on others.

Personal searches of children are proportionate to children's known risks and their individual circumstances. Staff complete these with sensitivity and thoughtfulness, thus protecting children's dignity. Staff do not apply this positive ethos when searching children's bedrooms. This activity is custom and practice in the home. These searches are not reflective of any known or perceived risks that may affect children's safety and are overly intrusive and are not protective of children's privacy without good reason.

Senior managers work in partnership with safeguarding agencies and referrals of any suspicions of abuse or harm are shared by the home. In these circumstances, the registered manager maintains comprehensive records. These include steps taken to support and reassure children. This transparent approach to the management of allegations promotes children's safety and welfare.

Managers recently reviewed the safeguarding policy. The policy is now a comprehensive document that links clearly to statutory guidance and legislation. Some associated and supplementary internal procedures are now out of date. For example, the 'children's risk assessment' policy no longer reflects practice in the home. However, this is offset by the introduction of formulation meetings that are specific to the review of risk management practice. This means that staff are guided by risk assessments that are up to date and provide good direction.

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

Shortfalls in staffing have impacted negatively on the overall quality of care on offer in this home. Staff absence and the difficulties in recruiting and retaining staff have resulted in an over-reliance on agency workers. This means that, at times, the permanent core staff have been extremely stretched. To their credit, the staff remain motivated and committed to caring for children. However, their ability to do this in a well-thought-out, planned and consistent manner is sometimes compromised. As a result, children do not always realise their full potential, particularly in relation to their education.

When agency staff have been used previously, it has not always been done in a thoughtful and planned manner. The need to fill gaps on the rota had often taken precedence over the thorough assessment of the agency staff's skills and experience. It had not been custom and practice to ensure that agency staff received a suitable induction prior to working in the home. Positively, a service level agreement is now in place with several agencies. The agreement outlines the requisite knowledge and set of skills for agency workers. This agreement has not yet been in place for a sufficient period to measure its impact. In addition, the organisation is continuing to voluntarily reduce the overall number of children that are accommodated. This is allowing for a

period of consolidation and the opportunity to make planned improvements to the home as well as offering support to staff.

Overall, staff report feeling supported by managers. New permanent members of staff say that their induction prepares them well for their role and that they receive a combination of professional and clinical supervision regularly. There is a wide range of training on offer to staff. However, due to the demands when on shift, there does not appear to be time for staff to complete all of this training. Therefore, this impacts on staff's continuing professional development.

The standard of internal monitoring and quality assurance is variable; for example, managers have failed to identify and address shortfalls relating to the review of restraint practice, behaviour management records, complaints records and out-of-date policies. Conversely, the registered manager's recent regulation 45 review report was very detailed and accurately captured many of the shortfalls identified at this inspection, including a series of actions to address them. This has helped leaders and managers to prioritise what needs to be done to improve children's experiences and outcomes and this has resulted in some action already having been undertaken. For example, procedures for recruiting staff have been strengthened and this has resulted in the appointment of new staff, including an increase in the night time staffing levels. This is especially helpful as the night time is a time when children can feel at their most vulnerable and need more emotional support.

A consultation forum has been set up to aid communication between managers and staff and to devise an incentive scheme for improved performance. This has created the opportunity for staff to contribute to and influence future planning and change, for example how rotas can be improved to ensure that continuity of care is achieved for the children. Changes have already been made with the recent redeployment of the two deputy managers, who are now working directly on the residential units. This strengthens the support for staff and the direct management oversight of day-to-day practice.

Senior managers acknowledge that they have previously been slow at times to respond to emerging shortfalls. They recognise that this has contributed to an unforeseen change in the ethos of care, which then became reactive and risk-averse. It is reassuring that managers had begun to formulate and implement a pragmatic longer-term improvement plan prior to the inspection. This plan, which is endorsed by the responsible individual and the organisation, clearly identifies areas for development and realistic strategies to address the identified shortfalls. For example, this includes putting a hold on admissions, scaling down to one unit, and investing time in up-skilling staff through further training and support. This plan has to be seen through to its conclusion to bring about sustained improvement.

Outcomes in education and related learning activities: inadequate

The quality and outcomes for education and related learning activities in this secure children's home are inadequate.

Leaders and managers do not prioritise education at the home. Staff do not have high enough expectations of what children can achieve. They too readily allow children to dictate what they will and will not do in lessons and whether they attend lessons at all. As a result, attendance is sporadic and poor.

The curriculum offer is too narrow to allow children to develop the knowledge, skills and behaviours that will help them progress to positive next steps in education, training or employment. It is too focused on an award or certificate in personal effectiveness and does not provide a breadth and depth of education that children need. Learning programmes do not develop children's self-esteem so that they have high aspirations for themselves.

Teachers do not plan lessons effectively to meet the individual needs, interests and abilities of children. Learning activities are not stimulating and do not help children to make the progress and achieve qualifications that will help them progress successfully to their next steps.

The assessment of children's starting points is not sufficiently rigorous. Children do not take these assessments seriously enough and a few have not taken them at all. Managers and teachers do not use additional information about the children such as education, health and care plans to plan learning. Teachers do not set appropriate and challenging targets for children based on their starting points that will help them to achieve their full potential.

Children do not demonstrate sufficient respect for staff. Teaching staff do not manage children's challenging behaviour and use of inappropriate language effectively to set clear boundaries and ensure that children participate fully in learning.

Leaders, managers and teachers do not have a clear oversight of the progress that children make over time. Recording and monitoring systems are weak and show only the units and skills that children achieve towards their award or certificate.

Teaching staff do not challenge children to produce work of a sufficiently high standard. Teachers do not correct spelling errors in children's work. Feedback is mostly informal and oral. It does not provide children with an understanding of their progress over time. Written feedback too often gives praise for the completion of basic tasks.

Leaders and managers have not implemented appropriate quality-assurance arrangements to ensure that they provide children with a comprehensive and high-quality education. The external education adviser recommended that managers produce a position statement and an action plan. However, these documents are too descriptive and do not evaluate the provision sufficiently to enable leaders and managers to identify its strengths and weaknesses accurately.

Performance management processes, including the quality of appraisals, require further development to ensure that they are effective in raising standards across the provision. Staff development is restricted to mandatory requirements and does not help staff to improve their teaching practices or gain further knowledge to support the development of these children.

Staff across the centre do not work together effectively to promote the importance of education. Care staff do not ensure that they support children's learning when they are on the residential units. Too often, when children remove themselves from lessons, they return to their unit and are allowed to watch television. Children do not complete the work that teachers set for them to do outside lessons.

Impartial careers information, advice and guidance is ineffective. Records of careers meetings list descriptions of proposed job roles and how the child can gain that role, for example by attending a vocational college. The records do not take into account children's current levels of education or provide individualised plans linked to a vibrant curriculum at the home that will help to raise children's aspirations for successful futures.

In 2017/18, almost all children achieved functional skills qualifications in English and mathematics at entry levels 1, 2 and 3.

Information about this inspection

Inspectors have looked closely at the experiences and progress of children and young people. Inspectors considered the quality of work and the differences made to the lives of children and young people. They watched how professional staff work with children and young people and each other and discussed the effectiveness of help and care provided. Wherever possible, they talked to children and 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 whom it is trying to help, protect and look after.

For inspections of secure children's homes, Ofsted is assisted by an inspector from the Care Quality Commission (CQC) in Ofsted's evaluation of health services provided for children (authorised by HMCI under section 31 of the Care Standards Act 2000).

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 Children's Homes (England) Regulations 2015 and the 'Guide to the children's homes regulations including the quality standards'.

Children's home details

Unique reference number: SC022448

Provision sub-type: Secure Unit

Registered provider: Nugent Care

Registered provider address: 99 Edge Lane, Edge Hill, Liverpool L7 2PE

Responsible individual: Gary Thistlewood

Registered manager: Marie Higgins

Inspectors

Paul Scott, social care inspector

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Andrea Crosby-Josephs, health & justice inspector, Care Quality Commission

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