

1247491

Registered provider: Keys Group Progressive Care & Education Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

The home is registered to provide care and accommodation for up to four children who may have learning disabilities. The home is privately owned and managed.

The manager has been registered with Ofsted since 31 January 2019.

Inspection dates: 30 to 31 July 2019

Overall experiences and progress of

children and young people, taking into

account

How well children and young people are

helped and protected

good

good

The effectiveness of leaders and managers requires improvement to be good

The children's home provides effective services that meet the requirements for good.

Date of last inspection: 29 November 2018

Overall judgement at last inspection: good

Enforcement action since last inspection: none

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Recent inspection history

| Inspection date | Inspection type | Inspection judgement |
|-----------------|-----------------|-------------------------|
| 29/11/2018 | Full | Good |
| 14/03/2018 | Interim | Improved effectiveness |
| 31/10/2017 | Full | Good |
| 11/01/2017 | Interim | Sustained 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 |
|---|------------|
| In order to meet the leadership and management standard, the provider should— | 30/08/2019 |
| ensure that the staff have the experience, qualifications and skills to meet the needs of each child; | |
| ensure that staff 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; | |
| use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13 $(2)(c)(f)(g)$) | |
| The registered person must ensure that all employees receive practice-related supervision. (Regulation 33(4)(b)) | 30/08/2019 |
| The registered person must complete a review of the quality of care provided for children ("a quality of care review") at least once every 6 months. | 30/08/2019 |
| The registered person must—supply to HMCI a copy of the quality of care review report within 28 days of the date on which the quality of care review is completed; | |
| and make a copy of the quality of care review report available on request to a placing authority, if the placing authority is not the parent of a child accommodated in the home. (Regulation $45(1)(4)(a)(b)$) | |

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Recommendations

Staff should be familiar with the home's policies on record keeping and understand the importance of careful, objective and clear recording. Staff should record information on individual children in a non-stigmatising way that distinguishes between fact, opinion and third-party information. Information about the child must always be recorded in a way that will be helpful to the child. ('Guide to the children's home regulations including the quality standards', page 62, paragraph 14.4)

Inspection judgements

Overall experiences and progress of children and young people: good

Young people make very good progress because of their good-quality, nurturing relationships with staff. Staff are skilled and adept at building relationships with young people. Interactions observed during the inspection were relaxed and in the young person's preferred communication style.

Staff offer young people a wide range of activities to explore, experience and integrate within the local community, for example trips to the local park, amusement parks and local restaurants. Staff are creative and confident, and provide opportunities that young people may not previously have had. The staff's ethos is that risk assessments should be enabling rather than disabling. Consequently, young people receive support to undertake new and exciting experiences.

Progress for young people is evident, including the development of their confidence in spending time with their parents. One parent said, 'My son didn't want to spend time with me. Now he phones me every day and I go out with him and staff. I am so proud of the progress he has made.'

Staff have registered young people with a range of external services, including GPs, opticians and dentists. They proactively liaise with external colleagues to review each young person's physical health and matters of well-being. Recorded health plans help the team to keep up to date with individual young people's current issues. This prioritises their unique needs and results in them making significant progress in meeting developmental milestones, for example in self-care.

There continues to be good education provision in place for all young people. Key workers attend and contribute to review meetings so that they are aware of any changes. Communication between the home and the school is very good, and information regarding young people's anxieties, behaviours and general moods is shared to ensure that there is a consistent level of care in both settings.



How well children and young people are helped and protected: good

Young people live in a safe home, where they are protected from harm. Staff understand good safeguarding practice, including knowing to whom they need to report concerns.

Individual placement plans, behaviour plans, risk assessments and health plans are of a good quality. Documentation clearly describes the work undertaken towards meeting health, behavioural and care needs. Any potential risks are swiftly identified, and plans are updated.

Young people do not go missing from the home. This is because of the high staffing levels in place, and because staff have a very good understanding of the needs and vulnerabilities of each young person. Staff are clear about the action to take should a child go missing.

Young people are observed to be happy, relaxed and settled in their home. One young person told the inspector that the home was 'a nice place' and that staff were 'really good fun'. Observations of staff interaction and supervision of young people indicated that staff were very alert to any potential risks to young people's safety. The close supervision and high staffing ratios do not impact on the domestic, homely environment.

Risk assessments and care plans are reviewed to reflect the changing needs of young people. Young people are supported by staff to manage their behaviour with individual risk assessments and behaviour support plans detailing triggers, behaviours, strategies for de-escalation and intervention. Staff are calm and consistent in their approach as they support young people in times of high anxiety. Young people have an awareness of the boundaries and have a good understanding of their routines, knowing what is expected of them. The home does not use sanctions as this would have little effect due to the cognitive level of understanding of the young people.

Staff follow the home's policy and procedure when administering medication. Staff undertake training and are observed and assessed during administration to ensure that they comply with the procedure. Medication is stored as required, with regular review and audit.

Staff recruitment is safe. All staff are carefully vetted before starting work in the home. This ensures that young people are cared for by people who are assessed as being safe.

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

Following the last inspection, the registered manager was absent from work for a significant period. Although temporary management arrangements were put in place, the management oversight of the home declined. Senior managers were alert to the shortfalls, and instigated protocols to improve the management of the home. However, despite substantial improvements, the process to implement the management audits is



ongoing.

The monitoring of incidents by the registered manager lacks rigour and evaluation. Staff do not always complete behaviour management records, including records relating to physical interventions, to an acceptable standard. Managers have failed to note that these documents do not always specify that de-briefs have taken place. To date, these weaknesses have not had an impact on the safety and welfare of young people, but they have the potential to do so if not rectified. Furthermore, the manager has not undertaken a review of the quality of care within the required timeframe. This means that opportunities to identify strengths and weaknesses are being missed.

Staff feel valued and supported by the interim management team. However, in the absence of the registered manager, some staff have not received regular supervision in recent months. The lack of regular supervision does not enable staff to reflect on their practice and identify any further training that they need to support their continued professional development.

The team morale is positive. It is due to the motivated and confident staff team that firm boundaries for young people are being instilled. Staff speak in complimentary terms about the young people and express positive regard towards them. Staff feel supported by the interim manager and senior managers and find working at the home a pleasurable experience. One staff member said, 'We are like a family here. We look out for one another. It's a good place to work.'

Professionals and family members speak positively about the quality of care provided by the staff and the quality of the communication shared with them. A social worker commented, 'Communication between the staff, parents and I is excellent.'

Permanent staff members are trained to a high level to meet the needs of the young people. However, agency staff have not been trained in the provider's approved behaviour management strategies.

The interim manager and the director of residential care fully acknowledge all shortfalls raised at this inspection. They recognise how these shortfalls impact on the day-to-day running of the home and the outcomes for young people. They show capacity and enthusiasm to make all the required improvements, including introducing more robust systems to ensure that young people's care planning, safety and well-being are prioritised.



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.

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: 1247491

Provision sub-type: Children's home

Registered provider: Keys Group Progressive Care & Education Limited

Registered provider address: Maybrook House, 2nd Floor, Queensway, Halesowen,

Worcestershire B63 4AH

Responsible individual: Melanie McGuinness

Registered manager: Richard Hughes

Inspector

Elaine Allison, social care inspector



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