

1229534

# Assurance visit

## Information about this children's home

This privately owned and run home is registered to provide care and accommodation for up to eight children who may have emotional and behavioural difficulties.

A new manager has been in post since March 2020 and was approved by Ofsted for registration in November 2020.

**Visit dates:** 21 to 22 December 2020

**Previous inspection date:** 6 August 2019

**Previous inspection judgement:** Good

## Information about this visit

Due to COVID-19 (coronavirus), Ofsted suspended all routine inspections in March 2020. As part of a phased return to routine inspection, we are undertaking assurance visits to children's social care services that are inspected under the social care common inspection framework (SCCIF).

At these visits, inspectors evaluate the extent to which:

- children are well cared for
- children are safe
- leaders and managers are exercising strong leadership.

This visit was carried out under the Care Standards Act 2000, following the published guidance for assurance visits.

Her Majesty's Chief Inspector of Education, Children's Services and Skills is leading Ofsted's work into how England's social care system has delivered child-centred practice and care within the context of the restrictions placed on society during the COVID-19 pandemic.

## Findings from the visit

We did not identify any serious or widespread concerns in relation to the care or protection of children at this assurance visit.

## **The care of children**

Children told the inspectors that they feel well cared for by the staff team and that the positive relationships they have with staff mean they always have someone to talk to. Social workers said that children have trusted relationships with staff, which allows staff to support children with any challenges and helps them to make progress.

Children enjoy regular attendance at school and the staff team works collaboratively with schools to ensure that children are helped to resolve any difficulties they may face. Children have engaged in a range of creative activities during the pandemic and family contact has been promoted regularly using technology.

Children are in good health. The home liaises with agencies to support and meet young people's health needs. This has included working with children's psychologists and nutritionists. Regularly updated health plans for children and proactive multi-agency work have been key in helping children to maintain healthy lifestyles and balanced diets.

For children who have moved on from the home, clear transition plans were in place and reflected the voice of the child. Working with multi-agencies, including foster carers and placing authorities, to ensure positive and well-planned transitions for children, is a strength of the staff team.

Workshops and house meetings engage children in productive pieces of work to educate them about key issues that can affect them, such as anti-bullying and racism. Planned key-work sessions have helped children to regulate their emotions and understand peer relationships. As a result, there has been a reduction in the number of sanctions used, and the team is focused on restorative work to help children make positive choices.

The home environment is warm and welcoming throughout, and children are encouraged to personalise their bedrooms to reflect their own preferences and hobbies. Children's bathrooms require attention to décor, to make them homely.

## **The safety of children**

Children feel safe, and professionals report that children are safe living at the home. Children told the inspectors that they know how to make a complaint and feel that the manager would always take action to resolve their concerns.

The number of allegations made by children has reduced. All allegations have been investigated and children, placing authorities and designated officers have been updated appropriately. The Head of Therapeutic Parenting (HTP) and the registered manager are now responsible for overseeing allegation management and safeguarding. This enables the manager to have a better oversight of staff practice and any improvements she needs to make.

Staff implement clear and consistent daily routines for children. Staff demonstrate that they understand risks for children and help children to manage their behaviours more effectively. As a result, there has been a reduction in the use of restraint. Missing-from-home incidents are not a high risk for children living at the home. Where children have gone missing from home, staff have followed the protocols and records are comprehensive.

The behaviour management policy requires revising, to establish safe and effective procedures for staff to follow when children are restrained upstairs. This should also consider that there are no hazards in the home environment which compromise staff's ability to safely restrain children.

Risk assessments do not always contain up-to-date chronologies or identify strategies that staff should follow to enable them to safeguard children in relation to allegation management and self-harm. For example, where a child is at risk of self-harm, risk assessments do not identify that staff should complete frequent welfare checks and room searches. This is a previous recommendation that has not been met and so it has been escalated to a requirement.

In addition, risk assessments detailing the safe management of COVID-19 contain contradictory information relating to guidance when children are required to self-isolate. They also do not focus on the impact of the pandemic on individual children. The manager should ensure that they have full oversight of all risk assessments, prior to signing them off.

### **Leaders and managers**

The registered manager is dedicated to her role. Her focus is the children's well-being, safety and happiness. A recent restructure to the senior leadership team has meant that senior managers are more visible in the home and staff report that they feel comfortable approaching them for support. Some staff members have left the home. This has been carefully managed to ensure consistency of care for the children.

Staff told the inspectors that they feel supported by the manager and listened to. As a result, the staff work together as a strong team. They receive regular practice-related supervision. Staff morale remains positive despite the impact of the pandemic, which saw the home go into isolation following several children and staff testing positive for COVID-19.

Team meetings are thorough. They address key issues in the home and lessons learned from incidents to make improvements to staff practice. The manager has recently revisited whistle-blowing and safeguarding policies with staff. Children's needs, risks and evaluations of their behaviour are discussed at length in the meetings, with input from the clinical team.

The system in place to notify staff of any changes to risk assessments and strategies agreed to manage children's behaviour is not effective. There is a risk of staff not reading updates they are sent by email, and handover sheets do not include new information. A robust communication system will ensure that all staff understand any changes implemented and are therefore accountable in their daily practice.

The manager has taken suitable action to notify relevant professionals and the designated officer in relation to allegations made by children. However, on one occasion, they have failed to notify Ofsted about an allegation and an internal investigation completed. This was a requirement at the last inspection and so it has been repeated to be addressed.

The review of the quality of care report does not evidence feedback from staff, parents and children in relation to the standard of care children are receiving in the home. This would enable the manager to monitor trends or patterns and make changes to improve outcomes. That said, the HTP and the manager complete detailed monthly side reports covering all areas of the management of the home and weekly monitoring of significant incidents to ensure they have full oversight of the home's operation.

## 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 protection of children standard is that children are protected from harm and enabled to keep themselves safe. In particular, the standard in paragraph (1) requires the registered person to ensure—</p> <p>that staff—</p> <p>assess whether each child is at risk of harm, taking into account information in the child's relevant plans, and, if necessary, make arrangements to reduce the risk of any harm to the child;</p> <p>help each child to understand how to keep safe;</p> <p>have the skills to identify and act upon signs that a child is at risk of harm;</p>	3 February 2021

<p>understand the roles and responsibilities in relation to protecting children that are assigned to them by the registered person;</p> <p>that the home's day-to-day care is arranged and delivered so as to keep each child safe and to protect each child effectively from harm. (Regulation 12 (1) (2)(a)(i)(ii)(iii)(v)(b))</p> <p>Specifically, the registered manager should ensure that all risk assessments for children or the management of health and safety in the home identify clear strategies that staff should follow to enable them to safeguard children from individual risks.</p>	
<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—</p> <p>helps children aspire to fulfil their potential; and</p> <p>promotes their welfare.</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 purpose;</p> <p>ensure that staff work as a team where appropriate. (Regulation 13 (1)(a)(b) (2)(a)(b))</p> <p>Specifically, the registered manager should ensure that a clear and effective system is in place to notify staff of any changes that have been implemented, for example changes to risk assessments and strategies to be used to manage children's behaviour.</p>	<p>3 February 2021</p>
<p>The registered person must prepare and implement a policy ("the behaviour management policy") which—</p> <p>sets out the measures of control, discipline and restraint which may be used in relation to children in the home. (Regulation 34 (1)(b))</p>	<p>3 February 2021</p>

Specifically, in relation to establishing safe and effective procedures for staff to follow when children need to be restrained upstairs.	
<p>The registered person must notify HMCI and each other relevant person without delay if—</p> <p>there is an allegation of abuse against the home or a person working there;</p> <p>there is any other incident relating to a child which the registered person considers to be serious. (Regulation 40 (4)(c)(e))</p>	3 February 2021
<p>In order to complete a quality of care review the registered person must establish and maintain a system for monitoring, reviewing and evaluating—</p> <p>the quality of care provided for children;</p> <p>the feedback and opinions of children about the children's home, its facilities and the quality of care they receive in it.</p> <p>The system referred to in paragraph (2) must provide for ascertaining and considering the opinions of children, their parents, placing authorities and staff. (Regulation 45 (2)(a)(b) (5))</p> <p>Specifically, that feedback from children and everyone involved in the children's care is reflected in the quality of care report. This is to enable the registered manager to evaluate effectively the quality of care provided to children and use any trends and patterns identified to improve the service.</p>	3 February 2021

## Recommendations

- The registered person should ensure that the home is a nurturing, homely and supportive environment that meets the needs of the children. The home should seek as far as possible to maintain a domestic rather than an 'institutional' impression. Specifically, bathrooms used by children should be homely and decorated to the same high standard as the rest of the home. ('Guide to the children's homes regulations including the quality standards', page 15, paragraph 3.9)

## Children's home details

**Unique reference number:** 1229534

**Registered provider:** Halliwell Homes

**Registered provider address:** The Curtis Partnership, 1 Tape Street, Cheadle, Stoke-on-Trent ST10 1BB

**Responsible individual:** Paul Bliss

**Registered manager:** Jemma Craven

## Inspectors

Cheryl Field, Social Care Inspector

Mandy Nightingale, Social Care Inspector

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