

1240397

Registered provider: Keys Direct Care Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This is one of many homes owned by a private provider. The home is registered to provide care for up to five children with emotional and/or behavioural difficulties.

The manager is registered with Ofsted and is suitably qualified and experienced.

Due to COVID-19 (coronavirus), at the request of the Secretary of State, we suspended all routine inspections of social care providers on 17 March 2020.

We last visited this setting on 16 September 2020 to carry out an assurance visit. The report is published on the Ofsted website.

Inspection dates: 25 and 26 May 2021

Overall experiences and progress of children and young people, taking into account **good**

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

The effectiveness of leaders and managers **good**

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

Date of last inspection: 4 February 2020

Overall judgement at last inspection: improved effectiveness

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
04/02/2020	Interim	Improved effectiveness
24/04/2019	Full	Requires improvement to be good
19/09/2018	Full	Good
21/11/2017	Full	Good

Inspection judgements

Overall experiences and progress of children and young people: good

Children at the home are making progress and have caring and nurturing relationships with the staff looking after them. This has allowed the children to build trusting and secure bonds with the adults at the home. Children are happy and enjoy spending time with the staff team. Positive feedback was received from professionals about the care and support children receive at the home.

All the children attend a form of education, which is tailored to their individual needs. There is a strong ethos around education and children's participation in this. Staff provide additional support when needed. Communication with schools is good and this provides a consistent approach when working with the children. The manager supports the multi-agency team in identifying mainstream schools and in securing school placements for children.

Some limited work has been carried out to prepare children for moving on from the home and into independence. There is a lack of structured planning in this area, particularly regarding individual detailed work looking at wider issues to consider when planning the transition to independent living.

The matching process for new children is appropriately detailed. Managers consider the impact that moving into this home may have on the child and on the children already living at the home. Children moving into the home are made to feel welcome. A social worker highlighted a letter of welcome written by the other children as an example of how this helped a child to settle in well at the home.

Children's healthcare needs are met. They are registered with all relevant healthcare professionals. The home experienced a COVID-19 outbreak, with all the children and some staff testing positive. This was managed well by leaders and managers. The children were well cared for during their recovery and provided with additional resources to support them.

Children have access to a range of activities in the home and, more recently, in the community with the easing of lockdown restrictions. Children are encouraged to have friendship groups external to the home. Family time is promoted, and the home facilitates any necessary travel and supervision to ensure that children maintain contact and family links. Children have a clear voice in the home and are regularly consulted with.

The physical environment is homely but requires some redecoration in places to improve the overall appearance of the home. The stair carpet needs to be replaced due to some damage and has already led to an accident in the home where a child was injured. There has been some delay in addressing this due to the COVID-19 restrictions previously in place.

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

Children are supported to understand their risk assessments and why some restrictions must be put in place to help them and keep them safe. Children know what they have to achieve and how these restrictions are designed to help them to keep safe. Staff have good knowledge and understanding of the children's plans and risk assessments. However, the written information does not always reflect the known plans, which could lead to confusion.

Incidents in the home have significantly reduced, particularly for children who have a history of going missing or absent prior to moving into this home. When incidents have occurred, they have been well managed, and staff have followed the protocols in place. Staff have a good understanding of how to safeguard children and manage risk.

Children have access to therapeutic support and input if required. The therapist oversees incidents of self-injurious behaviour and offers support to the team. The therapy input is not always recorded within the health file or chronology, so it is not clear when a child is receiving direct support from the therapist.

The management of an allegation against a staff member was not sufficiently robust. Not all known information was shared with the external safeguarding officer. This, therefore, prevented them from giving fully considered advice and guidance in response. The staff member resigned prior to disciplinary procedures being completed and no further action was taken by the organisation. This prevented an external safeguarding agency from considering further action in response to the allegation. The consequences of a poorly managed allegation had not been considered by the organisation if the staff member applied for other positions working with vulnerable children and/or adults. The manager took steps during the inspection to ensure that all relevant information was shared with external professionals.

The effectiveness of leaders and managers: good

The manager provides strong leadership in the home. Staff feel supported and valued by the manager and they benefit from regular supervision. Staff have their performance regularly reviewed and evaluated and are set targets to help them develop their practice. Staff morale is high, and the staff speak positively about the home and the children.

Staff have access to a wide range of training, and they have all completed the mandatory training courses. However, not all staff have received training specific to the needs of the children in the home. This limits the capacity of staff to think more broadly about the children's needs, the risks they may face and how best to support them.

The manager clearly knows the children well and has a good understanding of their needs. The oversight of children's files and plans is not robust, and information is not routinely updated to reflect current needs. Children's files are not regularly audited or quality assured by the manager, which has led to some shortfalls.

The rota does not always clearly identify who is working in the home. When agency staff have been used, it is not clear when and who has verified their identification documents as there are two systems in place. These shortfalls do not support clear oversight of who is working in the home and when.

The manager has utilised the independent visitor's reports and their own development plan to identify areas where improvements can be made. The manager is aware of the strengths and weaknesses within the home and areas for progression and development.

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 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>ensure that staff have the experience, qualifications and skills to meet the needs of each child;</p> <p>use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13 (1)(a)(b) (2)(c)(h))</p>	1 August 2021
<p>The registered person must prepare and implement a policy which—</p> <p>is intended to safeguard children accommodated in the children's home from abuse or neglect; and</p> <p>sets out the procedure to be followed in the event of an allegation of abuse or neglect.</p> <p>The procedure to be followed in the event of an allegation of abuse or neglect must, in particular—</p> <p>provide for records to be kept of an allegation of abuse or neglect, and the action taken in response. (Regulation 34 (1)(a)(b) (2)(d))</p>	1 August 2021

Information about this inspection

Inspectors have looked closely at the experiences and progress of children and young people, 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: 1240397

Provision sub-type: Children's home

Registered provider: Keys Direct Care Limited

Registered provider address: 2nd Floor, Maybrook House, Queensway,
Halesowen, Worcestershire B63 4AH

Responsible individual: Janet Porter

Registered manager: Deana Law

Inspector

Sarah Orriss, Social Care Inspector

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