

# 1258894

Registered provider: Happy Children Home Limited

Full inspection

Inspected under the social care common inspection framework

#### Information about this children's home

This home is owned by a private provider and can provide care for up to six children with emotional and/or behavioural difficulties.

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

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 8 and 9 December 2020 to carry out an assurance visit. The report is published on the Ofsted website.

**Inspection dates: 14 to 15 September 2021** 

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

account

How well children and young people are good

helped and protected

The effectiveness of leaders and good

managers

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

**Date of last inspection:** 3 September 2019

Overall judgement at last inspection: good

**Enforcement action since last inspection:** none

Inspection report children's home: 1258894

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# **Recent inspection history**

| Inspection date | Inspection type | Inspection judgement |
|-----------------|-----------------|----------------------|
| 03/09/2019      | Full            | Good                 |
| 14/01/2019      | Full            | Good                 |
| 23/01/2018      | Full            | Outstanding          |



## **Inspection judgements**

#### Overall experiences and progress of children and young people: good

Children living at the home are making good progress from their starting points. All the children engage in education, which is specific to their individual needs, either in the home or in the community. Some children have needed support to re-engage with education, and they are now achieving. One child has recently achieved a BTEC National qualification, and this was celebrated in the home. Children aspire for their future and understand how education will support them with their goals.

Children have positive relationships with the staff, who nurture them. Children say that they are happy and feel safe in the home. They actively sought out inspectors to talk about the home and how settled they are. Children can identify a trusted adult to talk to if they have any issues or concerns. Stakeholders and professionals are positive about the care children receive, and with the communication they have with the home. Children have access to range of activities in the home and community and enjoyed a summer holiday this year. Staff are gathering photographs to produce memory books for the children to remind them of these positive experiences.

Children's care plans do not always contain all known and relevant information and do not cross reference with other documents in the home. Information is recorded across several documents rather than in one place, which is confusing. This is due, in part, to the online recording system which is yet to be fully embedded in practice. Staff are receiving further training in using this recording system. However, there is no impact on the day-to-day care provided. Staff talk knowledgeably about the children.

There is little evidence of how children's views contribute to their plans or how they are consulted with about their care. However, a new child moving into the home has been well-supported and has settled in well.

One child, who has now left the home, did not make expected progress due to frequently being missing or absent from the home. When the child was there, they engaged well with staff and education, but increased levels of risk affected the placement. The manager was a strong advocate for the child and challenged the placing authority regarding the best way to keep the child safe. The child subsequently moved on from the home.

Children are supported to stay in touch with people who are important to them, and they are developing friendships away from the home. They are encouraged to bring friends back to the home to spend time with them. They have ample space for this in areas such as the designated cinema room or gym. Children's bedrooms are personalised to their own taste and the home is clean and tidy, although it could do with some re-decoration in places.

The staff are doing as much as they can to educate children about the risks of smoking. Children know that there is help and support to stop smoking. Children keep their smoking paraphernalia in their bedrooms, and staff believe that they use this while out in the community.



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

Staff know the children well and understand their risks and how best to manage and support them when they are upset or angry. Children have been supported in identifying more effective strategies for managing their emotions. This has helped children to talk about things that are worrying them and may have an impact on them. Staff have strong and positive relationships with the children, and children feel staff keep them safe in the home. Incidents in the home are infrequent and when they happen are managed well. Children engage well with the routines and boundaries in the home.

In response to incidents, the manager undertakes debriefs and reflection to see where improvements can be made. As a result, there have been changes to practice and the risk assessment process in the home, to further support staff. A complaint about staff was well managed and appropriate action was taken in response.

Children's risk assessments are not consistently updated and do not always contain the most recent concerns. They do not always contain all known risks, for example the use of candles in bedrooms and risks associated with smoking.

For one child, who was regularly going missing, the risk assessment in place did not highlight the significant increase in risk factors. However, poor-quality information-sharing with the home contributed to this lack of risk assessment. The manager ensures that pertinent information is shared to enable staff to safeguard children effectively. The manager has also escalated concerns to senior management, about a child's missing-from-home episodes and periods of absence from the home. The manager has requested strategy meetings and has contributed to risk assessments in response to the risks posed to the child.

Recruitment practice in the home is usually safe and appropriate. However, on one occasion, the manager did not consider additional references for a member of staff who had previously been employed in care roles elsewhere. This could potentially lead to unsuitable people being employed in the home.

#### The effectiveness of leaders and managers: good

The management team provides good leadership in the home. The manager has good oversight of the children and the progress they are making. When concerns have arisen about children's care, the manager has escalated these concerns to senior management and has appropriately challenged decision-making, to safeguard children.

The manager has clear oversight of key documents in the home. Where shortfalls are identified, these primarily relate to the use of a new online recording system. Not all information is being captured at present, and the manager has planned additional training to support staff and improve the quality of record-keeping. The manager is aware of the strengths and weaknesses in the home and is pro-active in responding when improvements are needed.



Staff morale in the home is good, and staff feel well supported by the manager. Staffing in the home has been stable and consistent. Most staff have regular supervision and appraisals. However, a new member of staff did not have any supervision documented, and a night-care worker has infrequent supervision. The manager had already identified this as an area for improvement and was implementing a plan to address this.

Some staff have the required level 3 qualification, and several staff are in the process of studying towards this qualification. All staff have received mandatory training in key areas, such as safeguarding and behaviour management. Additional training courses have been undertaken in subjects such as attachment, trauma and child exploitation, to support staff's knowledge and understanding of children's needs.



# 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      |
|--|---------------|
| The protection of children standard is that children are protected from harm and enabled to keep themselves safe.  | 31 October 21 |
| In particular, the standard in paragraph (1) requires the registered person to ensure—   |               |
| that staff—  |               |
| 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;   |               |
| 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)(b))  |               |
| In particular, this relates to ensuring that children's risk assessments and care plans are regularly updated and contain details of all known risks. This also relates to implementing risk assessments in response to environmental risks, such as smoking and use of candles. |               |
| The registered person must recruit staff using recruitment procedures that are designed to ensure children's safety.   | 31 October 21 |
| The registered person may only—  |               |
| employ an individual to work at the children's home;   |               |
| if the individual satisfies the requirements in paragraph (3).   |               |
| The requirements are that—   |               |
| full and satisfactory information is available in relation to the individual in respect of each of the matters in Schedule 2. (Regulation 32 (1) (2)(a) (3)(d))  |               |



| This relates to references being sought and verified from previous employers when applicants have previously worked |  |
|---|--|
| in a relevant role.   |  |

#### Recommendations

- The registered person should ensure that children are consulted regularly on their views about the home's care, to inform care plans and support continued improvement in the quality of care provided. ('Guide to the children's homes regulations including the quality standards', page 22, paragraph 4.11)
- The registered person should have systems in place so that all staff, including the manager, new staff and night staff, receive supervision of their practice from an appropriately qualified and experienced professional, which allows them to reflect on their practice and the needs of the children assigned to their care. ('Guide to the children's home regulations including the quality standards', page 61, paragraph 13.2)

## 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:** 1258894

**Provision sub-type:** Children's home

Registered provider: Happy Children Home Limited

Registered provider address: West Walk House, 99 Princess Road East, Leicester

LE1 7LF

Responsible individual: Ranjit Bains

Registered manager: Jealous Fumai

# **Inspector**

Sarah Orriss, Social Care Inspector



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