

SC063883

Registered provider: Keys Care Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This privately run home provides care for up to three children aged between eight and 18 years. It specialises in providing long-term, therapeutic residential care for children with social and emotional difficulties. During this inspection period, two children have moved in and three have moved out. One child has remained in the home throughout.

The manager registered with Ofsted in 2018.

Due to COVID-19, at the request of the Secretary of State, we suspended all routine inspections of social care providers carried out under the social care common inspection framework (SCCIF) on 17 March 2020. We returned to routine SCCIF inspections on 12 April 2021.

We last visited this setting on 2 December 2020 to carry out an assurance visit. The report is published on the Ofsted website.

Inspection dates: 25 and 26 January 2022

Overall experiences and progress of children and young people, taking into account	good
How well children and young people are helped and protected	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: 5 November 2019

Overall judgement at last inspection: good

Enforcement action since last inspection: none



Recent inspection history

Inspection date	Inspection type	Inspection judgement
05/11/2019	Full	Good
13/02/2019	Full	Outstanding
26/07/2017	Full	Outstanding
19/12/2016	Interim	Sustained effectiveness



Inspection judgements

Overall experiences and progress of children and young people: good

Children have positive relationships with staff. They benefit from staff who are committed to ensuring that they have their needs met and who will actively challenge and advocate on their behalf.

Staff support children to have positive relationships with family and friends when appropriate. They work with the local authority to ensure that plans are in place to reduce potential risk and will challenge if this is not in the child's best interests. Alternative ways of communicating with families are used to help ensure that children can maintain contact when placed further away.

Children receive help to understand and embrace their own and others' culture. Plans are in place to ensure that children's physical health needs are met. Elements of these plans, such as specialist hairdressers and skin routines, help enhance children's self-esteem. Staff support children to understand their own history and family dynamics. As a result, children have a better understanding of their identity.

Staff support children to engage in education. They work with teachers to implement plans that meet the child's needs to improve attendance. The child currently living in the home now has future aspirations and staff are supporting them to achieve this.

Despite the restrictions of the COVID-19 pandemic, children have taken part in numerous activities. They have opportunities to pursue their interests, which helps to develop their confidence and self-esteem. They also have experiences they have not had before, such as going to the beach, helping them to make positive memories and to enjoy their childhood.

The staff team challenges other professionals to ensure that the children's health needs are met. This includes putting interim plans in place using the home's own therapist to support the team and ensure that the child has the support they need.

The home's staff advocate for the children's needs and wishes and put plans in place to help them achieve this. They gather the child's views in ways that meets their needs and children feel that their voice is heard. This includes when children's needs can no longer be met at the home.

Care plans capture the child's voice; however, they are lengthy and contain a lot of historical information, which then makes the information within them contradictory at times. Newer sections that have been added are clear. Current staff know the children well, but care plans do not provide newer staff with the guidance they need or enable the focus to be on the child's current plans.



Daily recordings are overly positive and are not an accurate reflection of the events of the day. Significant incidents are not referenced, which does not provide the child or staff with information relating to incidents. This does not enable children to reflect on their time in the home accurately.

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

Significant incidents in the home have been managed well by staff. They are quick to respond and are aware of the impact of incidents on the other children. When concerns arise, the staff try to work with the children to keep them safe. When this is no longer possible, staff identify this and ensure that children move on from the home in the safest way possible.

For one child, incidents of self-harm, aggression and damage increased to such an extent that it was no longer safe for her to remain at the home. However, this was following a significant disclosure that she was able to make to staff due to the positive relationship she had with them. Staff continued to support her as much as they could while working with the local authority to find a suitable alternative home.

Physical restraints have been used by staff to help protect children from harm. These have been reviewed and evaluated and lessons learned, including where further training may be needed. Historically, the responses from staff were not always consistent; however, this has improved significantly.

Staff know how to respond to allegations and disclosures made by children and ensure that this is acted on. The management team advocates for this to be acted on by the local authority and ensures that safeguards are in place. This helps to protect children.

Most of the time, staff respond well to the child and can identify the signs that they are distressed. When errors in staff practice do happen, this is addressed quickly, and plans are put in place to ensure that the children are protected.

Staff know the children well and know the plans in place that have been verbally shared. Risk assessments are not easy to understand and while most information is recorded, it is in a format that is confusing. New risk assessments implemented by the acting manager provide clear guidance to staff but are contradicted by risk assessments that need archiving. This prevents newer staff and agency staff from having the most up-to-date information.

Staff engage with children when they go missing and are proactive in following them and returning them home safely. As a result of this, only two missing episodes have occurred since the last inspection. This represents an area of significant progress for the children.

Health and safety risk assessments for the home state that one communal door is locked overnight for safety reasons. This is not routinely happening and not all staff



are aware of this safety measure. This has not had an impact on children and the manager took steps during the inspection to rectify this.

Key-work sessions are undertaken after significant events. The amount of work recorded varies from month to month. However, the quality of work is high, and it is clear that children engage well, which is improving their understanding and helping to educate them.

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

The registered manager has had time off during the year and has not been in the home since the start of December 2021. The deputy manager was also off from August 2021 to January 2022. While the manager is focused on the children's needs, managerial responsibilities have not always been completed and numerous documents are not up to date or accurate. The manager, deputy manager and responsible individual are working together to address this.

Audits and development plans are in place and do identify shortfalls. Those relating directly to plans for children are met. However, the plans for staff have not been implemented despite clear time frames. This includes staff skill sheets, personal development plans and enhanced training in the home's therapeutic model of care. This prevents staff from having all the skills they need as well as limiting their professional development.

Matching risk assessments for children show limited follow-up to obtain full information regarding the child's risks. This does not enable plans to be implemented from the point of admission to the home. The responsible individual has recognised this and is working with the registered manager to learn and develop this process.

Staff supervisions are in place for most staff, but recordings are brief. At times, debriefs of incidents have been used instead of formal supervision. While this provides an opportunity for learning from that event, it does not give staff the time to discuss the whole month or their own development, which prevents further learning.

Team meetings do not consistently take place. This has been due to sickness within the staff team. However, when they do occur, they are of good quality.

The statement of purpose is inaccurate and has not been shared with Ofsted. This does not allow for stakeholders to understand what the home is able to offer to support the children.

Notifications of significant events have not always been sent to Ofsted. This does not enable Ofsted to have oversight of the events or actions taken.



Achieving good staffing levels has been a challenge due to sickness. However, when needed, the manager has arranged for staff from other homes or consistent agency staff to cover shifts. This has helped to reduce the impact of change for the children.

The management team has a strong understanding of children's needs and risks and ensures that staff have had further training to support them. The management team is proactive in challenging and escalating concerns with the local authority. This is done professionally and in the best interests of the children.

The combined managerial approach in place is now ensuring oversight of the home and most shortfalls identified during this inspection were known and plans were put in place. The management team also accessed further support during the inspection to address the areas they had not yet identified.



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 March 2022
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;	
understand the roles and responsibilities in relation to protecting children that are assigned to them by the registered person. (Regulation 12 (1) (2)(a)(i)(v))	
In particular, ensure that risk assessments are easy to read and understand, and are up to date with all known strategies. Ensure that previous versions are archived to prevent confusion.	
The leadership and management standard is that the registered person enables, inspires and leads a culture in relation to the children's home that—	31 March 2022
helps children aspire to fulfil their potential; and promotes their welfare.	
In particular, the standard in paragraph (1) requires the registered person to—	
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;	
ensure that staff work as a team where appropriate;	



	and the control series access and the
ensure that staff have the experience, qualifications and skills to meet the needs of each child;	
ensure that the home's workforce provides continuity of care to each child;	
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 (1)(a)(b) (2)(a)(b)(c)(e)(f)(h))	
In particular, the manager should have full oversight and address the quality of records, ensuring that plans in place are clear and accurate for staff to improve consistency. Ensure that staff have had training in the model of care used. Ensure that monitoring systems in place are used and that actions are completed in a timely manner.	
The care planning standard is that children—	31 March 2022
receive effectively planned care in or through the children's home; and	
have a positive experience of arriving at or moving on from the home.	
In particular, the standard in paragraph (1) requires the registered person to ensure—	
that children are admitted to the home only if their needs are within the range of needs of children for whom it is intended that the home is to provide care and accommodation, as set out in the home's statement of purpose;	
that each child's relevant plans are followed. (Regulation 14 (1)(a)(b) (2)(a)(c))	
In particular, when matching children to the home, ensure that all information is obtained and that all children's needs are considered and assessed, with clear plans to safeguard children. Care plans must be up to date and provide clear guidance for staff.	



	015004
The registered person must notify HMCI and each other relevant person without delay if—	31 March 2022
a child is involved in or subject to, or is suspected of being involved in or subject to,	
sexual exploitation;	
an incident requiring police involvement occurs in relation to a child which the registered person considers to be serious;	
there is an allegation of abuse against the home or a person working there;	
a child protection enquiry involving a child—	
is instigated; or	
concludes (in which case, the notification must include the outcome of the child protection enquiry); or	
there is any other incident relating to a child which the registered person considers to be serious. (Regulation 40 (4)(a)(b)(c)(d)(i)(ii)(e))	

Recommendations

- The registered person should ensure that the home's statement of purpose is kept up to date and changes are made in line with changes to company policies and staffing. This should be shared with Ofsted. ('Guide to the children's homes regulations, including the quality standards', page 14, paragraph 3.5)
- The registered person should ensure that children have access to all shared parts of their home unless there are specific reasons why this would not meet their needs. This need to be clearly recorded when changes take place. ('Guide to the children's homes regulations, including the quality standards', page 15, paragraph 3.10)
- The registered person should ensure that children's daily records are accurate and capture the events of the day for the child to be able to look back on as part of their life history. ('Guide to the children's homes regulations, including the quality standards', page 62, paragraph 14.5)

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: SC063883

Provision sub-type: Children's home

Registered provider: Keys Care Limited

Registered provider address: C/o Pinsent Masons Llp, The Soloist Building, 1 Lanyon Place, Belfast, Northern Ireland BT1 3LP

Responsible individual: Joanne Carter

Registered manager: Alexia Bedford

Inspector

Debra Boldy, Social Care Inspector



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