

# SC397933

Registered provider: Cove Care Residential Limited

Full inspection

Inspected under the social care common inspection framework

## Information about this children's home

This children's home is privately owned. It provides care for two children with complex mental health and emotional and behavioural needs. The home was registered in July 2009.

The new manager started working in the home in November 2021 and her application to register is being processed by Ofsted.

### Inspection dates: 8 and 9 June 2022

**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:** 15 February 2022

**Overall judgement at last inspection:** improved effectiveness

**Enforcement action since last inspection:** none

## Recent inspection history

Inspection date	Inspection type	Inspection judgement
15/02/2022	Interim	Improved effectiveness
07/07/2021	Full	Requires improvement to be good
10/09/2019	Full	Requires improvement to be good
22/03/2019	Interim	Sustained effectiveness

## Inspection judgements

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

Two children live in the home. At the time of the visit, one child was staying with a friend.

Children make good progress from their starting points. The manager and staff encourage children to attend education or gain employment. One child who aspires to become a police officer now attends online tuition daily. One child is currently exploring college and employment options. The good support children receive, along with the message that education and training is important, is helping children to develop and achieve their career aspirations.

Children receive support from staff to keep in touch with people who are important to them. The manager values parents' involvement and contributions. One parent said, 'Staff always make us feel welcome when we visit'. Positive relationships between parents and staff help children to feel secure.

Staff promote children's cultural needs well. One staff member has a good understanding of a child's cultural needs and has supported them to develop skills in managing their hair type.

Staff take an interest in what children like to do. As a result, they plan a range of activities that children enjoy. This helps children's emotional and physical health and well-being.

Life skills are promoted well. Staff support children to understand the value of money and one child has developed good skills in budgeting for food. Children take an active role in daily tasks around the home, such as cooking and cleaning. This means children develop good routines that will help them to live independently.

Staff ensure that children register with local health services and support them to attend routine and emergency appointments. Children have access to the organisation's clinicians who offer weekly therapy. When required, external health specialists also support children. Actions in children's health plans are not always achieved within the expected timeframes, which does not fully promote children's health.

Children have positive relationships with the manager and some staff. However, delays in repairing relationships between one child and some staff following an incident has resulted in the child feeling a sense of loss.

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

Children develop improved emotional resilience because of the support they receive. This good work is continuing. Because of the progress one child has made, there has been a reduction in the levels of supervision she requires. The manager and staff do not always ensure that risk assessments are updated to reflect children's needs. For example, although the child's clinical care plan was reviewed to reflect the reduction in supervision levels, these changes were not reflected in the risk assessment. As a result, information is confusing and has the potential for the child's needs to be managed inconsistently.

Since the interim inspection, no new staff have been recruited. Due to a temporary increase in staffing requirements, the manager has commissioned an external agency to provide a small number of staff. On the whole, this is working well and safer recruitment checks are largely good. However, for one agency member of staff, managers have not ensured that the agency has explored conflicting dates in their employment history.

Parental controls and passwords are installed on electronic devices that children can access the internet on. On one occasion, staff did not follow a child's care plan by supervising the child at all times when accessing the internet. A check later identified that during a lapse in supervision the child had attempted to access an inappropriate social media platform. This lapse had the potential to place the child at risk of harm.

On two occasions, children have raised concerns about staff who work in the home. Managers responded to one concern well. However, on another occasion, while the responsible individual had spoken to a child's social worker, she had not shared relevant information with the designated officer for the local authority where the home is situated. This was rectified during the inspection and clarified that the matter did not meet the threshold for designated officer involvement. In addition, clear records are not always kept to maintain a good audit trail about concerns raised and the action taken in response.

Staff are trained to use physical restraint to keep children and others safe. On occasions when this is used, staff do not always record a clear description of the restraint technique used. This means that the reader of the record cannot assess if the restraint was proportionate. The effectiveness of restraint is not evaluated by managers and records of discussions with staff to reflect on the incident are not recorded in a timely way. These shortfalls do not help staff to learn from incidents and managers to effectively review what has happened.

One child has a history of going missing from home, and since living at the home, the frequency of missing from home incidents has reduced. Although levels of supervision are generally high, on two occasions the child has left the home without staff knowing. These lapses potentially compromised the child's safety. When children go missing from home, the staff work in partnership with police and ensure

that children are spoken to by an independent person when they return home. This helps staff to develop missing from care plans that are specific to the child to promote their safety.

Children speak positively about the manager who they trust. One child does not feel that complaints escalated to senior managers are always responded to in a way that they would like. Records of complaints made on behalf of children are not always kept in the home.

Managers and staff ensure that the home is suitably furnished and maintained to a good standard. Suitable arrangements are in place for managing health and safety.

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

The manager was appointed in November 2021 and has applied to Ofsted to become registered. Ofsted is in the final stages of considering this application.

The manager is very child-focused and passionate about helping children to have positive experiences. She values the time she spends with children and this helps her to understand their needs.

The manager ensures that team meetings take place on a regular basis. These meetings provide opportunities for staff to discuss children's plans and reflect on their practice to drive forward improvements.

Staff receive supervision on a regular basis and have their performance reviewed annually. Staff feel supported and are helped to develop in their role.

The manager and one staff member are qualified. Other staff are working towards gaining a suitable qualification. Managers ensure that staff attend training to support them to fulfil their role and help them to meet children's individual needs.

Senior managers have introduced monitoring systems into the home and weekly and monthly audits are now completed by the manager. These are in their infancy and their effectiveness is not yet fully realised. As a result, some shortfalls are not identified, such as physical intervention recording and some actions in children's health plans not being followed up.

Medication is kept in a lockable cabinet that cannot be accessed by children. Monitoring systems in place only include stock checks. Temperature checks of the room where medication is stored are not completed. This has the potential for some medication to be stored outside of the required temperature, meaning that medication that has spoiled could be administered to children.

## 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 quality and purpose of care standard is that children receive care from staff who—</p> <p>understand the children's home's overall aims and the outcomes it seeks to achieve for children.</p> <p>use this understanding to deliver care that meets children's needs and supports them to fulfil their potential.</p> <p>In particular, the standard in paragraph (1) requires the registered person to—</p> <p>ensure that staff—</p> <p>protect and promote each child's welfare.</p> <p>treat each child with dignity and respect.</p> <p>provide personalised care that meets each child's needs, as recorded in the child's relevant plans, taking account of the child's background. (Regulation 6 (1)(a)(b)(2)(b)(ii)(iii)(iv))</p> <p>This relates to ensuring that actions identified in children's plans to keep children safe and support them to make progress are met by the manager and staff who work in the home.</p>	31 July 2022
<p>The protection of children standard is that children are protected from harm and enabled to keep themselves safe.</p> <p>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</p>	31 July 2022

<p>necessary, make arrangements to reduce the risk of any harm to the child;</p> <p>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))</p> <p>This relates to ensuring that risk assessments are up to date and staff consistently follow the guidance set out in these documents to fully promote children's safety.</p>	
<p>The registered person must recruit staff using recruitment procedures that are designed to ensure children's safety.</p> <p>The registered person may only—</p> <p>employ an individual to work at the children's home; or</p> <p>if an individual is employed by a person other than the registered person to work at the home in a position in which the individual may have regular contact with children, allow that individual to work at the home, if the individual satisfies the requirements in paragraph (3).</p> <p>The requirements are that—</p> <p>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)(b)(3)(d))</p> <p>This is specific to the manager ensuring that agency staff have full employment histories.</p>	<p>31 July 2022</p>
<p>The registered person must ensure that—</p> <p>within 24 hours of the use of a measure of control, discipline or restraint in relation to a child in the home, a record is made which includes—</p> <p>a description of the measure and its duration.</p> <p>the effectiveness and any consequences of the use of the measure; and</p> <p>within 48 hours of the use of the measure, the registered person, or a person who is</p>	<p>31 July 2022</p>

<p>authorised by the registered person to do so ("the authorised person")</p> <p>has spoken to the user about the measure; and</p> <p>has signed the record to confirm it is accurate. (Regulation 35 (3)(a)(iv)(vii)(b)(i))</p>	
<p>The registered person must maintain records ("case records") for each child which—</p> <p>include the information and documents listed in Schedule 3 in relation to each child;</p> <p>are kept up to date; and</p> <p>are signed and dated by the author of each entry.</p> <p>(Regulation 36 (1)(a)(b)(c))</p> <p>In particular the manager ensures that records are written without delay and signed and dated by the author.</p>	31 July 2022
<p>Subject to paragraph (6), the registered person must establish a procedure for considering complaints made by or on behalf of children.</p> <p>The registered person must ensure that a record is made of any complaint, the action taken in response, and the outcome of any investigation.</p> <p>This regulation (apart from paragraph (4)) does not apply to any matter to which the Children Act 1989 Representations Procedure (England) Regulations 2006 apply. (Regulation 39 (1)(3)(6))</p> <p>In particular, the manager should ensure that the home's procedure for managing and recording complaints made on behalf of children are followed and that a clear record of complaints are kept in the home.</p>	31 July 2022



## **Recommendations**

- The registered person should ensure that they make suitable arrangements to manage medication. In particular, the manager has systems in place to ensure that medication is stored at the correct temperature. (Guide to the Children's Homes Regulations, including quality standards', page 35, paragraph 7.5)

## **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:** SC397933

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

**Registered provider:** Cove Care Residential Limited

**Registered provider address:** 16 Waterloo Road, Wolverhampton, West Midlands  
WV1 4BL

**Responsible individual:** Rachel Oliver

**Registered manager:** vacant

## Inspector

Helen Malanaphy, Social Care Inspector

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