

1276249

Registered provider: Esland North Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This is a privately owned home. It provides care for up to three children. The home cares for children who may have emotional and social difficulties or learning disabilities.

The manager is experienced and registered.

Inspection dates: 21 and 22 June 2022

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: 10 February 2022

Overall judgement at last inspection: sustained effectiveness

Enforcement action since last inspection: none

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Recent inspection history

Inspection date	Inspection type	Inspection judgement
10/02/2022	Interim	Sustained effectiveness
26/04/2021	Full	Requires improvement to be good
05/03/2020	Interim	Declined in effectiveness
04/06/2019	Full	Good



Inspection judgements

Overall experiences and progress of children and young people: good

Children enjoy a warm and welcoming environment. Maintenance works have been completed. The home is now in a good state of repair for children to enjoy. Children have been encouraged and supported to personalise their bedrooms and living areas. This develops children's sense of belonging and comfort.

Staff work closely with schools to secure children's education. Children's education plans are realistic and support them to make progress. For example, one child had been out of school for some time. This has been reversed. They are now attending daily. Staff, managers and involved professionals have supported the child to overcome barriers to education. This has led to very positive changes for the child.

Staff want the best for children. They persevere through challenging times. Staff maintain their resilience. They always recognise the progress that children make, no matter how small this might be. For example, one child is now spending more time downstairs with peers and staff. For another, they were sleeping in a makeshift tent area in their bedroom, to help them to feel safe and secure. The child is now sleeping in their bed. This is good progress.

Children receive good practical and emotional support with gender identity. Staff have completed specialist training in this area. They understand the importance of sensitively supporting children to explore their identity in a safe environment, without fear of being judged. For example, a child has flourished in relation to their gender identity due to the nurturing and caring approach of staff.

Staff encourage children with individual interests and hobbies. For example, one child enjoys attending Brownies. This has supported her to grow in confidence and develop friendships outside of the home. Another child has a love of horses. She is planning to have riding lessons. These opportunities help children to grow in confidence and enhance their social engagement.

Children are supported to maintain relationships with those important to them. For example, staff take one child long distances so that she can see her family. Another child who recently moved to the home said: 'I can't thank staff enough for everything that they have done for me. I love it here.'

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

When children move to the home, they are often in crisis. Children start to become safer soon after their admission. This is because staff understand children's risks and vulnerabilities and take action to keep children safe.

The recording of medication administered to children is not yet robust. For example, one child refused their medication, and staff recorded this as refused. However,



medication records did not reflect that the medication was later administered to the child. This was recorded elsewhere. This inaccuracy of records was not identified in medication checks.

Staff have a good understanding of children's risks and vulnerabilities. There is a comprehensive risk management plan in place for each child. This includes behaviour management strategies that help keep children safer. Staff have a good understanding on the actions they should take to keep children safe. They have a good understanding of their safeguarding responsibilities. This creates a culture whereby children's safeguarding is central to everything that staff do.

Staff carefully monitor children's behaviour. They provide constant support to children to reduce and manage negative behaviour. This has resulted in a reduction of incidents. Staff use de-escalation and calming techniques effectively. As a result, physical restraint has not been used for over four months. One child said that they had felt angry, and staff were able to talk to them to help them to become calm. The child reflected and said that no one had ever been able to do that.

The management team is working to change the culture of the home. A preferred therapeutic model has been implemented, with a focus on rewarding positive behaviour and not using sanctions. Overall, this has worked well, although some sanctions have been used and do not reflect the therapeutic model. This has been addressed by the manager to ensure a consistent approach is implemented.

The manager has completed a detailed location risk assessment. He has canvassed the views of the local police and other professionals. This helps to gain a good understanding of the specific risks to children in the area. The assessment is informative for staff, highlighting specific risks and vulnerabilities for the children and how these should be managed.

The effectiveness of leaders and managers: good

The manager and deputy manager are very committed to the children. They have led the home well through a difficult year. Children have continued to make good progress, despite the challenges. The home is steadily improving under the current management arrangements.

Staff receive good support from the manager. He has a strong focus on staff development. He is completing a staff skills audit for all staff to help them identify how they can develop their practice. This is recognised by staff, who say that he pushes them to achieve their best. This high expectation and the culture of high support benefit children.

Staff have completed a wealth of training. However, some staff have not received child-specific training in relation to a specific condition. This training is scheduled to be completed in the coming weeks and will help staff to have more insight into a child's needs.



There have been some changes in the staff team and, at times, this has led to staff shortages. The management and staff team have worked over and above their normal hours to provide consistency of care to children. A number of these vacancies have now been appointed to.

Staff receive regular supervision meetings. However, the quality of supervision is variable. In some supervision meetings, the needs of children are not discussed in detail and not all sessions are reflective in nature. Staff say that they feel supported and enjoy their jobs. One staff member said, 'Management are really good. They keep us motivated, are supportive and ensure we feel appreciated.'

The manager uses a range of systems to ensure that he has good oversight of the quality of care provided. Checklists are used to ensure that daily tasks are completed and various audits take place monthly. The manager ensures any concerns are followed up with staff or the appropriate external professional agencies.

Standards of cleanliness and tidiness in the home fluctuate. One child is known to create a chaotic environment around them. Staff have implemented a plan that is designed to help the child cope in a less chaotic environment.



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 leadership and management standard is that the registered person enables, inspires and leads a culture in relation to the children's home that—	25 July 2022
helps children aspire to fulfil their potential; and	
promotes their welfare.	
In particular, the standard in paragraph (1) requires the registered person to—	
ensure that staff have the experience, qualifications and skills to meet the needs of each child;	
ensure that the home has sufficient staff to provide care for each child. (Regulation 13 (1)(a)(b) (2)(c)(d))	
This specifically relates to the manager ensuring that the home has sufficient staff to care for the children and ensuring staff have the required training to meet the individual needs of children.	
The registered person must make arrangements for the handling, recording, safekeeping, safe administration and disposal of medicines received into the children's home.	25 July 2022
In particular the registered person must ensure that—	
a record is kept of the administration of medicine to each child. (Regulation 23 (1) (2)(c))	
This specifically relates to the manager ensuring that records of medication administration are accurate.	
For the purposes of paragraph (3)(b), an individual who works in the home in a care role has the appropriate qualification if, by the relevant date, the individual has attained—	25 July 2022

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the Level 3 Diploma for Residential Childcare (England) ("the Level 3 Diploma"); or

a qualification which the registered person considers to be equivalent to the Level 3 Diploma.

The relevant date is—

in the case of an individual who starts working in a care role in a home after 1st April2014, the date which falls 2 years after the date on which the individual started working in a care role in a home; or

in the case of an individual who was working in a care role in a home on 1st April 2014, 1st April 2016. (Regulation 32 (4)(a)(b)(5)(a)(b))

This specifically relates to the manager ensuring that all staff enrolled on the level 3 qualification have access to this and an assessor.

Recommendations

- The registered person must have systems in place so that all staff, including the manager, 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 Children's Homes Regulations, including the quality standards', page 61, paragraph 13.2).
- The registered person must ensure children's homes are nurturing and supportive environments that meet the needs of their children and are, in most cases, homely, domestic environments. Children's homes must comply with relevant health and safety legislation (alarms, food hygiene etc)but should seek as far as possible to maintain a domestic rather than 'institutional' impression. ('Guide to Children's Homes Regulations, including the quality standards', page 15, paragraph 3.9). This is in relation to the home's cleanliness

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'.

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Children's home details

Unique reference number: 1276249

Provision sub-type: Children's home

Registered provider: Esland North Limited

Registered provider address: Suites 1 & 5, Riverside Business Centre, Foundry

Lane, Milford, Belper, Derbyshire DE56 0RN

Responsible individual: Karl Haywood

Registered manager: Jonathan Cammiss

Inspector

Zoey Lee, Social Care Inspector

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