

# 1183069

Registered provider: Aspris Children's Services Limited

Full inspection

Inspected under the social care common inspection framework

## Information about this children's home

This privately owned home provides care for up to six children with mental health needs. It is also registered with the Care Quality Commission.

The suitably qualified and experienced manager registered with Ofsted in April 2018.

### Inspection dates: 12 and 13 July 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 **good**

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

**Date of last inspection:** 13 July 2021

**Overall judgement at last inspection:** good

**Enforcement action since last inspection:** none

## Recent inspection history

Inspection date	Inspection type	Inspection judgement
13/07/2021	Full	Good
18/02/2020	Full	Good
21/11/2018	Full	Good
20/11/2017	Full	Good

## Inspection judgements

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

Three children were living at the home at the time of this inspection. This is a settled home in which the multi-disciplinary staff team of support workers, therapists and nurses helps children to recover from a period of poor mental health. The support that children are receiving is helping them to improve their mental health and reduce the risk of serious self-harm or suicide ideation. The manager and staff know children very well and are ambitious for them to realise their potential. Children who have had multiple placement breakdowns in the past have been able to enjoy a sustained period living at the home.

Children are making significant improvements in their health and well-being. They have very regular support from the home's in-house psychotherapist and nurse. Children have lost weight with staff's encouragement to eat healthily. One child has been supported to stop smoking and substance misuse. The nurse acts as a central communication point between the multiple health agencies involved with each child. The nurse and other professionals collate information to show progress or identify further support needs so that specialists can make decisions in children's best interests.

Children are supported by the manager and staff to find education and skills development placements. Children have made good progress towards achieving qualifications. The manager challenged other professionals in respect of the suitability of an education placement for one child who wanted to do a construction skills course and had only been offered a beauty therapy course. The manager's tenacity meant that the child got a place on their desired course and is now qualified to start work in that industry.

Children take part in beneficial and enjoyable activities, including holidays and special days out, for example to a theme park. Children said that they have been able to forge friendships with each other, which makes them feel happy and settled. The home's psychotherapist helps children to develop the skills to do this. One example is helping children to learn about social cues and having the skills to recognise them. This has helped to reduce conflict between children when seeking interaction with staff.

Children's self-care and independence skills have improved with guidance and support from staff. Children actively plan with staff for their future and their views are valued. Children learn essential skills for better personal hygiene and building confidence to communicate and interact with adults. A child's relative said, 'She is doing amazingly well; she is a different child. She is in control of her feelings and able to consider other people. She can better advocate for herself. The staff have kept her safe and well.'

Staff help children to maintain relationships with their families. This includes regular long-distance trips supported by staff for weekend stays. Family members feel that staff keep them involved in the care of their children. A child said that she was very excited and proud that her family were going to visit her and stay nearby. This was the first time since leaving hospital two years before that the child has been well enough for this to happen. Staff planned the visit in detail with the child and helped her to prepare.

The house is spacious and is furnished to reduce the risks to children who may self-harm or have suicide ideation. However, refurbishment or replacement of flooring in bathrooms and carpeted areas is overdue. The garden area to the front of the house has not had adequate maintenance and is overgrown. This affects the homely feel of the house.

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

Children said that they feel safe. All staff undertake safeguarding training and know the provider's system of reporting concerns. This helps staff to identify concerns around exploitation and online abuse. Staff ensure that children understand the reasons why there are consistent boundaries and actively encourage them to be involved in setting them.

The children have histories of significant self-harm and suicide ideation. Staff have extensive training and experience in recognising and reducing the frequency of incidents. Clinical oversight and support are provided by the in-house psychotherapist and nurse, who provide a continual therapeutic programme. The number of incidents of self-harm and restrictive physical interventions has significantly reduced for each child.

Risk assessments for children are detailed and provide guidance for staff on managing risk. These assessments are regularly reviewed with children's social workers and updated following any changes. Staff enable children to take age-appropriate risks and gain trust, which helps them to develop their independence and confidence.

Care plans emphasise the importance of de-escalation techniques to avoid incidents. Incidents of restraint have only taken place when there has been a need to protect children's safety. Restorative work takes place following these incidents so that children understand the reasons why staff acted to protect them, and to rebuild trust. However, the provider recently changed their model of training for staff which, although suitable for many of its services, was not suitable for this home. The registered manager has identified this and staff will retrain in the previous model of positive behaviour support.

Safeguarding concerns are shared appropriately with other professionals. This enables the most relevant professional to respond to any incidents.

There has been a significant reduction in the frequency of children going missing from the home. Each child has a clear plan for staff to follow if the child does go missing. This includes details of likely places to search and the immediate actions that staff should take. The manager works closely with external professionals, including the local police, to safeguard children when they are missing from the home.

Recruitment processes are robust and ensure that applicants are suitable to work with vulnerable children. Interviews with prospective staff explore how the applicant, if appointed, would treat children with kindness and respect.

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

The registered manager is experienced and suitably qualified for the role. Professionals report very good working relationships with the multi-disciplinary staff team. The manager and deputy manager work closely with the home's therapy and nursing team. Staff describe the manager and deputy manager as calm, experienced and knowledgeable. Staff care about the children and enjoy working at the home.

Staff team meetings and supervision sessions are regular and effective. They focus on children's well-being and progress. These meetings encourage staff to reflect on their practice.

The manager values the independent person's visits and uses the feedback to improve the quality of care. The manager writes a high-quality detailed review of the care provided to children twice a year. This helps her to review and measure the impact of the care on children.

Monitoring and assurance systems have improved since the last inspection. The manager has close oversight of children's progress and any changes needed. Handovers of information between staff and the wider multi-disciplinary team ensure that children's mood, emotional well-being and diagnosed mental health conditions are regularly considered. This helps staff to monitor and provide tailored support or request input from the therapy and nursing team.

The manager is clear about the types of support that the staff can offer children. She has paused accepting new children into the home while vacant nursing posts are recruited to. Having enough suitably qualified nurses available is essential for the home to meet the needs of children as described in its statement of purpose. The manager fully understands the potential for disruption that new children moving in may cause. Professionals say that this has helped to provide children with a settled home.

There are sufficient care staff for the children. New staff receive a comprehensive induction. All staff undergo a suitable training programme to give them the skills to support children. Staff are flexible and amend shift patterns to provide cover to reduce the need for agency staff or to facilitate trips to a child's family home. This helps children to have consistent care from staff they know well.

## 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 the premises used for the purposes of the home are designed and furnished so as to—</p> <p>meet the needs of each child. (Regulation 6 (1)(a)(b) (2)(c)(i))</p> <p>This requirement was made at the last inspection and is restated.</p>	<p>31 August 2022</p>

### Recommendation

- The registered person should ensure that all staff have been adequately trained in the principles of restraint and any restraint techniques appropriate to the needs of the children living at the home, as defined in the home's statement of purpose. ('Guide to the Children's Homes Regulations, including the quality standards', page 49, paragraph 9.57)

## **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:** 1183069

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

**Registered provider:** Aspris Children's Services Limited

**Registered provider address:** The Forge, Church Street West, Woking, Surrey  
GU21 6HT

**Responsible individual:** Victoria Wallace

**Registered manager:** Kate Rowe

## Inspector

Jamie Cousins, Social Care Inspector



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