

SC379123

Registered provider: Cove Care Residential Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This privately owned home offers care for up to five children with mental health, psychological and/or emotional difficulties and associated complex care needs.

The manager is in the final stages of registering with Ofsted. She is working towards a qualification in leadership and management at level 5.

Inspection dates: 6 and 7 September 2022

Overall experiences and progress of children and young people, taking into account	requires improvement to be good
---	--

How well children and young people are helped and protected	requires improvement to be good
---	---------------------------------

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

The children's home is not yet delivering good help and care for children and young people. However, there are no serious or widespread failures that result in their welfare not being safeguarded or promoted.

Date of last inspection: 22 March 2022

Overall judgement at last inspection: sustained effectiveness

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
22/03/2022	Interim	Sustained effectiveness
21/07/2021	Full	Requires improvement to be good
04/03/2020	Interim	Sustained effectiveness
05/06/2019	Full	Good

Inspection judgements

Overall experiences and progress of children and young people requires improvement to be good

Four children live in the home. One child has left the home and returned to live with a family member. One child has moved into the home since the last inspection.

Children's experiences of living in the home are mixed. Two children enjoy living in the home and participate well in daily routines that promote their health and well-being. Two children spend most of their time in their bedrooms and so have limited interactions with staff and their peers.

The child who moved on from the home did so after learning to regulate his emotions better and having developed positive relationships with the staff providing his care and his family. The child had a positive and planned transition when he returned to live with his family. This was a good outcome for him.

Education plans for two children are not clear. One child, who has not attended school for a long time, has not had his education plan reviewed within the expected time frame. When new children move into the home, school transport arrangements are not always well thought out. This does not fully support children's regular attendance at school. Two children are making good progress with their learning, and their attendance at school is good.

All children are registered with local health services and are supported by staff to attend routine and emergency health appointments. Children can access therapy through clinicians who work for the organisation, and further specialist support is accessed as necessary. Two children appear to be making progress with their health and well-being, and two children are experiencing difficulties. For one child, this has led to a decline in their personal hygiene. Clinical reviews are held monthly with children and their key worker. This is less frequent than described in the home's statement of purpose and so managers and staff are not delivering the aims and objectives of the service as set out in this document.

Some children are well supported to keep in touch with people who are important to them. However, one child's social worker is unclear why staff have not supported a child to see their sister, and the child wants to understand more about this too. Arrangements for children to keep in touch with their siblings are not always recorded clearly in children's plans.

Children have a range of opportunities to share their wishes and feelings and to contribute to the day-to-day running of the home. Individual discussions with staff and weekly children's meetings provide forums for children to have a voice. However, it is not always clear how staff and managers respond to the issues and requests that children make.

Staff encourage children to develop skills that will help them in adulthood. For example, children are encouraged to carry out household chores, such as cooking and cleaning. One child has acquired part-time employment, which is in addition to attending school.

There have been some improvements to the decor and furnishing of the home. Two children's bedrooms viewed by inspectors are personalised. Lighting in the children's rooms is designed to help children to communicate their mood through colour representation.

There is a diverse team of staff who care for the children. Staff value the children's wishes about how they want to be identified. This creates a culture where children feel able to explore and express their identity. They are supported by staff to access religious materials in the faith that they choose to follow. Staff understand children's cultural needs and ensure that these are well supported.

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

The manager ensures that staff receive training in how to use physical intervention techniques effectively and safely. However, there are delays in managers reviewing the effectiveness of the intervention techniques and talking to staff and children about what happened. This limits the opportunities to learn from what has happened promptly.

When children receive consequences for their behaviour, these are not always correctly logged, and records lack management oversight. On one occasion, staff have not demonstrated care and empathy when they have imposed a consequence for a child.

Fire doors are not maintained well. One fire door does not close fully and a bedroom door where staff sleep is damaged. A fire exit on the ground floor was locked and could not be accessed by children and visitors, and staff do not always carry the key with them to facilitate an exit in the event of a fire emergency. The external gate that leads to the fire assembly point from the rear of the home was locked on both sides and could not be opened from inside of the garden. These shortfalls present a hazard to children's safety, as well as to visitors and staff.

Staff work well with professionals when there are concerns about child exploitation. Meetings are held to discuss risk and strategies to manage risk. However, risk management plans do not give a clear overview of the concerns and do not always distinguish between current and historic information. This has not had a direct impact on children, but how staff record information and request formal minutes of professionals' meetings require improvement so that there is a clear audit trail of discussions had and decisions made about children's safety and welfare.

There has been a reduction in episodes of children going missing from the home. Staff work well with police to locate children who are not where they should be.

Records completed by staff do not always detail actions taken to locate children for the full duration they are missing. Children now speak to an independent person when they return; however, the quality of information shared with staff to help further reduce risk and future incidents varies. This has not been challenged by the manager.

There has been one allegation about a person who works in the home. Managers responded quickly by reporting concerns to professionals. This ensures that there is external scrutiny, and actions taken are in the best interests of the children who live in the home.

Some children have developed skills to manage their impulse to cause harm to themselves. One child has developed a good relationship with the clinical nurse and will communicate their feelings. This trusted relationship has resulted in the child informing the clinical nurse that they have access to medication. This allowed staff to remove the medication and keep the child safe.

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

The manager has introduced some new systems to monitor the quality of the care that children receive. However, these are not consistently used well. For example, on one occasion, the manager signed off a physical intervention incident record that did not contain all the relevant information about the technique used. In addition, Ofsted is not always notified of incidents when children have been exposed to risks relating to child sexual exploitation. For example, Ofsted was not informed when a child received an indecent image of an older person who was unknown to the child. This reduces oversight of events at the home by the external regulatory body.

A consistent group of five agency staff supplements the core staff team. There is never more than 50% agency staff caring for the children at once. While challenges with staffing remain, the registered person is taking steps to reduce the impact on children and provide continuity of care as far as possible.

Team meetings do not take place regularly. This reduces opportunities for managers and staff to review children's care and inform development plans. In addition, it does not support a reflective culture that promotes learning through shared discussions about practice.

Staff complete training to support them to carry out their role, and most staff have completed training that is specific to mental health. Other staff have plans in place to complete this training. The home's workforce development plan is not kept up to date, which limits its effectiveness.

The manager ensures that staff receive regular supervision. Staff feel well supported by the manager and enjoy their work. Staff receive an annual appraisal of their performance to further support their development. The responsible individual does not keep clear records of the manager's supervision. As the manager is new to the

role, this is a missed opportunity to keep an audit trail of issues discussed for both the manager and the responsible individual to refer to, to support the manager's ongoing learning and development.

Feedback from families and professionals is mixed. Some feedback reflects positive communication with staff at the home and good support provided to children, which has resulted in good progress. However, other feedback reflects shortfalls in communication and support provided for two children. This means that children have had mixed experiences and made varied levels of progress when residing at the home.

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>understand and apply the home's statement of purpose;</p> <p>ensure that staff—</p> <p>understand and apply the home's statement of purpose;</p> <p>protect and promote each child's welfare;</p> <p>treat each child with dignity and respect. (Regulation 6 (1)(a)(b) (2)(a)(b)(i)(ii)(iii))</p> <p>In particular, help children to develop daily routines that support their emotional health and well-being. Ensure that consequences children receive are imposed with care and empathy. Support children to stay in touch with siblings where this is appropriate. Follow up with children about issues they raise in children's meetings and other forums.</p>	31 October 2022
<p>The education standard is that children make measurable progress towards achieving their educational potential and are helped to do so.</p>	31 October 2022

<p>In particular, the standard in paragraph (1) requires the registered person to ensure—</p> <p>that staff—</p> <p>help each child to achieve the child’s education and training targets, as recorded in the child’s relevant plans;</p> <p>understand the barriers to learning that each child may face and take appropriate action to help the child to overcome any such barriers;</p> <p>help each child to understand the importance and value of education, learning, training and employment;</p> <p>help each child to attend education or training in accordance with the expectations in the child’s relevant plans. (Regulation 8 (1) (2)(a)(i)(iii)(iv)(x))</p> <p>In particular, ensure that all children living in the home have an up-to-date education plan and are supported by staff to attend a place of education or employment.</p>	
<p>The leadership and management standard is that the registered person enables, inspires and leads a culture in relation to the children’s home that—</p> <p>helps children aspire to fulfil their potential; and</p> <p>promotes their welfare.</p> <p>In particular, the standard in paragraph (1) requires the registered person to—</p> <p>use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13 (1)(a)(b) (2)(h))</p>	<p>31 October 2022</p>
<p>After consultation with the fire and rescue authority, the registered person must—</p> <p>take adequate precautions against the risk of fire, including the provision of suitable fire equipment in the children’s home. (Regulation 25 (1)(a))</p> <p>In particular, ensure that fire doors are well maintained and fire exits are accessible at all times.</p>	<p>20 September 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>the date, time and location of the use of the measure;</p> <p>a description of the measure and its duration;</p> <p>details of any methods used or steps taken to avoid the need to use the measure;</p> <p>the name of the person who used the measure (“the user”), and of any other person present when the measure was used;</p> <p>the effectiveness and any consequences of the use of the measure;</p> <p>a description of any injury to the child or any other person, and any medical treatment administered, as a result of the measure;</p> <p>within 48 hours of the use of the measure, the registered person, or a person who is 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; and</p> <p>within 5 days of the use of the measure, the registered person or the authorised person adds to the record confirmation that they have spoken to the child about the measure.</p> <p>(Regulation 35 (3)(a)(i)(ii)(iii)(iv)(v)(vi)(vii)(viii)(b)(i)(ii)(c))</p>	<p>31 October 2022</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>31 October 2022</p>

<p>The registered person must notify HMCI and each other relevant person without delay if—</p> <p>a child is involved in or subject to, or is suspected of being involved in or subject to, sexual exploitation. (Regulation 40 (4)(a))</p>	<p>20 September 2022</p>
---	--------------------------

Recommendations

- The registered person should develop and keep under review a statement of purpose which is child focused and indicates how the home provides individualised care to meet the quality standards for the children who live there. In particular, information about the staff team and the frequency of clinical reviews should reflect current arrangements. ('Guide to the Children's Homes Regulations, including quality standards', page 14, paragraph 3.5)
- The registered person should have a workforce development plan which is always accessible and kept up to date. ('Guide to the Children's Homes Regulations, including quality standards', page 53, paragraph 10.8)
- The registered person should recognise that it is good practice for a note of the content and/or outcomes of supervision sessions with the manager to be kept and to ensure that both the person giving the supervision and staff member have a copy of the record. ('Guide to the Children's Homes Regulations, including quality standards', page 61, paragraph 13.4)

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: SC379123

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: Post vacant

Inspectors

Helen Malanaphy, Social Care Inspector
Mark Dickenson, Social Care Inspector

The Office for Standards in Education, Children's Services and Skills (Ofsted) regulates and inspects to achieve excellence in the care of children and young people, and in education and skills for learners of all ages. It regulates and inspects childcare and children's social care, and inspects the Children and Family Court Advisory and Support Service (Cafcass), schools, colleges, initial teacher training, further education and skills, adult and community learning, and education and training in prisons and other secure establishments. It assesses council children's services, and inspects services for children looked after, safeguarding and child protection.

If you would like a copy of this document in a different format, such as large print or Braille, please telephone 0300 123 1231, or email enquiries@ofsted.gov.uk.

You may reuse this information (not including logos) free of charge in any format or medium, under the terms of the Open Government Licence. To view this licence, visit www.nationalarchives.gov.uk/doc/open-government-licence, write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk.

This publication is available at <http://reports.ofsted.gov.uk/>.

Interested in our work? You can subscribe to our monthly newsletter for more information and updates: <http://eepurl.com/iTrDn>.

Piccadilly Gate
Store Street
Manchester
M1 2WD

T: 0300 123 1231
Textphone: 0161 618 8524
E: enquiries@ofsted.gov.uk
W: www.gov.uk/ofsted

© Crown copyright 2022