

SC361090

Registered provider: Tulip Care One Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home is owned and run by a private organisation. It provides care and therapeutic support for up to five children of the same gender who experience social and emotional difficulties.

There were three children living in the home at the time of the inspection.

There has been no registered manager at the home since 1 June 2023.

Inspection dates: 12 and 13 September 2023

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: 9 August 2022

Overall judgement at last inspection: good

Enforcement action since last inspection: not applicable

Recent inspection history

Inspection date	Inspection type	Inspection judgement
09/08/2022	Full	Good
17/11/2021	Full	Good
31/07/2019	Full	Good
01/08/2018	Full	Good

Inspection judgements

Overall experiences and progress of children and young people: good

Staff are sharply focused on treating children with dignity and respect and giving them a positive experience of care. Staff demonstrate empathy and resilience, which offers emotional containment and stability for children and helps them to make good progress. Staff receive support from the organisation's clinical lead to build on their capacity to remain sensitive and responsive to the needs of children in their care.

Children are supported to pursue their talents and interests. Their strengths are recognised, which improves their self-esteem. One child was proud to demonstrate to the inspector their involvement in the weekly food shop, and another described their talent in drama. The artwork created by one child is displayed throughout the home.

Children go on day trips independently and with staff. They also have access to home-based activities, such as arts and crafts, playing the keyboard, and caring for the two pet cats. For some children, their daily routine has limited variety. This is recognised by leaders and staff proactively try to develop the capacity of children to engage in activities and therefore improve their overall experience. Where necessary, referrals to mental health services and health professionals are made when the limiting factors are linked to their physical or emotional health and well-being.

Staff recognise that children's traumatic early life experiences can affect their ability to make steady progress. Clinical supervision is used to discuss the effectiveness of the responses from staff, particularly when children's progress is fluctuating. Some, but not all, monthly progress reports are of a good quality. As a result, records do not consistently demonstrate the progress that children are making towards the goals that are important to them.

Children's care and support plans are individualised and reliably inform staff how to help them to be more independent. Staff consider children's wishes for their futures alongside their strengths and vulnerabilities. In one example, a child is hoping to live more independently in the future and managers are working closely with other professionals to consider how they can be helped to learn how to do so safely.

Inclusivity and kindness are values that are modelled by staff. Children are encouraged to express their individual choices. However, there are times when children struggle to live together harmoniously. One child recently moved out of the home, which has had a negative impact on the dynamics between the other children. This is being addressed by leaders and staff to ensure that there is better cohesion and acceptance. Activities are carefully planned to enable children to have time independently with trusted staff, and key-work sessions seek to address any frustrations that children might experience with one another.

All children have access to education, and managers think creatively about how to help children who have previously found it difficult to attend school. The acting manager has built strong relationships with education providers to ensure that children have the right support, and leaders advocate on behalf of children when they identify shortfalls in the service they are receiving from other professionals.

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

There are occasions when children go missing from home. Staff understand how to respond effectively to these incidents to ensure that children return home safely. There is a trauma-informed approach to addressing children's needs. Individual behavioural management plans provide staff with clear strategies, so they know how to care for children and keep them safe.

Positive behaviour is promoted by staff engaging children in conversations about their feelings and supporting children to understand their experiences. They consider the timing and setting to give children the best chance of being reflective. This has been effective in helping children take ownership of their behaviours rather than using consequences.

Risk assessments are thorough and informed with input from the clinical team. There are clear actions for staff to follow when there is presentation of specific risk. Key-work sessions are specific and responsive to need, for example by addressing the dynamics within the home that are contributing to children feeling withdrawn or frustrated. They help children understand how risks may affect them and how to reduce them.

Staff and managers have a good understanding of relational security and how this contributes to an emotionally and psychologically safe environment for children. Allegations and complaints are taken seriously and are followed up by leaders. When allegations are made, interim measures to protect children are put in place pending investigation. The wider network is involved in discussions around risk management and children are consulted with sensitivity. Information about how to complain is given to children when they arrive, but is not readily accessible throughout their stay.

There are occasions when physical interventions are required, but these are necessary and proportionate for the prevention of harm to children. On the whole, they are well recorded and reflective, with appropriate management oversight. Staff use calming techniques to good effect to de-escalate situations and thereby reduce the need for holding children.

Staff are knowledgeable about children's risks and needs. They are aware of the challenges with the dynamics among the children and are committed to exploring these during the team meetings and clinical consultations that take place. For one child, staff and leaders recognise that the granting of independence in the community has contributed towards a greater sense of well-being for this child.

Although the child has not made full use of this opportunity yet, the value of it being arranged is evident.

Before a child moves into the home, a risk assessment is completed to consider the child's needs alongside those of children who already live there. The risk assessments enable managers to undertake a well-informed assessment of the likely impact of the child moving into the home, which results in careful planning and matching.

The effectiveness of leaders and managers: good

There has been no registered manager in the home since June 2023. The acting manager has submitted their application to be registered with Ofsted. There have been changes to staffing since the last inspection and the introduction of a new electronic recording system. These changes are positive but have also presented challenges for leaders, who have worked hard to reduce the risk of a negative impact on children and on staff.

Children are reassured by the acting manager and demonstrate positive attachments with staff members. Children can identify trusted staff and seek them out to talk about their day, and to raise any worries they have.

A monthly reporting system and quarterly managers' meeting have been introduced. This has contributed to better oversight and monitoring in relation to some of the shortfalls identified during the last inspection. The provider is aware that there are still improvements to be made to ensure that there are consistent progress reports for children, timely quality of care reviews and comprehensive safeguarding notifications provided to the regulator.

Staff have trust in their leaders and managers and report positively about their experiences. They describe kind and committed leaders with an 'open door' approach to support. Staff are proud of being part of a hardworking and committed team whose members communicate well and are dedicated to improving the outcomes for children in their care. The therapeutic underpinning is central to the vision of leaders and the staff team, and is evident in their approach and recording.

Supervision is regular and of a good standard. Staff say that they trust their leaders to listen and respond appropriately. One member of staff said that support from the acting manager is 'accessible at any time', both formally and on a day-to-day basis. Managers recognise the importance of ensuring that all care staff working at the home have the necessary qualifications as required by The Children's Homes Regulations (2015). They closely monitor progress towards the qualification in staff supervision and appraisals.

Professionals have confidence in the commitment and capacity of staff and managers to support children. One social worker described excellent communication from the acting manager and how they have 'done everything in their power to create stability' for a child. The acting manager has good support from leaders and

maintains good communication with external professional networks to improve outcomes for 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, The 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 children’s views, wishes and feelings standard is that children receive care from staff who—</p> <p>develop positive relationships with them;</p> <p>engage with them; and</p> <p>take their views, wishes and feelings into account in relation to matters affecting the children’s care and welfare and their lives.</p> <p>In particular, the standard in paragraph (1) requires the registered person to—</p> <p>ensure that each child has access to the home’s children’s guide, and the home’s complaints procedure, when the child’s placement in the home is agreed and throughout the child’s stay in the home.</p> <p>(Regulation 7 (1)(a)(b)(c) (2)(b)(ii))</p> <p>In particular, the registered person should ensure that children have clear access to information about the complaints procedure throughout their stay and that they understand it.</p>	<p>14 December 2023</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>14 December 2023</p>

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.

(Regulation 13 (1)(a)(b) (2)(f))

In particular, the registered person should ensure that information about children's progress is regularly recorded and evaluated to inform how care is delivered.

Recommendations

- The registered person should ensure that all staff in a care role have the qualification in regulation 32(4) within the relevant timescale listed in regulation 32(5). Where the registered person has extended the time period for staff members, their progress towards achieving the qualification must be kept under close review. ('Guide to the Children's Homes Regulations, including the quality standards', page 53, paragraph 10.12)
- The registered person should have a system in place so that all serious events are notified to the regulator at the point of any incident meeting the requirements set out in regulation 40. Notification must include details of the initial actions taken by the home's staff in response to the event without delay. ('Guide to the Children's Homes Regulations, including the quality standards', page 63, paragraph 14.13)
- The registered person should ensure that they make best use of information from independent and internal monitoring. Where the registered person has completed the quality of care review, they should submit it to the regulator within the required timescale outlined in regulation 45 to ensure that there is effective oversight. ('Guide to the Children's Homes Regulations, including the quality standards', page 55, paragraph 10.24)

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: SC361090

Provision sub-type: Children's home

Registered provider: Tulip Care One Limited

Registered provider address: Unit 19–20, Bourne Court, Unity Trading Estate, Southend Road, Woodford Green, Essex IG8 8HD

Responsible individual: Chan Brissett

Appointed manager: Denika Minley Foster

Inspector

Tash Williams, Social Care Inspector

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