

SC046276

Registered provider: Devon County Council

Full inspection

Inspected under the social care common inspection framework

Information about this secure children's home

This secure children's home is managed by a local authority and is approved by the Secretary of State to restrict children's liberty. The children's home can accommodate up to eight children aged between 10 and 17 years under Section 25 of the Children Act 1989. Admission of any child under 13 years of age requires the approval of the Secretary of State.

The commissioning of health services in this home is the statutory responsibility of NHS England under the Health and Social Care Act 2012. Education is provided on site in dedicated facilities.

The manager is registered with Ofsted. There were four children living in the home at the time of the inspection.

Inspection dates: 12 to 14 September 2023

Overall experiences and progress of children and young people, taking into account	outstanding
Children's education and learning	good
Children's health	outstanding
How well children and young people are helped and protected	outstanding
The effectiveness of leaders and managers	outstanding

The secure children's home provides highly effective services that consistently exceed the standards of good. The actions of the children's home contribute to significantly improved outcomes and positive experiences for children and young people who need help, protection and care.

Date of last inspection: 7 June 2022



Overall judgement at last inspection: good

Enforcement action since last inspection: none



Recent inspection history

Inspection date	Inspection type	Inspection judgement
07/06/2022	Full	Good
09/02/2022	Full	Good
29/06/2021	Interim	Sustained effectiveness
03/03/2020	Interim	Sustained effectiveness



Inspection judgements

Overall experiences and progress of children and young people: outstanding

Children say they are happy, they feel safe, and they have formed important trusting relationships with peers and staff. Children have staff they turn to if they have worries or concerns. All inspectors observed positive and extremely caring interactions between staff and children.

Social workers report timely, excellent-quality communication with the team. They are overwhelmingly positive about all aspects of the care children receive and the outstanding progress children are making.

Parents are very happy with the care and support their children receive. They remarked that their children feel settled and have opportunities to experience a range of activities that reflect their interests and hobbies. Parents said that staff are very good at keeping them up to date about their child's needs and progress.

Care plans are holistic and thorough. They are regularly reviewed, evidencing the significant progress each child is making. They are written in a child-centred way.

Staff understand the importance for children of spending time in the community prior to moving on from the home. They involve children in planning a range of activities that meet their interests and their educational needs. Children are also encouraged to develop new interests. Staff plan activities at the child's pace and review each activity afterwards to identify learning and listen to children's views. As a result, children are developing essential life skills and enhancing their health and well-being.

Staff are proud of the work they do. They are skilled at forming trusted relationships. They are compassionate and respectful in the way they communicate and record. Staff know the children's needs extremely well and communicate with children in the ways they prefer. They have received training in trauma-informed practice and working and communicating with children with autistic spectrum disorder.

Children's transitions are extremely well planned and implemented, resulting in successful moves for children. They are excellent examples for other children in the home, allaying their worries about leaving the home.

When children move on, managers and staff continue to provide advice and support for children and their carers, as agreed with their social workers. This is time limited, but is effective in supporting children to settle.



Children's education and learning: good

Leaders and managers provide children with a suitably broad and well-designed curriculum. However, at the time of the inspection, children had limited access to science lessons. Education managers had advanced plans in place to provide more science teaching for children.

Teachers plan subject curriculums well. For example, in art children gradually develop knowledge of an array of art materials and their use, as well as various creative techniques. Teachers involve children appropriately in decision-making about the taught curriculum.

Leaders and teachers are keen for children to develop their reading skills, and a love of reading, while living in the home. As a result, most of the children read books in their own time.

Teachers do not consistently conduct thorough assessments of children's starting points in mathematics and English. Teachers experiment with learning materials to find the right level of learning for children and cannot easily measure children's progress from their starting points.

Teachers deliver their curriculums well, including explaining new materials to learners. In most cases, they plan suitable opportunities to recap challenging topics. In music, this helps children to grasp the use of unfamiliar technical equipment.

Teachers work well across subject areas to track children's progress. They set ambitious targets for children, which relate to both pastoral needs and academic goals. They use this approach to find flexible ways to support children's learning, such as the development of English and mathematics knowledge via other subject areas.

Teachers mostly provide children with clear and direct feedback. However, in a few subjects, such as mathematics, teachers do not use feedback well enough to support children to correct the errors that they make.

Teaching staff have appropriate teaching qualifications and, in the large majority of cases, relevant subject-specific qualifications and experience. They undertake specialist training to help them support children. This enables them to confidently work with young people when they experience difficulties during lessons.

Teachers work very effectively with other professionals at the home. They have a thorough knowledge of children's wider lives, and how certain needs can affect their studies. This enables children to establish positive relationships with teaching staff and gain confidence to make progress in a variety of subjects.

The SENCo holds an appropriate qualification and has suitable experience for the role. They are diligent in ensuring that staff have the information they need to support children's special educational needs. Teachers make reasonable adjustments



for children's needs in class, such as to meet the needs of children with autistic spectrum disorder and/or dyslexia.

As a result of good-quality teaching and support, children make good progress in their learning. The work that they produce is of the expected standard. In art, children's work is of a very high standard, and some children have won prizes in national competitions. Children use art journals to express and explore their feelings, alongside creating striking artwork.

Children benefit from opportunities to take accredited qualifications in subjects such as English, mathematics, hair & beauty, and food hygiene. In almost all cases, they pass their examinations. However, in a number of subjects, there are no opportunities for children to gain useful qualifications. Managers have advanced plans in place to rectify this.

Leaders use a well-considered reward-based system to encourage children's positive behaviour. They link positive behaviour directly to opportunities for children to engage in experiences outside the home. There is a calm, studious atmosphere during lessons, and children participate well. Children attend lessons at high rates, and they engage well with learning activities.

Leaders are keen that children's opportunities to experience life outside the home are enriching and educational. They provide children with a plethora of suitable activities. Children value these opportunities.

Leaders and teachers include an appropriate focus on healthy lifestyles within the curriculum. For example, in sport, children learn about the importance of healthy eating and a balanced diet. They take part in activities such as sports days, which include an array of challenging sports events.

Teachers use classroom activities to support children's transition to their next placements, for example by supporting them to provide their new placement with information about themselves, and developing financial literacy so that they can be more independent.

Children can access impartial careers information, advice and guidance. However, a significant number of children are not ready to access this externally supplied support, and instead receive a less formal and more limited range of careers support within the home.

Children's health: outstanding

The healthcare staff are passionate and very knowledgeable about the health and well-being of all of the children in the home. They work collectively to improve the physical, mental and emotional well-being of children they support.



Staff work very creatively with children to build trusting relationships, encouraging their engagement with the CHAT assessment at a pace that meets their individual needs. This ensures the appropriate sequencing of interventions.

All children are assessed by specialist services such as a speech and language therapist, occupational therapist, CAMHS and a substance misuse practitioner. Children's physical and emotional health significantly improves as a result. Health professionals work closely and effectively with family members to support them to understand the child's needs, and help motivate children to consider their choices about their health and lifestyles in the future.

Secure Stairs is fully embedded across the home and has a very positive impact on children's experiences and progress. The home, with some external support, has developed a level 3 diploma in line with the principles of Secure Stairs. Health and care staff have embraced this, and its success is supported by the excellent integrated working across the home.

Multi-agency formulation meetings inform an understanding of the needs of each child and appropriate interventions for each child. The meetings monitor children's goals and ensure that children feel safe and supported.

Reflective practice sessions provide support for staff, enabling them to deliver highquality care to children. Staff have received training to assess and understand their own sensory needs and behaviour triggers.

Transition planning and arrangements are of high quality. Practitioners use the Thrive assessment framework for each child. Assessments are shared with subsequent placements and enable carers to have a thorough understanding of how best to support the child to continue to make progress in their behaviours and well-being.

Health practitioners have developed comprehensive discharge packs for children that are child centred and personal. A discharge audit has commenced, and learning identified. This is an ongoing process and will continue to be monitored and inform transitions for children.

The occupational therapist helps children to complete vocational work to achieve employment when children leave the centre. They use the sensory attachment intervention model, a trauma-impact model which supports children with identified trauma.

The occupational therapist has worked with staff members to engage in the 'just right state' programme. This helps staff with self-regulation and co-regulation. This also enables staff to effectively support children to manage vicarious trauma.

Staff vacancies have presented some challenges in the healthcare team. However, strong clinical leadership and successful recruitment campaigns have ensured that



children have continued to receive a comprehensive healthcare service. As a result, all children have improving emotional, physical and mental health.

Children who are physically restrained are assessed by a first aider. They are not currently seen by a physical health nurse as the post is vacant (this is being addressed). Children can see the GP or other health professionals if they request this and/or staff assess that this is necessary.

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

Very good-quality risk management and the sharing of learning lead to staff practices that help to keep children safe and to children saying they feel safer.

Staff implement comprehensive risk assessments and support plans. These are reviewed and updated. Staff use these to work with children to help them to understand what children are worried about and what can help keep them safe.

Staff use their skills in building relationships to influence children to develop positive socials skills and behaviour. When children's behaviour is poor, staff help children to understand the impact this has on others, and this has led to children changing behaviours. The home's culture is one of earning rewards and positive reinforcement, rather than using consequences, which are rarely used.

Physical restraint, when used, is used appropriately. Interventions are usually very brief, and staff release children as soon as it is safe to do so. Children receive skilled support going forward. Incidents are well recorded and there is effective quality assurance that identifies learning and good practice. This helps to develop practice and informs individual children's care.

Currently, the local safeguarding partnership does not carry out a review of the use of restraint at the home or include this in its annual report. This does not detract from the quality of safeguarding practice at the home.

Single separation and managing away are also rarely used. When they are used, they are appropriate and for the minimum time necessary, with robust management oversight.

Very good practice is evident in helping children understand the impact of bullying on others. Bullying and discrimination are challenged and addressed. Group work carried out with children in early June, following a small number of incidents of verbal bullying, has resulted in no further incidents to date.

Safeguarding referrals, including referrals to the local authority designated officer, are managed very well. All concerns are dealt with promptly, appropriately recorded and are supported by excellent partnership working with relevant professionals.



Professional curiosity is impressive. For example, a manager rigorously pursued information shared with the home, leading to protective actions being taken by the placing local authority. One professional said 'staff are dogged in their efforts to seek information' to help the child. All managers and staff proactively promote children's safeguarding.

Safe recruitment of staff is robust and ensures that the right people are employed to work with vulnerable children.

The effectiveness of leaders and managers: outstanding

Managers are inspirational leaders. They are energetic, passionate and committed in their work, with the needs of children at the centre of practice and decision-making.

Managers apply their own experience and use of self appropriately in supporting staff and developing practice. They apply extremely high standards because they are aspirational for each child and each member of staff.

One very experienced manager said the registered manager is the best manager they have worked with, because 'she gets it'. That is, the registered manager understands the complexity of the work, provides support and respectful challenge.

Leaders know staff strengths and areas for development. They identify and grow talent. There are a number of managers who have the relevant management qualification or are undertaking leadership and management qualifications. The integrated senior management team is succession planning.

Staff and managers are supported with good-quality supervision, including the offer of clinical supervision, appraisal, regular team meetings and training days.

Staff receive training to meet the specific needs of children living in the home. They receive training to support staff resilience and enhance their understanding of the emotional impact of their work.

While there has been a relatively small number of children living in the home at any one time, there have been a number of planned admissions into the home and transitions out of the home since the last inspection. Staff skills in relationship building and the commitment of staff to each individual child's needs support effective communication and interventions with children.

The integrated management team is committed to continuous development and improvement. There is an embedded whole home ethos to work with the children in a nurturing, therapeutic way. This includes the business team, facilities team, as well as care, health and education staff. Positive relationships and effective interventions support children's progress, reduce risk and enable children to return to live in the community.



The whole home is enthusiastic about disseminating and sharing learning. This is demonstrated in the home's involvement in three research projects. All these projects are relevant to enhancing staff practice and staff understanding of working with children with complex needs and vulnerabilities.

Managers have also reached agreement about information-sharing and will be embarking on a peer review programme with another secure children's home, to learn, to challenge and to further develop practice.

The management team has effective systems in place to monitor and review the quality of care in the home. There is robust management information. The team knows the areas for further development and identifies and responds to emerging trends or behaviours in a timely way.



What does the secure children's home need to do to improve?

Recommendations

- The registered person should ensure that they liaise with the local safeguarding partnership to remind it of its duties as set out in Working Together to Safeguard Children 2018. Specifically, that safeguarding partners should include their review of the use of restraint at the home in their annual report. ('Guide to the Children's Homes Regulations, including the quality standards', page 42, paragraph 9,2)
- The registered person should ensure that teachers have a firm knowledge of all children's starting points in mathematics and English, to help them plan the taught curriculum. Leaders should ensure that all teachers use feedback well to support children's development. They should also ensure that all children can access appropriate careers guidance to help them plan their future study and work goals. ('Guide to the Children's Homes Regulations, including the quality standards', page 29, paragraph 5.18)

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'.

11



Secure children's home details

Unique reference number: SC046276

Provision sub-type: Secure Unit

Registered provider: Devon County Council

Registered provider address: Devon County Council, County Hall, Topsham

Road, Exeter, Devon EX2 4QD

Responsible individual: Steve Liddicott

Registered manager: Helen Bowkett

Inspectors

Cathey Moriarty, Social Care Inspector Gary Turney, Social Care Inspector Shaun Common, HMI Social Care Inspector Saul Pope, HMI Further Education and Skills Bev Gray, Health and Justice Inspector CQC



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13