

1231311

Registered provider: Cove Care Residential Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home is registered to provide care for up to three children with social, emotional and complex mental health difficulties.

The home has been without a manager since 19 March 2024. A new manager has not yet been appointed.

Inspection dates: 4 and 5 June 2024

Overall experiences and progress of children and young people, taking into account **inadequate**

How well children and young people are helped and protected **inadequate**

The effectiveness of leaders and managers **inadequate**

There are serious and/or widespread failures that mean the care and experiences of children and young people are poor and they are not making progress.

Date of last inspection: 27 February 2024

Overall judgement at last inspection: requires improvement to be good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
27/02/2024	Full	Requires improvement to be good
12/12/2022	Full	Good
25/10/2022	Full	Inadequate
21/02/2022	Interim	Sustained effectiveness

Inspection judgements

Overall experiences and progress of children and young people: inadequate

The same three children live at the home as were there at the time of the last inspection. All three children were spoken to by the inspectors.

Staff are not helping children to develop good daily routines, and this is not being addressed well by managers. Children go to bed late, have poor sleep patterns, do not get up at a reasonable time and do not eat regular meals. This poor approach to care does not support children's well-being and does not prepare them to manage daily life now or in the future.

The home environment is not well maintained by staff. Some areas, including children's bedrooms, are unkempt and unclean. One child's bedroom has paint peeling off the wall, while a chest of drawers in another child's bedroom is broken. There are also damaged and stained soft furnishings and broken furniture in communal areas of the home.

Some children are not helped by staff to develop good self-care skills or to tend to their personal hygiene. In addition, staff do not prioritise children's health needs. For example, staff have not followed up on recommendations raised at children's health reviews. In addition, they do support children to understand the dangers of using a vape. A child was seen carrying a vape around the home, and this was not noticed by staff.

Children's educational progress is mixed. While one child attends college, two children are out of school and have limited time with tutors at home. Leaders and managers do not advocate for these children strongly enough to help them to increase their engagement and return to full-time learning as soon as possible. In addition, staff do not encourage the children to take part in educational activities when they are not engaging with their tutor, nor do they follow up on recommendations raised at education review meetings. This does not help children to reach their potential academically. Consequently, their learning and social interaction are compromised.

Having lived at the home for some time, the children are settled and have built trusting and positive relationships with some staff. They are comfortable in their home and have developed a sense of belonging. The children get along well and look out for each other. They enjoy activities together, including a recent day out at the beach.

Staff help children spend time with their families and people who are important to them. For one child, time with family has increased considerably, which is positive for them.

Some children have made progress with managing their feelings, and they have been supported to express their views and be part of decisions that affect them. For example, one child now accesses horse therapy, and this is helping them to develop in confidence and talk about their feelings more openly.

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

Some aspects of children's health are poorly managed, and these shortfalls compromise children's safety and well-being. For example, one child has been hiding medication and refusing to take it. No guidance is provided for staff to help them manage this issue, and health advice has not been sought for the child. Managers have not sought advice and support for a child in relation to a specific need that they have, and without this, they are compromising the child's emotional and physical well-being. A child was found to be using an inhaler that had not been prescribed to them, and this had gone unnoticed by staff until it was highlighted by the inspectors.

Staff do not always follow the guidance set out in children's risk management plans. For example, they do not check on children when they are in their bedrooms as regularly as they should. Consequently, a child's girlfriend had been in the home for some hours without staff realising. This has happened twice, and there has been no learning about how to reduce the risk of this happening going forward.

General health and safety matters are kept under review by managers and staff. However, a rear gate, which is a designated fire exit out of the garden, was padlocked, and neither the staff nor the responsible individual knew the code. This was rectified during the inspection.

When children go missing from home, staff follow procedures as set out in children's plans. They are persistent in their efforts to look for the child and encourage them to return home. There has been an increase in missing-from-home incidents for one child. However, the manager has worked well with other professionals to discuss concerns and formulate a plan to reduce risks.

Children receive some support from staff to help them to understand risks and vulnerabilities. This support is offered after incidents occur and is a reactive measure rather than a preventative one to support children and educate them on how to keep themselves safe.

The effectiveness of leaders and managers: inadequate

The home has been without a manager and a deputy manager since March 2024. The provider is making efforts to recruit for these positions. The responsible individual and other managers from within the organisation are overseeing the home during this time. However, the current arrangements are ineffective, which has led to a decline in the quality of care being provided to children. Although the responsible individual recognises some of the shortfalls, there is no plan to address these issues to bring about improvement.

Managers do not work well with children's placing authorities in respect of care planning for each child. They do not escalate concerns to progress important matters for children relating to their health and education. Statutory documents such as care plans and personal education plans are missing. This does not help staff to fully understand

children's needs. A lack of coordinated care planning is negatively affecting children's progress.

Training and development opportunities for staff are poor. Some staff training is out of date, and staff have not received training specific to children's needs. As a result, they do not have the skills and knowledge they need to support children well. A lack of oversight by managers means there is no development plan to take this forward.

Some staff receive supervision, which helps them to reflect on their practice, but the frequency of this support is inconsistent. One staff member, who is on probation, has not had supervision for a number of months. This lack of targeted support does not promote the development of new staff.

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>In meeting the quality standards, the registered person must, and must ensure that staff—</p> <p>seek to involve each child’s placing authority effectively in the child’s care, in accordance with the child’s relevant plans;</p> <p>seek to secure the input and services required to meet each child’s needs;</p> <p>if the registered person considers, or staff consider, a placing authority’s or a relevant person’s performance or response to be inadequate in relation to their role, challenge the placing authority or the relevant person to seek to ensure that each child’s needs are met in accordance with the child’s relevant plans; and</p> <p>seek to develop and maintain effective professional relationships with such persons, bodies or organisations as the registered person considers appropriate having regard to the range of needs of children for whom it is intended that the children’s home is to provide care and accommodation. (Regulation 5 (a)(b)(c)(d))</p>	28 July 2024
<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>	28 July 2024

<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;</p> <p>provide personalised care that meets each child’s needs, as recorded in the child’s relevant plans, taking account of the child’s background;</p> <p>provide to children living in the home the physical necessities they need in order to live there comfortably. (Regulation 6 (1)(a)(b) (2)(a)(b)(i)(ii)(iii)(iv)(vii))</p>	
<p>The education standard is that children make measurable progress towards achieving their educational potential and are helped to do so.</p> <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>maintain regular contact with each child’s education and training provider, including engaging with the provider and the placing authority to support the child’s education and training and to maximise the child’s achievement;</p> <p>raise any need for further assessment or specialist provision in relation to a child with the child’s education or training provider and the child’s placing authority;</p> <p>help a child who is excluded from school, or who is of compulsory school age but not attending school, to access educational and training support throughout the period of exclusion or non-attendance and to return to school as soon as possible. (Regulation 8 (1) (2)(a)(i)(vi)(vii)(viii))</p>	<p>28 July 2024</p>
<p>The health and well-being standard is that—</p> <p>the health and well-being needs of children are met;</p>	<p>28 July 2024</p>

<p>children receive advice, services and support in relation to their health and well-being; and</p> <p>children are helped to lead healthy lifestyles.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure—</p> <p>that staff help each child to—</p> <p>achieve the health and well-being outcomes that are recorded in the child’s relevant plans;</p> <p>understand the child’s health and well-being needs and the options that are available in relation to the child’s health and well-being, in a way that is appropriate to the child’s age and understanding;</p> <p>understand and develop skills to promote the child’s well-being. (Regulation 10 (1)(a)(b)(c) (2)(a)(i)(ii)(iv))</p>	
<p>The protection of children standard is that children are protected from harm and enabled to keep themselves safe.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure—</p> <p>that staff—</p> <p>assess whether each child is at risk of harm, taking into account information in the child’s relevant plans, and, if necessary, make arrangements to reduce the risk of any harm to the child;</p> <p>understand their roles and responsibilities in relation to protecting children that are assigned to them by the registered person;</p> <p>that the premises used for the purposes of the home are designed, furnished and maintained so as to protect each child from avoidable hazards to the child’s health. (Regulation 12 (1) (2)(a)(i)(v)(d))</p>	28 July 2024
<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>	31 August 2024

<p>helps children aspire to fulfil their potential.</p> <p>In particular, the standard in paragraph (1) requires the registered person to—</p> <p>lead and manage the home in a way that is consistent with the approach and ethos, and delivers the outcomes, set out in the home’s statement of purpose;</p> <p>ensure that staff have the experience, qualifications and skills to meet the needs of each child;</p> <p>ensure that the home’s workforce provides continuity of care to each child;</p> <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;</p> <p>use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13 (1)(a) (2)(a)(c)(e)(f)(h))</p>	
<p>The registered person must make arrangements for the handling, recording, safekeeping, safe administration and disposal of medicines received into the children’s home.</p> <p>In particular the registered person must ensure that—</p> <p>medicine which is prescribed for a child is administered as prescribed to the child for whom it is prescribed and to no other child; and</p> <p>a record is kept of the administration of medicine to each child. (Regulation 23 (1) (2)(b)(c))</p> <p>This is specifically in relation to managers ensuring children’s prescribed medications are administered and recorded correctly. In addition, ensure that there are clear processes in place for staff to follow in the event of children refusing medication.</p>	28 July 2024
<p>A responsible individual must—</p> <p>have the capacity, experience and skills to supervise the management of the home, or the homes, in respect of which the responsible individual is nominated.</p>	31 August 2024

(Regulation 26 (7)(b))	
<p>The registered provider must appoint a person to manage the children’s home if—</p> <p>there is no registered manager in respect of the home; and</p> <p>the registered provider—</p> <p>is an organisation or a partnership. (Regulation 27 (1)(a)(b)(i))</p>	31 August 2024

* These requirements are subject to a compliance notice.

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: 1231311

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: Rhian Hopkins

Registered manager: Post vacant

Inspectors

Joanne Humphreys, Social Care Inspector
Jackie Line, 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 looked after children, 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 www.gov.uk/government/organisations/ofsted.

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 2024