

1257706

Registered provider: Gravitas Care Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home is run by a private organisation. The home provides care for up to two children who may experience social and emotional difficulties.

At the time of the inspection, two children were living in the home.

There has been no manager in post since the previous manager left in November 2023. Day-to-day management is provided by the deputy manager and overseen by the responsible individual.

Inspection dates: 12 and 13 February 2024

Overall experiences and progress of children and young people, taking into account	requires improvement to be good
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How well children and young people are helped and protected	good
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The effectiveness of leaders and managers	requires improvement to be good
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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: 25 August 2022

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
25/08/2022	Full	Good
14/06/2021	Full	Good
12/03/2020	Interim	Sustained effectiveness
10/09/2019	Full	Outstanding

Inspection judgements

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

There are good relationships between the children and staff. Families spoke highly of the care children receive, and said that they have confidence that children feel safe and like living in the home. However, the home needs a registered manager to drive improvements so that children's overall experiences and progress can improve.

Children's education is not always arranged before they move into the home. Staff offer informal alternatives but are not teachers and do not know what level children are learning at. Assertive challenge about the lack of education has not happened and this results in weeks or months out of school for children. The lack of education means that children do not have opportunities to make local friendships or become part of the local community. It leaves large parts of the children's week unstructured and significant time out of education can reduce children's long-term options.

Staff identify when children need specialist treatment or assessment for health needs and seek appropriate services. However, this is not done with sufficient urgency. This leaves drift in establishing what children's particular needs and vulnerabilities are, and staff do not have information that would help them best support the children. Because of delays in accessing secondary health care, the provider has now commissioned support from a therapist. This means that children will have earlier access in the future, to fill the gap until specialists become involved.

Some children have moved out of the home without proper preparation. This removes the opportunity for children to make decisions about where they will live or to move on at their own pace. Staff have been unable to safely manage children's behaviour and children's placements have ended quickly. These situations were not a positive experience for the children involved.

Staff have recently introduced different ways and more opportunities for children to provide their views about their care. However, there has been a lack of consultation previously, including when the quality-of-care review and the regulator's annual survey are completed. This misses opportunities to obtain a variety of perspectives on the care and take actions accordingly to drive up quality.

Staff provide good support to sustain family relationships when this is safe to do. This is important to children to help them understand their past and their identity. On one occasion, face-to-face contact with family was suspended as a consequence for a child's poor behaviour. This is not an appropriate way to improve children's conduct.

Children have some positive experiences. One child is supported to pursue their talent for music. This increases their self-esteem. Shopping and trips to the arcades

are children's favourite activities so staff make sure these pastimes are frequently offered. Joint activities, like go-karting further afield, help to build peer relationships.

The home is furnished like a family home, with plentiful resources. Children are encouraged to personalise their rooms and take pride in them and in themselves. This helps them to feel settled and build self-confidence.

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

Risk assessments are kept up to date and clearly reflect the children's vulnerabilities. Actions to mitigate risk are well understood by staff. The main risks for children are regularly reviewed and discussed in team meetings. This helps staff have a common understanding of how to respond in times of crisis. Staff are trained in areas of vulnerability, such as self-harm, exploitation and childhood trauma. As a result, staff are confident to support children.

Any allegations made by children are managed appropriately. Both the actions taken by senior leaders and the records of those actions demonstrate that children's well-being is central to how these situations are approached.

When children show signs of vulnerability to forming extremist views, staff work with appropriate specialists to address this. This has been effective as there has been no repetition.

Online safety is promoted by staff, through checking children's activity online and controlling access to Wi-Fi. Some of the safeguarding in this respect relies on children volunteering information or sharing their phone content. Due to the positive trusted relationships between staff and children, this often happens. Senior managers are also exploring additional safety measures for those times that children feel unable to discuss things with staff.

There are very few occasions when children need to be held for their own safety or that of others. Staff are trained to use physical restraint, should this be necessary. There have been occasions when police have been called to manage behaviours. However, on no occasions have children been criminalised.

When children go missing from the home, staff take decisive action to return them quickly and safely. However, independent return home interviews are not always carried out, which misses a chance to understand the push-and-pull factors for children. The children's placing authorities are not challenged about this.

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

There is currently no manager in post. The previous manager left suddenly in November 2023. Her replacement has been recruited but is yet to start. Interim management has been provided on a day-to-day basis by senior leaders, supported by the deputy manager and senior care workers.

Staff said that they feel the multiple changes in management over the last few years have been destabilising and have adversely affected morale. Each manager has had a different approach, and this does not promote consistent support for staff.

Prior to leaving, the previous manager was not completing management tasks as she should have. Since she left, there have been some further gaps in the management function. Significant incidents are reliably recorded; however, on at least one occasion, information was not then notified to the regulator. This prevents the regulator from having oversight of serious events, and the opportunity to check that the staff's response is appropriate.

There has been delay in some independent visitor reports being submitted to the regulator. One quality-of-care review report has not been submitted at all.

There has been a lack of provision of health services, education and return home interviews and a lack of development of children's care plans. Some challenges have been made but these have been ineffective. This has resulted in delays for children in receiving the most appropriate services and leaders have failed to escalate their concerns further.

Previous inspections identified the need for staff to have further training in supporting bereaved children; this is not yet complete. This does not demonstrate effective workforce planning.

Recently, the responsible individual has taken a major role in supporting staff in the home in the absence of a manager. He is aware of the home's strengths and weaknesses and, having already identified shortfalls, has put measures in place to address some of these. This augurs well for the future. The new manager is appointed and has previously worked in the home. She is due to start shortly, and staff speak highly of her.

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

Statutory requirements

This section sets out the actions that the registered person 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 must comply within the given timescales.

Requirement	Due date
The education standard is that children make measurable progress towards achieving their educational potential and are helped to do so. In particular, the standard in paragraph (1) requires the registered person to ensure— that staff— help each child to achieve the child's education and training targets, as recorded in the child's relevant plans; 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)(iv)(viii)) In particular, the registered person must ensure that children's learning needs are understood and that effective support is in place while children are waiting to begin school or education.	31 March 2024
In meeting the quality standards, the registered person must, and must ensure that staff— seek to secure the input and services required to meet each child's needs; 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. (Regulation 5 (b)(c))	31 March 2024

In particular, the registered person must offer appropriate challenge when any professionals involved with the children fail to deliver services to meet children's needs and escalate accordingly if needed.	
No measure of control or discipline which is excessive, unreasonable or contrary to paragraph (2) may be used in relation to any child. The following measures may not be used to discipline any child— any restriction, other than one imposed by a court or in accordance with regulation 22 (contact and access to communications), on— visits to the child by the child's parents, relatives or friends. (Regulation 19 (1) (2)(c)(ii)) In particular, the registered person must ensure that staff do not use prohibited consequences.	31 March 2024
The care planning standard is that children— receive effectively planned care in or through the children's home; and have a positive experience of arriving at or moving on from the home. (Regulation 14 (1)(a)(b)) In particular, the registered person must ensure that effective planning is in place when children move into and out of the home.	31 March 2024
The registered person must complete a review of the quality of care provided for children ("a quality of care review") at least once every 6 months. In order to complete a quality of care review the registered person must establish and maintain a system for monitoring, reviewing and evaluating— the quality of care provided for children; the feedback and opinions of children about the children's home, its facilities and the quality of care they receive in it; and	31 March 2024

any actions that the registered person considers necessary in order to improve or maintain the quality of care provided for children. After completing a quality of care review, the registered person must produce a written report about the quality of care review and the actions which the registered person intends to take as a result of the quality of care review (“the quality of care review report”). The registered person must— supply to HMCI a copy of the quality of care review report within 28 days of the date on which the quality of care review is completed; and make a copy of the quality of care review report available on request to a placing authority, if the placing authority is not the parent of a child accommodated in the home. The system referred to in paragraph (2) must provide for ascertaining and considering the opinions of children, their parents, placing authorities and staff. (Regulation 45 (1) (2)(a)(b)(c) (3) (4)(a)(b) (5))	
The registered person must notify HMCI and each other relevant person without delay if— an incident requiring police involvement occurs in relation to a child which the registered person considers to be serious; there is any other incident relating to a child which the registered person considers to be serious. (Regulation 40 (4)(b)(e))	29 February 2024

Recommendations

- The registered person should develop and keep under review a statement of purpose (regulation 16 and schedule 1). The home’s statement of purpose should be child-focused, indicating how the home provides individualised care to meet the quality standards for the children in its care. (‘Guide to the Children’s Homes Regulations, including the quality standards’, page 14, paragraph 3.5)
- The registered person should ensure that children are consulted regularly on their views about the home’s care, including via the regulator’s annual survey, to inform and support continued improvement in the quality of care provided. (‘Guide to the Children’s Homes Regulations, including the quality standards’, page 22, paragraph 4.11)

- The registered person should ensure that children feel safe and are safe. Staff should support children to be aware of and manage their own safety both inside and outside the home to the extent that any good parent would (including in the online world). Staff should help children to understand how to protect themselves, feel protected and be protected from significant harm. ('Guide to the Children's Homes Regulations, including the quality standards', page 43, paragraph 9.9)
- The registered person should support staff to be ambitious for every child in the home and to gain skills and experience (including in supporting bereaved children, managing risk of self-harm, exploitation and online safety) that enable them to actively support each child to achieve their potential. ('Guide to the Children's Homes Regulations, including the quality standards', page 52, paragraph 10.5)
- The registered person should actively seek independent scrutiny of the home and make best use of information from independent and internal monitoring (including under regulations 44 and 45) to ensure continuous improvement. They should be skilled in anticipating difficulties and reviewing incidents, such as learning from disruptions and placement breakdowns. They are responsible for proactively implementing lessons learned, ensuring that the reports are shared with the regulator in a timely manner, and sustaining good practice. ('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: 1257706

Provision sub-type: Children's home

Registered provider: Gravitas Care Limited

Registered provider address: 1-3, Annes Place, Pellon Lane, Halifax HX1 5RB

Responsible individual: David Ayres

Registered manager: Post vacant

Inspector

Rachel Ruth, Social Care Inspector

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