

1267650

Registered provider: Keys NHCC Ltd

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home is owned and managed by a private provider. It offers care for up to three children who may experience social and emotional difficulties.

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

The manager registered with Ofsted in June 2024.

Inspection dates: 29 and 30 January 2025

Overall experiences and progress of children and young people, taking into account	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	good
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The children's home provides effective services that meet the requirements for good.

Date of last inspection: 20 February 2024

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
20/02/2024	Full	Good
14/02/2023	Full	Good
01/03/2022	Full	Good
07/01/2020	Interim	Sustained effectiveness

Inspection judgements

Overall experiences and progress of children and young people: good

All the children were seen and spoken to by the inspectors during the inspection.

The children enjoy positive relationships with staff and are happy living at the home. Staff know the children very well. One child described a member of staff as 'kind' and 'compassionate'. These nurturing relationships have helped children develop a sense of belonging at this home.

Staff ensure that children access education in line with their learning needs. Children regularly attend school and are making good progress. Staff support older children to look for employment and apprenticeships when they finish college. This has supported one child to be invited to interviews and secure some work experience.

Staff support the children to prepare for their future. Children manage their own medication and take responsibility for jobs in the home. Older children are supported with more complex tasks, such as travelling independently to college open evenings and carrying out the checks on the home's vehicles. However, leaders and managers have not always escalated concerns to the local authority when there has been a delay in planning for the children's independence.

Staff and managers ensure that children access a range of activities, including horse riding, go-kart racing and holidays abroad. The children value the variety of activities, and these enjoyable experiences are captured in memory books. One child spoke about their holiday to Spain and said, 'We went for pizza, watched the sunset and then chilled in the pool. It was really good. I loved it.'

Staff understand the varied health needs of the children. They seek support and guidance from medical professionals when needed. Staff help children with their health needs, such as healthy eating and oral hygiene. Additionally, creative incentives are used to encourage healthy habits. For example, one child received a smart watch to support their aim to be more active.

Children spend time with the people who are important to them. They are encouraged to spend time with friends both in and away from the home. Family time is integrated into daily life where possible. Staff respect the children's wishes in relation to seeing family members and offer emotional support with the impact that family time can have.

The home is well furnished and decorated. Photos of the children in the communal areas help it to feel homely. Members of staff bring their dogs into work with them, which adds to the homely feel and enjoyable times for children. However, one child's bedroom door alarm has not been kept under review to assess whether it remains necessary.

Children know how to raise complaints. The manager acts on complaints received and directly responds to the children. However, the children's views on the outcomes of complaints are not clearly recorded. Therefore, it is unclear if children are satisfied with the outcome or want to escalate it further.

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

Managers and staff understand the risks for the children they care for. Risk assessments are reviewed regularly. Staff respond proactively when new concerns are identified and consult specialist services where necessary, such as the child exploitation team. This has supported the development of a detailed 'trigger plan' when a child was at risk of online grooming, which enabled staff to escalate concerns for the child's safety.

Staff use effective de-escalation techniques to help children cope when experiencing difficult emotions. As a result, the use of physical intervention is rare. Trusting relationships between children and staff mean they can discuss and reflect about incidents, to help children learn better coping strategies. Children say that the rules and consequences in the home are fair.

Staff work effectively to reduce risks. Children who were going missing or self-harming when they first moved into the home no longer do so. One child has been able to reduce his prescribed medication due to the support received to manage his behaviour. This demonstrates that staff work effectively with children to understand and reduce risks.

Leaders and managers ensure that allegations about staff conduct are managed appropriately. Staff and managers receive support throughout the process. Safeguarding procedures are followed, and the local authority designated officer reports a positive working relationship with the manager. This helps to ensure that there is independent scrutiny when concerns are raised about staff's practice.

Staff are aware of what to do when presented with an issue that they have not encountered recently. For example, staff can clearly articulate the process they would follow should a child go missing, when this has not happened for over a year.

The manager has created a role for a designated safeguarding lead for the staff team. A senior member of staff received external training to help them undertake this role. She provides advice to colleagues in team meetings and identifies training that will support the children's care. This has strengthened the team's safeguarding practice and demonstrates a positive attitude towards keeping children safe.

The manager and staff do not yet have effective strategies to discourage children from vaping. Staff understand the health risks and discuss these with children. Additional support from specialist agencies has been accessed but with limited impact on influencing healthier habits. As a result, some of the children continue to use vapes.

The effectiveness of leaders and managers: good

The manager knows the children well and is ambitious for each child to achieve. He has a clear vision for the home and wants to provide children with the best possible care, in an environment that feels like a family home.

Children experience consistent care from a committed staff team. The manager uses overtime and bank staff to cover staff vacancies and sickness. This helps to avoid the use of unfamiliar adults caring for the children. Trusting relationships are maintained because children experience continuity in their day-to-day care from people who know them.

The manager and staff benefit from regular practice-related supervision. Staff said they find the sessions helpful. However, records of supervision sessions do not evidence that reflective conversations are held or that children are discussed. This may limit staff's development and the care they provide to children.

Staff have access to a comprehensive training offer that they can access online or in person. The designated safeguarding officer has strengthened the training offer and ensures that it remains relevant to the children living in the home. For example, they delivered a session on historic disclosures during a team meeting in response to a concern raised. This ensures that staff have the skills they need to support children.

Feedback from professionals is positive. The independent reviewing officer for one child said that the child had not previously attended any meetings and now attends them all. One social worker described how staff supported her introduction as a new social worker to the child.

Staff support the children to hold their own regular meetings. One child is responsible for chairing the meetings and feeding back to the manager. The children have developed a draft of a new children's guide, incorporating their own experiences of moving to the home. This helps children feel listened to.

The manager's monitoring systems support their oversight of the home and the children's care. Management oversight is clear on the children's records. External monitoring by an independent person provides appropriate challenge to the manager each month.

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
In meeting the quality standards, the registered person must, and must ensure that staff— seek to involve each child's placing authority effectively in the child's care, in accordance with the child's relevant plans; 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 (a)(b)(c)) This specifically relates to escalating drift and delay to managers in the placing authority.	16 March 2025

Recommendations

- The registered person should have systems in place so that all staff, including the manager, receive supervision of their practice which allows them to reflect on their practice and the needs of the children assigned to their care. ('Guide to the Children's Homes Regulations, including the quality standards', page 61, paragraph 13.2)
- The registered person should ensure that, in line with their individual health plans and the ethos of the home, children are offered advice, support and guidance on health and well-being. Staff should have the relevant skills and knowledge to be able to help children understand, and, where necessary, work to change negative behaviours in key areas of health and well-being, such as, but not limited to, vaping and tobacco. ('Guide to the Children's Homes Regulations, including the quality standards', page 35, paragraph 7.18)
- The registered person should ensure that the home seeks as far as possible to maintain a domestic rather than 'institutional' impression. In particular, the registered person should ensure that the use of bedroom door alarms is proportionate to each child and regularly reviewed. Work should be carried out to ensure that alarms are not

needed. ('Guide to the Children's Homes Regulations, including the quality standards', page 15, paragraph 3.9)

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: 1267650

Provision sub-type: Children's home

Registered provider: Keys NHCC Ltd

Registered provider address: Maybrook House, Third Floor, Queensway, Halesowen, West Midlands B63 4AH

Responsible individual: Joanne Joseph

Registered manager: Philip Jervis

Inspectors

Kirstie Sutherland, Social Care Inspector
Jess Elliott, Social Care Inspector

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