

1278873

Registered provider: Mig House Residential Care Home Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

The home provides care for up to six children who have learning disabilities. It provides a permanent home for up to four children and short-break services for two children at any one time.

The manager left in February 2024.

Inspection dates: 28 and 29 July 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: 24 February 2025

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
24/02/2025	Full	Good
10/10/2023	Full	Good
23/11/2022	Full	Good
05/10/2021	Full	Good

Inspection judgements

Overall experiences and progress of children and young people: good

This inspection was brought forward to address specific concerns received by Ofsted. At the time of the inspection, five children were living at the home. One child was staying at the home for respite care. All of the children contributed to the inspection.

Most of the children are non-verbal, and the staff use alternative communication methods adapted to children's preferred style of communication. Children enjoy spending time with staff, and this is reciprocated. Children enjoy dancing to music. The staff understand children's individual communication needs and preferred music choices. Children appear relaxed and happy, and they confidently enjoy activities.

Staff support children's family relationships. When family dynamics became difficult, managers advocated to improve the child's experience. Family members are positive about the staff and how they have helped their children.

All children are attending education that meets their needs and are making progress. Concerns have been raised about the quality of one of the children's educational placements. This has raised anxieties for families and professionals. Staff have increased their observations of children when they return from school to identify any changes in children's moods.

Some children have complex health needs. Staff understand these and keep comprehensive medication records. Staff have contacted health partners to discuss reducing one child's medication and helped the child to reduce and stop this. The child no longer needs the medication because the staff have helped the child become more aware of emotional changes.

Children take part in a range of activities that reflect their interests. They attend a local disco which they thoroughly enjoy. One child has an interest in music and attends a weekend music group. This has increased his confidence. At a recent awards ceremony, the child performed in front of an audience. This is a significant achievement.

Children have individual targets that help them to develop skills. Children accomplish using the oven safely and preparing snacks and light meals. Staff support children in these activities using guided hand support. These are written up in key-work sessions and illustrated by photos to capture children's successes. This helps the children to recognise their progress.

There are areas of the home that are tired and worn. Two bedrooms have broken curtain poles and one child has a broken set of drawers. Children's lockers are also broken. This fails to provide children with a well-maintained home.

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

Staff understand children's needs well. When children are upset or angry, staff use communication boards so they can identify what would help them to feel better. Staff know how children are feeling from their facial expressions and from the non-verbal communication.

Since the last inspection, no physical intervention has taken place. This helps children to have more trusting relationships with staff.

Two children have court orders to keep them safe. For one child, staff have advocated that the staffing levels no longer reflect the child's current needs. This has meant the number of staff has been reduced, which is less intrusive for the child. This is the least restrictive option possible. This shows the progress that the child has made and their ability to recognise their emotions.

One child often cannot recall their experiences and past events. This can mean that the child describes incidents that are not accurate. The risk assessments fail to prompt staff to be objective and focus on the child getting the facts wrong. This does not keep the child or the staff safe.

There have been allegations about staff members that have not been discussed with safeguarding professionals. The children's risk assessments fail to provide clear details to guide staff on the action to take if it is suspected that a child makes an allegation. These are not all shared with the local authority designated officer, which reduces the intended safeguard.

A record shows that one child showed distress through self-injury during a period when staff were handing over from one shift to another. An accident form was completed. However, this information has not been transferred to risk assessments or the handover notes for staff. This means that important information about a child has not been shared with the rest of the team.

There are staff who are related who are working at the home. This has not been formally risk assessed to make the whistle-blowing expectations clear. This does not demonstrate who should be contacted in the event of any concerns arising and how these would be investigated.

The effectiveness of leaders and managers: good

A manager is in post. She has applied to register with Ofsted. She has previously been the deputy manager and knows staff and the children well. She is committed to providing an inclusive environment for children in which they can thrive. She is in the process of completing her level 5 qualification.

Staff feel well supported. They speak very highly of the manager and feel that she has implemented sensible and meaningful changes since she took over. Staff are exceptionally enthusiastic and thoroughly enjoy working at the home.

Communication with families and professionals is positive. They provided good feedback about the quality of care provided. Parents and professionals recognise the progress that children have made.

The manager has increased the regularity of staff supervisions. These provide detailed and informative support to help staff become more knowledgeable and improve their practice. This work is followed up in well-attended team meetings. However, there is little time for reflective discussion about specific work that staff have carried out with children. This does not support good communication and an understanding of children's changing needs.

The manager takes grievances seriously and follows these up with the staff. However, she has not identified that information shared in a grievance was not shared sooner by staff.

The language used in some reports is unhelpful. Ambiguous words and phrases are used. The details lack context to make it clear how children are helped when they are upset.

The manager has not ensured that important information is shared. For example, she has undertaken risk assessments for the child who is in the home on respite. However, she has not ensured that these are available to staff. Staff are aware of risks but are unable to check them themselves should they need to.

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
The protection of children standard is that children are protected from harm and enabled to keep themselves safe. In particular, the standard in paragraph (1) requires the registered person to ensure— that staff— 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; have the skills to identify and act upon signs that a child is at risk of harm; understand the roles and responsibilities in relation to protecting children that are assigned to them by the registered person; that the home's day-to-day care is arranged and delivered so as to keep each child safe and to protect each child effectively from harm. (Regulation 12 (1) (2)(a)(i)(iii)(v)(b)) In particular, ensure that following incidents, risk assessments are updated with important information; ensure that incidents are recorded in handovers and daily logs; ensure that staff have access to the most up-to-date version of documents; ensure that relatives working together are risk assessed to mitigate potential whistle-blowing conflicts.	31 August 2025
The quality and purpose of care standard is that children receive care from staff who—	31 August 2025

understand the children's home's overall aims and the outcomes it seeks to achieve for children;

use this understanding to deliver care that meets children's needs and supports them to fulfil their potential.

In particular, the standard in paragraph (1) requires the registered person to—

ensure that staff—

provide personalised care that meets each child's needs, as recorded in the child's relevant plans, taking account of the child's background;

ensure that the premises used for the purposes of the home are designed and furnished so as to—

meet the needs of each child.
(Regulation 6 (1)(a)(b) (2)(b)(iv)(c)(i))

In particular,

ensure that children's bedrooms and communal rooms are furnished appropriately;

ensure that language used to record is clear, unambiguous and provides a full description of how staff have worked with children.

Recommendation

- The registered person should ensure that supervision sessions include discussions specifically about children, their needs and how staff meet these needs together with reflections on staff practice. ('Guide to the Children's Homes Regulations, including the quality standards', page 61, paragraph 13.2)

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: 1278873

Provision sub-type: Children's home

Registered provider: Mig House Residential Care Home Limited

Registered provider address: 8 Bushwood, London E11 3AY

Responsible individual: Khairoonessah Dustagheer

Registered manager: Post vacant

Inspector

Hannah Phillips, Social Care Inspector

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