

2503076

Registered provider: Hygge Care Ltd

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

The home provides care for up to three children aged five to 12 years on admission, whose adverse childhood experiences and trauma can lead them to exhibit complex behaviours. The home's purpose is to work therapeutically with children over a period of 12 to 18 months to prepare them for a planned transition to family care.

The current manager has been at the home since January 2023 and has recently registered with Ofsted. The manager is working towards a relevant qualification in leadership and management.

Inspection dates: 2 and 3 October 2023

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

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

The effectiveness of leaders and managers **good**

The children's home provides effective services that meet the requirements for good.

Date of last inspection: 6 June 2022

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
06/06/2022	Full	Requires improvement to be good
26/01/2022	Full	Requires improvement to be good
25/02/2020	Interim	Declined in effectiveness
22/10/2019	Full	Good

Inspection judgements

Overall experiences and progress of children and young people: good

Three children live in the home. Since the last inspection, one child has left, and two children have arrived. Careful planning enables children to settle quickly. Two children have lived in the home for a year and another child for three years. This stability enables children to settle and progress in all areas.

The staff team is nurturing in its approach and there are warm and good-humoured interactions between staff and children. Staff encourage children to have new experiences. They take children shopping, for days out and on holidays. Staff plan celebrations with children, such as Carnival Day and a Halloween party. They encourage children to make friends and to attend local community groups. Children and staff eat their evening meal together in the large kitchen diner and staff play and draw with children. Creating opportunities to spend time with children enables meaningful relationships between children and staff to develop and grow.

Professionals are positive about the care that children receive. They say that communication from managers and staff is good. A child's social worker said that staff understand their child: 'They have taken the time to get to know her.' An independent therapist praised the 'brilliant work' of the staff and said: 'They wonder how things feel for the children and they work hard to understand children's emotional needs.' As a result of this attuned care, all children are making progress from their starting points.

All children go to school and have good attendance. Consistent support for children's education has helped children to make progress. When children are being bullied at school, staff take action. They talk with teachers and ensure that the child is supported and protected. They regularly update teachers about children's emotional health and well-being. This close partnership working ensures that children thrive and achieve at school.

Staff register children with local health services and children have an annual health review. However, staff do not always update children's health plans to reflect steps taken to meet children's needs. For instance, staff have not recorded plans to support a child who is refusing an important vaccination, or to support the child's emotional health needs. This does not help to promote children's health and well-being.

The home is a homely place for children to live. Photos of children and artwork created by children are on display throughout the home. Communal areas reflect children's interests and tastes. However, some areas of the home are uncared for. For example, cupboards in children's bathrooms are not fixed to the wall. The outside areas are unkempt. The grass is not regularly cut, and a paved area is overgrown with moss. Children's precious possessions are not carefully stored. Children's bicycles are left in a pile in the garden. One child's bicycle helmet has also

been left outside. This prevents children from taking pride in their home and impacts on their self-esteem.

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

Regular consultation with clinicians is effective in improving staff practice. It also allows staff to understand the reasons behind some behaviours, providing a nurturing environment for children. This enables staff to support children during times of crisis and helps children to regulate their emotions.

On one occasion, managers did not review an incident when a child showed complex behaviours. Additionally, managers did not talk with staff or use professional curiosity with a child to explore comments they made about their behaviours. Additionally, managers have failed to update a child's risk assessment with clear guidance to staff about the triggers to a child's behaviours.

Managers and staff promote good relationships between children. Aggressive and unkind behaviour is quickly dealt with. Regular discussions with children about being kind and tolerant enable children to manage their own behaviour more effectively. Restraint is rarely used. This reflects the home's commitment to supporting children to manage their own behaviour.

Managers ensure that the home is safely located. Regular health and safety checks and fire checks ensure that the home is a safe place for children to live. New staff are safely recruited, which ensures that suitable people work with the most vulnerable children.

There are good systems to ensure that the administration and storage of medicine are safe. However, staff do not always appropriately record the administration of children's medication. To date, this has had no impact on the children.

The effectiveness of leaders and managers: good

The home has a registered manager who has high aspirations for children in their care and for the staff team. The manager is supported by a deputy, a responsible individual and a director who has been a consistent presence in the lives of the children. The manager's commitment to providing children with safe and nurturing care that is attuned to their needs informs the culture in the home.

The manager has established good working relationships with external professionals, including independent therapists, education professionals and placing social workers. The manager is a strong advocate for children. For instance, when a child does not have a school place, the manager contacts schools directly and works with the virtual school to ensure that the child gains a place. This partnership approach means that children are benefiting from the full range of support provided by other professionals.

Since the last full inspection, eight staff have left the home and 10 have joined. Managers and staff acknowledge that this high turnover of staff has a negative impact on children. Despite these changes, a small number of core staff have remained. Managers have continued to recruit new staff and any shortfalls in staffing are covered by familiar staff from the company's sister home. This enables children to form positive relationships with familiar adults who know them well.

Managers support staff with regular, good-quality supervision. Staff say that they feel supported by managers and that morale is high.

Staff are provided with a wide range of training, which is specific and relevant to the children's needs. Additionally, managers ensure that team meetings are informative and child focused. Therapists attend meetings to discuss children and consolidate staff's understanding of trauma-informed practice. These sessions help staff to understand the children's individual responses to their trauma and how they can best support the child.

Managers do not always send the monthly report from the independent visitor and the most up-to-date statement of purpose to the regulator. This means that the regulator does not have necessary information to maintain scrutiny of the home. Additionally, records of the most recent looked after children reviews and education reviews are not always on children's files. Targets from these reviews have not been added to the internal placement plans. Additionally, staff do not involve children in planning aspects of their care. This is a barrier to children making progress and to children investing in their care.

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. (Regulation 12 (1) (2)(a)(i)) This specifically relates to managers ensuring that they monitor and critically evaluate incidents when children are at risk and update children's risks assessments with clear guidance to staff to keep children safe.	12 November 2023
The health and well-being standard is that— the health and well-being needs of children are met; children receive advice, services and support in relation to their health and well-being; and children are helped to lead healthy lifestyles. In particular, the standard in paragraph (1) requires the registered person to ensure— that staff help each child to— achieve the health and well-being outcomes that are recorded in the child's relevant plans; take part in activities, and attend any appointments, for the purpose of meeting the child's health and well-being needs.	12 November 2023

(Regulation 10 (1)(a)(b)(c) (2)(a)(i)(iii)) This specifically relates to managers ensuring that when children refuse to attend health appointments, this is recorded in children's health plans along with a clear strategy for staff to support children to attend.	
The leadership and management standard is that the registered person enables, inspires and leads a culture in relation to the children's home that— helps children aspire to fulfil their potential; and promotes their welfare. In particular, the standard in paragraph (1) requires the registered person to— use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13 (1)(a)(b) (2)(h)) This specifically relates to managers ensuring that reports from the independent visitor and the most up-to-date statement of purpose are sent to the regulator. Additionally, that the most up-to-date care plan and personal education plan are available on children's files along with agreed actions and goals.	12 November 2023

Recommendations

- The registered person should ensure that the children's home is a nurturing, supportive and homely environment that meet the needs of their children. Children's homes must comply with relevant health and safety legislations (alarms, food hygiene, etc.); however, in doing so, homes should seek as far as possible to maintain a domestic rather than 'institutional' impression. ('Guide to the Children's Homes Regulations, including the quality standards' page 15, paragraph 13.9)
- The registered person should ensure that staff encourage children to see the home's records as living documents, supporting them to view and contribute to the record in a way that reflects their voice on a regular basis. ('Guide to the Children's Homes Regulations, including the quality standards', page 58, paragraph 11.19)

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: 2503076

Provision sub-type: Children's home

Registered provider: Hygge Care Ltd

Registered provider address: Grosvenor House, 11 St Pauls Square, Birmingham, West Midlands B3 1RB

Responsible individual: Justin Evans

Registered manager: Amy Ellson

Inspector

Karen Gillingwater, Social Care Inspector

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