

2539305

Registered provider: South West Childcare Services

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home provides care and support for one child who may experience social and/or emotional difficulties. It is one of several homes provided by a private organisation operating in this area.

The home has been without a registered manager since 31 October 2024. A new manager was appointed on 24 March 2025, who was previously the deputy manager for the home. The manager has submitted an application for registration.

Since the previous inspection, one child has moved out of the home, and a new child moved in in November 2024.

Inspection dates: 11 and 12 June 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	requires improvement to be 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: 10 September 2024

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
10/09/2024	Full	Good
04/09/2023	Full	Good
12/01/2023	Full	Good
13/10/2021	Full	Good

Inspection judgements

Overall experiences and progress of children and young people: good

Following a series of placement breakdowns, the child in this home has started to form trusting relationships with a child-centred manager and staff team who are committed to providing a stable and caring home for them. As a result, the child now feels able to confide in staff about their worries and fears and accepts some boundaries that have been put in place to protect them, such as supervised time outside of the home.

Careful attention is paid to meeting the child's physical, emotional and identity needs, with staff using creative approaches to address these needs. When the child struggles to attend health appointments, these are rearranged at times that the child is more likely to attend, as staff know how crucial attendance is for the child's well-being. This approach has started to make a positive difference to the child's confidence, and their health needs are now being met.

Helping the child to access education consistently and achieve is a priority, and the child is making relative progress in this area. The manager strongly advocates for the child to help ensure that they are given every opportunity to have positive experiences at school. Staff often attend school to support the child, and their attendance and engagement are carefully monitored. Staff clearly recognise the impact of relationships and have many conversations to support the child through friendship difficulties and any obstacles they have to overcome.

The social worker speaks highly of the care provided to the child and sees the team as 'brilliant and proactive'. The social worker was impressed at how thorough the manager is in reviewing the child's needs to make sure the right support is in place. The team is guided by the organisation's therapeutic clinicians, who help them, alongside management guidance, to respond to the child in a trauma-informed way while exploring the best approaches to help the child establish healthy routines.

Family time and friendships are promoted. Family and friends are welcomed to the home, and it is not unusual for the child to have friends to visit and have sleepovers. Activities are encouraged where possible, such as attending the local youth club. Staff compile a book of encouraging messages written to the child, to help them realise they are cared for and have positive memories.

The child does not always have access to a telephone, and therefore a requirement is made to address this, should the child ever need to call for help.

How well children and young people are helped and protected: requires improvement to be good

Risk to the child is understood by the manager, and staff know what steps to take to help keep children safe. However, risk assessments and plans are not individualised to the child and lack detail. While staff have taken appropriate action and receive effective guidance, plans do not sufficiently outline what needs to happen and by who. This lack of clarity could potentially lead to confusion and procedures not being adhered to, particularly if new staff came to work in the home.

In their sincere efforts to guide the child and help them learn from behaviours, the strategies staff used have not always been restorative. However, the manager and the team are working together in the knowledge that behaviour is a form of communication, so their responses are proportionate and effective. The learning from this is yet to be embedded in practice, but already progress is being realised. For example, incidents of physical aggression towards staff have reduced in frequency and severity due to the team's improved understanding of the child's needs. Consistent boundaries are starting to be established in the home so that the child receives clear messages from the staff.

On occasion, physical intervention has been used as a last resort to prevent the child from harming themselves or others. Due to increased staff confidence and using successful strategies when responding to the child, the use of physical intervention has occurred once in the last four months. Records of restraint have improved, but do not always show effective use of de-escalation techniques in line with the child's support plan.

There have been minimal instances of the child going missing from the home. Records show that staff have taken appropriate steps to protect the child, such as following them, keeping in contact with them and liaising with the child's friends and professionals in their attempts to locate them. Staff continue to search for the child until they are home. Although staff have taken the right action to safeguard the child, written guidance on what to do when children go missing lacks some necessary detail.

Allegations have been dealt with promptly and are shared with relevant professionals; however, written guidance for staff is not sufficiently detailed, and therefore, not all staff understand their roles and responsibilities should an allegation be made. Multi-agency responses to allegations are effective but require review. In some instances, greater professional curiosity will increase the opportunity to learn from incidents.

The effectiveness of leaders and managers: good

Since the previous inspection, due to some personnel changes and sickness, the inconsistency of management arrangements has had an impact on how effectively the home has functioned. During this time, senior leaders made robust attempts to

provide management cover, and a new manager has now been permanently recruited. This manager has needed to address a range of issues in terms of team building, repair of the home environment and establishing a consistent trauma-informed approach to the child.

The manager has an ambitious vision and holds high expectations for the child. He has a thorough understanding of what the child needs and advocates strongly to help them receive necessary services and support. The manager has successfully created a culture of professional support and challenge to help the team support the child to reach their potential. For example, some records are not written in an inclusive way, so the manager has identified this as an area for development. As a new manager, he is taking full advantage of the support and supervision available to him from his mentor and other managers.

The manager has identified the strengths of the home and areas for improvement. He has reviewed incidents to identify patterns and amended strategies accordingly. Many changes in the home's initial development plan have already been implemented and embraced by the team.

Staff feel inspired and supported by the manager. They care about the work they do and have been empowered to confidently deal with challenging situations. Staff are regularly supervised, and the extent to which records show depth, challenge and reflection on practice has grown over time. Team meetings are well attended and take place regularly. Leaders and managers ensure that recruitment processes are robust and that there are enough staff to care for the child.

The home is well maintained, welcoming and meets the needs of the child. The child feels comfortable to have friends and family to visit, which is actively encouraged and makes for a homely atmosphere.

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
Subject to paragraph (5), the registered person must ensure that children are provided at all reasonable times with access to the following facilities which they may use without reference to persons working in the home— a telephone on which to make and receive telephone calls in private. If the registered person considers it to be necessary for the purpose of safeguarding or promoting the welfare of a child, the registered person may impose conditions, prohibitions or restrictions upon a child's— contact with parents, friends or relatives; or access to communications under paragraph (3). No measure may be imposed by the registered person under paragraph (5) unless— the child's placing authority consents to the imposition of the measure; or the measure is imposed in an emergency, and full details are given to the placing authority within 24 hours of its imposition (Regulation 22 (3)(a) (5)(a)(b) (6)(a)(b))	1 July 2025
The registered person must prepare and implement a policy ("the behaviour management policy") which sets out— how appropriate behaviour is to be promoted in the children's home; and the measures of control, discipline and restraint which may be used in relation to children in the home.	14 July 2025

The registered person must keep the behaviour management policy under review and, where appropriate, revise it.

The registered person must ensure that—

details of any methods used or steps taken to avoid the need to use the measure;

the effectiveness and any consequences of the use of the measure.

(Regulation 35 (1)(a)(b) (2) (3)(v)(vii))

In particular, the manager must ensure that staff have clear written guidance on how to respond to eventualities such as how to help staff have consistent approaches in their response to children, when the child goes missing and if allegations are made. The manager should ensure that the potential for learning from allegations is maximised.

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: 2539305

Provision sub-type: Children's home

Registered provider: South West Childcare Services

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

Responsible individual: Lucy King

Registered manager: Post vacant

Inspectors

Sarah Canto, Social Care Inspector
Carly Parry, Social Care Inspector

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