

2548571

Registered provider: Worcestershire Children First

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home was previously owned by the local authority. It was re-registered in October 2019 when the local authority moved to be a wholly owned limited company. It is registered for up to four children with learning disabilities, including autism spectrum disorder.

The manager registered with Ofsted in October 2019 and holds the level 5 diploma in leadership and management.

Due to COVID-19, at the request of the Secretary of State, we suspended all routine inspections of social care providers carried out under the social care common inspection framework (SCCIF) on 17 March 2020. We returned to routine SCCIF inspections on 12 April 2021.

We last visited this setting on 22 Sep 2021 to carry out a monitoring visit. The report is published on the Ofsted website.

Inspection dates: 16 to 17 November 2021

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: 3 August 2021

Overall judgement at last inspection: inadequate

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
03/08/2021	Full	Inadequate

Inspection judgements

Overall experiences and progress of children and young people: good

At the time of this inspection, three children lived at the home. Children live in a warm and homely environment that is well maintained. Children's bedrooms are personalised to their individual preferences. For example, one child had chosen a specific colour for his wall. Staff created a blackboard theme for another child who liked to draw on his bedroom walls. One social worker told the inspector that she is pleased that communal areas are now more friendly and welcoming.

Children build positive relationships with staff. Staff spend time with children and use personalised approaches to support them with their complex needs. One child's attendance at school has improved because of the support he receives with his mental health. A member of staff supported one child who often became fixated on things. This distracted him from being able to complete basic tasks, such as getting ready for school. He now has an activity that he can complete at these times which helps to re-engage him. This child-focused approach means children are helped to make good progress.

Staff work hard to build relationships with people who are important to children. This includes working collaboratively with families to ensure that they are fully involved in their child's care. A grandparent was invited to training to improve her understanding of her grandchild's health needs. One parent stated, 'Nothing is too much, we feel they [staff] go above and beyond.'

The registered manager and staff value the importance of giving children valuable and memorable experiences. Staff have listened to children's views about holiday preferences. As a result, children benefited from separate holidays, in line with their individual wishes and feelings. Children also enjoy a wide range of social and community-based activities that reflect their interests. These include bike rides, trips to local parks, youth clubs and dance classes. This not only supports children's interests but provides opportunities for social interaction.

Staff promote children's emotional well-being. For example, one child's coping strategy is daily exercise. Staff ensure that he has opportunities for outside activities each day. He also benefits from regular pamper evenings. This helps him to regulate his emotions and maintain a positive frame of mind. However, staff are not always proactive in ensuring that they follow up mental health support promptly. This has created delays for one child who requires therapeutic interventions.

Overall children are provided with various opportunities to share their views, wishes and feelings. However, there have been delays in accessing advocacy support for children. One child has not had independent advocacy support to help him express his views, which may have helped him.

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

Overall staff have a good understanding of children's risks and behaviours. This enables staff to keep children safe. Children are supported to understand basic risks, in line with their understanding. Staff role model appropriate behaviours when out in the community. This has helped children to learn new behaviours and develop an awareness of people who may be unsafe.

Since the last inspection, incidents have been minimal in the home. When incidents have occurred, they are managed well by staff. This means that incidents have been de-escalated quickly and there has not been a need to restrain children. The manager's oversight of incidents is evident, and this provides opportunity for reflection and learning.

Children benefit from clear rules and boundaries that help them to feel safe. They are encouraged to reflect on their behaviour. Logical sanctions are used to support children's understanding. This approach helps to guide children to take responsibility for their behaviour and promotes a helpful learning experience.

When children make allegations, managers take appropriate actions. Children are listened to, and the manager informs appropriate safeguarding agencies.

Staff ensure that children have written risk assessments in place. These include all strategies that are being used by staff to manage risk. However, the manager does not always ensure risk assessments are reviewed and updated to provide guidance to staff about how risks have changed and when new risks have emerged. As a result, staff are not always provided with the most up-to-date information about risks to children.

The effectiveness of leaders and managers: good

The home is managed by a committed manager who cares about children and wants the best for them. The deputy manager role has now been filled, which has increased time for management responsibilities. The manager has worked hard to drive up standards and make improvements to the care that children receive. Her dedication towards this means that the staff share the manager's vision for improvement, and they are invested in the process.

Staff are positive about improvements made to the home. One member of staff said, 'The whole place feels different now.' There is currently a need to use agency staff to cover gaps in the home's rota. However, the home has a core team of regular staff, which provides consistency to children.

Staff receive training that supports them in their role. A range of training opportunities are provided to ensure that staff are equipped to meet the individual needs of children. This has included bespoke epilepsy training.

The registered manager has an array of monitoring tools in place to support her in evaluating the care provided to children. This includes a monthly audit and a variety of tracking tools. As a result, the manager has good oversight of the service and identifies shortfalls quickly to ensure that children receive good-quality care. In addition, she identifies learning points and actions for her team, ensuring that staff have accountability through clear targets and responsibilities.

The manager and staff work collaboratively with external stakeholders. They communicate well and ensure that social workers are kept up to date with progress as well as concerns. During the inspection, the inspector spoke with two teachers and two social workers who were all positive about partnership working. One teacher told the inspector that communication had improved.

Staff are supported through regular supervision. There is a clear supervision agenda which means that staff know what will be discussed. However, supervision lacks opportunity for reflection about individual relationships between staff and children. This is a missed opportunity for staff to reflect on children's needs and their relationships with children, to ensure children receive safe and effective care.

The registered manager has not sent a copy of the updated statement of purpose to Ofsted within the required time frame.

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, 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 children's views, wishes and feelings standard is that children receive care from staff who— develop positive relationships with them; engage with them; and take their views, wishes and feelings into account in relation to matters affecting the children's care and welfare and their lives. In particular, the standard in paragraph (1) requires the registered person to— ensure that each child— is given appropriate advocacy support. (Regulation 7 (1)(a)(b)(c) (2)(b)(iii))	31 December 2021
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 each child has access to such dental, medical, nursing, psychiatric and psychological advice, treatment and other services as the child may require. (Regulation 10 (1)(a)(b)(c) (2)(c)) In particular, that managers and staff support children to access therapeutic support in a timely manner.	31 December 2021

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)) In particular, that each child has a risk assessment which is regularly reviewed and updated	31 December 2021
The registered person must compile in relation to the children’s home a statement ("the statement of purpose") which covers the matters listed in Schedule 1. The registered person must— notify HMCI of any revisions and send HMCI a copy of the revised statement within 28 days of the revision. (Regulation 16 (3)(b))	31 December 2021

Recommendation

- The registered manager should ensure that they 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)

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: 2548571

Provision sub-type: Children's home

Registered provider: Worcestershire Children First

Registered provider address: County Hall, Spetchley Road, Worcester WR5 2NP

Responsible individual: Justine Bishop

Registered manager: Nina Kersho

Inspector

Natasha Skinner, Social Care Inspector

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