

2568010

Registered provider: Keys Educational Services Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

The children's home is registered for up to three children with social and emotional difficulties. The home is operated by a private provider, which has several other homes in the area. At the time of this inspection, four children were living in the home.

The manager has been registered with Ofsted since May 2023.

Inspection dates: 11 and 12 June 2024

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

requires improvement to be good

How well children and young people are helped and protected

requires improvement to be good

The effectiveness of leaders and managers

requires improvement to be good

The children's home is not yet delivering good help and care for children and young people. However, there are no serious or widespread failures that result in their welfare not being safeguarded or promoted.

Date of last inspection: 10 May 2023

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
10/05/2023	Full	Good
23/08/2022	Full	Good
02/11/2021	Full	Good

Inspection judgements

Overall experiences and progress of children and young people: requires improvement to be good

Seven children have lived in the home since the last inspection. Four children are currently living in the home and their progress is variable.

Three children have been supported to move out of the home since the last inspection. One of these moves was planned and positive. Two children moved out because staff were unable to meet their needs successfully mediate the impact of children's behaviours on each other. Ultimately, this led to children's progress stagnating and/or regressing.

Overall, children are supported to develop their confidence, build positive relationships with staff, and engage in fun activities inside and outside of the home. Additionally, children are encouraged to play an active role in their education, and staff have helped one child to complete their GCSE exams. Staff support children well to spend time with family and friends. One child has enjoyed a sleepover with a friend in the home and other children are enjoying football and St John's Ambulance groups.

Most of the children currently living in the home have positive experiences and good relationships with staff. However, this is not the same for children who find it difficult to engage positively in the routines of the home. Staff and managers have not adapted or reassessed the strategies that they are using to support the children.

When activities are repeatedly declined, staff do not always reflect on alternative ways that children can be supported to access the opportunities that they are offered. When children are not participating in full-time education, they are not often provided with planned and structured learning activities. Staff do not always have clear plans about how they will support children to increase their confidence and re-enter the classroom environment.

One child's daily routine revolves around access to the internet. Staff are not helping the child to maintain a healthy routine and support them to learn important life skills. This child's health needs are not being met. Staff have been unable to help the child to change their distorted views about healthcare services and there is an acceptance among staff that this child will not attend necessary medical appointments. This has resulted in poor health outcomes.

Staff recognise these challenges, but they are not being guided well enough by leaders and managers to help them to overcome the barriers to children making progress.

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

Leaders and managers analysis of how staff support children does not always identify learning, areas for development, or the actions that need to be taken to ensure that staff have the skills that they need to care for children effectively. As a result, staff do not always maintain clear boundaries and expectations, and at times, their responses to behaviours are inconsistent.

Staff do not always have the skills or experience necessary to support children to express themselves safely. Staff's action, inaction and/or lack of confidence have, at times, contributed to behaviours becoming increasingly unsafe. There is little evidence of meaningful work being undertaken with children with regards to the impact of their behaviour on themselves and others.

There have been 48 incidents that have involved children being reported as missing from home. Managers and staff do not sufficiently consider the significant risks that some children are exposed to when they are in the community. Not all staff demonstrate a good understanding of contextual safeguarding. As a result, some staff are unclear about the risks that children are exposed to when they are missing from home. When multi-agency working has been attempted, leaders and managers have not adequately sought support from external services. Consequently, opportunities to implement safety plans for children have been unsuccessful.

Medication is stored and administered safely. However, insufficient consideration has been given to how children are supported to understand, manage and take their own medication. This is particularly important given children's increasing age and future care planning.

When children harm themselves, or make threats to harm themselves, staff respond quickly and appropriately to help keep children safe. Medical attention is sought, and emotional health services are accessed. Advice and guidance for staff are provided by emotional health services and the provider's internal specialists. Self-injurious behaviours are taken seriously by staff, who understand the significant risk of harm, both intended and/or accidental.

Staff support children to understand the risks of misusing drugs and alcohol. When concerns about substance misuse are identified, staff offer children nurturing care and medical attention. Staff report their concerns to the relevant external professionals and children are supported to understand the dangers of substance misuse.

Several concerns were raised about staff by a child who is no longer living in the home. There was a robust multi-agency response to how these concerns were responded to, which allowed for clear procedures and processes to be followed. After concerns were raised, the child was supported to reflect on their relationships and explain what their concerns and/or frustrations were. However, managers and staff

did not seek to help the child to express their feelings in this way in the moment. This resulted in repeated concerns about staff being raised.

The effectiveness of leaders and managers: requires improvement to be good

Vulnerabilities in leadership and management are having, or have had, a negative impact on some children's overall experiences and progress. Consequently, this has undermined children's safety and well-being. Leaders and managers have not always been able to respond effectively to prevent situations that pose a risk to children and others from reoccurring.

Leaders and managers have taken some action to address the requirements and recommendations that were raised at the last inspection. However, leaders and managers have not sufficiently identified areas for improvement, particularly when staff do not demonstrate the skills that they need to support children's well-being or keep them safe. Staff's inability to meet some children's needs and/or help them to keep safe has, and will likely, lead to children leaving the home without achieving positive outcomes or having the skills that they will require in adulthood.

Team meetings provide a forum for helpful discussions about staff issues, the progress that some children are making, alterations to care plans and how staff stay up to date with changes in the home. There is some reflection on how staff work with and support children, although there is little focus on learning from incidents that have taken place. Key-work sessions do not always focus on the pertinent issues for children, and contributes to some progress stagnating and risks not being mediated effectively.

Feedback from external professionals and children's family members is positive and reflects the progress that some children have made in the home. One family member commented that staff are good role models and that their commitment to their child is 'amazing'.

Children are supported to move into the home and transitions are appropriately planned when possible. Children are supported to complete visits before moving in, and where children are anxious about moving into the home, staff complete outreach work to develop relationships and ease children's anxieties about the move. Leaders and managers consider the risks that individual children present with and how these may interact with the children already living in the home.

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; help each child to understand how to keep safe; 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; and take effective action whenever there is a serious concern about a child's welfare. (Regulation 12 (1) (2)(a)(i)(ii)(iii)(v)(vi)) In particular, the registered person should ensure that staff have the skills and knowledge to help keep children safe. Additionally, managers and staff should have a sound understanding of safeguarding and the important role of external professionals in helping to keep children safe.	31 July 2024
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.	31 July 2024

In particular, the standard in paragraph (1) requires the registered person to— lead and manage the home in a way that is consistent with the approach and ethos, and delivers the outcomes, set out in the home’s statement of purpose; ensure that staff work as a team where appropriate; understand the impact that the quality of care provided in the home is having on the progress and experiences of each child and use this understanding to inform the development of the quality of care provided in the home; and use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13 (1)(a)(b) (2)(a)(c)(f)(h)) In particular, the registered person should strive for all children in the home to have good routines and ensure that strategies to achieve this are reviewed when they are found to be ineffective. Additionally, managers should identify areas for improvement in relation to staff skills when children’s needs are not being met or when children are not being kept safe.	
The health and well-being standard is that— the health and well-being needs of children are met. In particular, the standard in paragraph (1) requires the registered person to ensure— that staff help each child to— understand the child’s health and well-being needs and the options that are available in relation to the child’s health and well-being, in a way that is appropriate to the child’s age and understanding; take part in activities, and attend any appointments, for the purpose of meeting the child’s health and well-being needs; and understand and develop skills to promote the child’s well-being. (Regulation 10 (1)(a) (2)(a)(ii)(iii)(iv)) In particular, the registered person should ensure that all children’s health needs are met and that work is undertaken	31 July 2024

with children to help them understand the importance of engaging with healthcare services and meeting their own hygiene needs. Additionally, managers and staff should ensure that when strategies are found to be ineffective, they are reviewed and alternatives are considered.	
The care planning standard is that children— receive effectively planned care in or through the children's home. (Regulation 14 (1)(a)) In particular, the registered person should ensure that staff meet the needs of children effectively, as set out in children's plans.	31 July 2024
The positive relationships standard is that children are helped to develop, and to benefit from, relationships based on— mutual respect and trust; an understanding about acceptable behaviour; and positive responses to other children and adults. In particular, the standard in paragraph (1) requires the registered person to ensure— that staff— meet each child's behavioural and emotional needs, as set out in the child's relevant plans; and understand how children's previous experiences and present emotions can be communicated through behaviour and have the competence and skills to interpret these and develop positive relationships with children. (Regulation 11 (1)(a)(b)(c) (2)(a)(i)(ix)) In particular, the registered person should ensure that staff have the skills necessary to build positive relationships with children and are able to support them to reflect on their behaviour and emotions and express themselves more effectively.	31 July 2024

Recommendations

- The registered person should ensure that when children are not in full-time education, staff work closely with the placing authority so that children are supported and enabled to resume full-time education as soon as possible. When children are not in full-time education, they should be supported to sustain or regain their confidence in education and be engaged in suitable structured activities. ('Guide to the Children's Homes Regulations, including the quality standards', page 28, paragraph 5.15)
- The registered person should ensure that the home has a homely feel. They should seek to remove any items that give an unnecessarily institutional impression, such as the locked plastic box encasing the home thermometer. ('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: 2568010

Provision sub-type: Children's home

Registered provider: Keys Educational Services Limited

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

Responsible individual: Michael Spencer

Registered manager: Michelle Tipper

Inspectors

Martin Brown, Social Care Inspector
Min Sims, Social Care Inspector

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