

2587315

Registered provider: Herefordshire and Worcestershire Health and Care NHS Trust

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home provides short breaks for up to four children who may have sensory impairment and/or physical disabilities and/or learning disabilities.

The service is registered with Ofsted and the Care Quality Commission.

The manager registered with Ofsted in January 2025 and is a qualified nurse.

A new responsible individual has been appointed and Ofsted are in the process of reviewing their suitability.

Inspection dates: 9 and 10 June 2025

Overall experiences and progress of children and young people, taking into account	requires improvement to be 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	requires improvement to be good
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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: 11 March 2025

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
11/03/2025	Full	Requires improvement to be good
13/02/2024	Full	Good
21/03/2023	Full	Good
09/11/2021	Full	Good

Inspection judgements

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

At the time of inspection, two children were having a short break. These children were seen and spoken to. The registered manager was absent during the inspection.

Children say that they like attending the home and they feel safe. One child said that staff help them with playing on the trampoline and settling at bedtime. Staff foster positive, nurturing relationships with children. Observations indicate that children feel relaxed in their care. Professionals and parents' feedback, in general, was positive about the care that the children receive. One parent said that they would like to see their child participating more with community activities.

Children's health needs are understood well by staff. They follow medical health plans well, such as epilepsy plans and complex eating plans. However, for one child who has a diet plan, this is not always followed to ensure that the child has a healthy, balanced diet during their stays. This practice does not fully promote this child's well-being.

Since the last inspection, one child has moved on. They have had stays at another home within the same organisation. Parents and the placing authority were consulted, and transition planning was thoughtful. However, another child was transitioning to the other service at the time of this inspection without prior consultation with their placing authority.

Staff morale has declined since the last inspection. This has affected their motivation. As a result, children's stays have not always been well planned. For example, children do not take part in a variety of activities that help to meet their needs and reflect their interests. Community activities are limited for children who enjoy these experiences.

Leaders and staff have not kept up to date with children's care planning changes, which means that some children receive inconsistent support to help them develop in line with care plans. Children who are supported with communication aids and sensory items are not always helped to use these during their stays.

The home is spacious and provides a welcoming feeling. The initial gated garden area lacked facilities for children to play with. However, during the inspection, new items were purchased and set up. Children were captivated while playing with new play equipment during their stay.

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

There have been no incidents where children have gone missing or required physical intervention.

Staff understand children's individual risks and take appropriate steps to keep them safe. However, there is no systems to review the effectiveness of behaviour management strategies. For example, one child's room was basic for safety reasons. This has not been reviewed and, as a result, less-restrictive and supportive strategies are not considered. Some risk assessments also lack clear details, which can lead to unfair assumptions about children.

Accidents are rare. When they have occurred, children have received appropriate levels of medical attention. Parents have been informed and documents have been completed. However, there is an inconsistent approach to reviewing, recording and monitoring any marks on children. These are missed opportunities to ensure children's safety is promoted.

There has been one medication error since the last inspection. This error has been managed well, and leaders have adapted their practices to ensure that this does not reoccur. As a result, there are now clear procedures for checking and signing medication in. There are new systems for when medication errors occur. Medication is only administered by qualified registered nurses.

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

At the time of inspection, the registered manager has been absent for more than 28 days. Leaders have made Ofsted aware of this, and management oversight plans have been put in place.

The home is currently managed by a senior leader. She is passionate about supporting staff and driving improvements forward. She has a clear understanding of the home's strengths and areas for development. A new responsible individual has been appointed since the last inspection in March 2025. However, they have had little oversight during this time. Despite this, they have plans to play a more active role in supporting the home.

There are continual changes to the staffing team, with some staff leaving. Some staff said that they have not always felt supported. However, this has improved recently and is helping to increase staff morale. Leaders have planned a team building day away to help rebuild the team. Staff say they now enjoy coming to work, when there was a period where they did not.

Since the last inspection, leaders and managers have worked hard to improve and streamline documents, along with plans to create more meaningful opportunities for children during their stays. However, this is yet to be imbedded, so its effectiveness could not be measured.

Safer recruitment checks have now been carried out on bank members of staff; however, information of these checks have not been shared with the registered person. This does not allow the registered person to reassure themselves that these staff members have

been safely recruited. However, the manager has taken appropriate action to not have these staff members working in the home while a resolution is being considered.

Monitoring systems are not always effective. The registered manager has not met all the previous requirements from the last inspection. The manager's review of accident forms does not pick up shortfalls in the recordings of language used about the child. In addition, there is a lack of professional curiosity about how accidents have happened. Leaders and managers do not fully understand the actions required following the home's fire risk assessment. As a result, there is a slow response to action these. These actions were immediately addressed during inspection.

Staff supervisions are now carried out regularly for most of the staff. However, for one member of staff, they have not received a supervision since they started five months ago. In addition, the quality of supervision records does not always reflect individual practice or focus on the needs of children. It is not clear if these are always carried out by experienced, suitable people.

Staff receive a variety of training. More specialist training is provided by external professionals who have specific knowledge, such as individual children's epilepsy nurses. Staff have now been booked onto training around working with children with attention deficit hyperactivity disorder. However, training around visual impairment is still outstanding. This could mean that not all staff have all the skills and knowledge they need to care for the children.

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
In meeting the quality standards, the registered person must, and must ensure that staff— seek to involve each child's placing authority effectively in the child's care, in accordance with the child's relevant plans; seek to develop and maintain effective professional relationships with such persons, bodies or organisations as the registered person considers appropriate having regard to the range of needs of children for whom it is intended that the children's home is to provide care and accommodation. (Regulation 5 (a)(d)) This specifically relates to the registered person consulting with families and other professionals to ensure that changes in children's care arrangements are understood. This requirement was raised at the last inspection and is restated.	26 October 2025
The enjoyment and achievement standard is that children take part in and benefit from a variety of activities that meet their needs and develop and reflect their creative, cultural, intellectual, physical and social interests and skills. In particular, the standard in paragraph (1) requires the registered person to ensure— that staff help each child to— develop the child's interests and hobbies; participate in activities that the child enjoys and which meet and expand the child's interests and preferences; and make a positive contribution to the home and the wider community; and	28 September 2025

that each child has access to a range of activities that enable the child to pursue the child's interests and hobbies. (Regulation 9 (1) (2)(a)(i)(ii)(iii)(b)) In particular, the registered person must ensure that children have access to a wide range of activities in and out of the home, and that children's activities are planned and centred around their interests and development.	
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— 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; 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; 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)(f)(h)) In particular, the registered person must ensure that they use monitoring and review systems to review and improve practice. Actions identified in fire safety checks must be understood and completed without delay. Information about children should be kept up to date and staff should receive training that is specific to children's identified needs. Full and satisfactory information should be available to show safe recruitment practice. This requirement was raised at the last inspection and is restated.	28 September 2025
The care planning standard is that children—	26 October 2025

receive effectively planned care in or through the children's home.

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

that each child's relevant plans are followed.

(Regulation 14 (1)(a) (2)(c))

In particular, the registered person must ensure that staff receive up-to-date information about the children's plans and practice is consistent, which supports children's development and progress. In addition, ensure that communication aids and sensory items are used when children require these, and that plans and arrangements are made to support children's views on activities, which are listen to and acted on.

Recommendations

- The registered person should continually and actively assess the risk to each child and the arrangements in place to protect them, and to ensure that information as part of risk assessing is current and children are not scrutinised by historical concerns, which no longer pose risk. ('Guide to the Children's Homes Regulations, including the quality standards', page 42, paragraph 9.5)
- The registered person should ensure that all staff receive regular supervision, and by a suitably experienced member of staff. Ensure that staff receive supervisions that allow them to reflect on their practice and the needs of children. ('Guide to the Children's Homes Regulations, including the quality standards', page 61, paragraph 13.2)
- The registered person should ensure that staff record information on individual children in a non-stigmatising way. Information about the child must always be recorded in a way that will be helpful to the child. In particular, when recording children's incidents. ('Guide to the Children's Homes Regulations, including the quality standards', page 62, paragraph 14.4)

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: 2587315

Provision sub-type: Children's home

Registered provider address: Unit 2, Kings Court Business Park, Charles Hastings Way, Worcester, Worcestershire WR5 1JR

Responsible individual: Post vacant

Registered manager: Charlotte Byrne

Inspector

Joanne Humphreys, Social Care Inspector

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Piccadilly Gate
Store Street
Manchester
M1 2WD

T: 0300 123 1231
Textphone: 0161 618 8524
E: enquiries@ofsted.gov.uk
W: www.gov.uk/ofsted

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