

2611027

Registered provider: Halliwell Homes Midlands Division Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This is a private children's home that provides care and accommodation for up to eight children. The home has an attached registered school. The inspector only inspected the social care provision.

The manager was registered with Ofsted on 15 September 2021. She has an appropriate qualification and is suitably experienced.

Inspection dates: 9 and 10 August 2022

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	requires improvement to be 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: 25 January 2022

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
25/01/2022	Full	Good

Inspection judgements

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

Since the last inspection, five children have moved into the home and two children have left. The staff continue to build good relationships with the children living in the home.

Children living in the home attend school full time and are making good progress. Staff promote education by working with education staff and supporting educational activities in the home. When children face difficulties in attending education, the manager seeks external support. This helps to reduce the barriers to learning.

Children engage in a range of positive activities outside of the home. For example, one child is a member of the local Brownies group, while another child enjoys going climbing and visiting the beach. These experiences provide children with opportunities for fun and enjoyment and help to build their self-esteem.

The provider's clinical team supports staff and children in the home. They play an integral role in overseeing children's day-to-day care and staff practice. For example, the clinical team provides staff with regular consultation and child-focused meetings to oversee and review children's progress. Children are also supported to engage in clinical sessions such as play therapy. This practice helps professionals and family members to understand children's journeys and ensures that children are receiving suitable clinical support.

Children are registered with local health services and are supported to attend routine appointments. However, some important information is missing from children's healthcare plans. For example, when a child has enuresis, there has been no tracking of toileting and only limited one-to-one work has been carried out with the child. This could have implications for the child's health and well-being.

The staff support and encourage the children to maintain positive relationships with their loved ones. Staff send monthly newsletters to family members and provide regular updates on their child's progress. This helps children to maintain relationships with their family.

The home environment requires improvement. The garden needed a clean-up, and inspectors saw a broken and dirty swimming pool and litter in the grounds. Furthermore, some children's bedrooms lacked personalisation and two children's bedrooms did not have blinds. During the inspection, the staff and manager made efforts to improve the environment and some broken items were replaced.

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

Staff ensure that children have detailed individualised behaviour management plans and risk assessments, which reflect their needs. The manager regularly reviews these plans to enable staff to keep up to date and shares the agreed measures with the in-house clinical team. This practice helps to reduce risk and keep children safe.

Children are sometimes unkind to each other. Staff do not consistently challenge unacceptable behaviours or help children to develop an awareness of the possible implications of their actions. Furthermore, staff do not consistently provide support to all children involved in incidents, which means that some children's feelings are not fully understood or recognised. This is a missed opportunity to ensure that children acquire a sense of responsibility and to ensure that children have positive experiences while living in the home.

Physical intervention is used to keep children or staff safe. The recording of physical intervention is clear, and the manager has introduced a checklist to improve oversight of these records. This ensures that documents contain sufficient detail and that the interventions are justified and appropriate.

Medication arrangements are not consistent. The records of the administration of medication contain essential information. However, the storage of medication requires improvement. For example, during the inspection, it was identified that a child's medication was loose on the office floor and not safely secured. This practice does not ensure that storage of medication is safe.

Door alarms are used in the home without sufficient assessment. All the children's bedroom doors are alarmed at night. There is no assessment of children's needs to support the requirement of this measure, despite the home's statement of purpose stating that this would be done. As a result, there is a possibility that alarms may be being used unnecessarily.

The recruitment of staff requires improvement. The manager has no system in place to ensure that safer recruitment checks have been completed for agency staff. For example, the manager has failed to identify gaps in employment and does not check training records. Furthermore, agency staff have not been provided with an induction to the home. This does not ensure that staff working in the home are suitable to work with children.

Regular health and safety checks take place to ensure that the home is physically safe. This helps to ensure that the children live in a physically safe environment.

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

The manager is aware of strengths and areas for development in the home. Staff spoke highly of the manager, describing her as supportive. The manager said she is determined to rectify shortfalls identified during this inspection.

The quality of the individual supervision that staff receive is variable. When staff are in their induction period, they are not provided with performance reviews in line with the home's policy. Furthermore, agency staff are not provided with supervision, despite working with the children on a frequent basis. This lack of support and effective oversight limits the opportunities to review and improve practice.

When concerns have been raised about the behaviour of staff, swift action has been taken by managers to address the concerns. However, on occasions, although investigations took place, the manager could not provide evidence that the child was provided with a formal response in relation to the outcome. This makes it difficult to understand whether the child was aware or satisfied with the process.

Since the last inspection, the manager has updated the training matrix and increased the training offered to the core staff. However, there is no mechanism in place to ensure that the agency staff have the skills to meet the children's needs. Furthermore, the staff are not yet offered training to meet the children's specific needs. For example, staff have yet to complete enuresis training and allegation and disclosure training. This does not ensure that staff have the correct knowledge to care for the children living in the home.

The manager does not have a workforce development plan. There is no plan in place to specify training needs or plans for induction and to detail how performance would be improved or managed. Consequently, expectations for staff are not clear.

Feedback from external professionals is positive. They spoke of good working relationships and said that communication is good.

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 quality and purpose of care standard is that children receive care from staff who— understand the children's home's overall aims and the outcomes it seeks to achieve for children; use this understanding to deliver care that meets children's needs and supports them to fulfil their potential. In particular, the standard in paragraph (1) requires the registered person to— provide to children living in the home the physical necessities they need in order to live there comfortably; ensure that the premises used for the purposes of the home are designed and furnished so as to— ensure that staff— meet the needs of each child. (Regulation 6 (1)(a)(b) (2)(b)(vii)(c)(i)) This specifically relates to the managers ensuring that the environment is improved and meets the needs of the children living in the home.	16 September 2022
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—	16 September 2022

that staff help each child to— achieve the health and well-being outcomes that are recorded in the child’s relevant plans. (Regulation 10 (1)(a)(b)(c) (2)(a)(i)) The registered manager should ensure that children’s plans are updated and clear and that strategies set out in health plans are followed by staff.	
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— help each child to develop socially aware behaviour; encourage each child to take responsibility for the child’s behaviour, in accordance with the child’s age and understanding; help each child to develop and practise skills to resolve conflicts positively and without harm to anyone; communicate to each child expectations about the child’s behaviour and ensure that the child understands those expectations in accordance with the child’s age and understanding; help each child to understand, in a way that is appropriate according to the child’s age and understanding, personal, sexual and social relationships, and how those relationships can be supportive or harmful. (Regulation 11 (1)(a)(b) (2)(a)(ii)(iii)(iv)(v)(vi)) This specifically relates to the need for staff to provide children with effective support to help them understand the impact of relationships with peers.	16 September 2022

The registered person must make arrangements for the handling, recording, safekeeping, safe administration and disposal of medicines received into the children's home. In particular the registered person must ensure that— medicines kept in the home are stored in a secure place so as to prevent any child from having unsupervised access to them. (Regulation 23 (1) (2)(a)) In particular, the registered person must ensure that medication is stored safely.	16 September 2022
The registered person may only use devices for the monitoring or surveillance of children if— the monitoring or surveillance is for the purpose of safeguarding and promoting the welfare of the child concerned, or other children. (Regulation 24 (1)(a)) This specifically relates to ensuring that door alarms are only used as set out in a child's agreed risk assessment.	16 September 2022
The registered person must recruit staff using recruitment procedures that are designed to ensure children's safety. The registered person may only— employ an individual to work at the children's home; or if an individual satisfies the requirements in paragraph (3). The requirements are that— full and satisfactory information is available to relation to the individual in respect of each of the matters in Schedule 2. (Regulation 32 (1) (2)(a)(b) (3)(d)) This specifically relates to the registered manager ensuring that all gaps in agency employment and training records are checked and that information about the worker is clear.	16 September 2022
The registered person must ensure that all employees— receive practice-related supervision by a person with appropriate experience; and	16 September 2022

have their performance and fitness to perform their roles appraised at least once every year. (Regulation 33 (4)(b)(c))

This specifically relates to managers ensuring that all staff working in the home receive practice-related supervision and a suitable induction.

Recommendations

- The registered person should encourage children to share any concerns about their care or other matters as soon as they arise. Regulation 39 sets out the requirement on the registered person to have a complaints procedure. Children must be aware of this procedure and be reminded of it as necessary. ('Guide to the Children's Homes Regulations, including the quality standards', page 22, paragraph 14.3)
- The registered person should ensure that staff can access appropriate facilities and resources to support their training needs and should understand the key role they play in the training and development of staff in the home. ('Guide to the Children's Homes Regulations, including the quality standards', page 52, paragraph 10.11)
- The registered person should have a workforce plan which can fulfil the workforce-related requirements of regulation 16, schedule 1. The plan should be updated to include any new training and qualifications completed by staff and used to record the ongoing training and continuing professional development needs of staff, including the home's manager. ('Guide to the Children's Homes Regulations, including the quality standards', page 53, paragraph 10.8)

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: 2611027

Provision sub-type: Children's home

Registered provider: Halliwell Homes Midlands Division Limited

Registered provider address: Pearce House, 80 Cawdor Street, Eccles M30 0QF

Responsible individual: Paul Bliss

Registered manager: Elizabeth Rowley

Inspectors

Sophie Hills, Social Care Inspector

Andrew Waugh, 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
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