

2666653

Registered provider: Jeeves Care Group Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

A small independent provider owns this home. The home provides care for up to two children aged between 11 and 17 years who may have emotional and social difficulties and/or mild learning disabilities.

One child was living at the home at the time of the inspection.

There has been no registered manager since April 2024. A manager has been appointed and has submitted their application to be registered with Ofsted.

Inspection dates: 17 and 18 November 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	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: 20 May 2024

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
20/05/2024	Full	Requires improvement to be good
10/05/2023	Full	Good
20/06/2022	Full	Requires improvement to be good

Inspection judgements

Overall experiences and progress of children and young people: good

Since the last inspection, one child has moved out of the home, and one child has moved in. The child spent a brief period with the inspector.

Staff build meaningful relationships with the child. When the child showed that they were upset or frustrated, staff showed kindness and patience to the child, helping them to move through routines in a peaceful way. The child was observed taking staff by the hand to go with them to different parts of the house. The child feels comfortable with staff in a relatively short space of time.

Staff talk fondly about the child. They understand the child's needs and write clear and thoughtful records about the child. Staff ensure that the child's personality is evident, and records evidence the child's progress and successes.

Staff support the child to attend learning opportunities. Records are high quality and demonstrate the learning areas that each task focuses on. A tutor has recently started spending time with the child. Staff noticed that the tutor was not attuned to the child's needs and viewed the child's behaviour in relation to the child's traumatic background. Teaching failed to fully recognise the child's neurodiversity. Managers recognised this, which led to a meeting with the social worker and education partners to identify a tutor more able to help the child succeed.

Staff ensure that the child takes part in activities that they enjoy. The child goes out for a daily walk with staff. This includes shopping or picking leaves in the park for the child's pet stick insects. During activities, the staff notice the small, independent tasks that the child does for themselves. The child is praised for these, and high fives are often given in recognition. This boosts the child's self-esteem.

Staff ensure that the child has a healthy diet. Meals are nutritious and balanced. Combined with daily walks, these provide the child with a healthier physical lifestyle.

The child has difficulty sleeping. To support this, staff write in-depth records to describe the child's routine and to what level they participate in supporting the child to settle at night. Some records show that the child has a full eight hours of sleep. However, this is rare. The manager has not used the information in these records to identify helpful routines that could be used on future nights. This does not support healthy sleep routines and limits the use of the records.

Aspects of the building need attention. The kitchen floor was dirty. The bathroom door needed to be cleaned. A piece of the bathroom door frame has broken off, exposing the wall. Due to the child's needs, maintenance work needs to be completed when the child is out of the house. However, these repairs detract from a nurturing environment.

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

Staff have helped the child to manage their emotions. Incidents have reduced each month. Staff understand the signs that show the child is in the early stages of feeling upset. Because of this, staff can intervene quickly to help the child. As a result of this, high level strategies, such as restraint, are rare.

Risk assessments provide clear strategies for staff to follow. Staff can articulate the strategies, and records show that staff follow these. Following incidents, as part of the manager's reviews of these incidents, areas where staff practice could be developed are followed up.

Managers have approached external agencies to help them find better ways to help the child. One agency specifically supports children with sensory needs and learning disabilities. Managers have used the advice provided by the agency in their risk assessments. This has helped staff to be more aware of the child's sensory needs and how their triggers can be reduced.

Managers respond to allegations quickly. When these do occur, managers prioritise children's welfare and well-being. Managers liaise with safeguarding partners, and thorough investigations are carried out.

The child has medication prescribed as and when needed, which can be used by staff when the child is upset. The use of this has reduced the intensity of the child's emotions. However, there has been one occasion where the manager has not identified that the medication use had not been appropriately recorded.

Risk assessments are thorough and contain detailed information. However, consideration has not been given as to how the child might indicate that he has been harmed. The child's vocabulary and language skills are limited. There are no instructions for staff on what to look for to identify if the child is making an allegation.

The effectiveness of leaders and managers: good

A new manager has recently started. He was on leave during the inspection. He has submitted his application to register with Ofsted. Since the last inspection, two previous managers have been in post. One resigned and one was dismissed. Both submitted applications to register with Ofsted. Throughout this period of instability, the responsible individual has provided reliability and consistency. Staff described the responsible individual as someone they trust. The responsible individual has recently left this role, and a new responsible individual is in post. Ofsted is currently assessing their application.

Leaders and managers coach staff to understand how to improve their practice. Staff are supported to see their practice through different models of working. Staff are not judged for their decision-making. This approach from managers enables staff to be more grounded during incidents and helps them to be better able to care for the child.

Team meetings take place regularly. The child's individual needs and risks are discussed. Before the child moved in, a team meeting took place with staff from the child's previous placement. This focused specifically on communication methods the child uses to show they are upset, what this might mean for the child and what works best to help the child. This means that staff had essential information to help the child before he moved in.

Feedback from a professional was positive. They said they were 'impressed' with the care provided to the child and that they had noticed that the child looked healthier.

Staff have received training in the therapeutic model used at the home. Their understanding of this is evident throughout the records. Staff have had training in neurodiversity that is relevant to the child. However, staff have not yet received training in other, more specialist topics, such as global developmental delay or Tourette's syndrome. This training would further enhance the knowledge and skills of the staff team.

The manager's monitoring is basically evident. However, the manager does not always use this information to make improvements to the child's care or identify when issues need to be rectified. This means that opportunities to develop the quality of care are missed.

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 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— ensure that staff have the experience, qualifications and skills to meet the needs of each child; use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13 (1)(a)(b) (2(c)(h)) In particular, the registered person must use records to identify the successful actions taken by staff to support children's good sleep hygiene. The registered person must ensure that risk assessments consider the ways a child may make an allegation of harm, ensure appropriate oversight of medication dispensing and deal with any issues as they arise, and ensure that all aspects of the home are clean and well maintained.	15 February 2026

Information about this inspection

The inspector has 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: 2666653

Provision sub-type: Children's home

Registered provider: Jeeves Care Group Limited

Registered provider address: 7–8 Portmill Lane, Hitchin SG5 1DJ

Responsible individual:

Registered manager: Post vacant

Inspector

Hannah Phillips, Social Care Inspector

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