

2673339

Registered provider: Homes 2 Inspire Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This privately owned home provides care for up to three children who may have social and emotional difficulties. The home is run by a private company that is owned by a national charity.

This home is led by a registered and experienced manager.

At the time of this inspection, there were three children living at the home.

Inspection dates: 27 and 28 November 2023

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: 18 October 2022

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
18/10/2022	Full	Good

Inspection judgements

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

There have been some challenges in this home over the past 12 months. The manager has worked with the local authority to continue to support a child to remain in the home pending a new placement being identified. The child has now moved from the home. The manager and staff demonstrated a child-centred approach and commitment to the child to ensure this transition was undertaken carefully to best help the child going forward.

Children's views are central to the care they receive and the day-to-day running of the home. Staff listen carefully to children's views in a variety of ways. Children are encouraged and supported by staff to express themselves. Managers and staff respond verbally and in writing to children's suggestions and evidence how children's contributions impact the running of the home. This reassures children that they are listened to.

Not all children have a healthy and well-balanced diet. Although children help to draw up meal plans, one child is frequently allowed to have unhealthy, processed foods despite health concerns. This does not support children to have a healthy lifestyle. It also does not help children to understand the impact that an unhealthy diet has on their health and well-being.

The manager has not ensured that two children are registered with a dentist. Although there have been challenges in finding a local dentist that is taking on new patients, the manager has not taken appropriate action to escalate this.

Two children do not have education placements. One child is having difficulties with attendance due to their current individual circumstances. Children are encouraged to engage in education at home, in the form of worksheets and life-skills work and development. However, there is a lack of structure to children's daily routines. One child said that they do worksheets and commented, 'I can't wait to go back to school. I just want to learn.'

Managers have not ensured that staff carry out regular key-work sessions with children. Conversations are not linked to children's care plans or risk. For example, two children have had e-cigarettes removed from them. Follow-up work has not been carried out to help them understand the associated risks to their health. These are missed opportunities.

Children take part in a wide variety of activities, including sporting and social activities. When children have a particular interest, such as fishing, managers purchase equipment to ensure they promote their hobbies and interests. The staff help children to keep important mementos and photos of their activities and day trips. This helps children to reflect on their growth and to remember fun times.

Staff work closely with social workers and families to ensure that children are able to maintain relationships that are important to them. Staff have also supported children and families to repair relationships. This is good practice that helps children sustain important relationships into the future.

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

Risk assessments designed to help staff keep children safe vary in quality. Some documents are not up to date or accurate. Not all assessments provide guidance to staff to keep children safe when using their mobile phones. They fail to provide guidance to staff on the action to take if concerns are identified.

Despite one child being at risk of child exploitation, staff were not professionally curious when the child was overheard providing personal information over the phone to strangers. This places the child at increased risk of harm.

There have been a high number of incidents of a child going missing from care. The child has also been exposed to associated risks. Staff work in accordance with missing-from-care protocols and collaborate with external agencies to locate children. However, on one occasion, staff were not proactive in supporting a child to return to the home when they were found. There was a prolonged period when staff were not in contact with the child. Despite the child refusing to engage in return home interviews, this has not been followed up or explored with the child. This prevents managers from learning valuable information which may help prevent future incidents.

Staff administered a high level of non-prescribed medication to one child over a period of six days, without exploring the frequency of the child requesting them to do so. Staff did not seek advice from health professionals. Managers failed to identify this concern. As a result, the child was at increased risk of harm.

Children know how to make a complaint. When they move into the home, children receive a welcome booklet. This details who they can speak to if they have any concerns. There have been two complaints made by children. Both have been thoroughly investigated and children are reassured that appropriate action has been taken.

There has been one allegation, which was reported promptly and appropriately. This has been investigated.

Consequences are used to help children learn the effects of their actions. The manager scrutinises this practice to ensure that it is fair. Consequences are discussed with children and their views are taken into consideration. This helps children to feel valued.

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

The home is managed by a suitably qualified and experienced manager. The deputy manager proactively supports the manager and they work together well. They are passionate and have an ambitious vision for the home. They are committed and strive for the children to do well.

Management monitoring systems are not yet robust. The systems have not supported the manager to identify shortfalls in some safeguarding records and children's daily diaries. This hinders their ability to oversee the quality of care, practice and outcomes for children.

The managers are aware of the home's areas of weakness where development is required. They are taking action to ensure improvements are made so that children receive the consistency of care they need. There has been some turnover of staff since the last inspection. However, a small but stable team remains.

The manager has not ensured that the local authority plan for one child is on file, despite this child having lived at the home for three months. The manager has escalated her concerns, however, there is still no up-to-date care plan. As a result, the manager cannot ensure that staff are supporting the child to work towards the aims and objectives of the plan. There is a potential risk that the child's needs could go unmet due to missing information.

Staff receive formal supervision and attend monthly team meetings. These meetings provide staff with regular, formal support, where discussions are held and plans for the running of the home and care of the children are agreed.

Staff speak positively about working in the home and of the support they receive from their manager. Staff participated in a learning activity to explore the placement of the child who left recently. This offered staff the opportunity to understand what worked well and what could be done differently.

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 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 staff help each child to— achieve the health and well-being outcomes that are recorded in the child's relevant plans; understand and develop skills to promote the child's well-being; that each child is registered as a patient with a general medical practitioner and a registered dental practitioner. (Regulation 10 (1)(a)(b)(c) (2)(a)(i)(iv)(b)) This specifically relates to children being encouraged to lead a healthy lifestyle and eat a healthy balanced diet. It also relates to children being registered with a dental practice.	1 January 2024
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	1 January 2024

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; manage relationships between children to prevent them from harming each other; understand the roles and responsibilities in relation to protecting children that are assigned to them by the registered person; take effective action whenever there is a serious concern about a child's welfare; that the home's day-to-day care is arranged and delivered so as to keep each child safe and to protect each child effectively from harm. (Regulation 12 (1) (2)(a)(i)(ii)(iii)(iv)(v)(vi)(b)) This relates to staff ensuring that the children's risks are fully understood and action is taken to reduce risks to children. It relates to staff being professionally curious and exploring risks to children. Also, to staff supporting children to have positive relationships with one another.	
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— 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)(b)(h)) This specifically relates to ensuring all records are reviewed and monitored by the manager.	1 January 2024

This requirement was made at the last inspection and is restated.	
The care planning standard is that children— 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 arrangements are in place to— manage and review the placement of each child in the home. (Regulation 14 (1)(a) (2)(b)(ii)) This specifically relates to managers ensuring that children have up-to-date and accurate care plans.	1 January 2024
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— medicine which is prescribed for a child is administered as prescribed to the child for whom it is prescribed and to no other child; and a record is kept of the administration of medicine to each child. (Regulation 23 (1) (2)(b)(c)) This specifically relates to the manager ensuring medication administration records reflect why non-prescribed medication is administered. It also relates to records being monitored and reviewed by the manager to ensure any concerns can be acted on.	1 January 2024

Recommendation

- The registered person should ensure children are provided with clear structures and timetables for education and training when they are not attending formal education or training settings. (‘Guide to the Children’s Homes Regulations, including the quality standards’, page 29, paragraph 5.18)

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: 2673339

Provision sub-type: Children's home

Registered provider: Homes 2 Inspire Limited

Registered provider address: Lumonics House, Valiant Office Suites, Valley Drive, Swift Valley Industrial Estate, Rugby CV21 1TQ

Responsible individual: Matthew Earnshaw

Registered manager: Dominique O'Connor

Inspector

Zoey Lee, Social Care Inspector

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