

2718906

Registered provider: Omega Elifar Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

The home registered with Ofsted in August 2023. It provides short-break services for children with learning disabilities. Twelve children currently use the service for overnight stays. The home provides care for up to six children at any one time. At the time of the inspection, one child was receiving day support. There were no children staying for a short break. One child is on long-term stay exceeding short-break arrangements. The provider is in the process of reviewing their registration conditions.

The registered manager left the home in November 2024. A new manager started in December 2024 and has applied to register with Ofsted.

Inspection dates: 8 and 9 April 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	requires improvement to be 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: 22 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
22/05/2024	Full	Requires improvement to be good
06/02/2024	Full	Inadequate

Inspection judgements

Overall experiences and progress of children and young people: good

Since the last inspection, there has been a strong focus on making improvements to the service. Changes have been made to the management of the home and the systems to support children and families. As a result, there is a better quality of care for children and staff are well supported.

Children appear relaxed and happy and enjoy coming into the home. They have positive relationships with staff, who have a natural and attentive approach. This means that children receive care that is nurturing and enables them to be safe and have fun.

Children feel safe because they benefit from predictable structures and routines. As a result, they have made progress from their starting points. One child has been helped to quickly settle and develop positive relationships and self-care routines. This means they have been prepared for managing new challenges and are able to try new things. One child has been helped to build confidence and trust, which meant they talked to staff for the first time. One child's social worker said their child had made 'amazing progress'.

Staff understand and support children's individual communication needs. Children receive consistent, individualised support that helps them make good progress in this area. One child who was non-verbal has started using both pictorial and verbal communication to express their wishes. Communication aids are used effectively to help children continue learning and developing these skills.

There have been significant improvements in the range of activities offered to children. Staff carefully plan both fun and educational outings, in line with children's individual needs and preferences. This means that children regularly have fun new experiences and can learn about being a part of the community.

Managers and staff work collaboratively with children's families. For children staying at the home, there is proactive work with the professional team to help them see the people who are most important to them. As a result, one child has progressed to spending time in their family home without staff support. The parents of children who have short breaks gave positive feedback about the support currently provided. Parents say children love coming in to stay and have been helped to make meaningful connections with other children.

The home is welcoming, with plenty of space for children to enjoy their favourite hobbies. Children can choose if they would like to have time on their own or do activities with other children. Managers have ongoing plans for further improvements to the home, including making short-breaks bedrooms more comfortable and personalised. However, managers are not able to control the heating systems. This means that they are not able to act if rooms are cold.

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

Care plans and risk assessment records have improved in quality and detail. This means that staff have better guidance on how to support children with a range of needs. Staff and managers know children well. They have a child-centred approach which helps children to feel safe and better regulate their emotions and behaviours. As a result, there have been few incidents.

Medication incidents have been robustly managed. When there have been medication errors, managers have responded quickly and robustly to investigate and make improvements to medication administration, records and audits. Staff are provided with extensive training and additional support to ensure they have the confidence and knowledge to carry out medication tasks. Disciplinary action has been taken to address issues when staff practice has fallen short.

Health support plans in place for children are not always informed by medical guidance. Managers rely on parents to give them advice, and medical concerns for children are not always checked with appropriate health professionals. In addition, for one child who has a medication prescribed to help them calm, there is no protocol agreement from a prescribing practitioner in place. This means that staff are not clear about when to give the medication, and there is no oversight from appropriate professionals to review its use.

Restrictive practices have been reviewed. The safe space bed used by one child has been assessed and agreed by the occupational therapist. However, there are still shortfalls in the home's records around why the safe space bed is used and when this restriction will be reviewed. In addition, children are not always helped to understand when restrictions are in place or helped to give their views.

Staff are aware of children's risks and record incidents in line with procedure. Managers review reports, however, there is a lack of scrutiny of the incident. As a result, details about what happened are not fully understood or evaluated. This means that the appropriate level of reflection and follow-up action is not taking place. For example, on one occasion, a child was picked up from the floor and this was not recognised or appropriately assessed as a physical intervention. In addition, the appropriate professionals are not always informed about incidents. This means that the relevant professionals do not always have an overview of children's individual experiences or safeguarding concerns in the home.

Action has been taken to complete work identified in the fire risk assessment. There is further work due, and managers are seeking quotes to have this carried out. The fire exit on the first floor has been out of use. One child's emergency evacuation plan did not guide staff in how to help the child in the event of a fire and was not individualised. The manager took immediate steps to rectify this during the inspection.

The effectiveness of leaders and managers: good

The management team has worked hard to make positive changes. Managers are committed to the success of the home and they have made good progress in a short period of time. The deputy manager has been instrumental in effecting change and working with the manager to ensure there is continuous work to improve every aspect of the home. Managers reflect on the challenges encountered and welcome guidance for further development. There is a shared vision for ensuring children are well supported and have positive experiences.

Managers have invested in a range of resources to give them time to review and improve how the service operates. Short-break support was temporarily paused to ensure the service could be reassessed and safely delivered. Additional creative resources have been sought to support managers and staff to learn more and explore good practice approaches.

Staff are positive about the changes and excited about the difference this is making to children's lives. There is a sense of teamwork and enthusiasm to give children the best possible care. Staff feel supported. They have regular opportunities to meet and discuss ideas and approaches that have led to improvements for children.

Transition planning is good. Managers consider children's needs and matching assessments, and children currently using the service are prepared for changes before they happen. In addition, for children whose needs cannot be met, this has been appropriately reviewed and plans made with professionals for the service the children receive to have a planned end.

Communication with families and external professionals is good. There is a new system in place to make sure that the service has updates about the children's needs and wishes before every stay. Managers have developed a guide to the home, so parents know what to expect from the service and how children will be looked after. When a parent made a complaint, managers responded by meeting with them, however, complaints are not recorded or responded to in writing.

Managers are not engaging effectively with the independent person's monitoring systems to ensure that information is appropriately reported and identified issues are responded to promptly. Managers did not act on information and concerns outlined in one report, which indicated that an issue raised by a parent and a social worker had not been resolved. In addition, managers do not ensure that all the information in the reports is accurate and up to date. Managers are aware of this shortfall and have plans to review how this is managed.

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; 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; and are familiar with, and act in accordance with, the home's child protection policies; 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; that the premises used for the purposes of the home are located so that children are effectively safeguarded;	30 April 2025

that the premises used for the purposes of the home are designed, furnished and maintained so as to protect each child from avoidable hazards to the child's health; and that the effectiveness of the home's child protection policies is monitored regularly. (Regulation 12 (1) (2)(a)(i)(ii)(iii)(iv)(v)(vi)(vii)(b)(c)(d)(e)) Specifically, the registered person should ensure written records of incidents in the home are accurate and have consistent management oversight. Also, the registered person should ensure that incidents involving staff practice and safeguarding concerns for children are promptly referred to the appropriate professionals. Also, the registered person should ensure that personal emergency evacuation plans for children are up to date and personalised.	
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 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; understand and develop skills to promote the child's well-being. (Regulation 10 (1)(a)(b)(c) (2)(a)(i)(ii)(iv)) Specifically, the registered person should ensure they seek guidance from relevant medical professionals on how to meet children's health needs and that plans for emergency medication	30 April 2025

are set out by medical professionals and any use is subject to review.	
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Recommendations

- The registered person should ensure that a record is made of any complaint, the action taken in response and the outcome of any investigation. ('Guide to the Children's Homes Regulations, including the quality standards', page 22, paragraph 4.13)
- The registered person should ensure that the independent person makes a rigorous assessment of the home's arrangements for safeguarding and promoting the welfare of children. In particular, the registered person should scrutinise reports to ensure they are fit for purpose, that they accurately reflect incident management and follow-up actions are appropriately identified to ensure continuous improvement. ('Guide to the Children's Homes Regulations, including the quality standards', page 65, paragraph 15.5)
- The registered person should ensure that any decisions to limit a child's movement are only made where this is intended to safeguard the child's welfare. All decisions should be informed by a rigorous assessment of that individual child's needs, outlines the reason for the restriction, seeks views of the child, dependent on their age and understanding and are kept under regular review. ('Guide to the Children's Homes Regulations, including the quality standards', page 15, paragraph 3.10)
- The registered person should ensure children live in a welcoming environment with a homely feel and the temperature of the home is kept at an appropriate level to keep children warm. ('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: 2718906

Provision sub-type: Children's home

Registered provider: Omega Elifar Limited

Registered provider address: Kintyre House, 70 High Street, Fareham, Hampshire
PO16 7BB

Responsible individual: Justin Rolph

Registered manager: Post vacant

Inspector

Shirin White, 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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