

2730932

Registered provider: Westmorland and Furness Council

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home is operated by a local authority. It is registered to provide care for up to six children who experience social and emotional difficulties.

The home and manager registered with Ofsted in April 2023.

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

Inspection dates: 13 and 14 August 2024

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: 22 August 2023

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
22/08/2023	Full	Good

Inspection judgements

Overall experiences and progress of children and young people: good

Children say that they feel safe in the home. This helps them to share their views and feelings with staff and to talk about their past experiences.

When children move into the home, their needs are carefully considered, with efforts to make the transition gradual and supportive. For example, one child was introduced to other children living at the home before moving in and had time to get to know their carers while the other children were away on holiday.

The manager and staff are skilled in supporting children's transitions, even in emergencies. One child moved into the home with little information from their previous caregivers. The staff diligently worked to understand and meet their needs. Another child, who was experiencing a mental health crisis, was admitted to hospital. The team provided strong support during this time, but the manager eventually decided that the home could not meet the child's needs without impacting others.

Children's health needs are well met by staff. Staff support children to attend appointments and to understand their own health needs. The manager advocates for specialist involvement and assessment for children's emotional well-being to support their care planning. Staff supported one child's health assessment where their needs were unknown by preparing observations of the child's physical health to share with the assessor.

Children benefit from regular support from an emotional health and well-being practitioner who they have built trusting relationships with. The practitioner also provides support to the staff team to increase its capacity and consider how it can adjust its practice to meet children's emotional needs.

Educational outcomes for children are varied, depending on children's starting points. Some children who did not attend school before moving into the home have been supported to take exams. Children who have now left education are encouraged to apply for jobs in the local area. There are plans for one child to return to further education in September to continue their studies. Staff recognise the impact of children's emotional well-being on their ability to engage in education and work with schools to consider how barriers to children's engagement can be overcome.

Children who are not in education have weekly planners, but these focus on appointments and tasks rather than educational activities. Children say that some staff encourage them to get up and take part in activities while other staff do not. There are missed opportunities for staff to engage children in activities that will help to build their self-esteem. Children have shared their wishes and requests in their regular house meetings but do not always get feedback on their requests. The manager acknowledged that a 'you said, we did' approach would be helpful.

Children are supported to develop their independence skills and to consider the next steps for their care. The manager and staff are working with the local authority to support children to consider their options. This includes consideration of 'homestays' so children receive ongoing support with their independence in a home environment.

Children are supported to spend time with people who are important to them and to develop important relationships. Staff are attuned to the impact that family time and relationships can have on children's well-being. Staff help children to explore their identities in a non-judgemental and supportive way. One child has been able to express their identity and feelings through the decoration of their bedroom.

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

Staff understand the risks to children and use the strategies outlined in detailed risk assessments to reduce risk. Contextual risks assessments have been developed to manage specific risks, using intense and focused support to help children to understand and address emerging behaviours before they develop further. This has worked well to support one child to address concerns around substance misuse.

Risk assessments are regularly updated to show how risks have increased or decreased. Information about some of the children moving into the home has been limited, meaning that staff have needed to make risk assessments in a dynamic way.

The team communicates well with professionals such as the police. This has helped with information-sharing and to support timely assessments about any emerging risks, such as criminal exploitation. Staff work with professionals and parents to ensure that there is a good understanding and a consistent approach to keeping children safe.

There is some inconsistency in how staff implement boundaries in the home. Both children and staff are aware of the inconsistencies and have raised this with the manager. The manager is working to address these issues, using individual supervision, team meetings and performance plans to consider and improve practice.

When children go missing from the home, staff are proactive in taking steps to locate them with the involvement of family members and professionals. However, records of missing-from-home incidents lack detail and do not demonstrate the follow-up work and exploration with children about their experiences.

Physical intervention is not used in the home. Staff receive regular training and support to ensure that they have the skills needed to support children's behaviours in a positive way. Consequences are used to promote and support positive behaviour, and children are encouraged to reflect on their actions.

Children feel confident to make complaints about their care. Complaints are taken seriously by the manager and are dealt with in a timely way, with children receiving feedback on the outcome of their complaint.

The effectiveness of leaders and managers: good

The manager has a good understanding of the needs of the children in her care. She advocates well for children and is confident to challenge other professionals to achieve better outcomes for children. The manager uses information about incidents and risk-taking behaviours to analyse emerging areas of concern for children.

The manager has developed her oversight of the home and is proactive in addressing staff practice issues in a timely way. She acknowledges the difficulties in filling staff vacancies in the home and has used temporary staff to ensure that the demands of running the home can be met effectively.

Staff feel supported in their roles. The team is supervised by three knowledgeable assistant managers who have a broad range of skills. Supervision takes place regularly, with a focus on supporting staff well-being. Staff benefit from reflective discussions about their practice and feel confident to raise any issues or concerns.

Team meetings take place regularly. These follow a set agenda that prioritises discussions about children to ensure that staff are well informed and share their experiences of caring for children. The manager uses the meetings to advise staff on changes to policies and to ensure that any wider practice issues and learning are shared with the team.

The training matrix used by the manager is not kept up to date. This means that the manager is not assured that all staff have completed training in key areas in a timely way.

The manager completes regular reviews of the quality of care provided by the staff team. Reports show the progress made by children and include their views. However, there is a lack of analysis to demonstrate the impact of the care given and to identify areas for improvement.

Safe recruitment practices used by the manager ensure that staff caring for children are safe to do so.

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. (Regulation 13 (1)(a)(b) (2)(c)) In particular, leaders and managers must ensure that they have good oversight of the training required and completed by staff.	31 August 2024

Recommendations

- The registered person should ensure that when children are consulted on their views, that children should be able to see the results of their views being listened to and acted on. ('Guide to the Children's Homes Regulations, including the quality standards', page 22, paragraph 4.11)
- The registered person should ensure that children are provided with appropriate opportunities to develop themselves in accordance with their wishes and feelings and as part of the home's plan for their care. Each child's talents and interests should be understood and nurtured, with children selecting activities based on their personal preferences and abilities, so far as is reasonable. Staff should also support children to try activities that are 'new' for them, where appropriate. ('Guide to the Children's Homes Regulations, including the quality standards', page 31, paragraph 6.4)
- The registered person should ensure that the review of the quality of care considers the quality of the care provided by the home, the experiences of children living there and the impact the care is having on outcomes and improvements for the

children. ('Guide to the Children's Homes Regulations, including the quality standards', page 64, paragraph 15.2)

- The registered person should ensure that there is clear, careful and objective recording of incidents when children go missing from the home. Information about the child must always be recorded in a way that will be helpful to the child. ('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: 2730932

Provision sub-type: Children's home

Registered provider: Westmorland and Furness Council

Registered provider address: Town Hall, Duke Street, Barrow in Furness, Cumbria
LA14 2LD

Responsible individual: Elizabeth Curtis

Registered manager: Cheryl Athersmith

Inspector

Andrea Foreman, Social Care Inspector

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