

2768530

Registered provider: Children to Prosper Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home is operated by a private provider and offers care for up to two children with emotional and social difficulties.

The manager registered with Ofsted in March 2024 when the home was registered. This was the first inspection after registration.

Inspection dates: 3 and 4 June 2024

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	inadequate
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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: not previously inspected

Overall judgement at last inspection: not applicable

Enforcement action since last inspection: not applicable

Inspection judgements

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

At the time of this inspection, there were no children living at the home. Since the home registered in March 2024, one child has moved in and out. The child moved out with very little notice as the staff could not keep them safe in the community. The manager is aware of the negative impact of the move on the child. The staff tried to make the ending as positive as possible.

The child did not receive any formal or informal learning and was unable to make any progress in education. The manager held discussions with the placing and local authorities regarding education options. These discussions did not materialise into any learning opportunities and the manager did not escalate this further.

The staff do not have clear advice about the way best way to respond to challenging behaviour. Missing-from-home records do not contain full information. It is unclear if staff have responded to missing episodes appropriately. This means that the care provided is inconsistent and unpredictable.

The manager has not followed up information regarding the child's neurodiversity. After the child arrived, the manager identified emotional health needs and discussed these with the placing authority. There was no follow-up in relation to supporting the child's neurodiversity or emotional health.

The guidance and plans to help staff to respond to the child do not take into account neurodiversity. These do not include a multi-agency perspective. Opportunities to understand the child's behaviours, linked to food preferences and sleep routines, have been missed. This means that the staff were not able to consider all the child's needs and this has limited progress.

At times, the child smoked in their bedroom. The staff provided an incentive plan and advice about second-hand smoke inhalation and fire risks. However, there is no plan to support the child with smoking cessation or understand the impact on their personal health.

Daily experiences for the child are not planned effectively. Staff use weekly planners to structure the child's day. Some attempts are made to encourage the child to be involved in this planning. However, these are limited in success and were not reviewed effectively when the child was not taking part. Informal learning opportunities are not prioritised. This has encouraged the child to develop unhealthy sleep routines.

Some positive experiences and activities were planned for the child, including go-karting, a short seaside break, magnet fishing and arcade trips. The child built positive

relationships with some staff. The staff considered the child's views in the running of the home.

The home is warm and well maintained and the decor is of a good standard. The garden areas are large, well maintained and suitable for outdoor activities.

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

Safeguarding practice and understanding children's behaviour are not good enough. Staff use strategies that are not always effective. When there have been increasingly volatile incidents, the staff have not been able to manage these effectively.

On one occasion, following an incident, staff vacated the property for several hours for their safety and to allow the child space. The staff observed the child through the living room window and saw them setting fire to some paper. Staff went in for a period of 20 minutes to restrain the child. This was not successful and they left the child in the home for a significant amount of time. The staff asked managers for help and eventually called the police. However, for a period of time, the child was alone in a potentially dangerous situation.

The child made two allegations against staff. These were low level, however, these were not reported by staff to the on-call manager. The local authority designated officer (LADO) was not consulted. The extra layer of scrutiny that would have been provided by multi-agency working has not taken place.

A member of staff was trying to protect the child and themselves during an incident and took hold of the child's wrists. This could be confrontational for a child. Following an episode of self-harm, a staff member went to check on the child and proceeded to restrain the child on the bed. It is not clear from records whether staff took all possible steps to minimise worsening the self-harm. The manager understood that these holds were unrecognised. Despite this, the manager failed to report this to the LADO and, again, external oversight has not been provided.

Staff do not fully understand child sexual exploitation. The staff have been trained. However, the language used in risk assessments indicates that the child is choosing to place themselves at risk. This fails to recognise the child's vulnerabilities and the risk of exploitation.

The child had a mobile phone, without any safeguards in place around its use. The child left the home to spend time in the community without staff being sure of where they were going or who they were with. This lack of understanding fails to provide adequate safeguards. These risks resulted in the manager ending the placement. The manager and staff lack an understanding about their responsibilities to safeguard children.

Risk management plans do not always provide current and clear guidance for the staff. These plans are not updated after each significant incident to reflect emerging risks such as self-harm. There are no behaviour management plans or clear strategies for staff to follow to meet the child's daily emotional needs.

When the child went missing from the home, staff followed them and reported them missing in line with their missing-from-home protocol. However, the supporting records are incomplete, with important information missing. The manager was unaware that return home interviews were required, and therefore these have not taken place.

When there were serious practice concerns, the provider acted swiftly to address these and reduce the risk.

The premises risk assessment includes up-to-date information from the police. This ensures that staff are aware of local areas where children could be exposed to risk.

The staff showed resilience and commitment to the child's well-being and welfare. However, they were not guided by the management team and therefore lacked the direction and strategy to ensure that the child was properly safeguarded.

The effectiveness of leaders and managers: inadequate

The manager is working towards his level 5 qualification. This is his first post as a registered manager. He understands the seriousness of the home's weaknesses and has begun to write a plan for improvement.

The child moved into the home in an emergency. This was not a sensible decision as the staff team and manager are new. Leaders and managers did not recognise that a child requiring a home in an emergency indicated a high level of complex needs and risks. As a result, the staff were not skilled or experienced enough and the child moved after a short period of time, causing them further instability.

Senior managers did not identify the vulnerability of the situation and did not provide the manager with sufficient support. The responsible individual did not meet the child. This meant that the manager was dealing with too many complex issues daily and was not able to maintain oversight of the home. This led to safeguarding issues not being identified or referred to external agencies.

Staff supervision sessions have not discussed the child's high-level needs and risks. Poor practice by staff has not always been dealt with in a rigorous way. There have been no investigations into allegations about practice. This means that staff have not been provided with opportunities to learn from poor practice and develop their knowledge and skills.

Staff have not received sufficient training. Referral documents suggest the child was neurodiverse. Training to help staff understand this has not taken place. Staff are unable

to articulate the therapeutic model used. The care provided does not align with that described in the statement of purpose.

The manager has felt that external agencies have not been helpful, however, there has not been sufficient challenge to the agencies to obtain a better response. The local virtual school was not involved in finding an education provision. There was no escalation to mental health partners. Alongside this, leaders and managers have not understood their own roles, meaning that they have been passive and waited for advice from other agencies. This led to poor outcomes and limited progress for the child.

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— lead and manage the home in a way that is consistent with the approach and ethos, and delivers the outcomes, set out in the home's statement of purpose; ensure that staff have the experience, qualifications and skills to meet the needs of each child; understand the impact that the quality of care provided in the home is having on the progress and experiences of each child and use this understanding to inform the development of the quality of care provided in the home; demonstrate that practice in the home is informed and improved by taking into account and acting on— feedback on the experiences of children, including complaints received; and 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)(c)(f)(g)(ii)(h)) In particular: ensure that, through monitoring, allegations and safeguarding issues are identified and referred to external agencies;	1 July 2024

ensure that staff receive further training in working with challenging behaviour, de-escalation and restraint; ensure that children's needs detailed in referral documents are covered in relevant staff training; ensure that supervision and team meetings discuss children's needs and how to support them to make progress; ensure that staff practice issues are identified, investigated and dealt with appropriately through supervision or performance management meetings; ensure that external agencies are challenged as required.	
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; have the skills to identify and act upon signs that a child is at risk of harm; 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)((iii)(v)(vi)(b)) In particular: ensure risk assessments are updated in response to emerging risks of self-harm and any future risks;	1 July 2024

ensure that staff understand child sexual exploitation and appropriate language is used to describe concerns; ensure that sensible risk assessments and plans are in place to minimise the risk of child sexual exploitation, such as effective plans for mobile phone use and time in the community; ensure that behaviour management plans help staff to understand and respond to children's daily needs and emotions; ensure that return home interviews are carried out by someone independent from the home.	
The education standard is that children make measurable progress towards achieving their educational potential and are helped to do so. In particular, the standard in paragraph (1) requires the registered person to ensure— that staff— help each child to achieve the child's education and training targets, as recorded in the child's relevant plans; understand the barriers to learning that each child may face and take appropriate action to help the child to overcome any such barriers; help each child to understand the importance and value of education, learning, training and employment; promote opportunities for each child to learn informally; maintain regular contact with each child's education and training provider, including engaging with the provider and the placing authority to support the child's education and training and to maximise the child's achievement; raise any need for further assessment or specialist provision in relation to a child with the child's education or training provider and the child's placing authority; help a child who is excluded from school, or who is of compulsory school age but not attending school, to access educational and training support throughout the period of	1 July 2024

exclusion or non-attendance and to return to school as soon as possible; help each child to attend education or training in accordance with the expectations in the child's relevant plans. (Regulation 8 (1) (2)(a)(i)(iii)(iv)(v)(vi)(vii)(viii)(x)) In particular: ensure that the local virtual school is involved in planning for children; ensure that plans provide 25 hours of learning using a creative approach to learning opportunities; ensure that staff have the understanding and skills to write and implement the child's learning plan; ensure that staff understand potential neurodiversity and how this affects the child's learning style and communication.	
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)) In particular:	1 July 2024

ensure that plans include full details to support children into a healthy sleep routine; ensure that staff understand these plans and implement them, with action taken when staff do not implement them; ensure that the child has a healthy diet, taking into account preferences related to possible neurodiversity; ensure that the child is supported to find alternative coping strategies to smoking cigarettes and vaping; ensure that children do not vape or smoke cigarettes in their bedroom.	
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— understand and apply the home’s statement of purpose; ensure that staff— understand and apply the home’s statement of purpose; protect and promote each child’s welfare; treat each child with dignity and respect; provide personalised care that meets each child’s needs, as recorded in the child’s relevant plans, taking account of the child’s background. (Regulation 6 (1)(a)(b) (2)(a)(b)(i)(ii)(iii)(iv)) In particular:	1 July 2024

ensure that the child has a complete and up-to-date care plan that gives staff and the child full details of how the care will be provided;

ensure that the staff understand and apply the model described in the statement of purpose and reflect this in the records;

ensure that the language used in documents recognises the vulnerability of the child and does not blame the child.

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: 2768530

Provision sub-type: Children's home

Registered provider: Children to Prosper Limited

Registered provider address: 71 Knowl Piece, Wilbury Way, Hitchin, Hertfordshire
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Responsible individual: Cydeena Bonner

Registered manager: Wayne Fox

Inspectors

Hannah Phillips, Social Care Inspector
Natalie Day, Social Care Inspector

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