

2785671

Registered provider: City of York Council

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home was registered with Ofsted in April 2024. The service is a multi-building children's home with two premises, with one overall judgement that covers the registered children's home and considers the experiences and progress of children in each of the home's buildings.

The home is owned by the local authority. The manager registered with Ofsted in April 2024.

The home is registered to provide care for up to six children between both buildings, who may have social and emotional difficulties. At the time of the inspection, there were four children living in the home.

Inspection dates: 14 to 16 January 2025

Overall experiences and progress of children and young people, taking into account	inadequate
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How well children and young people are helped and protected	inadequate
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The effectiveness of leaders and managers	inadequate
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There are serious and widespread failures that mean children and young people are not protected or their welfare is not promoted or safeguarded and the care and experiences of children and young people are poor and they are not making progress.

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: inadequate

Three children were spoken to during the inspection.

When children move into the home, the impact of their known risks is not always assessed against those of the children already living there. This has resulted in some difficult to manage dynamics between children. For one child this has resulted in their transition plan being brought forward.

Children do not always feel listened to or valued. Children say that they do not always feel respected by staff and therefore demonstrate this through their behaviours. Children say the handling of some situations, including the timeliness of actions, left them feeling unheard. Staff and leaders did respond to children's concerns, but the timeliness and communication of actions were unclear resulting in the children not being sure that they had been listened to.

Children continue to smoke or vape as well as use substances inside the home. The home's policy states that staff should encourage children to hand in substances through a variety of measures, but does not give guidance on actions to take if children disagree. The home does not establish or reinforce boundaries in relation to substance use to keep children safe.

The children's risk assessments place emphasis on the staff's judgement and observation to determine when to seek medical attention and monitor children after they have disclosed to staff that they have taken substances. Staff are not given clear directions to seek medical attention in these circumstances. This resulted in medical attention not being sought for one child after they had taken an illegal substance.

The two buildings do not always provide for a homely environment. There have been repeat incidents of property damage in one building, but when damage occurs, it is not always addressed in a timely way to ensure that a nice environment is maintained. An example of this is not replacing the dining chairs, which would allow all children and staff to sit together at mealtimes. At the second building, this has had greater consideration, such as plastic-coated pictures secured to walls to ensure the home remains a welcoming environment.

Children told inspectors that they were not always aware of the ways available to them to raise concerns. Guidance on how to raise a complaint was given to children on admission to the home in the children's guide and this was available in a child-friendly format. However, children felt that they did not know how to make complaints formally and did not know the outcome of the concerns they had raised.

Education and opportunities to increase independence are not always given at the earliest opportunity, such as ensuring children have access to online bank accounts.

Children approaching adulthood told us that they did not feel ready to leave care. An independence assessment and plan had been devised with one child, but given their transition is being brought forward due to a breakdown of relationships in the home, this could no longer be delivered in the planned way.

Children have made progress with their education from their starting points. The manager is exploring means by which to reintroduce children into education, including a phased programme and exploration of future courses. The manager advocates for children in relation to their education. When children expressed a desire to enter employment as opposed to education, this was supported by staff. However, there were no structured educational activities within the home for when children would not engage.

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

Children do not always feel that they are protected from harm, with some children saying they felt 'kind of safe', and that living in the home was 'all getting too much'. Risks are identified and known by staff, but the plans to reduce harm or risk of harm are not always sufficient.

There is a lack of clear strategy to guide staff practice to safeguard children. Some safety plans devised in response to children's risks were insufficient to guide staff on how to keep children safe. The manager and staff could articulate strategies, but these were not detailed in plans to ensure staff knew all measures available to them, such as when to involve the police or how to access more staff in order to protect children.

Room searches are not always conducted in collaboration with children. Children told inspectors that staff entered their rooms without their knowledge and searched or removed their items. Although these items may pose harm and were appropriately removed, this was not always done in an informed way.

The use of logical consequences, rules and boundaries is not always consistent, and some staff told us they did not feel that adequate learning took place following incidents for children to prepare them for leaving care. Although restorative discussions take place with children, learning from these has proved ineffective in reducing similar incidents from occurring.

Physical and police intervention is minimal, with staff understanding the impact that further trauma or criminalisation could have on children's futures. The use of physical intervention and police involvement is described in both behavioural management plans and risk assessments for children and implemented in accordance with these.

Staff were knowledgeable about how to respond when children were reported as missing from care, in line with their individualised Philomena Protocols or 'trigger' plans. Episodes of children going missing from care have decreased and the home has benefited from a resident police liaison officer to support with this. This has allowed for direct communication with the local police, who are aware of children at risk of going missing.

The effectiveness of leaders and managers: inadequate

Leaders and managers' communication and oversight processes do not sufficiently capture areas that are ineffective, identify required actions and drive timely improvement. When staff raises concerns, these are not captured, and actions are not taken to deliver timely outcomes.

Relationships within the service have not been managed. Although multi-agency working is evident at a strategic level, leaders and managers do not always have effective relationships with professionals. This has resulted in delays in informing professionals about incidents or allegations involving children, which has not enabled them to have a full picture of the risks to the children they support. Risk management strategies are not always updated in line with the changing circumstances and needs of the children.

Some staff say that staff well-being is not prioritised and that the staff support one another. The manager is implementing systems to capture staff feedback and respond with actions in a timely way, delivering feedback via email and in team meetings and huddles. Staff do receive post-incident debriefs and learning but felt that the home's response to incidents did not always recognise lessons learned.

Supervision sessions and team meetings take place regularly. These are reflective and discuss the children and their needs. Additional clinical supervision with the psychologist has been introduced and is beginning to embed the therapeutic model into staff practice. Staff say that they have found this extremely valuable.

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; manage relationships between children to prevent them from harming each other; take effective action whenever there is a serious concern about a child's welfare. (Regulation 12 (1) (2)(a)(i)(iv)(vi)) In particular, the registered person should ensure that by ensuring children's risk assessments and plans are reviewed in a timely manner, risk assessments provide clear guidance for staff to follow, and staff have knowledge and skills to understand risks and respond effectively.	16 March 2025
The health and well-being standard is that— children are helped to lead healthy lifestyles. In particular, the standard in paragraph (1) requires the registered person to ensure— That each child has access to such dental, medical, nursing, psychiatric and psychological advice, treatment and other services as the child may require. (Regulation 10 (1)(c) (2)(c))	16 March 2025

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— 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; use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13 (1)(a)(b) (2)(f)(ii)(h))	16 March 2025
The quality and purpose of care standard is that children receive care from staff who— understand the children's homes 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— ensure that the premises used for the purpose of the home are designed and furnished so as to— enable each child to participate in the daily life of the home. (Regulation 6 (1)(a)(b) (2)(c)(ii))	16 March 2025

*These requirements are subject to a compliance notice.

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: 2785671

Provision sub-type: Children's home

Registered provider: City of York Council

Registered provider address: West Offices, Station Rise, York YO1 6GA

Responsible individual: Michael Cavan

Registered manager: Bethany Gamble

Inspectors

Vikki Thwaites, Social Care Inspector

Cherie Chen, 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
W: www.gov.uk/ofsted

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