

2794978

Registered provider: Cherry Care Children's Home

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home is registered to provide care for up to four children with social and emotional needs. One child was living at the home at the time of the inspection.

The home and the manager registered with Ofsted in October 2024. This is the home's first inspection since registration.

Inspection dates: 7 and 8 May 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	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: 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: good

There is one child living in the home, who moved in shortly after the home was registered. No children have moved out. The child spoke with the inspector and showed them around the home, speaking positively about it. The inspector also received feedback from the child's parent, who said, 'I just wish [name of child] had been homed there when [name of child] was younger instead of only a year so there would have been more time for their help.'

Staff support the child to help them achieve the goals in their care plan. Targets are identified jointly between adults and the child and are reviewed weekly. Incentives and rewards are well balanced to help encourage the child.

Staff help the child to maintain relationships with the people who are important to them. Staff and managers have built up good relationships with family members and, for example, welcome them into the home provided this is in line with local authority plans. This helps the child to feel connected to their family, and helps parents to still feel involved in their child's life.

Staff support the child's health and well-being needs, including their emotional needs. The child is supported to attend all medical appointments and to maintain a healthy routine and lifestyle. For example, staff quickly identified that the child would benefit from glasses and took them to an optician. Staff and leaders also work with other professionals, for example specialist mental health services. Medication is managed effectively, with detailed and accurate records kept. Staff place emphasis on supporting the child's emotional well-being. They receive therapeutic training, and a therapeutic approach is being introduced and embedded to help staff further support the child.

Staff encourage and promote education. When issues arise, or when education placements break down, staff and managers work with education providers and virtual schools to support the child and to identify a provision that meets the child's needs. Staff also encourage the child to complete daily educational activities, such as worksheets, in the home.

The child's leisure interests and social relationships are actively promoted. The child has an interest in making music and is supported to attend a music recording studio weekly. They also regularly enjoy and attend more than one youth club.

Staff speak regularly with the child and have meaningful conversations to help and support them in maintaining friendships. Special events and significant dates are celebrated, including Easter and St George's Day activities. The child has also been permitted to keep a pet and is supported by staff to look after it.

The home is spacious, modern, well decorated and furnished to a very high standard. The bedrooms are large. The garden and other external parts of the property are well maintained.

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

Staff know their safeguarding responsibilities. All staff have completed safeguarding training. Staff were able to talk about how they would respond to safeguarding incidents. The manager understands procedures to follow in the case of an allegation of abuse, and staff know the home's whistle-blowing practices.

Staff know the child well. They speak fondly and with respect about the child and the relationship they have with them. Staff want the child to feel safe and happy and want to help the child make progress.

Staff know the child's strengths and vulnerabilities. Staff are aided by risk assessment and behaviour support plans, which are detailed and individualised. Plans and assessments identify behavioural triggers, preventative measures and de-escalation responses. Staff update plans and assessments regularly. Consequences are proportionate and well recorded.

There have been no missing-from-home incidents. However, missing-from-care protocols are in place for the child. The staff and managers were able to talk through how they would respond should a child go missing from the home.

Staff respond well to specific risks. There is a consistent approach from staff and managers. Managers have developed a 24-hour safety plan, which helps support the child effectively in times of crisis. Staff are aware of triggers and look out for signs or warnings as to when the child may need support. These measures have been effective in reducing risk.

Health and safety risks are reviewed regularly and managed effectively. Fire drills take place regularly and fire and safety checks are conducted routinely.

Physical intervention is used infrequently and, when incidents occur, staff's responses are proportionate and justified. However, on some occasions records do not include clear details of preceding events, and managers do not consistently show professional curiosity when evaluating them. Some lower-level interventions are not recorded as physical interventions, and there is not sufficient clarity about when these should be recorded as such. There is insufficient oversight of incidents and physical interventions to identify practice issues and monitor patterns or trends that may emerge.

The effectiveness of leaders and managers: good

The registered manager is competent, suitably qualified and committed to supporting staff and children. The manager is supported by a deputy manager who is equally

committed and competent. The manager, the deputy manager and senior leaders have good expectations and aspirations for the home and have shown insight and reflection on where practice can improve.

Staff and managers are committed to supporting children to achieve stability. No other children have moved in or out since the home has been registered, as the manager has taken a cautious approach to ensuring children are well matched and able to cope with the change.

Staff speak positively about their roles, and they speak passionately about supporting the child and any future children. Staff also speak positively about leaders and managers and highlight a strong culture of teamwork.

Safer recruitment processes are followed, and necessary checks are completed on all staff members. New members of staff receive thorough inductions and feel well supported by those around them.

Training for staff is comprehensive and helps them build the necessary skills to work with children who have complex needs. The manager also identifies further training that is specific to meet the individual needs of the child and makes use of staff development through mechanisms such as team meetings.

The manager makes effective use of external monitoring and reviewing, for example responding to recommendations from the Regulation 44 visitor. The responsible individual also provides regular monitoring and scrutiny. This helps ensure a good quality of care throughout the home, and any shortfalls are remedied at an early opportunity.

Supervision takes place regularly for most staff, and employed staff speak about support and supervision. However, there are no records to show that agency staff, some of whom work regularly in the home, have received supervision. Some supervision records lack detail about what was discussed and reflected upon.

What does the children's home need to do to improve?

Recommendations

- The registered person should ensure that records of restraint are kept that enable the registered person and staff to review the use of control, discipline and restraint to identify effective practice and respond promptly where any issues or trends of concern emerge. The review should provide the opportunity to amend practice to ensure it meets the needs of each child. ('Guide to the Children's Homes Regulations, including the quality standards', page 49, paragraph 9.59)
- The registered person should ensure that a record of supervision is kept for staff. The record should provide evidence that supervision is being delivered in line with Regulation 33 (4)(b). ('Guide to the Children's Homes Regulations, including the quality standards', page 61, paragraph 13.3)

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: 2794978

Provision sub-type: Children's home

Registered provider: Cherry Care Children's Home

Registered provider address: 47b West Bank, London N16 5DF

Responsible individual: Jacob Kraus

Registered manager: Fikile Tshuma

Inspector

Daniel Rankin, 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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