

2819760

Registered provider: Estuary Residential Care Ltd

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home is owned by a small private provider. It can provide care for up to four children who may have learning disabilities. At the time of the inspection, two children were living at the home.

The manager has been registered with Ofsted since December 2024.

Inspection dates: 19 and 20 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

This is the first inspection of a new home. Two children have lived here since the home opened. A third child moved in and moved out quickly. There has been significant learning for the team and senior managers around this child's time at the home. Planning and risk assessments for children moving in are generally thorough. However, the actual moving-in process for one child was not considered sufficiently. This had a detrimental impact on all three of the children, and one child subsequently moved on from the home.

Children are developing secure relationships with the staff. Staffing has remained consistent, with only two members of the team leaving since the home opened. This means that children experience the same staff, which provides them with stability. At times, the purpose of care is not always clear. Children's plans are not explicit about how staff should support children or how long they should have on devices or spend gaming. This has led to difficulties for children.

Children are receiving education in line with their needs. One child attends school, and the other is at college. Staff have supported this child to get the bus to and from college independently, which has been great progress for them. One child has struggled with going to school recently, which relates to wider difficulties within the home. Staff have worked closely with the school to support this child to return and have given incentives to encourage the child to go.

Children have fun days, and one child said they get to do things they never imagined. Time is spent with children going for bike rides, to local parks and bowling for example. Some activities take place for the children together and some are individual. Memory books and boxes help children to capture these experiences, but these are not always dated or meaningful to children.

Staff support children to make their own health appointments where appropriate. Monitoring of one child's health needs is in place to help staff and external professionals to understand some complexities. However, managers were not proactive when medical appointments were cancelled. Support to follow-up specialist advice was slow at a time when the child was struggling with a number of difficulties.

The home is large, spacious and comfortable. When damage has been caused, repairs have been made quickly. However, this has meant that homely touches, such as photo frames and ornaments, are lacking, giving a sparse rather than homely feel. Some rooms and items are locked without a clear rationale. Managers are considering how to improve this.

Healthy eating is encouraged. Children and staff sit together at mealtimes, providing the children with a sense of a family home.

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

The two children that have lived at the home since it opened had a settled period of time. The third child moving in had a significant impact on all three of the children. Incidents involving damage to the home and threats of harm between the children increased. This also coincided with both the manager and registered individual being absent from the home at the same time. There has been significant learning for leaders and managers from this.

During this time period, children were showing that they did not feel safe. While no physical harm came to the children, it caused huge difficulties and setbacks for them. One child stopped going to school and the other stopped getting the bus to college independently. Restraints were not used as the staff managed the children's aggression to each other, and physical damage was to the home only. Meetings were called with wider professionals and decisions were made to end one child's placement quickly.

Adults understand the risks to the children well and are often able to use distraction and humour to support children. They are able to spot when situations are about to escalate and offer alternatives. For example, when one child began to throw sticks, this was turned into an opportunity to build a den, which was positive for the child.

Physical interventions have not been used at all. However, there is little guidance for staff as to when physical intervention would be needed and at what point they should intervene. Conversations take place with children after difficult situations. These conversations are nurturing, and children are given time to process their feelings.

When concerns were raised about staff practice, the manager took quick action to ensure that children were safe. Advice was sought appropriately. Actions were immediately addressed with the individual but the wider practice issues were not.

Risks relating to online safety and phone safety are understood, and appropriate measures are in place. Staff understand the importance of creating trusting relationships with children around online and internet safety. This means that children are more likely to share information and concerns with staff rather than staff relying on monitoring apps or parental controls.

Children receive a nurturing response when they have self-harmed. These have been low-level incidents, such as light scratching with fingernails. Incidents have reduced, despite the recent increase of difficulties between children. Staff know how to support the children, although written guidance is not always up to date.

The effectiveness of leaders and managers: good

The home is managed by a permanent manager who knows the children well. The manager worked closely with families and professionals to support the children before they each moved into the home. The staff team is stable and consistent, enabling the children to develop trusting relationships.

Learning from one child's placement ending highlighted a shortfall when both the manager and responsible individual were absent from the home at the same time. This was unplanned. Plans are now in place to ensure suitable cover in the future. Action was taken to address the difficulties within a short time frame.

Leaders and managers are reflective about learning and are keen to make improvements. When one child was not settling, this was reviewed quickly with the support of the child's social worker.

Staff speak of feeling supported and describe managers as being approachable and friendly. Champion roles have also been created to divide responsibilities and help to make people feel valued. Supervision does take place, although there have been some gaps recently. A new deputy manager is recently in post, and plans are in place for supervisions to take place.

Specific training has taken place to meet the children's needs, which supports the team to better understand the children. Wider safeguarding concerns are considered within team meetings. For example, contextual issues, such as what is happening in the local area, are pulled through into team meetings. This helps staff to be aware of wider potential risks to the children.

Language used in children's records does not accurately reflect what is happening for them and is not always meaningful to children. For example, describing a child as 'having their meds' when they are simply using an asthma pump is not helpful.

Feedback from professionals and family members is largely positive and describes good experiences and progress for children. They note the reduction in good communication over the last few weeks but also that this is unusual.

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 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; help each child to understand and manage the impact of any experience of abuse or neglect; help each child to develop resilience and skills that prepare the child to return home, to live in a new placement or to live independently as an adult; provide to children living in the home the physical necessities they need in order to live there comfortably;	7 July 2025

provide to children personal items that are appropriate for their age and understanding; and

make decisions about the day-to-day arrangements for each child, in accordance with the child's relevant plans, which give the child an appropriate degree of freedom and choice.
(Regulation 6 (1)(a)(b) (2)(a)(b)(i)(ii)(iii)(iv)(v)(vi)(vii)(viii)(ix))

In particular, the registered person must ensure that there is an agreed plan of care for each child. Staff should be provided with clear guidance as to how to help each child to achieve their goals and have consistent boundaries and approaches in place to support each child that all staff follow.

Recommendations

- The registered person should ensure that staff take a proactive role in supporting children's health needs. When a child needs additional health or well-being support, staff should work with the child's placing authority to enable proper and immediate access to any specialist medical, psychological or psychiatric support required, and challenge them through regulation 5 if this does not happen. ('Guide to the Children's Homes Regulations, including the quality standards', page 34, paragraph 7.10)
- The registered person should ensure that children's memory books are kept up to date to ensure the detail of events and outings is not lost. ('Guide to the Children's Homes Regulations, including the quality standards', page 62, paragraph 14.5)
- The registered person should have sufficient capacity to ensure that the quality standards are met for each child in the home. When learning is identified from practice, actions should be put into place to address the practice issues. ('Guide to the Children's Homes Regulations, including the quality standards', page 52, paragraph 10.7)
- The registered person should ensure that systems are in place so that all staff receive regular supervision of their practice, which allows them to reflect on their practice and the needs of the children in their care. ('Guide to the Children's Homes Regulations, including the quality standards', page 61, paragraph 13.2)
- The registered person should ensure that children's records are 'living documents' and that staff are recording information in a way that is meaningful to children. ('Guide to the Children's Homes Regulations, including the quality standards', page 58, paragraph 11.19)

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: 2819760

Provision sub-type: Children's home

Registered provider: Estuary Residential Care Ltd

Responsible individual: Neil Johnstone

Registered manager: Karl Griffiths

Inspector

Nickie Doney, Social Care Inspector

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