

SC008485

Registered provider: Choice Home for Children Limited

Assurance inspection

Inspected under the social care common inspection framework

Information about this children's home

This home is owned and managed by a private company. It is registered to care for up to five children who may experience social or emotional difficulties.

At the time of this inspection, there were five children living in the home. Inspectors were able to speak with four of the children.

There has been no registered manager in place since June 2024. A manager joined the home in November 2024 and has applied to register with Ofsted.

Inspection date: 19 March 2025

Date of last inspection: 16 July 2024

Judgement at last inspection: requires improvement to be good

Enforcement action since last inspection: none

Information about this inspection

At this inspection, the inspectors evaluated:

- the care of children
- the safety of children
- the effectiveness of leaders and managers.

Inspectors have looked closely at the experiences and progress of children, using the social care common inspection framework. This assurance 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'.

Findings from the inspection

We identified the following serious and widespread concerns in relation to the care or protection of children at this assurance inspection:

- ❑ Leadership and management in the home is not adequate. A lack of monitoring and oversight has impacted on the care and experiences of children.
- ❑ Care planning is poor. Decision making for bringing children into the home is done without appropriate consultation with managers and staff who work in the home.
- ❑ The registered provider has failed to ensure that allegations are responded to appropriately and children are safeguarded.
- ❑ The registered provider has failed to ensure that staff have the necessary training and skills to meet children's complex needs.
- ❑ The registered provider has moved a child into a bedroom which requires significant maintenance work to make this safe and homely.

Shortfalls in leadership and management practices mean that there is a lack of clear leadership and guidance to the team and children's experiences are not always positive. The manager and deputy manager joined the home in late 2024 and are developing relationships with children.

Leaders and managers lack robust oversight of the home. A number of gaps in recording were identified which had not been previously identified by the management team. In addition, management evaluation does not fully consider staff practice or learning from incidents. This does not enable clear monitoring or development of the service.

Decisions about children moving in to the home are not always made by the manager of the home, or in conjunction with the manager. The decision for one child to move in to the home was by senior managers, without consultation with the home's manager or any other member of staff who worked in the home. This meant that managers, staff, and children were unprepared for the child's move. Additionally, risks and vulnerabilities of children moving in are not always fully considered alongside those of children who already live in the home.

When one child made an allegation, managers and staff failed to recognise that this was an allegation and therefore did not follow allegation procedures. This does not ensure that children are responded to when they raise concerns. Serious incidents are not always notified to the regulator in a timely way.

Leaders and managers have not ensured that staff are up to date on their training. Many staff have not yet completed training in safeguarding, first aid, fire safety, or medication management. In addition, most staff have not completed training to

meet the identified vulnerabilities of children who live in the home. This does not ensure that children are cared for by a skilled and knowledgeable staff team.

Children live in a large home. Much of the home is kept in a good state of repair. However, two children are living in bedrooms which have water damage coming through their ceilings. Both children were brought into the home with the damage already known, without any repairs being completed first. This means that all children are not living in a safe and homely environment.

Most children living here do not regularly attend school. Managers have made attempts to increase children's hours at school, but there has been no robust or consistent challenge. Plans and routines for children when they are not attending school are unclear. This does not ensure that children are supported and encouraged to attend education and achieve their potential.

There have been some incidents of bullying in the home. These have included 'pranks' and the use of racist language which have not been sufficiently challenged by staff. No work has been completed with children following these incidents to help them understand the impact this behaviour could have on the other children who live here.

Many children in this home regularly vape and carry vapes openly around the home. This is not consistently challenged by staff, and no work has been recorded to demonstrate that staff are teaching children about the dangers of vaping and smoking. Leaders and managers have allowed external professionals and family members to make the rules for children's smoking instead of enforcing the home's own rules and boundaries.

Children and staff say that boundaries for children are inconsistent. Rules and plans are not consistently enforced by all members of staff which has enabled children to know when they can 'get away with things' based on which members of staff are on shift. This does not provide children with a consistently high quality of care.

When incidents occur, staff help children to reflect on their behaviour and think about what could have been done differently. However, there is no consistent work completed with children to help them to understand their risks and vulnerabilities before incidents happen. This is a missed opportunity to help children to keep themselves safe.

Staff respond effectively when children go missing from this home. Staff notify other professionals and work well with external professionals and family members to ensure that children return home safely.

Behaviour management practices in the home are not always helpful for children. On one occasion, staff practice contributed to an incident escalating and on another, an unapproved hold was used. Additionally, the same staff who have been involved in the incident, have debriefed the other staff involved as well as the child. This does

not ensure that debriefs are independent of the incident. This had not been identified or addressed by managers prior to the inspection.

Medication records are not always recorded in line with the organisation's policies. This limits management oversight of medication practices and does not ensure that medication is managed safely.

Only one requirement issued at the last full inspection has been met. The remaining requirements have all been re-issued from the last inspection, with additional requirements also given.

Following this assurance inspection, a case review was held where the decision was made to issue four compliance notices under regulation 12 the protection of children standard, regulation 13 the leadership and management standard, regulation 14 the care planning standard and regulation 8 the education standard.

Recent inspection history

Inspection date	Inspection type	Inspection judgement
16/07/2024	Full	Requires improvement to be good
07/05/2024	Full	Inadequate
26/09/2023	Full	Requires improvement to be good
09/08/2023	Full	Inadequate

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

Statutory requirements

This section sets out the actions that the registered person 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 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; help each child to understand how to keep safe; have the skills to identify and act upon signs that a child is at risk of harm; manage relationships between children to prevent them from harming each other; 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; and are familiar with, and act in accordance with, the home's child protection policies; and that the premises used for the purposes of the home are designed, furnished and maintained so as to protect each child from avoidable hazards to the child's health. (Regulation 12 (1) (2)(a)(i)(ii)(iii)(iv)(v)(vi)(vii)(d)) Leaders and managers must ensure that:	18 May 2025

• staff complete regular, planned direct work with children to help to reduce children's known vulnerabilities. • all staff who check and administer medications to children, know and follow appropriate medication protocols. • all staff are aware of safeguarding policies in the home and know what constitutes an allegation, and what procedure to follow when an allegation is made. • that maintenance issues in the home are rectified and that the home is made safe for children. In particular, repairs must be completed to address the leaking from the bathroom to the bedroom below, and the damage to the ceiling in a child bedroom, as well as the associated cause in the roof or loft above the bedroom.	
*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 work as a team where appropriate; ensure that staff have the experience, qualifications and skills to meet the needs of each child; ensure that the home has sufficient staff to provide care for each child; ensure that the home's workforce provides continuity of care to 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;	18 May 2025

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)(b)(c)(d)(e)(f)(h))

Leaders and managers must ensure that:

- staff are sufficiently trained and skilled to meet the changing needs of children they care for. This includes all staff completing training in child safeguarding, first aid, medication management and fire safety.
- all staff should complete training to meet children's identified vulnerabilities such as harmful sexual behaviour.
- a consistent and stable staff team is in place. Staff must implement consistent rules and boundaries in the home, ensuring that children receive the same messages from all staff.
- they continuously evaluate staff practice in the home and identify areas of learning and improvement.
- they continuously monitor the care provided to children, as well as continuously reviewing systems and procedures in place to keep children safe.
- they make use of this ongoing monitoring to improve the care provided and continue to develop the service they offer.

*The care planning standard is that children—
receive effectively planned care in or through the children's home; and

have a positive experience of arriving at or moving on from the home.

In particular, the standard in paragraph (1) requires the registered person to ensure—

that children are admitted to the home only if their needs are within the range of needs of children for whom it is intended that the home is to provide care and accommodation, as set out in the home's statement of purpose. (Regulation 14 (1)(a)(b)(2)(a))

Leaders and managers must ensure that:

- children move into the home only when their needs and the needs of the children already living in the home have been considered. The placement should only be made if this is in the interest of all the children.
- the organisation's policies and procedures for identifying and agreeing a placement for a child to

18 May 2025

move into the home, are child centred and include consultation with the home's manager to determine whether the home is suitable to meet the child's identified needs.	
*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; support each child's learning and development, including helping the child to develop independent study skills and, where appropriate, helping the child to complete independent study; 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. (Regulation 8 (1) (2)(a)(i)(ii)(iii)(iv)) Leaders and managers must ensure that children are encouraged and supported to take part in education during school hours. Leaders and managers must ensure that children have access to an alternative plan of education that supports their learning and development when they are not attending their academic provision.	18 May 2025
The positive relationships standard is that children are helped to develop, and to benefit from, relationships based on— mutual respect and trust; an understanding about acceptable behaviour; and positive responses to other children and adults.	2 June 2025

In particular, the standard in paragraph (1) requires the registered person to ensure— that staff— meet each child’s behavioural and emotional needs, as set out in the child’s relevant plans; help each child to develop socially aware behaviour; encourage each child to take responsibility for the child’s behaviour, in accordance with the child’s age and understanding; are provided with supervision and support to enable them to understand and manage their own feelings and responses to the behaviour and emotions of children, and to help children to do the same. (Regulation 11 (1)(a)(b)(c) (2)(a)(i)(ii)(iii)(x)) Specifically, the registered provider must ensure that children are supported to address conflict and manage their relationships. Bullying behaviour and racist language must be challenged immediately with ongoing work completed to support children’s understanding of these impacts. This was a requirement at the last inspection and has been restated.	
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— provide personalised care that meets each child’s needs, as recorded in the child’s relevant plans, taking account of the child’s background;	2 June 2025

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)(iv)(ix)) Specifically, the registered provider must ensure that children's plans are personalised, contain their views and wishes and are specific to their individual needs. The registered provider must also ensure that children are supported to understand their sexual identity and cultural heritage. This was a requirement at the last inspection and has been restated.	
In meeting the quality standards, the registered person must, and must ensure that staff— seek to involve each child's placing authority effectively in the child's care, in accordance with the child's relevant plans; seek to secure the input and services required to meet each child's needs; if the registered person considers, or staff consider, a placing authority's or a relevant person's performance or response to be inadequate in relation to their role, challenge the placing authority or the relevant person to seek to ensure that each child's needs are met in accordance with the child's relevant plans. (Regulation 5 (a)(b)(c)) Specifically, the registered provider must ensure that decisions regarding children's education are consistently challenged and appropriately escalated. This was a requirement at the last inspection and has been restated.	02 June 2025
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.	2 June 2025

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; take part in activities, and attend any appointments, for the purpose of meeting the child’s health and well-being needs; and understand and develop skills to promote the child’s well-being. (Regulation 10 (1)(a)(b)(c)(2)(a)(i)(ii)(iii)(iv)) Specifically, the registered person must ensure that children are supported to maintain their health and understand the dangers of smoking or vaping. Staff must be provided with clear guidance on how to respond when children bring smoking or vaping paraphernalia into the home.	
The registered person must ensure that— within 24 hours of the use of a measure of control, discipline or restraint in relation to a child in the home, a record is made which includes— the name of the child; details of the child’s behaviour leading to the use of the measure; the date, time and location of the use of the measure; a description of the measure and its duration; details of any methods used or steps taken to avoid the need to use the measure; the name of the person who used the measure (“the user”), and of any other person present when the measure was used;	2 June 2025

the effectiveness and any consequences of the use of the measure; and a description of any injury to the child or any other person, and any medical treatment administered, as a result of the measure; within 48 hours of the use of the measure, the registered person, or a person who is authorised by the registered person to do so (“the authorised person”)— has spoken to the user about the measure; and has signed the record to confirm it is accurate; and within 5 days of the use of the measure, the registered person or the authorised person adds to the record confirmation that they have spoken to the child about the measure. (Regulation 35 (3)(a)(i)(ii)(iii)(iv)(v)(vi)(vii)(viii)(b)(i)(ii)(c)) Specifically, the registered person must ensure that all physical interventions used are necessary to safeguard the child. The manager’s evaluation must consider staff practice and whether the situation could have been managed differently to avoid an intervention. When physical interventions are used, the registered person must ensure that these are approved holds that the user has been trained to use. If un-approved holds are used, there must be extenuating circumstances for these to have been required. The registered person must ensure that children are spoken to by someone not involved in the incident to determine their feelings about it.	
The registered person must notify HMCI and each other relevant person without delay if— an incident requiring police involvement occurs in relation to a child which the registered person considers to be serious; there is an allegation of abuse against the home or a person working there; or	2 June 2025

there is any other incident relating to a child which the registered person considers to be serious. (Regulation 40 (4)(b)(c)(e)) Specifically, the registered person must ensure that all serious incidents are reported to the regulator. The registered person must ensure that allegations made by children are responded to in full with external professionals consulted following these.	
The registered person must ensure that all employees— receive practice-related supervision by a person with appropriate experience. (Regulation 33 (4)(b)) Specifically, the registered provider must ensure that the responsible individual receives meaningful and reflective practice-related supervision to support her management of the home. This was a requirement at the last inspection and has been restated.	2 June 2025

*These requirements are subject to a compliance notice.

Children's home details

Unique reference number: SC008485

Provision sub-type: Children's home

Registered provider: Choice Home for Children Ltd

Registered provider address: 31 Wellington Road, Nantwich, Cheshire CW5 7ED

Responsible individual: Linda Heywood

Registered manager: Post vacant

Inspectors

Aislinn Cooper, Social Care Regulatory Inspector
Chibuzo Otache, Social Care Regulatory Inspector

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