

SC008488

Registered provider: Halliwell Homes

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This is a private children's home registered for up to eight children of either gender. The home's statement of purpose states that children living in this home may have a range of emotional, social and behavioral difficulties.

The home offers education on site at a registered school.

The home is currently operating without a registered manager. A new manager has been recruited but has not yet applied to Ofsted for the position of registered manager.

Due to COVID-19 (coronavirus), at the request of the Secretary of State, we suspended all routine inspections of social care providers on 17 March 2020.

We last visited this setting on 10 December 2020 to carry out a monitoring visit. The report is published on our website.

Inspection dates: 14 to 15 July 2021

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: 20 February 2020

Overall judgement at last inspection: Good

Enforcement action since last inspection:

The registration of the home was suspended on 7 October 2020 following a serious safeguarding incident and children moved out of the home. Ofsted carried out a further visit to the home on 13 November 2020 to consider actions taken in relation to the safeguarding incident and to consider progress made in relation to the suspension notice. During the visit, inspectors found that there had been suitable action taken by the leadership team for the suspension of the home's registration to be lifted.

Recent inspection history

Inspection date	Inspection type	Inspection judgement
20/02/2020	Full	Good
11/12/2019	Full	Inadequate
05/12/2018	Interim	Sustained effectiveness
12/06/2018	Full	Good

Inspection judgements

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

All children are provided with full-time education and have excellent attendance levels. Two children continue to be educated in mainstream settings. The remaining three children are educated in the on-site school provided by the organisation. These children are completing a variety of subjects and are achieving in line with their targets.

Menus are created in consultation with the home's nutritionist, who helps staff to plan and provide healthy, well-balanced meals. One child is working directly with the nutritionist to grow and tend to his own vegetable patch in the garden. This is working well, and the child has been able to sample some of the vegetables grown because of his efforts. This helps children to maintain healthy lifestyles and contributes to their overall health and well-being.

Children are not yet receiving direct therapy. However, staff are in direct contact with clinicians who agree therapeutically led action plans to support children's individual emotional and safety needs. Children living in the home for longer than 12 weeks receive psychological assessments that determine the level and type of further therapeutic intervention. This helps staff to understand and support children's emotional and mental health needs and identifies areas of focus for direct work.

Since the last inspection, five children have moved into the home. Impact assessments completed indicate that some children would not be appropriately placed with others currently living in the home. Furthermore, a review of one child's placement has resulted in significant changes to her care and future. Decisions made about this child have not involved thorough consultation with the placing authority or an exploration of measures that could be taken to maintain the child's current plans. Those responsible for the child believe this is detrimental to the child's future well-being. As such, the processes used do not support children to have positive experiences of moving in to or out of the home and are not reflective of good care planning.

Children receive positive praise and compliments from staff daily. This helps to improve their self-esteem and self-worth and provide children with a sense of achievement. This also reinforces the strong, positive and nurturing relationships children have with key staff in the home. One child said, 'Staff spend time with me, they make sure I am healthy, they listen to me, they care about me, and they are really good at making me feel loved.'

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

There have been improvements to the recording and reporting of incidents of physical intervention since the last inspection. Records detail the holds used, their duration, and the necessity of interventions. Interventions are used to ensure children's and staff's safety. On one occasion, staff physically intervened sooner than necessary. Appropriate behaviour management techniques were not exhausted prior to this. This does not ensure that all measures of control used are necessary and is not reflective of positive behaviour management.

There have been several medication errors, which have resulted in one child not receiving the correct medication. While this has not had an impact on the child's health, shortfalls in medication administration and management do not represent safe and effective practice. Since these errors, steps have been taken to rectify this and reduce the risk of further occurrences. Steps taken include: assigning a senior staff member as 'medication lead', constructing more efficient medication storage, the creation of a comprehensive instruction and guidance file for staff, and staff revisiting medication training.

Risk assessments do not include all identified risks or unsafe behaviours displayed by children. One child's impact assessment detailed a serious incident. This information is not included in the child's current risk assessment. This means that there is no ongoing assessment of this unsafe behaviour, which is necessary to mitigate future risks.

Children are not always helped to understand their behaviours. Appropriate consequences are not always imposed. Furthermore, direct work sessions are not completed with children following such incidents in order to help them understand their behaviours or the impact of them on others. This does not support the effective reduction of unsafe and harmful behaviours displayed by children.

Staff are fully aware of their responsibilities to supervise children living in the home together. Where it is necessary to provide children with increased monitoring and supervision, staff have adhered to the procedures in place to maintain children's safety and protect them from harm. This increased monitoring has enabled all children in the home to complete activities together as a group and has ensured no children are alienated or left out.

Staff are confident in the home's whistle-blowing and safeguarding procedures. They feel supported should they wish to raise concerns and are confident that these will be managed in line with the organisation's procedures. They are further aware of external professionals and procedures to consult if required.

Staff have received appropriate training to help them protect children. They have recently revisited medication and safeguarding training and have undertaken physical intervention training that is specific to the new model of restraint being used. Staff are positive about this training and say that it gives them more, less-restrictive options to support children when they are displaying behaviours that may cause significant harm or damage. Furthermore, staff have also recently received sexually harmful behaviour training, which is relevant to their role.

The effectiveness of leaders and managers: inadequate

There are significant shortfalls in the leadership and management of the home. There have been several changes to the manager, with two managers resigning from post over recent months. At the time of the inspection, the newly assigned manager had been overseeing the home for less than one month. The new manager is familiar with the home and has been promoted within the organisation.

The absence of a consistent manager has led to a lack of continuity and consistent guidance, direction and support for staff. This has resulted in some staff feeling uninformed, unsupported and unsure within their roles. This has the potential to affect staff's practice, morale and welfare and subsequently impact upon the care provided to children.

Shortfalls in staffing have resulted in numerous occasions where agency use has been required. Since the last inspection, agency staff have been used alongside the core team on more than 60 occasions. This does not provide children with sufficient continuity of care. Furthermore, it has been necessary for the newly assigned manager to complete shifts in the home. This hinders his ability to complete management duties and become accustomed to his new managerial role.

The quality and effectiveness of the care provided to children is not successfully monitored or reviewed. For example, regulation 45 reports have not been submitted to the regulator within the appropriate timescales. Furthermore, not all the requirements from the previous inspection have been met. Independent person reports do highlight key areas for improvement. However, action taken to resolve the shortfalls identified have not been taken. Failure to take all necessary action and to robustly monitor the home has affected the overall quality of care provided to children.

Incidents have not been effectively evaluated or reflected upon by managers. For example, there have been incidents in which staff have been seriously injured. There has been no reflection or evaluation about what could have been done differently or how staff can adapt their practice to reduce the risk of harm in the future. This does not encourage positive relationships between staff and children or support a reduction in incidents.

Since the last visit to the home, it can be seen that the senior leadership team are supporting gradual improvements. The new manager and staff have also taken action to make clear improvements to the home's environment and have paid particular attention to children's bedrooms and communal spaces, making the home appear much more homely and child friendly. Staff have worked hard to build strong, positive relationships with children, which are enabling children to have improved experiences while living at the home. The new manager and core team members are keen to continue to make improvements to the home and the care and experiences provided to children.

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, 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 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. 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; help each child to develop and practise skills to resolve conflicts positively and without harm to anyone; communicate to each child expectations about the child's behaviour and ensure that the child understands those expectations 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; de-escalate confrontations with or between children, or potentially violent behaviour by children;	10 September 2021

that each child is encouraged to build and maintain positive relationships with others. (Regulation 11 (1)(a)(b)(c) (2)(a)(i)(ii)(iii)(iv)(v)(x)(xi)(b)) This is with specific reference to evidencing direct work with children following incidents. This will ensure that key-work sessions are structured, appropriately timed and that children are helped to understand their behaviours. This requirement was made at the previous inspection and is restated.	
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. (Regulation 12 (1) (2)(i)) Specifically, ensure all significant and unsafe behaviours displayed by children are clearly recorded and that these behaviours receive ongoing assessment and review in order to reduce the risk of harm.	10 September 2021
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;	10 September 2021

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; 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)(d)(e)(f)(h)) In particular, the management oversight of the home should be more robust. Debriefs and lessons learned should be used to support staff to manage children's aggressive behaviour towards others living in the home in an effective manner in order to prevent children being hurt. There should be sufficient staff to provide quality, continuous care to all children living in the home. Staff should be supported, helped to review their practice and be provided with the necessary information and guidance to fulfil their roles with confidence. Monitoring and review by the manager should identify shortfalls and weaknesses in the home and serve to improve practice through effective reflection and evaluation of incidents and internal and external monitoring. This requirement was made at the last inspection and is restated.	
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;	10 September 2021

that arrangements are in place to— manage and review the placement of each child in the home; and plan for, and help, each child to prepare to leave the home or to move into adult care in a way that is consistent with arrangements agreed with the child's placing authority. (Regulation 14 (1)(a)(b) (2)(a)(b)(ii)(iii)) In particular, any decisions made for children to move from the home should be completed following thorough assessment and consultation with relevant others, such as the child's placing authority. Children should only be admitted to the home following robust assessments. Assessments should demonstrate that the home is equipped to meet the individual needs of each child and that there are no increased risks to children's safety arising from their placement with others.	
No measure of control or discipline which is excessive, unreasonable or contrary to paragraph (2) may be used in relation to any child. (Regulation 19 (1)) Specifically, where appropriate, de-escalation techniques should be exhausted prior to all measures of control. Children should be helped to recognise the impact of their behaviour on themselves, other children and the staff caring for them.	10 September 2021
The registered person must make arrangements for the handling, recording, safekeeping, safe administration and disposal of medicines received into the children's home. In particular the registered person must ensure that— medicine which is prescribed for a child is administered as prescribed to the child for whom it is prescribed. (Regulation 23 (1) (2)(b))	10 September 2021
The registered provider must appoint a person to manage the children's home if— there is no registered manager in respect of the home. (Regulation 27 (1)(a))	10 September 2021

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: SC008488

Provision sub-type: Children's home

Registered provider: Halliwell Homes

Registered provider address: The Curtis Partnership, 1 Tape Street, Cheadle, Stoke-on-Trent ST10 1BB

Responsible individual: Paul Bliss

Registered manager: Post vacant

Inspectors

Natalie Bennett, Social Care Inspector

Charlie Bamber, Social Care Inspector

Lisa Walsh, Her Majesty's Inspector

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