

SC034210

Registered provider: North Yorkshire Council

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home is owned and managed by a local authority. It provides pre-planned and emergency short breaks as well as longer-term placements for children with learning disabilities or physical disabilities and associated complex healthcare needs. The home can also provide extended and bespoke packages of support. The home is divided into two separate properties.

At the time of the inspection, there were children attending the short-breaks provision and one child living in the home on a shared care arrangement.

The manager registered with Ofsted in May 2016.

Inspection dates: 14 and 15 January 2025

Overall experiences and progress of children and young people, taking into account **good**

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

The effectiveness of leaders and managers **requires improvement to be good**

The children's home provides effective services that meet the requirements for good.

Date of last inspection: 16 January 2024

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
16/01/2024	Full	Good
06/12/2022	Full	Good
09/03/2022	Full	Good
17/12/2019	Full	Outstanding

Inspection judgements

Overall experiences and progress of children and young people: good

The home provides valuable care and support for children and their families. It offers multiple packages of support in addition to its short-stay provision. The creativity to extend the offer of services to children ensures that families receive packages of support to meet their children's individual needs.

Children receive well-planned introductions to the home. Staff meet with children, their families and professionals to gather essential information about the child. This ensures that children welcomed into the home have well-planned support from staff who have the knowledge and skills to meet their needs. Staff pay equal attention to support children who move to adult services. This ensures that children receive a positive transition and ending to their time in the home.

Both properties have specialist resources to enable staff to care for children in line with their care plans. Bathrooms are adapted to ensure that all children can access these. Bedrooms are equipped to keep children safe and comfortable during their stays. In addition, parents consent to the use of monitoring systems, so that staff can have oversight of children during the night, when this is necessary.

Staff complete focused work with children to help them learn and develop new skills. They celebrate the children's achievements, no matter how big or small and have rewards systems established. Staff are proactive in capturing the children's successes in photos, so these can be retained for the child, and shared with their parents.

Children are engaged in new experiences in the home and community. The staff are proud of the efforts they make to ensure that children are active and stimulated. Children are taken to activities such as the cinema and a children's choir, and the home organises an annual festival. This helps children have experiences they may not otherwise have without the support and commitment of staff.

Staff work collaboratively with professionals. Feedback from social workers indicated that communication is a strength of this service. Staff ensure that they attend planning meetings to help inform the children's care plans. A social worker said that staff are good advocates for children and this helps when making decisions for children.

Parents develop trusting relationships with staff. This gives them the confidence to trust staff to care for their children. Two parents said that staff go 'above and beyond' for their children and emphasised the importance of the service not only for children, but for their families.

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

Children are happy and engage in activities with staff. Parents participate in care planning for children and therefore understand how staff will respond if a child needs additional support. Parents said that they are kept up to date about any worries about their child's presentation or health.

Children's plans clearly describe children's vulnerabilities and risks. The plans are succinct and reflect that children spend short periods at the home. Strategies guide staff effectively on how to keep children safe and are set out in the plans. However, opportunities to develop children's plans are sometimes missed as they are not always reviewed after an incident.

Children have individualised plans to ensure that staff know how to support children to evacuate the building should there be a fire. Children practise fire drills with staff. This helps children become familiar with what to do and provides staff with an understanding of how children will respond.

Children are physically held or guided to keep themselves or others safe as a last resort after other techniques have been used. Not all incidents when a child is held are recorded as a physical intervention, and some do not follow the home's procedures. The manager does not always review the records to evaluate staff's practice and the effectiveness of the hold. However, this has not resulted in children being unsafe.

Staff complete body maps when a child has an injury. However, some records do not provide enough information to understand how an injury was sustained or what the staff did with this information. When records are audited, this is not completed in a timely manner, demonstrating gaps in management oversight.

Safe recruitment practice is in place. Managers ensure that all safeguarding checks are completed on adults before they come to work in the home. This ensures that only adults who are safe to do so work with the children.

The effectiveness of leaders and managers: requires improvement to be good

The home is run by an experienced manager and two deputy managers. They support a team of senior and residential support workers. Due to the size of the service, relief staff also work at the home to ensure that children have appropriate levels of supervision in place.

One child suffered a physical injury while in the care of staff. An internal investigation took place, but a record and evaluation of the outcome was not made. Poor record-keeping by managers does not evidence important conversations with social work managers about investigations, their processes and outcomes. Therefore, the record of what happened, and how professionals responded, is unclear.

Staff receive regular supervision from a manager. This provides staff with an opportunity to discuss and reflect on children's experiences and reflect on their practice. Staff said that supervision is beneficial, and this is offered on an individual and group basis to support staff development.

Staff are provided with training to ensure they have the right skills to meet the children's needs. In addition to mandatory training, specialist training is provided to ensure that staff understand how they care for children with complex health needs and disabilities. Managers incorporate training into team meetings to further help staff develop their practice.

The administration of medication is well managed. However, the signing of medication charts by staff has been raised by managers as an area for improvement. Despite this, there continue to be concerns that signatures are not always recorded in line with procedures.

Children's records are not always available on the children's files. Some records need to be updated or requested from children's social workers to ensure that the records held are accurate and up to date. This prevents staff from being able to read children's essential records, such as their education, health and care plans.

Not all staff who work in the home have a qualification to work with children in a residential setting as set out in regulation. Nine staff have passed the relevant date to achieve this. Other staff have achieved the qualification and newer staff are enrolled once they have completed their probation.

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 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— use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13 (1)(a)(b) (2)(h))	26 February 2025
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; 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 that the effectiveness of the home's child protection policies is monitored regularly. (Regulation 12 (1) (2)(a)(i)(vi))	26 February 2025

The registered person must keep the behaviour management policy under review and, where appropriate, revise it. 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; 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 (2) (3)(a)(i)(ii)(iii)(iv)(v)(vi)(vii)(viii)(b)(b)(ii)(c))	26 February 2025
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The registered person may only— employ an individual to work at the children’s home; or if an individual is employed by a person other than the registered person to work at the home in a position in which the individual may have regular contact with children, allow that individual to work at the home, if the individual satisfies the requirements in paragraph (3). The requirements are that— the individual has the appropriate experience, qualification, and skills for the work that the individual is to perform; For the purposes of paragraph (3)(b), an individual who works in the home in a care role has the appropriate qualification if, by the relevant date, the individual has attained— the Level 3 Diploma for Residential Childcare (England) (“the Level 3 Diploma”); or a qualification which the registered person considers to be equivalent to the Level 3 Diploma. The relevant date is— in the case of an individual who starts working in a care role in a home after 1st April 2014, the date which falls 2 years after the date on which the individual started working in a care role in a home; or in the case of an individual who was working in a care role in a home on 1st April 2014, 1st April 2016. (Regulation 32 (2)(a)(b) (3)(b) (4)(a)(b) (5)(a)(b))	25 April 2025
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Recommendation

- The registered person should ensure that case records are kept up to date and signed and dated by the author of each entry. This includes children’s medication records. (‘Guide to the Children’s Homes Regulations, including the quality standards, page 62, paragraph 14.6)

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: SC034210

Provision sub-type: Children's home

Registered provider: North Yorkshire Council

Registered provider address: County Hall, Racecourse Lane, Northallerton DL7 8AD

Responsible individual: Gemma Sheader

Registered manager: Katherine Clarke

Inspectors

Joanne Wallis, Social Care Inspector

Lisa Richards, Social Care Inspector

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