

SC036026

Registered provider: Sheffield City Council

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

The home is owned and managed by a local authority. It offers care for up to five children who experience social and/or emotional difficulties.

Two children were living at the home at the time of the inspection.

The manager has been registered with Ofsted since 4 July 2023.

Inspection dates: 18 and 19 June 2024

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	requires improvement to be good
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The children's home provides effective services that meet the requirements for good.

Date of last inspection: 30 January 2024

Overall judgement at last inspection: requires improvement to be good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
30/01/2024	Full	Requires improvement to be good
17/05/2022	Full	Requires improvement to be good
24/08/2021	Full	Good
15/10/2019	Full	Good

Inspection judgements

Overall experiences and progress of children and young people: good

Children have made good progress, including those who have moved out. Children's relationships with staff have developed and this has enabled children to successfully move on. Professionals who work with the children felt that the relationships and support offered to children from staff has been pivotal in their progress.

Education is prioritised in the home. One child accesses a bespoke education package that meets their needs. They are making good progress with this, including in maths and English. Staff support good attendance and children have developed a good routine. A child who recently moved to the home is not currently accessing education. Staff are liaising with the virtual school to support a return to education as soon as practical. Independence skills continue to be promoted and encouraged to ensure children have the skills they need to live independently.

Children's health needs are met. Staff support children to develop good routines around personal hygiene and oral health. There has been positive progress with this, although children remain resistant at times. Staff advocated to ensure a specialist assessment took place for one child. This has been important to inform onwards care planning.

Staff know children well and generally understand their needs. This enables staff to advocate on behalf of children around care planning. As a result, children are supported to have positive opportunities moving forward. When children move on to semi-independence, staff continue to maintain relationships through outreach work. This helps children feel a sense of belonging.

Children's success is celebrated. Staff are proud of children's achievements, and this supports children to develop their sense of worth.

The home has been redecorated throughout, including children's bedrooms. Children were involved in the improvements; this has fostered a sense of belonging for children living in the home. Children are now taking better care of the home, including their own bedrooms.

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

Children's documents are detailed and contain the relevant information relating to children's ongoing care needs. They are well-written, child-focused and provide a clear account of what needs to happen to meet children's needs and mitigate risks. This translates into clear actions and is reviewed monthly to ensure progress and prevent drift.

Children feel comfortable sharing their worries with staff, who respond appropriately. Children seek out support from staff and value the support provided. They believe staff

will advocate on their behalf. One child shared that staff treat him 'like their son'. Children know how to make a complaint. When they do complain, their complaints are taken seriously, and the manager responds appropriately.

Discrimination from children is consistently and appropriately challenged by staff. Extensive work has taken place to support children to understand the impact of discriminatory language and actions. This work is ongoing.

Risk assessments are detailed and contain all children's known risks. They are updated regularly, including after incidents. Strategies for staff to support children to de-escalate their behaviours could be improved to ensure all staff are utilising effective techniques. Staff work collaboratively with the wider networks for children to understand and reduce risks. Professionals are complementary about the care offered to children and the tenacity of staff to keep children safe. However, there have been times when staff have not always followed plans when children have gone missing.

Children experience positive relationships with most of the staff. Staff know children well and have a good understanding of children's experiences. Most of the time, this enables staff to support children to de-escalate and therefore physical intervention has not been used. However, there have been times when staff have not been able to effectively de-escalate incidents. On occasions, their actions have contributed to prolonged incidents which have led to staff calling the police to help manage children's behaviour.

Consequences are not restorative and at times do not correlate with the incident. Some have been repeated several times but the lack of analysis from managers does not help them to evaluate their effectiveness. Room searches take place proportionately in response to risk. However, one search could have been managed in a more child-friendly way.

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

The manager's monitoring systems are not always effective. Oversight of staff practice is poor at times. This leads to shortfalls not being addressed appropriately and missed opportunities to understand staff and their development needs.

The quality of staff supervision varies. There are missed opportunities for managers to support staff to reflect on their practice. Single subject supervision takes place to address issues. The records show some reflection but there is little follow up. The manager receives regular, reflective supervision. Staff feel supported by management and are happy working here. They are committed to achieving positive outcomes for children.

The issues previously identified with the fire systems in the home remain. This is at no fault to the home's manager. Senior leaders have challenged others in the local authority to address the issues to support increased safety within the home.

Safer recruitment checks have been processed. However, gaps in one member of staff's references were noted. All other required checks had been completed.

The quality-of-care review lacked analysis and direct feedback from children. This hindered the manager's ability to develop a clear plan that builds on the review of the previous six months.

Staff have not always reported poor practice. The manager has acted appropriately when they became aware of the issue and have addressed them. Complaints and allegations are taken seriously and investigated by the manager. However, they do not always keep a record of their decision making or rationale around concluding investigations. This makes it hard to understand whether action has been taken and why.

The home is fully staffed and there has been a reduction in the amount of agency staff working in the home. This has increased consistency around the care provided to children.

Team meetings take place regularly, although only a small number of the large team attend. There is a set agenda and actions are noted, but these are not reviewed at the following meeting. This leaves room for drift. The minutes do not indicate reflective discussions.

Mandatory training takes place and there is an effective system in place to monitor this. This includes management oversight of staff completing the diploma.

The statement of purpose has been updated to reflect the range of care offered to children. This has been shared with the regulator.

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— 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 have the experience, qualifications and skills to meet the needs of 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)(c)(f)(h)) In particular, the registered person must provide sufficient scrutiny of shortfalls in staff practice to improve the level of care for children. The registered person must also ensure that tasks from team meetings have clear timescales and the person expected to complete them is identified. Actions should be reviewed to ensure tasks are complete. The registered person must ensure that supervision offers space for staff to reflect on challenging situations. That the outcome of complaints is recorded clearly to help understand how the outcome was	13 September 2024

reached and that recruitment checks are robust before ensuring staff are suitable.	
The positive relationship 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) required 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 and practise skills to resolve conflicts positively and without harm to anyone; understand how children's previous experiences and present emotions can be communicated through behaviour and have the competence and skills to interpret these and develop positive relationships with children; 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 do the same; de-escalate confrontations with or between children, or potentially violent behaviour by children. (Regulation 11 (1)(a)(b)(c) (2)(a)(i)(iv)(ix)(x)(xi)) In particular, the registered person must support staff to have the skills to manage children's behaviour effectively.	13 September 2024
After consultation with the fire and rescue authority, the registered person must— take adequate precautions against the risk of fire, including the provision of suitable fire equipment in the children's home. (Regulation 25 (1)(a))	12 July 2024

In particular, the registered person must ensure that fire systems are fully functioning and cannot be disabled by children living in the home.	
The registered person must ensure that— within 24 hours of the use of a measure of control, discipline or restraint to a child in the home, a record is made which includes— details of any methods used or steps taken to avoid the need to use the measure; the effectiveness and any consequences of the use of the measure. (Regulation 35 (3)(a)(v)(vii)) In particular, the registered person must ensure that consequences are restorative in nature and the impact of the consequence is evaluated.	13 September 2024
In order to complete a quality of care review the registered person must establish and maintain a system for monitoring, reviewing and evaluating— the quality of care provided for children; the feedback and opinions of children about the children's home, its facilities and the quality of care they receive in it. The system referred to in paragraph (2) must provide for ascertaining and considering the opinions of children, their parents, placing authorities and staff. (Regulation 45 (2)(a)(b) (5))	1 December 2024

Recommendations

- The registered person needs to ensure that staff follow the correct procedures when children are missing from home, this includes reporting to the police at the times indicated in children's plans. ('Guide to the Children's Homes Regulations, including the quality standards', page 45, paragraph 9.28)
- The registered person needs to ensure that when room searches are completed, the impact on children is considered and mitigated against where possible. ('Guide to the Children's Homes Regulations, including the quality standards', page 16, paragraph 3.20)

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: SC036026

Provision sub-type: Children's home

Registered provider: Sheffield City Council

Registered provider address: Town Hall, Pinstone Street, Sheffield S1 2HH

Responsible individual: Sally Williams

Registered manager: Carly Peters

Inspector

Joanna Beal, Social Care Inspector

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