

SC066469

Registered provider: Keys Care Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

A private company owns and runs the home. The home is approved to provide care for up to three children. The home may provide care for children with social and emotional difficulties.

Two children were living at the home at the time of inspection. They lived in the home prior to the last inspection.

The manager has been registered with Ofsted since November 2021.

Inspection dates: 26 and 27 February 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	good
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The children's home provides effective services that meet the requirements for good.

Date of last inspection: 18 January 2023

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
18/01/2023	Full	Good
11/08/2021	Full	Good
03/03/2020	Full	Good
19/02/2019	Full	Good

Inspection judgements

Overall experiences and progress of children and young people: good

Children and staff have trusting relationships. The relationships are warm, and children receive hugs from staff if they want them. Staff understand the children's backgrounds and experiences. They also understand their emotional needs and how to meet them. Staff spend one-to-one time with children to help them to understand and manage their feelings. One child is supported by staff to explore their gender identity. Families state that their children have made progress since living at the home in terms of their behaviour and confidence.

Children's voices are heard and acted on and their views are obtained during weekly meetings. Creative methods that are age and ability appropriate help staff to elicit children's views, such as using pictures or simple questionnaires. Staff know how to connect with the children, for example, when driving in the car or playing. This helps children to open up and share their wishes and feelings.

The children's health needs are met. Medical appointments are attended by children to ensure that they are receiving the treatments they need. Children's emotional health needs are met. The home's therapist provides support through one-to-one sessions with children. The therapist also provides consultation with staff to help them to understand the children and how best to support them. Children are supported to access external services, such as the child and adolescent mental health service or online platforms to help them to manage their emotional needs.

Children's education is supported. Children access suitable education provision, which is progress from their starting points. When children have been unable to attend lessons due to an absence of provision, staff have undertaken work with them at home. There is good liaison with schools, virtual schools, and the special educational needs services. Staff undertake independence work with one of the children to prepare them for adulthood.

Family time for children is facilitated by staff. Staff travel long distances with children to see children's family and maintain their relationships. This helps children to form their identity and maintain their family network, which may support them when they reach adulthood. However, staff have not always facilitated contact effectively, as one parent was unable to speak to their child over the Christmas holidays.

The children's bedrooms are decorated in the style they choose. The children say that they like them. However, some areas of the home detract from a giving a homely feel. This is due to the locks on bathroom doors, which the children cannot open independently, and cupboards in the staff office that have not been painted since they were built.

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

Children say that they feel safe in the home. Staff understand the risks to children and have the right skills and knowledge to safeguard them. Staff are guided by the clarity in children's risk assessments. When children face an elevated risk, such as significant self-injury or exploitation, specialist guidance is sought from external providers to inform risk assessments. Regular risk planning meetings are also held. Risk assessments are kept updated and receive oversight from the manager. However, there have been some instances of the manager not alerting the regulator when a safeguarding incident has occurred.

Missing episodes are rare and are managed effectively. Staff know what to do if children are missing. Clear plans and protocols provide staff with additional guidance. Good liaison with the police and social care services helps to ensure that all actions are taken to locate children. Records of missing episodes are clear and have manager oversight. Missing protocols are dynamic and consider the child's emotional well-being. For example, if children need time away from the home then more time can be given without contacting the police. It also prevents children having unnecessary contact with police officers, decreasing the possibility of arrest and criminalisation.

Staff understand and follow children's behaviour support plans. De-escalation techniques are used when children become upset or angry. Holds are only used as a last resort and are proportionate. Staff are trained to undertake them safely. Children and staff are debriefed afterwards. Recordings are detailed and there is clear management oversight and evaluation. However, there has been one instance when a manager involved in a hold completed the child's debrief, which raises an issue over accountability.

Allegations against staff are acted on promptly. Children are kept safe. Information is gathered comprehensively and there is manager oversight. There is appropriate contact with the local authority designated officer and placing authority.

Room searches are undertaken to keep children safe. Children are included in the process and are asked for consent. Search details and outcomes are recorded. The child's views and presentation are also recorded. There is manager oversight when searches are completed.

The effectiveness of leaders and managers: good

The manager knows the children well and has close relationships with them. The manager has aspirations for the children and advocates on their behalf. For example, the manager has challenged education departments and schools to ensure that the children access suitable education. The manager has also challenged the local authority in respect of one child's care needs and what steps are needed to prepare them for adulthood.

Staff feel supported by the management team. They describe the home as a supportive and pleasant environment to work in. Staff receive regular supervision, which allows them to discuss personal issues and reflect on practice.

When there have been shortfalls in practice, action is taken to understand why it happened and what changes are needed. When needed, additional training is given to ensure that staff have the right skills and knowledge to prevent further shortfalls. In these instances, there is clear management oversight and evaluation.

The home currently has one staff vacancy. However, the home over-employs to prevent gaps in the rota. This provides continuity of care for the children. It also means that staff do not work unwanted additional hours and managers are not required to cover shifts. This reduces staff burnout and maintains staff morale.

There is effective communication between the manager and professionals to ensure that children's needs are met. Social workers and education providers receive regular updates about the children to encourage a coordinated approach to their care. The manager has systems in place to obtain professional feedback. The manager's review of care is detailed and evaluative. There is also good use of the independent person to provide an impartial assessment of the care provided. The manager has implemented systems to ensure that children's files are up to date and all actions and one-to-one work has been completed.

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 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— ensure that the premises used for the purposes of the home are designed and furnished so as to— meet the needs of each child; and enable each child to participate in the daily life of the home. (Regulation 6 (1)(a)(b) (2)(c)(i)(ii)) In particular, the registered person must ensure that locks on bathroom doors can be opened by the children without staff support and that the office cupboards are decorated to ensure a nice environment for people entering the room.	27 April 2024
The registered person must notify HMCI and each other relevant person without delay if— there is any other incident relating to a child which the registered person considers to be serious. (Regulation 40 (4)(e))	27 April 2024

Recommendations

- The registered person should ensure that appropriate forms of contact are promoted and facilitated for each child. ('Guide to the Children's Homes Regulations, including quality standards', page 58 paragraph 11.8)
- The registered person should ensure that all incidents of control, discipline and restraint are subject to systems of regular scrutiny to ensure that their use is fair. In particular, the registered person should ensure that debriefs with children are undertaken by someone who was not involved in the physical intervention, to increase accountability. ('Guide to the Children's Homes Regulations, including quality standards', page 46 paragraph 9.36)

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: SC066469

Provision sub-type: Children's home

Registered provider: Keys Care Limited

Registered provider address: C/o Pinsent Masons Llp, The Soloist Building, 1 Lanyon Place, Belfast, Northern Ireland BT1 3LP

Responsible individual: Joanne Carter

Registered manager: Tracey Backhouse

Inspectors

Ed McCallum, Social Care Inspector

Parveen Hussain, Social Care Inspector

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