

SC470513

Registered provider: Wandsworth Borough Council

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home is run by a local authority and provides care for up to 40 children with , special educational needs and/or disabilities and associated conditions. The home is on the same site as the organisation's school and comprises five individual houses where children live in small groups. The service accommodates children for placements of up to 38 weeks in the year. At the time of this inspection, 27 children were living in the home.

There has been no registered manager since 31 August 2023.

The inspectors only inspected the social care provision at this setting.

Inspection dates: 18 to 20 November 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: 11 June 2024

Overall judgement at last inspection: inadequate

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
11/06/2024	Full	Inadequate
12/12/2023	Full	Requires improvement to be good
20/06/2023	Full	Good
13/09/2022	Full	Good

Inspection judgements

Overall experiences and progress of children and young people: good

Recent improvements to the way staff care for children have had a significant and positive impact on their experiences and progress. Staff engage with each child in a focused and thoughtful way to help them to participate in activities. This helps children to develop and learn social and practical skills to enhance their independence and enjoyment.

The provider has improved communication between the school and the residential provision so that they align their approaches to care for individual children. This provides more consistency for children throughout the whole day. It has also helped children to manage the daily transitions between the residential provision and the school more effectively.

Staff are supported by a multi-disciplinary team that includes speech and language therapists, occupational therapists and behaviour specialists. They provide individualised care in a way that helps each child to develop to their potential. However, in one instance, there was a delay in sharing a written report, which detailed strategies devised by a specialist worker in education, with the residential staff. Although the residential staff knew the child well and provided safe care, this had the potential to impact on their confidence and the consistency of the strategies being used.

Children are supported to use a range of communication methods to help them to participate in decisions that affect them and to share their experiences. As a result, children are building positive relationships with staff and each other. Some children who previously struggled to mix with peers are now able to play games, take turns and have fun in group activities.

Children are becoming more confident in engaging with the world around them, and this is helping them to build skills for independence. For example, staff support children to undertake a range of household tasks. Children also regularly help with food shopping and are supported to make choices and understand how to pay for items. A parent commented that their child was previously unable to cope with a visit to the supermarket, and now they enjoy going. This has made a big difference in terms of them participating more in family life when they are at home.

The individual houses are generally well presented and homely. However, this is not of a consistently high standard across all of the houses. In two houses, some work is needed to freshen up the decor and make them feel more welcoming and comfortable.

The doors to the children's rooms can be locked and unlocked with an electronic fob key. Some children have their own fob key to open their doors and others do not. It is not clear how staff routinely review and assess which children can have a fob key. This runs

the risk that some children may miss opportunities to take responsibility for holding keys, and it may unnecessarily restrict them from entering their rooms without asking for help.

Most children's parents and social workers who shared views with the inspectors are very positive about the quality of care provided to children. In particular, they cited the excellent relationships between children and staff and being kept informed regularly about their children.

When children leave the home, staff advocate well on their behalf to make sure that their move is well planned and that they are supported well to adjust to their new placements. When children move between the houses, this is done in a thoughtful way to help them to settle and fit in with the other children already living in the house.

Children are active and supported to live healthy lifestyles. Staff notice and care for them if they are unwell and support them to attend routine medical appointments. A social worker commented that, for a child who previously struggled to attend health appointments, staff had been particularly creative in the way that they supported him to access health care.

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

Staff provide high levels of supervision, and there are always sufficient staff on duty to meet children's needs. Staff are deployed effectively to ensure that all children have staff supporting them who are suitably trained and know them well.

Staff are aware of and alert to the vulnerabilities of each child and know how to intervene to keep them safe.

Children's health care plans and protocols for emergency medication are now overseen by a health care professional. However, the health advice is not always clearly recorded or easily accessible on some children's electronic files. This can create delays in finding the specialist advice that informs the protocol.

Protocols are now generally clear and provide staff with clear and helpful advice. However, plans for two children were less clear and contained some conflicting information. The impact of these shortfalls was significantly lessened as staff know children well and understand their needs.

Systems and practice in relation to the safe administration of medications have significantly improved. Errors have reduced, and when they do occur, they are quickly spotted and managed effectively. Staff engage well with health services. However, it is not always clear when external medical advice should be sought, for example when children refuse their medication, they are sick after taking their medication or one of their plans needs to be updated. On every occasion, the school nurse is consulted. However, their advice is not always clearly recorded, and a record is not always made if other health professionals have been contacted.

There are good systems in place to promote the welfare and safety of children. Staff use these systems well to report all worries, including low-level concerns. The safeguarding team makes good decisions in relation to how to deal with concerns and takes prompt action to safeguard children. Managers work in partnership with external safeguarding agencies effectively and have good systems in place to identify any learning to inform practice if incidents occur.

There is a keen focus on helping children to find ways to express themselves positively, rather than through behaviours that are unhelpful or unkind. Staff work hard to understand how children are feeling, and they intervene early to help when there are signs that children may be stressed. As a result, behaviour incidents have reduced in number and severity. The use of physical interventions has similarly reduced, and when used, these are generally very brief and low level to help children avoid situations where they may be at risk. Following these incidents, staff check on the welfare of children and communicate with them to explore how they are feeling.

Improvements to the recruitment process include more thorough information and checks to ensure that agency staff are suitable to work with vulnerable children. Leaders are also introducing further checks for agency staff, over and above those carried out by the recruitment agencies, in order to further enhance the scrutiny.

The effectiveness of leaders and managers: good

The provider has taken all reasonable steps to recruit and register a manager for the home. The current manager was recently appointed to the role and has submitted her application to Ofsted. She has made a positive start, and staff feel that she is providing them with the support that they need to provide high standards of care.

There is a strong management team supporting the manager. This includes the responsible individual of the home and the school principal. Together, they have provided excellent leadership and direction to deliver significant improvements in the quality of care in a relatively short space of time.

Leaders and managers have supported staff well to ensure that meeting the individual needs of children is central to care practice. They regularly observe and monitor the day-to-day care to offer support and advice to staff and ensure that agreed strategies to help children are being consistently applied.

Leaders and managers have transformed the safeguarding culture in the home, and there are clear lines of communication and accountability in relation to how concerns are managed.

Leaders and managers are ambitious in terms of helping children reach their full potential. Care practice has shifted from 'firefighting' to being more thoughtful and measured. Staff have a more holistic understanding of the lived experiences of children

and are now able to focus on supporting children to learn and develop socially and emotionally. Children now enjoy living in a calmer, more structured environment that helps them make good progress.

Staff have undertaken extensive training in recent months to ensure that they can meet the individual needs of children. Staff responsible for managing the houses have undertaken leadership and management training and have access to ongoing management coaching. One house manager commented that she finds this extremely helpful to better understand her role and to prioritise tasks in a way that helps her cope much better with her workload.

Staff feedback in relation to the support that they get from managers is universally positive. They benefit from regular supervision sessions that consider their well-being and explore areas for learning and development. There is good management monitoring in place to ensure that the quality and frequency of supervision are maintained.

Leaders and managers have delivered significant improvements since the last full inspection. They have new systems in place to improve management oversight of all aspects of care practice. Consequently, all previous requirements are met, apart from the requirement made in relation to improving health care plans.

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, The 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 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. 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. (Regulation 10 (1)(a)(b) (2)(a)(i)(ii)) In particular, ensure that health guidance to staff remains reviewed, updated and informed by health professionals so that staff fully understand how to respond to the health needs of all children.	2 December 2024

Recommendations

- The registered person should ensure that, just as in a family home, children can access all shared areas of their home unless there are specific reasons why this would not meet a child's needs. Limits on privacy and access may only be put in place to safeguard each child in the home (regulation 21(c)(i)). Any decisions to limit a child's access to any area of the home and any modifications to the environment of the home must only be made where this is intended to safeguard the child's welfare. All

decisions should be informed by a rigorous assessment of that individual child's needs, be properly recorded and be kept under regular review. ('Guide to the Children's Homes Regulations, including the quality standards', page 15, paragraph 3.10)

- The registered person should ensure that children's homes are nurturing and supportive environments that meet the needs of their children. They will, in most cases, be homely, domestic environments. Children's homes must comply with relevant health and safety legislations (alarms, food hygiene etc.); however, in doing so, homes should seek as far as possible to maintain a domestic rather than 'institutional' impression. ('Guide to the Children's Homes Regulations, including the quality standards', page 15, paragraph 3.9)
- The registered person should oversee the welfare of the children in their care through engagement with professionals involved in the care or protection of each child, including teachers, clinicians and other health professionals. In particular, managers should ensure that specialist reports and assessments are made available to house managers, key workers and other staff as appropriate. ('Guide to the Children's Homes Regulations, including the quality standards', page 54, paragraph 10.23)

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: SC470513

Provision sub-type: Residential special school

Registered provider address: Wandsworth Borough Council, The Town Hall,
Wandsworth High Street, London SW18 2PU

Responsible individual: Debbie Tomlinson

Registered manager: Post vacant

Inspectors

Lee Kirwin, Social Care Inspector
Matt Hedges, Social Care Inspector

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