

# 2495377

Registered provider: St Elizabeth's Centre

Full inspection

Inspected under the social care common inspection framework

## Information about this children's home

This home is run by a large charitable organisation. It provides care for up to 52 children aged from five to 19 years with complex medical needs, autism spectrum disorder, epilepsy and associated learning disabilities. The home consists of seven individual houses. Children attend the on-site school.

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

The home has not had a registered manager since 12 April 2024.

### Inspection dates: 2 to 4 July 2024

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

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

The effectiveness of leaders and managers **good**

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

**Date of last inspection:** 20 June 2023

**Overall judgement at last inspection:** good

**Enforcement action since last inspection:** none

## Recent inspection history

| Inspection date | Inspection type | Inspection judgement            |
|-----------------|-----------------|---------------------------------|
| 20/06/2023      | Full            | Good                            |
| 28/06/2022      | Full            | Requires improvement to be good |
| 24/01/2022      | Full            | Requires improvement to be good |
| 05/10/2021      | Full            | Inadequate                      |

## Inspection judgements

### **Overall experiences and progress of children and young people: good**

This inspection was brought forward to address specific concerns received by Ofsted.

Since the last inspection, seven children have moved into the home and five children have moved on from the home. At the time of this inspection, 24 children were living at the home. Inspectors spent time with 19 children, across seven individual houses. This included one-to-one discussions and participation in group activities and daily routines. Children were happy and provided positive feedback about their experiences.

Children have good relationships with the staff. Staff work closely with speech and language therapists to support children to use their preferred communication systems. There is warmth in the exchanges between staff and children. Staff know the children well and understand their needs. This gives children a sense of stability, which supports their emotional development.

Children take part in a range of activities that reflect their interests. Some children have recently enjoyed a short holiday at a caravan resort. Other children enjoy weekly ballet classes. Recent trips to the cinema, museums and animal parks broaden children's experiences.

All of the children have education plans. The staff actively encourage children with their learning. Staff help children to achieve good attendance at school by maintaining consistent and familiar routines. Staff work closely with the school staff to ensure any gaps in children's learning are reduced.

Nursing and specialist therapy teams have good oversight of children's complex health needs. Staff follow clear and well-devised health and care plans to ensure children's needs are met.

Overall, the feedback from families is very positive. Families highlight good communication with the staff and recognise the progress children make at the home. Leaders and managers are responsive to constructive comments that are made by some families.

Children live in seven separate houses. Staff work hard to ensure that individual houses are well appointed and equipped to meet children's preferences. Children's bedrooms are creatively personalised. Children benefit from good-quality play equipment and individual spaces that meet their sensory needs. However, in several of the homes, there are health and safety signs and posters depicting children's personal allergy information on display which create an institutional impression.

Staff undertake frequent medication administration rounds each day. There have been several medication errors since the last inspection. Some of these are related to the implementation of a new electronic medication management system. When medication errors do occur, they are quickly identified. Leaders and managers address these issues in staff supervision sessions and support staff to improve through reassessing their competency. Despite the rigorous responses from leaders and managers, medication errors continue. Therefore, improvement in staff practice is still required.

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

Staff do not always report safeguarding concerns immediately in accordance with agreed safeguarding procedures. On one occasion, a staff member did not report a concern about poor staff practice for seven days. Leaders and managers took prompt action to respond to this concern once they were alerted. However, this meant that protective measures for the child were delayed.

Staff use physical interventions when necessary. Generally, records show that interventions are proportionate to support children's safety. However, one record relating to an incident was not completed within required timescales. Another incident was inaccurately recorded by a staff member and omitted important information. Managerial oversight of a further incident was delayed. This undermines the effective monitoring by leaders and managers of these interventions and has the potential to reduce any learning from these incidents.

Leaders and managers respond to most safeguarding concerns thoroughly, including seeking external oversight from the local authority designated officer and undertaking in-depth investigations into staff practice. However, a response to one concern lacked professional curiosity and objectivity.

Staff follow clear and informative behaviour management plans. These plans help the staff to identify the potential triggers for children's anxiety and understand how to manage their behaviours in a helpful way. Following incidents, staff have one-to-one discussions with children using their preferred communication systems. Some children are provided with tailored social stories, which improve their understanding of their personal safety.

Staff have a good understanding of children's additional learning needs and vulnerabilities. Parents and social workers are confident that the staff advocate for children's well-being and safety.

Children enjoy positive relationships with one another. Leaders and managers ensure that effective planning takes place when children move into the home. This helps to ensure that children are compatible with each other and feel welcome, safe and at ease.

## **The effectiveness of leaders and managers: good**

There has been no registered manager since April 2024. One of the established directors has been appointed as the new manager and is in the process of registering with Ofsted.

Leaders and managers continue to proceed with plans to divide the home's registration into smaller registrations. Presently each of the seven houses that form the home has a dedicated house manager. Individual home managers feel well supported by senior leaders and are highly regarded by staff. Leaders and managers are child-focused and determined to provide good-quality outcomes for children.

Staff team meetings prioritise the needs of children and are well attended. New staff have detailed inductions to help them begin to work with the children. Staff receive regular, good-quality supervision sessions. Leaders and managers have recently improved frameworks for staff annual appraisals. There are good opportunities for staff to reflect on their practice and consider their professional development opportunities.

Leaders and managers generally maintain effective oversight and operate developed managerial monitoring systems. They are aware of strengths in practice and areas that need further development. Leaders and managers undertake objective quality of care reviews which fully consider children's and parents' views. External monitoring by a team of independent visitors also influences improvements in the care provided to children.

Leaders and managers have recently revised staff training plans to reflect higher standards of care. The staff receive a wide range of training to equip them with the skills to meet the needs of children. Despite this, some staff are delayed in their safeguarding refreshment sessions in accordance with this revised training plan.

Leaders and managers generally notify Ofsted as required. However, one safeguarding concern related to an individual in a position of trust, was not notified. This meant that Ofsted's capacity to monitor the safeguards on this occasion was reduced.

Staff generally advocate and support children's views well. However,

there has been a delay for one child accessing an important mobility aid to assist with some of their personal care needs. Leaders and managers have regularly challenged the placing authority around this issue. However, they have not yet escalated their concern.

## 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              |
|---|-----------------------|
| <p>The protection of children standard is that children are protected from harm and enabled to keep themselves safe.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure—</p> <p>that staff—</p> <p>have the skills to identify and act upon signs that a child is at risk of harm;</p> <p>understand the roles and responsibilities in relation to protecting children that are assigned to them by the registered person;</p> <p>take effective action whenever there is a serious concern about a child's welfare.</p> <p>(Regulation 12 (1) (2)(a)(iii)(v)(vi))</p> <p>In particular:</p> <p>staff must fulfil their safeguarding responsibilities and report any concerns without delay and in accordance with the home's safeguarding policies;</p> <p>leaders and managers must ensure that all responses to safeguarding concerns are managed in a fair and consistent manner.</p> | <p>30 August 2024</p> |
| <p>The registered person must ensure that—</p> <p>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—</p> <p>the name of the child;</p>  | <p>30 August 2024</p> |

|  |                |
|--|----------------|
| <p>details of the child's behaviour leading to the use of the measure;</p> <p>the date, time and location of the use of the measure;</p> <p>a description of the measure and its duration;</p> <p>details of any methods used or steps taken to avoid the need to use the measure;</p> <p>the name of the person who used the measure ("the user"), and of any other person present when the measure was used;</p> <p>the effectiveness and any consequences of the use of the measure; and</p> <p>a description of any injury to the child or any other person, and any medical treatment administered, as a result of the measure;</p> <p>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")—</p> <p>has spoken to the user about the measure; and</p> <p>has signed the record to confirm it is accurate; and</p> <p>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.<br/>(Regulation 35 (3)(a)(i)(ii)(iii)(iv)(v)(vi)(vii)(viii)(b)(i)(ii)(c)(iv))</p> |                |
| <p>The registered person must make arrangements for the handling, recording, safekeeping, safe administration and disposal of medicines received into the children's home.</p> <p>In particular the registered person must ensure that—</p> <p>medicine which is prescribed for a child is administered as prescribed to the child for whom it is prescribed and to no other child.<br/>(Regulation 23 (1) (2)(b))</p>   | 30 August 2024 |
| <p>In meeting the quality standards, the registered person must, and must ensure that staff—</p>   | 30 August 2024 |



if the registered person considers, or staff consider, a placing authority's or a relevant person's performance or response to be inadequate in relation to their role, challenge the placing authority or the relevant person to seek to ensure that each child's needs are met in accordance with the child's relevant plans.  
(Regulation 5 (a)(c))

## Recommendations

- The registered should ensure compliance with relevant health and safety legislation; however, in doing so, the registered person should seek as far as possible to maintain a domestic rather than 'institutional' impression in the homes décor. ('Guide to the Children's Homes Regulations, including the quality standards', page 15, paragraph 3.9)
- The registered person should ensure that all staff can access suitable resources to support their training needs. In particular, ensure all staffs training in safeguarding is refreshed in accordance with the homes training plan. ('Guide to the Children's Homes Regulations, including the quality standards', page 53, paragraph 10.11)
- The registered person should consider reviewing thresholds for submitting notifications of serious incidents to Ofsted.('Guide to the Children's Homes Regulations, including the quality standards', page 63, paragraph 14.11)

## 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:** 2495377

**Provision sub-type:** Residential special school

**Registered provider:** St Elizabeth's Centre

**Registered provider address:** St Elizabeth's Centre, South End, Much Hadham SG10 6EW

**Responsible individual:** Jill Rankin

**Registered manager:** Post vacant

## Inspectors

Mark Anderton, Social Care Inspector  
Rachel Watkinson, Social Care Inspector  
Leanne Lyon, Social Care Inspector

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Piccadilly Gate  
Store Street  
Manchester  
M1 2WD

T: 0300 123 1231  
Textphone: 0161 618 8524  
E: [enquiries@ofsted.gov.uk](mailto:enquiries@ofsted.gov.uk)  
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