

1271519

Registered provider: The Spring Children's And Transitional Care Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This privately owned children's home may provide care for up to three children who have a range of additional complex needs.

The home does not have a registered manager.

Inspection dates: 5 and 6 April 2022

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

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

The effectiveness of leaders and managers **inadequate**

There are serious and/or widespread failures that mean children and young people are not protected or their welfare is not promoted or safeguarded and/or the care and experiences of children and young people are poor and they are not making progress.

Date of last inspection: 1 December 2021

Overall judgement at last inspection: Declined in effectiveness

Enforcement action since last inspection:

On 1 December 2021, Ofsted carried out an interim inspection. The home was judged to have declined in effectiveness. In response to that visit, Ofsted issued a compliance notice under regulation 13 (the leadership and management standard).

On 18 January 2022, Ofsted undertook a monitoring visit to the home. The purpose of the monitoring visit was to review the provider's progress in meeting the compliance notice and the requirements raised at the interim inspection. The

inspector found that the provider had not met the steps set out in the compliance notice. On 25 January 2022, Ofsted reissued the compliance notice under regulation 13 (the leadership and management standard).

Recent inspection history

Inspection date	Inspection type	Inspection judgement
01/12/2021	Interim	Declined in effectiveness
19/05/2021	Full	Good
14/11/2019	Full	Good
21/11/2018	Full	Good

Inspection judgements

Overall experiences and progress of children and young people: inadequate

Serious and widespread failures were identified which indicated that the two children living in the home were not being safeguarded effectively and their welfare was not being promoted.

The children have received inconsistent and, at times, poor-quality care. This is because staff and managers do not have a sufficient understanding of the individual needs of children. The poor quality of case records and disorganised approach to care planning means that staff are not given clear guidance on how best to meet children's needs and keep them safe.

Insufficient numbers of staff have resulted in the regular use of non-permanent staff. Although this has reduced since one child left the home, the need for non-permanent staff to work in the home continues. This means that children are looked after by staff who are not familiar to them and who do not have a strong understanding of their needs.

The extent to which non-permanent staff have been used and the impact this has had on children's care is not fully understood by managers. This is because staff rotas do not record the details of the staff who have worked in the home. This impacts the ability to understand if children have been provided with sufficient staff and that the staff have been appropriate to work with the children.

Staff have not ensured that the home is well maintained. For example, there are holes in some doors and walls are cracked. Internal monitoring of the home environment has not identified these issues and therefore no action has been taken to make the necessary repairs. Inspectors observed that in one room a television which is meant to be attached to a wall was propped on a table and was, therefore, a hazard.

A child's radiator thermostat was padlocked to prevent them from altering the temperature. The need for this measure of control had not been fully assessed by staff. Similarly, staff lock away crisps and breakfast cereal as a means of restricting children's access to these items. This punitive approach detracts from the extent to which children are provided with a homely, welcoming and supportive environment to live in.

Children are not always provided with support to learn and develop. For example, following an incident of a child using racist language, there was no evidence that staff had spoken to the child about why this may have been inappropriate. This was a missed opportunity to help the child make positive changes to their behaviour.

Despite the shortfalls identified at this inspection, the two children are attending school and their health needs have been met. Furthermore, they are involved in a range of activities and are supported to stay in contact with their families and loved ones.

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

Children's risk assessments are of poor quality and are not accurate or up to date. Consequently, staff do not have clear guidance on how to manage risks to children and to keep them safe. When strategies to protect children are identified, staff do not always adhere to them, which undermines the effectiveness of the strategies. For example, one child's risk assessment identifies that their access to the internet should be monitored. However, supervision and oversight of the child's use of the internet is absent or poor.

One child is supervised when they are using the bath or shower. Risk assessments related to this do not clearly set out the reasons why staff are supervising her. As a result, staff do not have a clear understanding of why they are doing this and the justification for not allowing the child privacy and dignity when she is in the bathroom remains unclear. Furthermore, staff are inconsistent in their levels of supervision of the child in the bathroom, which reduces the effectiveness of this strategy.

Managers have failed to ensure that appropriate action is taken when concerns are raised about the suitability of staff to work with children. For example, there are delays in concerns being raised with the local authority designated officer. In addition, there are no records of investigations taking place to identify learning and to prevent further risk. This means that all necessary action to protect children has not been taken. Furthermore, managers could not provide evidence that the child involved was reassured that concerns about a staff member's behaviour had been addressed. This lack of action leaves children at risk of harm and does not help children to feel safe.

Managers have failed to ensure that appropriate action is taken when concerns are raised about staff practice. For example, the provider's assurance officer carried out an investigation into an allegation about a member of staff. This investigation concluded that a disciplinary investigation was required. The disciplinary investigation had not been carried out and at the time of the inspection the responsible individual was not aware that this was an outstanding action.

In another example, a serious allegation about a member of staff, which indicated that the individual may present a risk to others, was not shared with the local authority designated officer for over a month. This failure to follow safeguarding procedures placed both children and staff at potential risk of harm.

Recruitment of staff is not safe. During the inspection, managers were unable to provide evidence that Disclosure and Barring Service checks had been undertaken for three agency members of staff who had been working in the home. Managers

had also failed to check the agency staff's references, training records and employment histories. This practice fails to safeguard children.

Two agency members of staff who have worked in the home have criminal convictions. Managers had not completed an assessment to determine whether these convictions had any impact on these staff members' suitability to work with the children.

Physical intervention records do not provide an accurate description of the restraint used or its duration. In addition, records do not always include the strategies used to prevent a restraint or an evaluation of the effectiveness of the actions taken by staff. It is therefore not clear if restraint practice is proportionate and safe and that staff are using physical intervention as a last resort. This practice does not promote the safety or welfare of the children.

Alarms are used on the external doors during the day and night. Managers have not undertaken an assessment to determine that the use of this monitoring system is required. In addition, there has been no consultation with the children or the children's social workers about the use of the alarms.

The effectiveness of leaders and managers: inadequate

Since April 2021, there has been no registered manager. A manager was appointed in January 2022 but his employment ended in March 2022. This post remains vacant and recruitment for a new manager is ongoing. This means that the home will have a further period without a permanent manager.

The responsible individual and the provider had not notified Ofsted before this inspection that the manager had ended their employment. This demonstrates senior managers' failure to provide effective oversight of the home.

In the absence of a manager, the responsible individual will be in day-to-day charge of the home. Ofsted is concerned about the responsible individual's skills, ability and capacity to provide the required leadership. As responsible individual, and in her previous role as operational manager, she has not ensured that the steps set out in the two compliance notices previously raised under regulation 13 have been met. Furthermore, because of the shortfalls identified at this inspection, two compliance notices under regulation 12 (the protection of children standard) and regulation 32 (fitness of workers) have been issued. A notice of restriction of accommodation, preventing the further admission of children, has also been issued.

Managers have failed to ensure that staff are adequately trained. The staff working with the children do not receive training that supports them to understand and respond to the children's specific needs. For example, staff have not had training in self-harm, online safety or sexualised behaviour. Furthermore, managers are not clear about what training agency staff who have worked in the home have completed. This means that permanent and non-permanent staff are not provided with the guidance they need to consistently meet the needs of the children.

The home's quality of care report submitted to Ofsted does not demonstrate that external stakeholders and children have been consulted and their views considered or that the strengths and shortfalls of the home are fully understood by managers. The ineffective evaluation of the service does not support managers to improve children's experiences and to understand the quality of care provided.

The home's workforce development plan lacks relevant information and is not effective. The plan in place does not provide information about the steps that managers would take if there were concerns about staff practice. In addition, arrangements for staff supervision are poor and staff are not always held to account on agreed actions or supported to reflect on their care of children.

The statement of purpose is not updated in line with regulation. For example, the document does not reflect the home environment or the training staff have completed. This means that key stakeholders do not have the most up-to-date information.

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
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)) In particular, ensure that repairs are carried out promptly and ensure the home is a nurturing and supportive environment that meets the needs of children.	30 May 2022
The positive relationships standard is that children are helped to develop, and to benefit from, relationships based on— an understanding about acceptable behaviour. In particular, the standard in paragraph (1) requires the registered person to ensure— that staff— help each child to develop socially aware behaviour;	24 April 2022

encourage each child to take responsibility for the child's behaviour, in accordance with the child's age and understanding; communicate to each child expectations about the child's behaviour and ensure that the child understands those expectations in accordance with the child's age and understanding. (Regulation 11 (1)(b) (2)(a)(ii)(iii)(v)) This specifically relates to the registered manager ensuring that staff support children to understand their behaviours and their plans.	
*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. (Regulation 12 (1) (2)(a)(i)(v))	24 April 2022
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;	30 May 2022

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; and 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)) This relates to ensuring that staff have received training specific to the needs of the children. As well as this, the registered person must review and evaluate the quality of care provided and use monitoring systems to identify and respond to shortfalls in practice. This requirement was made at the last inspection and is restated.	
The registered person must compile in relation to the children's home a statement ("the statement of purpose") which covers the matters listed in Schedule 1. The registered person must— keep the statement of purpose under review and, where appropriate, revise it; and notify HMCI of any revisions and send HMCI a copy of the revised statement within 28 days of the revision. (Regulation 16 (1) (3)(a)(b)) Specifically, ensure that the home's statement of purpose includes accurate information about the home's design and the care provided. This requirement was made at the last inspection and is restated.	30 May 2022
A responsible individual must— have the capacity, experience and skills to supervise the management of the home, or the homes, in respect of which the responsible individual is nominated. (Regulation 26 (7)(b))	30 May 2022
The registered provider must appoint a person to manage the children's home if—	30 May 2022

there is no registered manager in respect of the home; and if the registered provider appoint a person to manage the home, the registered provider must, without delay, give HMCI notice of— the name of the person so appointed; and the date on which the appointment takes effect. (Regulation 27 (1)(a) (2)(a)(b))	
*The registered person must recruit staff using recruitment procedures that are designed to ensure children’s safety. 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— full and satisfactory information is available in relation to the individual in respect of each of the matters in Schedule 2. (Regulation 32 (1) (2)(a)(b) (3)(d)) This specifically relates to the provider ensuring that all gaps in employment are checked and information about the worker is clear and consistent. In addition, when there are concerns about staff suitability, that this is assessed.	24 April 2022
The registered person must ensure that all employees- receive practice-related supervision by a person with appropriate experience; and have their performance and fitness to perform their roles appraised at least once every year. (Regulation 33 (4)(b)(c)) This requirement was made at the last inspection and is restated.	30 May 2022
The registered person must prepare and implement a policy ("the behaviour management policy") which sets out— how appropriate behaviour is to be promoted in the children’s home; and	30 May 2022

the measures of control, discipline and restraint which may be used in relation to children in the home. 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— details of the child’s behaviour leading to 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 effectiveness and any consequences of the use 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. (Regulation 35 (1)(a)(b) (2) (3)(a)(ii)(iv)(v)(vii)(b)(i)(ii)) This specifically relates to the provider ensuring that the recording of interventions used is clear. In addition, the provider should ensure that effectiveness of the measure is evaluated.	
Schedule 4 sets out the other information that the registered person must keep in relation to a children’s home. The registered person must— maintain in the home the records in Schedule 4. (Regulation 37 (1) (2)(a)(b)) This specifically relates to the home having an up-to-date rota.	30 May 2022

*These requirements are subject to a compliance notice.

Recommendations

- The registered person should have a workforce plan which can fulfil the workforce-related requirements of regulation 16, schedule 1 (paragraphs 19 and 20). The plan should be updated to include any new training and qualifications completed by staff while working at the home and used to record the ongoing training and continuing professional development needs of staff, including the home's manager. ('Guide to the Children's Homes Regulations, including the quality standards', page 53, paragraph 10.8)
- The registered person should ensure that staff are familiar with the home's policies on record-keeping and understand the importance of careful, objective and clear recording. Staff should record information on individual children in a non-stigmatising way that distinguishes between fact, opinion and third-party information. Information about the child must always be recorded in a way that will be helpful to the child. ('Guide to the Children's Homes Regulations, including the quality standards', page 62, paragraph 14.4)
- The registered person should ensure that the quality of care review reflects the views of children and relevant others and provides an accurate assessment of the care provided to children and a clear plan for improvement. ('Guide to the Children's Homes Regulations, including the quality standards', page 64, paragraph 15.2)

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: 1271519

Provision sub-type: Children's home

Registered provider: The Spring Children's And Transitional Care Ltd

Registered provider address: 9 Grenville Drive, Birmingham, Warwickshire B23 7YX

Responsible individual: Ann Henry

Registered manager: Post vacant

Inspectors

Sophie Hills, Social Care Inspector
Patrick McIntosh, Social Care Inspector

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