

2591688

Registered provider: Mutual Care Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This privately owned home is registered to provide care for two children who experience social and emotional difficulties. At the time of the inspection, two children were living in the home.

The manager of the home is registered with Ofsted. He was present throughout the inspection.

Inspection dates: 1 and 2 July 2025

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	requires improvement to be 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: 1 October 2024

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
01/10/2024	Full	Good
25/04/2023	Full	Good
02/02/2023	Full	Requires improvement to be good
27/09/2021	Full	Good

Inspection judgements

Overall experiences and progress of children and young people: good

Children who live in the home make progress. Staff acknowledge children's past experiences and support them to overcome challenges. Through staff working collaboratively with a child and working alongside other professionals, the child has begun to form trusting relationships with them. One child has made progress with their sleep hygiene, awareness of consequences and independence skills. One parent has noted vast improvements in their child's behaviours since the child moved into the home.

Staff have consistently raised concerns that one child's educational needs are not being met. This has contributed to the agreement for an updated education, health and care plan to be completed. Staff talk to children about the barriers to them attending school. They attend meetings to discuss the concerns and implement appropriate natural consequences when they choose not to attend. However, when children are not attending school, staff do not consistently offer or engage them with educational activities. Children can experience limited routine and boundaries and regularly spend extended time in their bedrooms when they do not attend school.

Staff are aware of children's health needs. They encourage and support them to attend appointments. However, a child has received limited support to improve their oral hygiene. Concerns that a child was smoking and vaping were quickly addressed. The child was educated on the negative impact of these behaviours. Planning to promote an overall healthier lifestyle for children is led by encouraging children to prepare and cook fresh meals and understand the benefits of healthy eating.

Children are supported, where safe and possible, to spend time with family and friends. Staff recognise the benefits of this in relation to the child understanding their identity and developing their sense of self. Children's wishes in relation to seeing family are listened to and when it is necessary they are shared with the team around the child. A parent said that staff regularly communicate with them about their child. Staff have built relationships with the parents of children's friends. This has assisted in the sharing of information and ensuring the safety of the children.

Children talk to staff about their worries and concerns. Staff take children's concerns seriously and spend time talking to them to gain their views and provide them with reassurance. Each child has raised a complaint. These were managed effectively and the outcomes of these were shared with the child.

Children are encouraged to choose and take part in activities in the home and in the community. Children's interests, such as learning to play the guitar, are nurtured. Staff ensure that children have one-to-one time with them with the aim of building stronger relationships.

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

The two children who live in the home were seen during the inspection. Both children said that they feel safe living in the home. One child said that the home 'is the best place I have lived in eight years of care,' rating it 10/10. All professionals spoken to said that children are kept safe. The use of internal door alarms for children is appropriately assessed and managed. Searches of a child's bedroom have been informed by a risk assessment. Concerns about self-harm are addressed with sensitivity.

Staff understand the risks that children are exposed to. Planning to manage and reduce risk is thorough. Staff share and gain information with other professionals and take part in multi-agency decision-making. Staff discuss topics including going missing, vaping, smoking, bullying and unsafe use of the internet with children. However, they miss opportunities to have deeper, more reflective and educational conversations with children to enhance their learning and awareness of risk.

During incidents, staff maintain boundaries and follow planning designed to support children with their behaviours and emotions. Restraint has been used appropriately. However, methods to manage and end incidents are rarely effective. Incidents regularly become long and drawn out. Reflective conversations with children following incidents lack depth and do not help children to learn from their behaviour. When children choose not to engage in reflective conversations, staff make no further attempts to revisit the incident. Managers acknowledge these concerns and are revising the model of care with the aim of supporting children more effectively.

Staff have attempted to support the children to have a positive relationship. However, this has not always been successful. Despite staff following plans and providing ongoing support and conflict management, there have been ongoing incidents of escalated and unkind behaviours. Professionals working with the children have raised concerns about the ongoing negative impact on the children. Planning to address these concerns has recently been implemented. This includes therapeutic parenting and more targeted work with the children. However, the impact of this work is yet to be seen.

Staff are responsive when children go missing. The protocol for them to follow is clear and informative. Staff take ongoing action to find the child. They communicate with other professionals and those who know the children with the aim of finding them safe and returning them home. Conversations with one child about their reasons for going missing have resulted in joint planning to reduce incidents. This has resulted in positive outcomes.

The effectiveness of leaders and managers: good

The home is led by a knowledgeable leadership and management team. Leaders and managers are invested in the children and in achieving positive outcomes for them. They are incredibly reflective and have acknowledged that changes are required to meet the

needs of the children. They have considered the quality of care that children receive and are taking measures to address this. The vision for the home is a joint one, with leaders and managers all invested in the changes that are taking place.

The model of the home is in a transition phase. There is an aim to provide therapeutic care. Staff have been provided with training to begin embedding this in their practice. Leaders, managers and staff have embraced clinical supervision. This is used to consider the children and discuss how to develop practice to better meet their needs.

Staff are committed to their roles and are knowledgeable about the children. They are confident in raising any concerns that they may have with managers and feel listened to. Communication between staff and managers is of good quality, particularly when children's plans change. Staff acknowledge the difficulties in the children's relationship and are looking to provide a more therapeutic approach.

Managers have good oversight of the home. Care planning for children sets out the aims of care and how they should be met. Clear and informative chronologies provide a narrative of children's experience. They document concerns, progress and direct work completed with children. Oversight of incidents and concerns is reflective and considers what action needs to be taken.

Professionals spoken to report positive relationships with staff. Staff share information with them and attend meetings. Two professionals highlighted how staff have been consistent in advocating for a child.

Supervision sessions and team meetings focus on the needs of the children, practice development and safeguarding. They show a collaborative approach to caring for the children and the running of the home. Staff find them beneficial.

Recruitment practice ensures that checks necessary to determine whether staff are safe to work with children are completed. Concerns in relation to staff practice are thoroughly addressed.

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 education standard is that children make measurable progress towards achieving their educational potential and are helped to do so. In particular, the standard in paragraph (1) requires the registered person to ensure— that staff— promote opportunities for each child to learn informally; help a child who is excluded from school, or who is of compulsory school age but not attending school, to access educational and training support throughout the period of exclusion or non-attendance and to return to school as soon as possible. (Regulation 8 (1) (2)(a)(v)(viii)) In particular, the registered person should ensure that children are provided with stimulation, boundaries and educational activities or support when they are not attending school.	7 September 2025
The positive relationships 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) requires the registered person to ensure— that staff—	7 September 2025

meet each child's behavioural and emotional needs, as set out in the child's relevant plans;

help each child to develop socially aware behaviour;

encourage each child to take responsibility for the child's behaviour, in accordance with the child's age and understanding;

help each child to develop and practise skills to resolve conflicts positively and without harm to anyone;

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;

help each child to understand, in a way that is appropriate according to the child's age and understanding, personal, sexual and social relationships, and how those relationships can be supportive or harmful;

de-escalate confrontations with or between children, or potentially violent behaviour by children;

understand and communicate to children that bullying is unacceptable.

(Regulation 11 (1)(a)(b)(c) (2)(a)(i)(ii)(iii)(iv)(v)(vi)(xi)(xii))

In particular, the registered person must ensure that work is completed with children to support them to understand the impact of their behaviours on other children and to promote positive relationships between the children.

In addition, the registered person must ensure that reflective conversations with children, both after incidents and during day-to-day life, do not miss opportunities to support and educate the children in relation to risk and behaviours.

In addition, the registered person must ensure that staff have the skills necessary to manage and de-escalate incidents between the children.

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; and children are helped to lead healthy lifestyles. 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. (Regulation 10 (1)(a)(b)(c) (2)(a)(i)) In particular, the registered person should ensure that staff provide children with the support they need to maintain their oral hygiene.	7 September 2025
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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: 2591688

Provision sub-type: Children's home

Registered provider: Mutual Care Limited

Registered provider address: Grafton Lodge, Battery Lane, Portishead, Bristol BS20 7JD

Responsible individual: Lance Feldman

Registered manager: David Owen

Inspector

Carla Simkiss, Social Care Inspector

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