

2707632

Registered provider: Brite Futures Ltd

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 five children. The home may provide care for children with physical and learning disabilities and/or sensory impairments.

At the time of the inspection, three children lived at the home.

The registered manager has been in post at the home since it was registered in July 2023.

Inspection dates: 14 and 15 May 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	requires improvement to be good
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The children's home provides effective services that meet the requirements for good.

Date of last inspection: 13 December 2023

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
13/12/2023	Full	Good

Inspection judgements

Overall experiences and progress of children and young people: good

The commitment from managers and the core members of staff have helped to reduce some of the impact of staff leaving and to maintain trusting relationships with the children.

Children have made progress living at this home. For example, children have developed their spoken vocabulary, have progressed with their personal care and independence skills, and have fewer behavioural outbursts when experiencing emotional distress.

Structured morning routines help children prepare for the day ahead and maintain high levels of school attendance. Staff recognise the difficult emotions children experience during their transition to school and sensitively encourage the children in a way that does not overburden them. Some of the changes in the staff team have resulted in occasions of sporadic communication with one child's school.

The children's health needs are met. Staff help children to overcome their fear of visiting health professionals by rehearsing the process of attending appointments before the event. Children enjoy nutritional meals and snacks, and they learn about different types of foods. Through play and having fun, the children benefit from plenty of exercise, relevant to their physical capabilities.

The managers work in collaboration with the child and adolescent mental health services (CAHMS) to support one child's complex behavioural and emotional health needs. The occupational therapist offers training to staff on sensory equipment to meet the child's physical needs. Open lines of communication with the consultant psychiatrist and their team are helping to build an assessment of the child's needs. The psychiatrist commented, 'They engage very well with the advice that we give them and are open to suggestions. Their approach is synchronised with the child's needs.'

'Chat and chill' sessions provide children with a creative and fun way to share their likes and dislikes and to discuss different topics, for example using kind words, choosing foods and activities, and exploring different types of people. Staff encourage the children to communicate independently and recognise their social cues, promoting reciprocal conversations. They support the use of children's communication aids to further expand the depth of conversation.

Photos of the children show their enjoyable experiences. Organised activity plans help children to have fun and structure to their day. Walks in the community and visiting trampoline parks help some children to burn off excess energy. Other children enjoy more relaxed activities, such as arts and crafts.

The large home is well maintained and has ample space for children to live and relax. Children personalise their bedrooms with their favourite soft furnishings and toys. The

atmosphere is generally relaxed because children experience nurturing care that is sensitive to their needs.

Children benefit from well-thought-out transition plans when they move to the home. Staff worked in consultation with one child's social worker to agree on what the child needed to help minimise the impact of moving to a new home. The child settled in quickly because of the trusting relationships they developed with staff before their move to the home.

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

Children develop a sense of safety with the adults who care for them. For example, the last child who moved into the home quickly developed trust in the staff. As a result, they now spend time out of their bedroom and play in the lounge area of the home, after being bedbound for several weeks as a result of the disruption they have experienced in their life. A professional who knows the child described this as 'fantastic progress'.

Children are held by staff to help keep them safe. There has been a reduction in the number of holds for one child because staff have found alternative ways to help soothe them. Restraint reports are well written and support management oversight. Detailed manager debriefs also help staff to reflect about their practice.

The management of one child's self-injurious behaviour is assisted by the close working relationship with CAHMS. This helps to keep the child's needs under review. Strong recording systems enable the manager to have oversight and monitor the safety of the child.

On a few occasions, staff have used physical intervention techniques that are not proportionate or detailed in the child's plan. This was linked to some staff not upholding their responsibilities by using the whistle-blowing procedure in a timely manner after observing the events. This has led to some professionals having mixed feelings about the quality of care provided for children. The child was not harmed, and managers have taken appropriate action by following safeguarding procedures to ensure that the staff are clear about their safeguarding responsibilities to keep children safe.

Well-written risk assessments direct staff about what they must do to keep children safe, for example when children are travelling in the car or walking in the community with staff. Predictable routines provide children with an enhanced sense of safety.

The effectiveness of leaders and managers: requires improvement to be good

The registered manager is suitably experienced for the role and is undertaking the required management qualification. They work hand-in-hand with the responsible individual, who brings a wealth of knowledge to the management team. Together, they are clear about the standards of care they want for the children and have taken appropriate action to manage staff when their performance has fallen short of expectations.

Some of the staff team has lost sight of the children's needs. A negative culture developed, with some staff relationships becoming frayed due to a lack of professionalism. As a result, some staff have left. However, managers are taking steps to re-establish a child-focused culture across the team.

Instability from staff leaving for various reasons has impacted on team development. Managers have not consistently sought feedback from those staff who have left to gain a deeper understanding of the issues at the home. New staff are being recruited, but the continued changes mean some staff lack the skills and depth of understanding of the children's complex needs. The manager works hard to promote stability by linking the staff working on shift with children.

One child's parents are not happy with their child's care. A breakdown in the relationship between the staff and the parents makes it more difficult for both parties to work things through. However, managers understand the parents' concerns and are working with the relevant professionals to help meet the child's complex needs.

The quality of training and induction is not sufficient to provide staff with the skills needed to care for the complexity of children at the home. Probation and induction reviews are not always completed, and staff do not have regular supervision. An absence of trauma-informed, therapeutic parenting and personal care training demonstrates gaps in the team's essential training needs. Managers have identified behaviour management training more aligned to the children's needs, but this has yet to be started.

Managers do not evaluate staff's competency to assess their suitability to take on shift leading roles. Coupled with the inconsistent delivery of the induction process, this does not ensure that staff have the essential skills they need to take on more senior duties in the home.

There is a lack of analysis and evaluation relating to the high number of restraints. Addressing this lack would help managers to identify patterns, trends and any contributing factors to incidents.

The manager overlooked notifying Ofsted on one occasion after a concern was raised about a staff member's practice. Other agencies were made aware of the incident during an allegation management meeting, and appropriate action was taken. However, this does not allow the regulator to have consistent oversight and ensure that the manager's actions keep children safe.

The home's quality of care review has not been submitted to the regulator. External monitoring by the independent person occurs monthly, and visits have been helpful to managers to help improve practice in the home. However, one of the independent person's reports was not submitted to the regulator as required by the Children's Homes (England) Regulations 2015.

Managers use team meetings effectively to reflect on the children's needs and make clear their expectations of staff. Staff speak positively about managers. They commented, 'They are supportive and act upon things straight away. Direction is clear, and they are approachable.'

Well-written plans give staff clarity about how they should meet the children's needs, the children's likes and dislikes, and their routines.

Managers and staff work proactively and positively with other agencies and professionals. Established relationships with CAHMS, schools and social workers are helping to meet the children's needs. Managers are confident to escalate concerns with other professionals in the best interest of meeting the children's needs.

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 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 work as a team where appropriate; ensure that staff have the experience, qualifications and skills to meet the needs of each child; ensure that the home's workforce provides continuity of care to each child; demonstrate that practice in the home is informed and improved by taking into account and acting on— research and developments in relation to the ways in which the needs of children are best met; 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)(b)(c)(e)(g)(i)(h)) In particular, the registered person must ensure that: staff have the required training and support to meet the children's individual complex needs;	14 July 2024

they review their induction, supervision and training strategy so staff have the required level of support to help them to be effective in their roles; they assess and evaluate the competency of staff before they take on leading roles; staff in their probationary period have their performance reviewed in line with the provider's own policy; they review the workforce development plan to ensure it still meets the needs of the staff and care for children; staff have personal care training; and they have a system that supports their analysis of behavioural incidents to help identify patterns and trends to help improve staff practice and the safety of children.	
The registered person must ensure that all employees— undertake appropriate continuing professional development; 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)(a)(b)(c))	14 July 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))	14 July 2024
The registered person must ensure that an independent person visits the children's home at least once each month. The independent person must provide a copy of the independent person's report to— HMCI; upon request, the local authority for the area in which the home is located; and the placing authorities of children.	14 July 2024

(Regulation 44 (1) (7)(a)(b)(c))	
The registered person must complete a review of the quality of care provided for children ("a quality of care review") at least once every 6 months. The registered person must— supply to HMCI a copy of the quality of care review report within 28 days of the date on which the quality of care review is completed. (Regulation 45 (1) (4)(a))	14 July 2024

Recommendation

- The registered person should ensure that they consistently consult with staff when staff leave their roles at the home and ask pertinent questions about their experience of working at the home. ('Guide to the Children's Homes Regulations, including the quality standards', page 49, paragraph 9.59)

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: 2707632

Provision sub-type: Children's home

Registered provider: Brite Futures Ltd

Registered provider address: Office 7, Warwick Road, Maltby, South Yorkshire S66 8EW

Responsible individual: Jason Darbyshire

Registered manager: Paynton Quinn

Inspector

Aaron Mcloughlin, Social Care Inspector

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