

2729412

Registered provider: Bradford Children and Families Trust

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

The home is owned by Bradford Children and Families Trust. It provides a short-break service for up to six children with physical or learning disabilities who may have a sensory impairment.

The manager registered with Ofsted in September 2024.

Inspection dates: 7 and 8 April 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	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: 30 April 2024

Overall judgement at last inspection: requires improvement to be good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
30/04/2024	Full	Requires improvement to be good
09/08/2023	Full	Requires improvement to be good
03/05/2023	Full	Inadequate

Inspection judgements

Overall experiences and progress of children and young people: good

Children are supported to engage in various activities inside and outside of the home. They have spent time in the community with staff and peers, which supports some of their goals. For example, one child's goal was to engage with the community more. Staff supported this child in attending community events and going shopping to enhance their independence skills. Staff support children with dedicated activity time, giving them the one-on-one attention they enjoy. Well-designed books capture the children's memories from activities and events.

Staff understand the children's communication needs and support them in expressing their wishes and feelings. Children benefit from spending time with staff who know them and can help them engage in positive activities. There is clear evidence of nurturing relationships between staff and children.

Staff treat children with dignity and respect. Many of the children have complex needs, which affects their abilities in specific areas. Children rely on the staff team to support them with their personal care needs. Staff assist children while respecting their privacy and dignity.

Staff understand the children's diverse cultural and religious needs and ensure that arrangements are in place to support these. These needs are identified in care planning documents, which staff are aware of. Staff support the children to attend celebrations linked to their faith, such as Eid events and Christmas parties. This helps the children to celebrate their faith in an inclusive and enjoyable manner.

Staff have good working relationships with the community and other stakeholders. Events are planned at the home to include parents, professionals and community members, which fosters an open culture. For example, local pony owners were invited to the home to meet the children and share positive experiences of animal handling with them. This was greatly enjoyed by the children.

Staff ensure that the views of families and professionals are represented throughout the care planning process. Plans are promptly updated to reflect any changes to children's care agreed with parents or during meetings with social workers. Staff are made aware of the information to ensure that their practice reflects the changes needed to support the children. This helps to acknowledge and promote the progress children are making.

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

The staff have made progress in routinely using body maps to record any injuries children may have. Relevant professionals and family members are informed quickly about any marks or injuries observed on a child, which ensures a multi-agency approach to safeguarding children.

Complaints received by the home are taken seriously, and swift action is taken to investigate them. The complaints process is thorough, and the manager ensures that all complaints are investigated in detail, providing responses to the relevant persons. Lessons are learned from any complaints received, and improvements in practice are implemented to ensure that positive action is taken to safeguard and support the children.

Physical intervention is only used as a last resort to keep children and staff safe. Since the last inspection, there has only been one incident where a child has needed to be held or guided. This was necessary and proportionate.

Positive behaviour support plans are in place for each child, which helps the staff keep them safe. Staff benefit from professionals who provide advice regarding these plans and ensure that these are updated to reflect any changes in practice. The staff team has a thorough understanding of the children's triggers, behaviours and how to best support them, which helps ensure that children receive the individualised responses they need.

Staff keep children safer through their understanding of safeguarding policies and individual risk assessments. Staff have good knowledge about the children's needs and how to support them in line with their care plans. There is always appropriate supervision of the children, which helps to keep them safe inside and outside of the home. While staff have good knowledge of the children's needs, some care plans do not include enough specific information regarding the strategies staff should take in certain incidents. This has not affected children's safety and well-being but would enhance safeguarding practice.

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

The manager has focused on the safeguarding changes that were needed following the last inspection, and there is evidence of progress in this area, which has benefited the children and their families.

Staff speak positively about the manager and believe that he has contributed to an open culture where they feel able to express their thoughts and ideas. Staff described the manager as 'a breath of fresh air' and said that he is supportive, which helps them feel valued as part of a wider organisation. Equally, parents and professionals share positive views about the manager and feel communication is a strength of the home.

The manager advocates for the children and holds professionals accountable to ensure that children receive the necessary support. However, there are still opportunities for improvement in the leadership and management arrangements, which stem from some issues in the senior leadership team. For example, delays in expediting occupational therapy assessments have resulted in one child not having a bed that is suitable for their needs.

Many members of staff continue to lack the necessary qualifications. This does not offer assurances that they have the necessary knowledge and skills to provide care for the children. The manager has acknowledged this as a widespread issue.

Professionals have identified some children who would benefit from additional stays; however, the home does not yet have enough staff to accommodate this. As a result, some children are not receiving the additional care that would support their overall progress and also benefit their families. Concerns have also been raised regarding the limited number of staff who are able to drive. This affects the range of areas staff can take children to during their stays. The manager is aware of the situation and has been proactive in his attempts to recruit more staff; however, this remains an issue.

Shortfalls have been identified in the recordings in children's documents. Children's goals have been identified, but the strategies to support them in meeting these goals have remained unchanged and do not correspond with the goals that have been set. Overall, children's plans and documents would benefit from further management oversight to ensure that relevant information is included to help staff support the children.

Further work is required around the development of management tools to ensure that the manager has comprehensive oversight of the home. For example, the manager created an action plan to focus on areas for improvement; however, this plan was basic and did not incorporate the changes that had been made.

There are gaps in staff supervision and training sessions, specifically for agency members of staff. Supervision sessions are not taking place as frequently as they should, and there is a lack of reflective discussions with staff during supervision sessions, which may be a lost opportunity for improving practice. There is a lack of oversight over the training that agency staff receive, which may affect their skills and abilities when caring for children.

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
In order to complete a quality of care review the registered person must establish and maintain a system for monitoring, reviewing and evaluating— the quality of care provided for children; the feedback and opinions of children about the children's home, its facilities and the quality of care they receive in it; and any actions that the registered person considers necessary in order to improve or maintain the quality of care provided for children. After completing a quality of care review, the registered person must produce a written report about the quality of care review and the actions which the registered person intends to take as a result of the quality of care review ("the quality of care review report"). (Regulation 45 (2)(a)(b)(c) (3)) This requirement has been restated.	1 May 2025
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).	1 September 2025

For the purposes of paragraph (3)(b), an individual who works in the home in a care role has the appropriate qualification if, by the relevant date, the individual has attained— the Level 3 Diploma for Residential Childcare (England) (“the Level 3 Diploma”); or a qualification which the registered person considers to be equivalent to the Level 3 Diploma. The relevant date is— in the case of an individual who starts working in a care role in a home after 1st April 2014, the date which falls 2 years after the date on which the individual started working in a care role in a home; or in the case of an individual who was working in a care role in a home on 1st April 2014, 1st April 2016. The registered person may defer the relevant date if the individual— does not work, or has not worked, in a care role in a home for a prolonged period; or works, or has worked, in a care role in a home on a part-time basis. (Regulation 32 (1)(2)(a)(b) (4)(a)(b) (5)(a)(b) (6)(a)(b)) This requirement has been restated.	
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;	1 September 2025

ensure that staff have the experience, qualifications and skills to meet the needs of each child;

ensure that the home has sufficient staff to provide care for each child;

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 (2)(a)(c)(e)(f)(h))

In particular, the registered provider must: ensure that appropriate equipment is available for children in relation to their sleeping arrangements; increase staffing levels to provide a service to children in line with their plans; ensure appropriate oversight of children's documents to identify any shortfalls and take steps to improve them; ensure robust oversight of the training needs of agency staff; and ensure that all members of staff receive timely supervision.

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: 2729412

Provision sub-type: Children's home

Registered provider: Bradford Children and Families Trust

Registered provider address: Sir Henry Mitchell House (5th Floor), 4 Manchester Road, Bradford BD5 0QL

Responsible individual:

Registered manager: Richard Ingham

Inspectors

Jo Birtwhistle, Social Care Inspector
Ladean Wilson, Social Care Inspector

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