

SC013553

Registered provider: Bramley Care Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home can accommodate up to eight children who require specialist support. Every child who is admitted to the home must agree to engage with the home's therapeutic services. There were six children living at the home at the time of the inspection.

There has been no registered manager in post since May 2022.

Inspection dates: 31 October and 1 November 2023

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: 17 May 2022

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
17/05/2022	Full	Good
19/01/2022	Full	Requires improvement to be good
12/11/2019	Full	Good
22/11/2018	Interim	Improved effectiveness

Inspection judgements

Overall experiences and progress of children and young people: good

All children are making progress and have achievements to celebrate. Staff's identification and recording of children's progress have improved. Staff are being supported by the interim manager to ensure that they are recognising and documenting children's development so that the care children receive is more responsive to their needs. There is improved oversight to progress tracking, which helps to demonstrate the good work being done by the home's staff to support children in achieving their goals.

Children said that they feel safe, listened to and supported. Staff are kind and eager to spend time with children. There is a supportive culture in the home which contributes towards the homely feel of the environment. There are warm interactions between children and staff and praise is offered readily. Professionals spoke positively of staff. One social worker said that the team is 'very strengths-based in their approach' and that a child 'has developed positive relationships with staff and other children'.

Staff are competent in addressing behaviours that may provoke discord within the home. There are opportunities for discussion and children's reflection on a daily basis as part of the home's routine. Children are responsive to feedback from adults and have supportive spaces to discuss concerns. One parent said that their child is happy and that they have recognised a change in the way their child manages difficult feelings. They said that their child is 'less angry and is more confident and able to challenge in an appropriate way'.

Staff encourage children to form part of the introduction and settling in for new children moving into the home. Cards are prepared for new arrivals, with input from children and staff, and one child said that they liked receiving a welcome pack when moving in. During the inspection, one child was spending their first week in the home as part of the assessment process. This child was fully immersed in the activities and seemed at home with the other children.

The incentive scheme is well understood by the children and complements the work supporting independence. For one child, incentives have provided a positive source of motivation for them to improve in areas such as personal care and doing their laundry. The system also functions well within the therapeutic model of the home as it promotes care for the welfare of others and encourages discussion around, and ownership of, behavioural risk.

Medication is well managed, and children are encouraged to access support in relation to their physical health and overall well-being. Key workers are creative and holistic in their approach to ensuring that children receive good-quality care in relation to health needs.

Children's attendance at education settings is consistent and managers advocate for children to receive the support they require. The organisation's school maintains a thread of communication with the home's staff and this contributes to reflective discussion with the children after the school day. Teaching staff celebrate children's achievements and ensure that feedback about children's positive behaviours is given to the care team.

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

The home has undergone refurbishment since the last inspection, which has improved the aesthetic appearance and environmental safety of the home. There is a clear plan for the remaining work to be completed and the overall feel of the home is one that is comfortable and inviting. The games room has been designed with feedback from the children in mind and children's bedrooms feature personalised elements that reflect their interests and personalities.

Efforts have been made to improve recruitment outcomes and to retain staff at the home. Staff are working additional hours to ensure that there is greater consistency in the care provided for children. Increased staff presence is necessary to safeguard children and is appropriate for this home. Induction processes for temporary and bank staff have improved too, as a supportive measure.

Staff and leaders are committed to promoting a culture of safeguarding practice and openness at this home. The home's manager is leading the efforts to enhance this culture within the staff team and has introduced processes to ensure that there is improved oversight of serious incidents. Staff meetings are used as a forum for disseminating information and to review the efficacy of any newly embedded practices.

Staff are knowledgeable and collaborative in the way they support children to reduce risks. The therapeutic model of care supports and underpins this practice. For one child who was restricting their food intake as an emotional response to difficult life events, staff provided sensitive and empathic support. By supporting the child to focus on shorter-term goals and reflect on alternative strategies for managing feelings, there was a gradual reduction in this behaviour. Staff also work in partnership with children's family and professional networks to produce restorative outcomes and strengthen feelings of connectedness for the children.

Safety planning for children with high risks is carefully considered and the plans are embedded and disseminated to staff effectively, including those who do not work permanently at the home. The manager takes a child-centred approach to managing risk and has offered challenge to external agencies where there have been barriers.

There are some inconsistencies in the quality of assessments undertaken prior to children moving into the home. While children are well supported with the practical and emotional elements of moving in, the compatibility of children is not always

explored or cross-referenced to ensure that risks are fully understood and mitigated.

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

There have been changes in the home's staffing and management structure since the last inspection. There is a newly appointed deputy manager in post and the responsible individual has been working closely with leaders to secure a suitable registered manager. The resilience and responsiveness of the interim manager is a protective factor that has allowed children to thrive in spite of the challenges.

Leaders have responded effectively to the requirements made at the last inspection and have made some impactful changes. However, there are shortfalls remaining that require attention. Appraisals for staff have not been completed within the reporting period, and there have been delays in some staff completing their qualifications as required by the regulations. Staff supervision is not up to date, but, where this has been completed, it is of a good quality. While this shortfall is not currently having a direct impact on the care children receive, the regularity of this oversight of staff practice is essential to ensuring the ongoing safeguarding and welfare of children.

Quality-of-care review reports are variable in quality and have not always been completed in a timely way. Notifications of serious events have also been submitted late on occasion, thereby limiting the oversight of the regulatory body. There has been an improvement since the appointment of the interim manager, and it appears that these shortfalls are a symptom of the inconsistencies in the management structure over the course of the reporting period.

There has been work undertaken by the provider to improve the accuracy and monitoring of children's records to ensure that they accurately reflect children's current needs and risks. In some cases, where children are placed under Section 20 of the Children Act 1989, delegated authority is not explicitly reflected in the records and staff understanding of the parameters of the legal framework is not always comprehensive.

The home's manager and leadership team have positive aspirations for the home and have good insight into the areas for improvement and knowledge of the children. There is evidence of positive and respectful relationships existing between staff and leaders. Managers are aware of the existing shortfalls and are committed to making continued and sustained improvements.

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 registered provider must appoint a person to manage the children's home if— there is no registered manager in respect of the home. (Regulation 27 (1)(a))	31 January 2024
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 December 2023
The registered person must notify HMCI and each other relevant person without delay if— a child is involved in or subject to, or is suspected of being involved in or subject to, sexual exploitation; an incident requiring police involvement occurs in relation to a child which the registered person considers to be serious; there is an allegation of abuse against the home or a person working there; a child protection enquiry involving a child— is instigated; or concludes (in which case, the notification must include the outcome of the child protection enquiry); or there is any other incident relating to a child which the registered person considers to be serious. (Regulation 40 (4)(a)(b)(c)(d)(i)(ii)(e))	16 November 2023

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))	16 November 2023
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Recommendations

- The registered provider should only accept placements for children where they have fully considered the impact that the placement will have on the existing group of children. In particular, the registered manager should ensure that risks are clearly cross-referenced against the needs, risks and vulnerabilities of children already living in the home. ('Guide to the Children's Homes Regulations, including the quality standards', page 56, paragraph 11.4)
- The registered provider should ensure that they hold records of the permissions that the children's placing authority has delegated, particularly where children are accommodated under Section 20 of the Children Act 1989. ('Guide to the Children's Homes Regulations, including the quality standards', page 30, paragraph 6.2)

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: SC013553

Provision sub-type: Children's home

Registered provider: Bramley Care Limited

Registered provider address: Malvern View, Hanbury Road, Stoke Prior,
Bromsgrove B60 4AD

Responsible individual: Maxwell Turner

Registered manager: Post vacant

Inspector

Tash Williams, Social Care Inspector

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