

SC031504

Registered provider: Bristol City Council

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home is owned by a local authority. It is registered to provide a short-break service and longer-term care for up to six children who may have learning disabilities and/or physical disabilities. At the time of the inspection, one child was living at the home. Two children were staying overnight on the first day of the inspection, and two were staying overnight on the second day.

The manager has been registered with Ofsted since 2007.

Inspection dates: 15 and 16 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: 7 March 2023

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
07/03/2023	Full	Good
18/05/2021	Full	Good
12/11/2019	Full	Good
04/12/2018	Full	Good

Inspection judgements

Overall experiences and progress of children and young people: good

Children make good progress at this home from sometimes difficult starting points.

Children visiting for short periods of time receive good-quality, warm and responsive care. Staff understand children's needs and how they communicate.

One parent spoke positively about the progress made by her child and the care provided to them during their visits. They reported that their child's independence skills and ability to manage new situations have improved. As a result, the parent said they have been able to take their child shopping and, recently, on holiday abroad, which would have been more difficult in the past.

One child made excellent progress during their time living here. With support from staff, they were able to significantly develop their independence and self-care skills. They were also helped to make changes to their eating and exercise habits. This resulted in the child losing a large amount of weight and a health condition related to their weight being reversed.

This child's move from the home was well planned. Staff and managers advocated strongly for them throughout the move to ensure the right care and support were in place.

One child recently moved into the home on an emergency basis. This child has complex medical needs, and during the inspection, they needed emergency medical treatment. Medical professionals advised that the response from staff was appropriate, and that the incident was a result of this child's condition rather than any omission in their care. However, this incident did highlight several gaps in the information and processes within the home that are specific to this child.

While some planning did take place before their move, communication between the home and medical staff should have been more robust. Once concerns were highlighted, action was taken by managers, on the advice of health professionals, to address the identified shortfalls, although these were not all in place by the end of the inspection.

The home environment is tailored to the needs of the children with toys and sensory equipment throughout. Some areas of the home need refreshing, and one bathroom is not fully accessible for children who have mobility issues. Managers advised that funding has been agreed on to invest in improving the appearance of the home and updating this bathroom, although no specific date has yet been set for this work.

Storage for medical equipment and supplies for one child is not yet organised with a clear system that staff understand.

Due to this child's health needs, some medical equipment and supplies need to be kept in their bedroom. However, the storage of these at present appears untidy, and some used and empty packets have been left in the room. This impacts on the homeliness of the child's bedroom.

Personal protective equipment is used by staff when working with some children due to them displaying physically challenging behaviours that could place staff at risk. These measures are recorded in children's care plans and discussed with professionals and parents in child-in-need meetings. However, care plans do not clearly include consent for the use of these measures or timescales for their review within the home.

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

One child living in the home has significant and complex health needs. Agency nursing staff are being used to ensure this child's medical needs are met. Managers have used block booking of these staff as far as possible to try and provide some consistency for the child.

Safer recruitment procedures have been followed in relation to agency staff, with additional checks and information requested and recorded on file.

When incidents take place, staff generally provide children with empathetic and appropriate responses consistent with the strategies in their support plans.

Since the previous inspection, 31 incidents of restraint have taken place across both services, involving six children. Restraint is used in appropriate circumstances and, for the most part, in line with children's care plans. However, on one occasion, a restraint was used with a child on the ground. While staff were trained in this hold, this was not an approved strategy for this child. Managers identified this issue and promptly addressed this with staff on an individual basis.

Records of restraint are detailed and debriefs are offered to staff. Management oversight is good, with incidents being reflected on and lessons learned recorded. However, following physical intervention, children are not always asked about their feelings.

One medication error has taken place. This was identified and followed up; however, medical advice was not sought until several days later. Managers have taken action to address issues in staff practice relating to this incident.

Reports from professionals were largely positive regarding the management of incidents and safeguarding concerns within the home. Some concerns were raised by medical staff about the planning of care for one child with significant medical needs. However, they were clear that there were no immediate safeguarding concerns for this child and that their health needs are currently being met.

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

At the time of the inspection, the home's manager was unavailable. Therefore, discussions regarding the management and development of the home were held with the responsible individual and the local authority team manager who oversees the home.

Management oversight is evident in records and is of good quality, with issues around staff practice being identified and addressed.

Practice is underpinned by detailed risk assessments and care plans for most children. These plans provide staff with clear guidance about how best to support children.

However, sections in one child's care plan were incomplete. For another child, information and guidance for staff around their health and care needs are not clear or specific enough.

Staff enjoy working at this home and were positive about the support and visibility of managers. However, some staff expressed anxiety about being able to appropriately care for this child, given the complexity of their health needs.

One medical professional expressed concern about elements of this child's care and the planning and documentation at the home being disorganised. However, due to agency nurses being present in the home to meet this child's medical needs, no immediate concerns were raised about this child's safety.

Managers accept that communication and planning could have been improved when planning for this child's move into the home, and during the inspection, some action was being taken to address identified shortfalls.

Some children visiting for short breaks have complex needs and can display behaviour that can pose a significant physical challenge to staff.

Managers understand the changing needs of children accessing the setting and the potential impact of this on staff. A clear training plan is in place for the next 12-month period to support the continuing development of the staff team in the long term.

There are several vacancies for staff in both services, and therefore, agency staff are used regularly. Some attempts have been made to mitigate any impact on children by booking the same agency staff wherever possible.

Managers reported that ongoing attempts are being made to recruit for these positions. Due to the reduction in staffing numbers, the home is also currently offering short breaks to a reduced number of 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
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— 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. 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 feedback on the experiences of children, including complaints received; 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)(f)(g)(i)(ii)(h)) In particular, ensure that support plans and risk assessments for each child are in place and up to date and that guidance for staff on how best to support children is clear and reflects children's needs.	10 January 2024

Recommendation

- The registered person should ensure that medical supplies and equipment are stored appropriately and are accessible. Where it is necessary to store items in children's bedrooms, efforts should be made to keep these spaces as homely and comfortable as possible. ('Guide to the Children's Homes Regulations, including the quality standards', page 15, paragraph 3.9).

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: SC031504

Provision sub-type: Children's home

Registered provider address: City Hall, College Green, Bristol, BS1 5TR

Responsible individual: Kate Markley

Registered manager: Valerie Mower

Inspector

Janet Jauregui, Social Care Inspector

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