

SC397092

Registered provider: Bryn Melyn Care Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home was registered with Ofsted in July 2009 and is operated by a private company. It provides care for up to three children with complex social, emotional and behavioural difficulties.

The home has no registered manager.

Inspection dates: 11 and 12 May 2022

Overall experiences and progress of children and young people, taking into account	requires improvement to be 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	inadequate
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The children's home is not yet delivering good help and care for children and young people. However, there are no serious or widespread failures that result in their welfare not being safeguarded or promoted.

Date of last inspection: 29 March 2022

Overall judgement at last inspection: Declined in effectiveness

Enforcement action since last inspection:

A compliance notice under regulation 13, the leadership and management standard and under regulation 12, the protection of children standard was issued at the interim inspection on 29 March 2022.

Recent inspection history

Inspection date	Inspection type	Inspection judgement
29/03/2022	Interim	Declined in effectiveness
14/12/2021	Full	Requires improvement to be good
10/12/2019	Full	Good
05/02/2019	Full	Good

Inspection judgements

Overall experiences and progress of children and young people: requires improvement to be good

There were no children living at the home during the inspection.

Children's experiences in the home are variable. Children continue to share that they have poor relationships with some staff, and this has impacted on their experiences of living in the home. Consequently, children do not always feel happy and safe in their home.

Staff do not consistently support children to understand the impact of their behaviour on each other. There is no evidence that staff are addressing and challenging poor behaviour from one child to another. As a result, relationships between children continue to be poor and the negative impact is evident when they talk about their experiences of living in the home.

Staff do not consistently keep children well informed about important issues in their lives. In relation to one child, there is little evidence that staff are having regular conversations with them about decisions that will affect them. On one occasion, this resulted in a serious incident in the home when the child displayed behaviours that placed others at harm. Poor preparation by staff does not support cohesive planning for children.

Children's experiences of moving on from the home are variable. One child experienced a positive move from the home, and they informed the inspector that they felt well supported by staff. Staff completed direct work with the child to prepare them for their move and they were suitably matched to their new home. However, the experiences for one child were poor and were not well planned. As a result, the outcomes for the child have not been as positive.

Staff promote children's education. They ensure that they make continuous effort to improve the experiences for children who may struggle at school due to their emotional and behavioural difficulties. School staff are positive about the communication from the staff and the support offered to children to make good progress. This reflects that staff are aspirational for children.

Staff ensure that children's health needs are met. Children are supported to attend health appointments and there is good communication with health professionals when children present with new health issues. This ensures that the well-being of children is promoted.

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

Staff do not consistently follow children's risk assessments. For example, on one occasion, staff did not consult the local authority to discuss changes to arrangements for a child to spend time with their family. This omission was immediately escalated to managers by another member of staff, and action was taken to prevent future shortfalls. However, this practice could have placed a child at risk of harm.

Staff do not keep accurate records of children's day-to-day lives. Children's records do not fully reflect actions taken by staff and omit important details. Consequently, some children's records are confusing documents that lack clarity and raise concerns about the action taken by staff to keep children safe.

Staff now ensure that physical restraint is used as a last resort. However, the recording of incidents is variable and lack sufficient detail. The manager's oversight of incidents is inconsistent, and shortfalls are not immediately identified or rectified. Furthermore, the recording of sanctions also lacks detail on debriefs completed with children and the effectiveness of the sanction. This impacts on the monitoring of the use of restraint and sanctions on children.

The quality of risk assessments is variable. Some risk assessments have been updated. However, some continue to lack important information and do not provide staff with sufficient guidance to manage risks to children or presented by children. Staff and the manager are not fully triangulating incidents to help inform risk-management plans. Consequently, the assessments are not consistently effective in managing risks to children.

The manager and leaders are now ensuring that more timely and immediate action is taken when allegations against staff's practice are made. Investigations into staff's practice and risk assessments of staff have improved, and they consider the impact on children as well as the well-being of staff subject to allegations. This practice helps keep children safe from further harm.

Staff now ensure that they follow safeguarding procedures when responding to concerns about the safety of children. Child protection concerns are immediately shared with relevant agencies, including children's social workers and the local authority designated officer. There is good communication with the provider's lead safeguarding officer who provides advice and support to ensure that children are kept safe. This ensures that action taken to safeguard children is effective.

The effectiveness of leaders and managers: inadequate

Since the last full inspection, inspectors have found that the leadership and management of the home continue to be poor. Two compliance notices were issued at the last inspection, one in relation to regulation 13 was not met and has been reissued, alongside an additional compliance notice under regulation 13. The

manager has also failed to address all the requirements from the previous inspection. These concerns hinder the overall experiences and progress of children.

The manager's external and internal monitoring and reviewing systems are not consistently effective. While some progress has been made since the last inspection, these are not consistently identifying shortfalls in staff's practice. In particular, the concerns about the inconsistent quality of staff recording and variable quality of risk assessments remain. In addition, there are repeat recommendations from the independent visitor's report that have not been actioned in a timely manner. This practice impacts on the overall quality of care provided to children.

Staff are not sufficiently skilled, trained and experienced in the home's therapeutic model of care. This is not embedded in staff's practice and this is evidenced in how staff inconsistently respond to children's needs. Consequently, lack of skilled and experienced staff has impacted on the progress made by children and the effectiveness of the intervention provided by the home.

The manager is failing to evidence their decision-making about children's care planning and actions to improve the outcomes for children. For example, the rationale for one child's unplanned move and the escalation to the local authority was not fully evidenced. Consequently, the outcomes achieved were not child centred and had an impact on the child's overall well-being.

The home is insufficiently staffed. There are three permanent staff in the home. One member of staff is currently suspended, pending an outcome of an investigation about their practice. Therefore, they are not able to complete their duties. As a result, there are not enough staff to provide care for the number of children the home is registered for.

The manager's review of the quality of care provided to children lacks sufficient detail and analysis. This also lacks consultation with staff, families, children, and partner agencies. The manager does not fully consider appropriate actions necessary to improve the quality of care provided to children.

Senior leaders are reflective and transparent; they are taking steps to address shortfalls identified by the inspector. They have made changes to the management of the home and completed learning reviews to help prevent future shortfalls. Leaders have a vision to help improve the outcomes for children and are child-focused in their thinking. However, these changes are in their infancy and are not yet embedded in the staff's practice.

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, 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 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— meet each child's behavioural and emotional needs, as set out in the child's relevant plans; strive to gain each child's respect and trust; understand how children's previous experiences and present emotions can be communicated through behaviour and have the competence and skills to interpret these and develop positive relationships with children; de-escalate confrontations with or between children, or potentially violent behaviour by children. (Regulation 11(1) (a)(b)(c) (2)(a)(i)(viii)(ix)(xi)) This requirement was issued at the last inspection and is restated. In particular, the registered persons should ensure that staff have the skills to develop positive relationships with children and to respond to their needs appropriately.	29 July 2022
The protection of children standard is that children are protected from harm and enabled to keep themselves safe.	29 July 2022

In particular, the standard in paragraph (1) requires the registered person to ensure—that staff— assess whether each child is at risk of harm, taking into account information in the child’s relevant plans, and, if necessary, make arrangements to reduce the risk of any harm to the child; help each child to understand how to keep safe; have the skills to identify and act upon signs that a child is at risk of harm; manage relationships between children to prevent them from harming each other; that the home’s day-to-day care is arranged and delivered so as to keep each child safe and to protect each child effectively from harm. (Regulation 12 (1) (2) (a)(i)(ii)(iii)(iv)(b)) In particular, the registered persons should ensure that staff are able to manage risks effectively and support children to understand the impact their behaviour may have on each other. In addition, staff and the manager should ensure that they follow children’s risk assessments.	
*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— 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;	29 July 2022

use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13 (1) (a)(b) (2)(c)(d)(h)) In particular, the registered persons should ensure that there are effective monitoring and reviewing systems of the quality of care provided to children. In addition, the registered persons should ensure that the home is sufficiently staffed.	
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; 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. (Regulation 13 (1)(a)(b) (2)(a)(f)) This requirement was issued at the last inspection and is restated, as shortfalls were still evident during this inspection. In particular, the registered persons should ensure that they have a good understanding of the care provided to the children in the home, and that they have systems in place to ensure that children continue to make good progress.	29 July 2022
The care planning standard is that children— receive effectively planned care in or through the children's home; and have a positive experience of arriving at or moving on from the home. (Regulation 14 (1)(a)(b))	29 July 2022

In particular, the registered persons must ensure that they evidence that sufficient steps have been taken to ensure that children have a positive experience of moving on from the home.	
The registered person must ensure that— within 24 hours of the use of a measure of control, discipline or restraint in relation to a child in the home, a record is made which includes— the name of the child; details of the child's behaviour leading to the use of the measure; the date, time and location of the use of the measure; a description of the measure and its duration; details of any methods used or steps taken to avoid the need to use the measure; the name of the person who used the measure ("the user"), and of any other person present when the measure was used; the effectiveness and any consequences of the use of the measure; and a description of any injury to the child or any other person, and any medical treatment administered, as a result of the measure; within 48 hours of the use of the measure, the registered person, or a person who is authorised by the registered person to do so ("the authorised person")— has spoken to the user about the measure; and has signed the record to confirm it is accurate; and within 5 days of the use of the measure, the registered person or the authorised person adds to the record confirmation that they have spoken to the child about the measure.	29 July 2022

(Regulation 35 (3) (a)(i)(ii)(iii)(iv)(v)(vi)(vii)(viii)(b)(i)(ii)(c)(iv)) This requirement was issued at the last inspection and is restated, as shortfalls were still evident during this inspection. In particular, the registered persons should ensure that staff provide sufficient detail when recording physical restraints of children. In addition, the manager should ensure that staff record debriefs and the effectiveness of the measure when consequences are issued on children.	
The registered person must maintain records ("case records") for each child which— are kept up to date. (Regulation 36 (1)(b)) In particular, the registered persons should ensure that staff maintain an accurate record of children's day to day experiences.	29 July 2022
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. 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 (1)(2)(a)(b)(c))	29 July 2022

In particular, the registered persons must ensure that they complete a detailed review of the quality of care provided to children and that the actions are linked to their findings.	
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* These requirements are subject to a compliance notice.

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: SC397092

Provision sub-type: Children's home

Registered provider: Bryn Melyn Care Limited

Registered provider address: Atria, Spa Road, Bolton BL1 4AG

Responsible individual: Stephen Travis
Rhian Hopkins

Registered manager: Rachel Simmonds

Inspector

Mazviita Makiyi, Social Care Inspector

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