SC472977

Registered provider: City of Bradford Metropolitan District Council

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

The home is owned and run by a local authority. It is registered to provide care for one child with learning disabilities. The home was originally registered to provide care for up to 15 children. However, following a request to vary the conditions, this number has been reduced.

There is no registered manager. There is an acting manager in post, who has not yet registered with Ofsted.

Inspection dates: 7 and 8 September 2022

Overall experiences and progress of children and young people, taking into account	**good**
How well children and young people are helped and protected	good
The effectiveness of leaders and managers	requires improvement to be good

The children's home provides effective services that meet the requirements for good.

Date of last inspection: 9 December 2021

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
09/12/2021	Full	Requires improvement to be good
26/05/2021	Full	Inadequate
06/08/2019	Full	Requires improvement to be good
11/02/2019	Full	Good

Inspection judgements

Overall experiences and progress of children and young people: good

Trusting relationships between the child and the staff have helped to improve the child's sense of safety. The child benefits from the staff's consistent approach and their detailed understanding of the child's needs. These strengths form the basis for the progress that the child has made.

Home tutoring sessions have provided the child with an alternative way of learning. However, the sessions have not been consistently delivered, which has prevented the child from having momentum with their learning. The manager escalated his concerns and advocated for the child to attend school. As a result, the child has now been helped to return to school after a lengthy period of disruption to their education.

The child's voice influences every aspect of their life. Staff consult with the child daily to agree the plan for the day ahead. The child is supported to talk freely and openly about their aspirations. This is helping to shape the child's care plan. The level of autonomy afforded to the child has also contributed to their increased sense of safety.

Staff help the child to develop tolerance to manage anxiety-provoking situations. The oversight and guidance from the clinical psychologist and the acting manager assist the staff to respond to the child's developing needs. This has led to the child having a more stable sleep routine. The child regularly goes into the community, takes part in enjoyable activities and benefits from new experiences. The child's social worker said, 'They have a great plan for [name of child] and the daily routine is excellent. Progress is being made because they are helping [name of child] to feel safe.'

Staff provide a positive atmosphere, which enhances the child's experience of spending time with their family when they visit the home. The child's parents said, 'Staff enjoy being with [name of child]. They are happy, positive and show commitment to [name of child],' 'They are brilliant, I can't fault them.'

The child is encouraged to develop their independence through basic cooking skills. The child is also spending more time in the community, with support from the staff, to strengthen their emotional coping strategies in unfamiliar surroundings.

The staff capture the child's experiences by taking photos of events and enjoyable activities. However, photos are disorganised, and the timeline of when they were taken is unclear. This limits the child's ability to reflect on their journey and the memories they have of their time living at this home.

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

There has been a significant reduction in the frequency and intensity of anxiety and stress-related behaviours exhibited by the child, which demonstrates their improved sense of safety. The child can vocalise more often the emotions they are experiencing to enable staff to offer help sooner and prevent unsafe behaviours escalating. The security of the home and high levels of staff supervision also help to reduce the potential risk of harm to the child.

Staff have established a vocabulary with the child that allows them to have reciprocal conversations. The style of the dialogue offers constant reassurance to the child that staff listen to, and understand, what the child is expressing through their use of words. This helps to engage the child in conversation about their day-to-day care needs.

The thoughtful and inclusive process that goes into the planning of the child's daily routine provides the child with a sense of predictability. Staff dynamically change the child's routine when they see early warning signs of distress and guide the child to a place of emotional safety.

Staff constructively praise the child and consistently recognise their achievements. This has surrounded the child with a culture of positivity and is helping to reduce the impact of some of the negativity previously experienced by the child.

There has been a reduction in the use of restraints with the child. However, the content of the records completed after incidents is inconsistent. For example, body maps are not always completed. Not all of the staff involved are spoken to after an incident occurs, and the record does not always describe how the staff have held the child. This limits the manager's ability to evaluate staff practice and make further improvements.

The child's risk assessment does not describe the restraint techniques used by staff to keep the child safe, and it is not aligned to the current behaviour management model used by the team. The behaviour management policy does not offer sufficient guidance to the manager about how incidents should be evaluated when certain restraint techniques are used. This limits the manager's monitoring and evaluation of the incidents.

When concerns are raised about the child's experience of living at this home, managers take proportionate action to ensure that safeguarding procedures are followed.

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

The home has been without a registered manager for an extended period. This is due to continued delays in the acting manager applying to the regulator.

The acting manager has forged important working relationships with the on-site clinical psychologist and lead mental health nurse. This has provided strong leadership to the team and the stability staff needed to help the child to make progress.

The continued struggle to recruit and maintain staff members has resulted in an unconventional staffing arrangement. A team of agency mental health nurses is employed to provide day-to-day care for the child. Managers have blended their staff with the mental health nurses to offer a bespoke care experience for the child. The positive working relationships developed by the team underpin their commitment to making a difference to the child's life.

Some staff are not being frequently supervised in line with the provider's supervision policy. This limits their progress and oversight and may lead to inconsistencies in their practice.

The quality of the records completed by staff about the child's day-to-day care varies, and the records do not provide a consistent narrative about the child's experiences. This limits the child's and their family's ability to look back at the child's time living at this home.

Managers lead team meetings and ensure that the child's care needs are central to the agenda items discussed. However, when the child's care plan is updated, there is no evidence that staff read, sign or understand the plan. This may lead to inconsistencies in the child's care without the constant oversight of the clinical psychologist and lead mental health nurse.

Internal monitoring systems have not been effective in identifying several administrative shortfalls about the child's care experience. These include gaps in the quality of daily records, incomplete accident forms, and an absence of information from the child's risk assessments. This limits the effectiveness of managerial oversight.

The statement of purpose for the home has not been sent to the regulator after it has been updated, as required by the Children's Homes (England) Regulations 2015. This prevents the inspector from reading the latest document before an inspection takes place.

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 quality and purpose of care standard is that children receive care from staff who— understand the children's home's overall aims and the outcomes it seeks to achieve for children; use this understanding to deliver care that meets children's needs and supports them to fulfil their potential. In particular, the standard in paragraph (1) requires the registered person to— ensure that staff— provide personalised care that meets each child's needs, as recorded in the child's relevant plans, taking account of the child's background. (Regulation 6 (1)(a)(b) (2)(b)(iv)) This registered person must ensure that staff read and understand the child's care plans and behaviour management plans when they are updated. The registered person must ensure that the quality of the daily records completed by staff contributes to the child's ability to look back and understand how they have been cared for while living at this home.	6 November 2022
The protection of children standard is that children are protected from harm and enabled to keep themselves safe. 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	6 November 2022

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; understand the roles and responsibilities in relation to protecting children that are assigned to them by the registered person; take effective action whenever there is a serious concern about a child's welfare. (Regulation 12 (1) (2)(a)(i)(ii)(v)(vi)) The registered person must ensure that children's risk assessments include up-to-date strategies that are aligned to their needs and the provider's current behaviour management model.	
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— use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13 (1)(a)(b) (2)(h))	6 November 2022
The registered person must— notify HMCI of any revisions and send HMCI a copy of the revised statement within 28 days of the revision. (Regulation 16 (3)(b))	6 November 2022
The registered person must ensure that all employees— receive practice-related supervision by a person with appropriate experience. (Regulation 33 (4)(b)) The registered person must ensure that staff receive supervision at the intervals as described in the supervision policy.	6 November 2022

The registered person must prepare and implement a policy ("the behaviour management policy") which sets out— how appropriate behaviour is to be promoted in the children's home; and the measures of control, discipline and restraint which may be used in relation to children in the home. The registered person must keep the behaviour management policy under review and, where appropriate, revise it. (Regulation 35 (1)(a)(b) (2)) The registered person must ensure that the behaviour management policy provides sufficient guidance to the manager and supports them to evaluate incidents effectively when advanced restraint practice techniques are used.	6 November 2022
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 person who used the measure ("the user"), and of any other person present when the measure was used; 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. (Regulation 35 (3)(a)(vi)(viii)(b)(i)) The registered person must ensure that all staff who have been involved in an incident of restraint have been debriefed about the incident.	6 November 2022

Recommendations

- Photographs relating to the child's experiences and any events they have taken part in should be kept in a way that help the child and their family to reflect about their time living at the home. ('Guide to the Children's Homes Regulations, including the quality standards', page 62, paragraph 14.5)

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: SC472977

Provision sub-type: Children's home

Registered Provider: City of Bradford Metropolitan District Council

Registered provider address: City Hall, Centenary Square, Bradford, West Yorkshire BD1 1HY

Responsible individual: Picklu Roychoudhury

Registered manager: Post vacant

Inspector

Aaron Mcloughlin, Social Care Inspector

The Office for Standards in Education, Children's Services and Skills (Ofsted) regulates and inspects to achieve excellence in the care of children and young people, and in education and skills for learners of all ages. It regulates and inspects childcare and children's social care, and inspects the Children and Family Court Advisory and Support Service (Cafcass), schools, colleges, initial teacher training, further education and skills, adult and community learning, and education and training in prisons and other secure establishments. It assesses council children's services, and inspects services for children looked after, safeguarding and child protection.

If you would like a copy of this document in a different format, such as large print or Braille, please telephone 0300 123 1231, or email enquiries@ofsted.gov.uk.

This publication is available at http://reports.ofsted.gov.uk/.

Interested in our work? You can subscribe to our monthly newsletter for more information and updates: http://eepurl.com/iTrDn.

Piccadilly Gate
Store Street
Manchester
M1 2WD

T: 0300 123 1231
Textphone: 0161 618 8524
E: enquiries@ofsted.gov.uk
W: www.gov.uk/ofsted