

# SC033502

Registered provider: Bradford Children's Specialist Service  
Interim inspection

Inspected under the social care common inspection framework

## **Information about this children's home**

A local authority operates and runs this home. It provides care and accommodation for up to four children and young people aged between 12 and 18. The children currently living in the home are under 16 years old and have a range of social, emotional and behavioural needs. The home is currently being managed by an acting manager.

**Inspection date:** 7 March 2019

**Judgement at last inspection:** requires improvement to be good

**Date of last inspection:** 11 July 2018

**Enforcement action since last inspection:** none

## **This inspection**

### **The effectiveness of the home and the progress and experiences of children and young people since the most recent full inspection**

This home was judged requires improvement to be good at the last full inspection. At the interim inspection, Ofsted judges that it has declined in effectiveness.

There has been no registered manager in day-to-day control of the home since the last inspection. The home has been managed by an acting manager since July 2018. The acting assistant unit manager has recently moved to another home. Leadership and management at this home are weak and most of the requirements raised at the last inspection have not been met.

Several staff members have been off work due to long-term sickness. This has left shortfalls in staffing rotas, which are filled by agency staff. However, the manager was unable to provide information about the number of shifts covered by agency staff or the ratios between agency and permanent staff.

Not all the staff have received training in the therapeutic parenting model adopted by

the home as outlined in its statement of purpose. Furthermore, not all staff have attended the refresher physical intervention training within the required timescales and now need to attend the full course again. Consequently, some staff working in the home are not trained to support children who may be in crisis.

Staff do not receive regular supervision. The manager was unable to provide the details of which staff had been supervised and when supervisions had taken place. Staff have not had the opportunity to discuss their performance and development even though the manager has raised a number of issues about staff performance. Both shortfalls relating to the management of the home were raised as a requirement at the last inspection.

Team meetings are often cancelled due to various reasons, which include the management's lack of appropriate arrangements to care for the children. This sometimes requires staff to address ongoing issues in the home rather than being supported to participate in the team meeting. There is also a lack of staff attendance, often with only a few members of staff available and rostered to attend instead of all staff being advised to attend. This does not ensure that the staff are given opportunities to better understand how to work collaboratively as a team, to develop their insight and to better understand the aims and ethos of the home as identified in the statement of purpose.

Children do not always receive feedback after raising their concerns with staff. The manager does not always inform them about any actions that will be taken. This is particularly important when children have reported feeling intimidated and bullied by their peers. This does not promote warm relationships and harmony within the home. This is further hindered by the lack of timely repair of damage to the children's bedroom doors, leaving one child feeling unsafe.

There are detailed and individualised positive support plans for each child. Staff know what action to take and which strategies to use if children engage in risk-taking behaviours. Staff go looking for children when they go missing from care. One recently admitted child has had an increase in the number of episodes of going missing since moving in. Staff are vigilant and share intelligence with the police and return home interviews take place with a variety of professionals to capture any information. Multi-agency meetings support a coordinated approach to keeping children safe. However, children do not have planned discussions or key-work sessions with the staff, enabling them to open up about any issues affecting them, such as safe relationships, bullying and child exploitation. Although staff work hard to ensure that the children are safe, they are not proactive at helping to educate the children through advice and guidance to keep themselves safe.

The manager has not always notified the regulator about notifiable events, including the going missing behaviours relating to a child who is at high risk of exploitation. Failure to notify Ofsted does not enable independent scrutiny of these incidents.

Children are not involved in their care planning and do not always have access to their documents. The computerised forms are not child-friendly, and one child spoken to did not know what the plans were for their future.

The manager has still not set up a system for consulting with children, parents, placing authorities and staff to inform the home's quality of care review. This shortfall was raised at the last inspection. The lack of consultation from stakeholders makes it difficult for the manager to review and evaluate the quality of care provided and to identify any actions needed to improve the experiences and outcomes for children.

The clinicians linked to the home include a psychologist, a speech and language therapist and an occupational therapist. Their visible presence in the home supports the staff to provide individualised care to the children. The joined-up working has particularly resulted in improvements in the children's behaviours and less need for physical interventions. These professionals have also been instrumental in assessing the children's emotional needs and, for one child, this has resulted in a quicker response for external intervention.

One child has been living at the home since the last inspection and has good relationships with staff. He is making progress and now attending and engaging in full-time education. Incidents of damage to the home and aggression towards staff have reduced. Two young people were supported by staff to move to semi-independent accommodation. These young people are still in contact with staff. This demonstrates the good relationships and support that they have received.

There are three new children living at the home who moved in following a planned introduction. The new pre-admission risk assessments are now more detailed than at the last inspection. However, these still do not take into account the individual needs of those children and/or young people who are already living at the home. This document does not fully demonstrate the potential impact that the new placement could have on the existing group of children.

Some of the children are happy. The home has been freshly decorated with new furniture to create a homelier feel and children have personalised their bedrooms.

### Recent inspection history

Inspection date	Inspection type	Inspection judgement
11/07/2018	Full	Requires improvement to be good
06/09/2017	Full	Requires improvement to be good
27/06/2017	Full	Inadequate
21/02/2017	Interim	Sustained effectiveness

## 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
<p>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.</p> <p>In particular, the standard in paragraph (1) requires the registered person to— ensure that the premises used for the purposes of the home are designed and furnished so as to— meet the needs of each child; and enable each child to participate in the daily life of the home. (Regulation 6 (1)(a)(b)(2)(c)(i)(ii))</p> <p>In particular, to ensure the timely repair of damage caused to the home, especially when damage is caused to children's bedroom doors that may leave them feeling unsafe.</p>	19/05/2019
<p>The protection of children standard is that children are protected from harm and enabled to keep themselves safe.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure— that staff— help each child to understand how to keep safe; and manage relationships between children to prevent them from harming each other. (Regulation 12 (1)(2)(a)(ii)(iv))</p> <p>In particular, staff are to complete planned discussions or key-work sessions with children and young people. This is to provide them with information, guidance and advice to empower them to keep themselves safe, for example about healthy relationships, bullying and child exploitation.</p>	19/05/2019
<p>* The leadership and management standard is that the registered person enables, inspires and leads a culture in</p>	19/05/2019

<p>relation to the children’s home that— helps children aspire to fulfil their potential; and promotes their welfare.</p> <p>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; ensure that staff have the experience, qualifications and skills to meet the needs of 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; demonstrate that practice in the home is informed and improved by taking into account and acting on— 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)(a)(c)(f)(g)(ii)(h))</p>	
<p>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.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure— that children are admitted to the home only if their needs are within the range of needs of children for whom it is intended that the home is to provide care and accommodation, as set out in the home’s statement of purpose; and that staff help each child to access and contribute to the records kept by the registered person in relation to the child. (Regulation 14 (1)(a)(b) and (2)(a)(f))</p> <p>This is with particular reference to completing a thorough pre-admission matching risk assessment for all children referred, taking into account the individual needs of those already living at the home to fully consider the impact that the placement will have on the existing group of children.</p> <p>Also, to involve children in their care planning by providing a child-friendly care planning document.</p>	19/05/2019
<p>The registered provider must appoint a person to manage the</p>	19/05/2019

<p>children's home if— the registered provider— is an organisation or a partnership; does not satisfy Regulation 28; or is not, or does not intend to be, in day-to-day charge of the home. (Regulation 27 (1)(a)(b)(iii))</p>	
<p>* 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; or there is any other incident relating to a child which the registered person considers to be serious. A notification made under this regulation must include details of— the matter; the other persons, bodies or organisations (if any) who or which have been notified; and any actions taken by the registered person as a result of the matter. (Regulation 40 (4)(a)(b)(c)(e)(5)(a)(i)(ii)(iii)(b))</p>	19/05/2019
<p>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.</p> <p>In order to complete a quality of care review the registered person must establish and maintain a system for monitoring, reviewing and evaluating— 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.</p> <p>The system referred to in paragraph (2) must provide for ascertaining and considering the opinions of children, their parents, placing authorities and staff. (Regulation 45 (2)(b) and (5))</p>	19/05/2019

\* 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. Inspectors considered the quality of work and the differences made to the lives of children and young people. They watched how professional staff work with children and young people and each other and discussed the effectiveness of help and care provided. Wherever possible, they talked to children and young people and their families. In addition, the inspectors have tried to understand what the children's home knows about how well it is performing, how well it is doing and what difference it is making for the children and young people whom it is trying to help, protect and look after.

This inspection focused on the effectiveness of the home and the progress and experiences of children and young people since the most recent full inspection.

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:** SC033502

**Provision sub-type:** Children's home

**Registered provider address:** Sir Henry Mitchell House, 4 Manchester Road, Bradford, Yorkshire BD5 0QL

**Responsible individual:** David Byrom

**Registered manager:** Christopher Workman

## Inspector

Tina Ruffles, social care inspector

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