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Registered provider: The Spring Children's and Transitional Care Limited

Full inspection Inspected under the social care common inspection framework

Information about this children's home

This service is operated by a private provider and is registered to provide care and accommodation for two children who have learning disabilities.

The registered manager has been in post since the service opened in 2017 and has the required qualifications.

Inspection dates: 20 to 21 November 2019Overall experiences and progress of
children and young people, taking into
accountinadequateHow well children and young people are
helped and protectedinadequateThe effectiveness of leaders and managersinadequateThere are widespread failures that mean children's welfare is not promoted or
safeguarded.inadequate

Date of last inspection: 19 February 2019

Overall judgement at last inspection: good

Enforcement action since last inspection: none



Recent inspection history

Inspection date	Inspection type	Inspection judgement
19/02/2019	Full	Good
19/12/2017	Full	Good



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—	06/01/2020
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 the premises used for the purposes of the home are designed and furnished so as to—	
meet the needs of each child. (Regulation 6 (1)(a)(b)(2)(c)(i)(ii))	
In particular, ensure that children have curtains at their bedroom windows.	
The children's views, wishes and feelings standard is that children receive care from staff who—	06/01/2020
develop positive relationships with them;	
engage with them; and	
take their views, wishes and feelings into account in relation to matters affecting the children's care and welfare and their lives.	
In particular, the standard in paragraph (1) requires the registered person to—	
ensure that each child—	



has access to the home's children's guide, and the home's complaints procedure, when the child's placement in the home is agreed and throughout the child's stay in the home. (Regulation 7 (1)(a)(b)(c)(2)(b)(i))	
In particular, ensure that the children's guide is in a format that each child is able to understand.	
The protection of children standard is that children are protected from harm and enabled to keep themselves safe.	06/01/2020
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;	
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; and	
are familiar with, and act in accordance with, the home's child protection policies. (Regulation 12 (1)(2)(a)(i)(v)(vi)(vii)) *	
The leadership and management standard is that the registered person enables, inspires and leads a culture in relation to the children's home that—	06/01/2020
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;	
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;	
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)(h)) *	
The registered person must keep the statement of purpose under review and, where appropriate, revise it; and notify HMCI of any revisions and send HMCI a copy of the revised statement within 28 days of the revision. (Regulation 16 (3)(a)(b))	06/01/2020
The registered person must make arrangements for the handling, recording, safekeeping, safe administration and disposal of medicines received into the children's home. (Regulation 23 (1))	06/01/2020
The registered person may only use devices for the monitoring or surveillance of children if—	06/01/2020
the monitoring or surveillance is for the purpose of safeguarding and promoting the welfare of the child concerned, or other children;	
the child's placing authority consents in writing to the monitoring or surveillance;	
so far as is reasonably practicable in the light of the child's age and understanding, the child is informed in advance of the intention to do the monitoring or surveillance; and	
the monitoring or surveillance is no more intrusive than necessary, having regard to the child's need for privacy. (Regulation 24 (1)(a)(b)(c)(d))	
If the Regulatory Reform (Fire Safety) Order 2005(a) applies to the home—	06/01/2020
the registered person must ensure that the requirements of that Order and any regulations made under it, except for article 23 (duties of employees), are complied with in respect of the home. (Regulation 25 (2)(b))	
The registered person must recruit staff using recruitment procedures that are designed to ensure children's safety.	06/01/2020



The registered person may only— employ an individual to work at the children's home; or if an individual is employed by a person other than the registered person to work at the home in a position in which the individual may have regular contact with children, allow that individual to work at the home, if the individual satisfies the requirements in paragraph (3).	
The requirements are that—	
full and satisfactory information is available in relation to the individual in respect of each of the matters in Schedule 2. (Regulation 32 $(1)(2)(a)(b)(3)(d))$	
In particular, gaps in employment should be verified.	
The registered person must ensure that all employees—	06/01/2020
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))	
The registered person must prepare and implement a policy which—	06/01/2020
is intended to safeguard children accommodated in the children's home from abuse or neglect; and	
sets out the procedure to be followed in the event of an allegation of abuse or neglect.	
The procedure to be followed in the event of an allegation of abuse or neglect must, in particular—	
provide for the prompt referral of an allegation about current or ongoing abuse or neglect in relation to a child to the placing authority and, if different, the local authority in whose area the home is located;	
provide for records to be kept of an allegation of abuse or neglect, and the action taken in response;	
describe the measures which may be necessary to protect	

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children following an allegation of abuse or neglect; and	
describe how and to whom staff are to report, without delay, any concern about abuse or neglect of a child. (Regulation 34 (1)(a)(b)(2)(b)(d)(e)(f))	
The registered person must prepare and implement a policy ("the behaviour management policy") which sets out—	06/01/2020
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 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. (Regulation 35 (1)(3)(b)(i)(ii)(c))	
The registered person must notify HMCI and each other relevant person without delay if—	06/01/2020
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)(d)(i)(ii)(e))	
The registered person must ensure that an independent person visits the children's home at least once each month.	06/01/2020
When the independent person is carrying out a visit, the registered person must help the independent person—	
if they consent, to interview in private such of the children, their parents, relatives and persons working at the home as the independent person requires.	
The independent person must produce a report about a visit ("the independent person's report") which sets out, in particular, the independent person's opinion as to whether—	
children are effectively safeguarded; and	
the conduct of the home promotes children's well-being. (Regulation 44 $(1)(2)(a)(4)(a)(b)$)	
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.	06/01/2020
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;	

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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").		
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; and		
make a copy of the quality of care review report available on request to a placing authority, if the placing authority is not the parent of a child accommodated in the home.		
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 (1)(2)(a)(b)(c)(3)(4)(a)(b)(5))		

* These requirements are subject to a compliance notice.

Inspection judgements

Overall experiences and progress of children and young people: inadequate

There are widespread and serious shortfalls that compromise children's welfare and safety. Poor leadership and management of the home have resulted in a lack of oversight of children's progress and of the quality of care provided to children. Leaders and managers do not ensure that staff have the necessary skills to meet children's needs or to recognise and respond to safeguarding concerns. This places children at risk of harm.

Staff do not keep children's health plans up to date. One child's health record describes administering a daily treatment to the child which leaders and managers identified had stopped being used 'months ago', and another child's health plan had no details of the medication they are administered daily. This places children at risk of not having their individual health needs met.



Recording in the home is chaotic. Information recorded about children is often duplicated, and there is inadequate cross-referencing of these records. This is of particular concern in relation to safeguarding as leaders and managers do not have clear oversight of incidents. As a result, leaders and managers are not identifying patterns and themes or taking action to develop practice. Leaders, managers and staff are unable to evidence how children's plans are implemented or how children are making progress.

There are no reward systems in use in the home. When sanctions are used, staff do not record children's views, and leaders and managers do not review the effectiveness of the sanction. As a result, children do not benefit from clear boundaries which promote positive behaviour.

Staff do not ensure that children's needs are met. One child has not had curtains at their bedroom window for several months. This does not meet the child's need for privacy or demonstrate that staff recognise children's basic needs.

Despite shortfalls in staff practice, staff and children do have good relationships. Staff offer nurturing responses to engage children in relationships. Children have a shared history with the core staff team. For example, one child talked about arriving at the home and which staff were working. These relationships help children to develop their confidence and sense of belonging at the home.

Staff ensure that children attend school. Some communication between staff and teachers is effective in supporting children's needs. However, at other times communication is poor and safeguarding concerns are not consistently shared. This demonstrates missed opportunities to understand children's behaviour and create a multi-disciplinary response to meet their needs.

Staff support children to maintain relationships with their families. This enables children to maintain their sense of identity and is valued by children and families alike.

One child said she felt supported by staff in working towards her independence. For example, she can now cook her own meals. The lack of recording of this work means that children cannot see their achievements and progress. Despite the poor recording, children feel they are making progress.

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

Staff do not clearly identify risks. Children's risk assessments and behaviour plans do not clearly show strategies to manage behaviour. This is confusing for staff and children. Staff do not recognise the significance of children's sexualised behaviour and do not update individual risk assessments to reflect recent events or behaviours. As a result, staff do not have accurate information and the necessary guidance to mitigate risk to protect children.

Staff lack knowledge and understanding of safeguarding. They do not always recognise



what constitutes a safeguarding concern. Therefore, incidents are not appropriately recorded, escalated to leaders and managers in the home or passed on to the placing authority. Not all staff have completed safeguarding training. This places children at risk of harm.

Staff do not understand the child protection policy and procedures of the home. When potential allegations about staff are made, staff are not clear what to do, who to tell or how to record this. Consequently, they do not report allegations to leaders and managers. Despite the independent visitor identifying in her monthly report that children have made allegations, leaders and managers were unaware that a child had made an allegation until inspectors brought this to their attention. This means that children are at risk of harm.

Leaders and managers have not addressed high-priority actions in the fire risk assessment to make the home safe. These include clearing and fire-proofing the understairs cupboard and ensuring that thumb-turn locks are on fire exits. Inspectors contacted the local fire safety officer during the inspection to request an urgent fire safety assessment. The lack of action taken meant children and staff were placed at potential risk of harm had there been a fire.

Leaders and managers do not safely recruit staff. They have not verified significant gaps in staff employment records. This means that leaders and managers cannot be assured of staff's work history and suitability to work with children.

Staff do not always administer medication according to the home's medication policy. Leaders and managers have not noted this. Staff aim to support children to be independent in managing their medication, which is aspirational. However, staff do not assess the child's competence to do this. This places children at risk.

Leaders and managers do not consistently let Ofsted know of serious incidents in the home. The independent visitor has highlighted concerns that staff should have notified to Ofsted, however, leaders and managers have not done this. This prevents the regulator having oversight of what is happening in the home.

The effectiveness of leaders and managers: inadequate

Management oversight in all areas of the home is of very poor quality. Since the last inspection, the registered manager has not been in day-to-day charge of the home. An acting manager and a deputy manager have undertaken this role.

Leaders and managers carry out reviews of the quality of care review report, however the report does not include the views of children, parents and social workers. As a result, leaders and managers cannot take account of key stakeholders' views to improve the quality of care. Leaders and managers have also failed to develop an action plan to drive forward improvements in the care provided.

The independent visitor provides detailed monthly reports, but these are not sent to



Ofsted promptly. This means that the regulator is unaware of the strengths and deficits of practice in the home. The independent visitor does not comment on whether safeguarding is effective in the home and does not routinely gain the views of interested parties outside of the home. Leaders and managers have failed to recognise this and ensure that this shortfall is addressed.

Staff do not receive regular supervision. Leaders and managers do challenge practice on some occasions. However, supervision and appraisal records are incomplete or not available. Inaccurate training records mean that leaders and managers do not have a clear understanding of the training needs of staff or how staff can meet children's needs. As a result, leaders and managers cannot demonstrate their understanding of staff's learning, development and support needs.

Leaders and managers do not have clear oversight of children's placement plans and behaviour management plans. As a result, they are unable to identify patterns and trends and to provide guidance to staff. For example, staff use a door alarm on one child's bedroom but this has not been discussed and agreed with the child or their placing authority, or kept under review.

The requirements and recommendation raised at the last inspection have not been met. The home's statement of purpose is not up to date which means that staff are not working to the current stated aims of the home. Leaders and managers have amended the children's guide, but it is still not in a format which is accessible to the children who live in the home. Shortfalls in staff training needs which were identified at the last inspection have not been addressed. The training matrix is still not up to date and it remains unclear whether staff have completed yearly refresher training within the required timescales.

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.

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: 1253623

Provision sub-type: Children's home

Registered provider: The Spring Children's and Transitional Care Limited

Registered provider address: 9 Grenville Drive, Birmingham B23 7YX

Responsible individual: Blessing Manyara

Registered manager: Alastair McDonald

Inspector

Karol Keenan, social care inspector



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