

# 2501555

Registered provider: Bryn Melyn Care Limited

Full inspection

Inspected under the social care common inspection framework

## Information about this children's home

This home is owned by a private company. It is registered to provide care for up to 12 children with special educational needs and/or learning disabilities, including autism spectrum disorder.

This home also has a school on the same site which is open to children living at the home and day students.

A new manager has been recruited and is yet to register with Ofsted.

### Inspection dates: 11 and 12 May 2022

<b>Overall experiences and progress of children and young people,</b> taking into account	<b>requires improvement to be good</b>
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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	requires improvement to be good
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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:** 23 March 2022

**Overall judgement at last inspection:** declined in effectiveness

### Enforcement action since last inspection:

At the last inspection, the home was judged declined in effectiveness. One compliance notice was issued, under regulation 13. At this inspection, the inspector found that the provider had not yet taken sufficient action to meet all the steps of

the compliance notice issued. As a result, the compliance notice in relation to regulation 13 was reissued.

## Recent inspection history

Inspection date	Inspection type	Inspection judgement
23/03/2022	Interim	Declined in effectiveness
28/09/2021	Full	Requires improvement to be good
25/02/2020	Interim	Sustained effectiveness
15/10/2019	Full	Good

## Inspection judgements

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

Staff show genuine care and affection towards children living at the home. Inspectors saw lots of lovely interactions and the staff were adept at being able to divert and distract children to help them feel less anxious. As a result, children feel safe and secure at the home.

Children are making good progress and are becoming more independent. They can make drinks and simple meals, help with cleaning tasks and keep their rooms tidy. Children who previously were reluctant to go out on the bus into the community are now visiting shops and enjoyed a trip to a safari park. Children who struggled to sit at the table to eat their meals are now doing so. However, children's plans do not always reflect the progress children are making. Children's targets are broad in nature, with limited guidance for staff to follow. In addition, managers and staff are not reviewing children's progress towards their targets. This could mean children are not progressing as well as they might.

Staff have developed children's plans that are individual to each child. However, for one child their legal status was incorrectly recorded. For another child, their plan did not tell staff how they should support the child's ethnicity and culture. These omissions could mean that children are not supported to understand who they are.

Staff are promoting communication with children. The home now has symbols around the house for children to use. For example, menus have pictures, staff carry symbol cards, bedrooms have pictures to help children indicate choice of clothing and bathrooms have sequencing boards to help children independently wash and brush their teeth. One worker told the inspector that they now better understand what children are trying to communicate instead of having to guess. As a result, children can now express their thoughts, wishes and feelings and know that staff will understand them.

The home environment is undergoing extensive renovations and is quite unrecognisable from before. Staff have been proactive in helping children to understand what is happening, through conversations and social stories. The impact on children has been minimal, with children saying they like the changes.

Staff have helped children to be involved in choices about the home during the renovations. Children have chosen colours for their bedrooms and the bathrooms and some have had the opportunity to change bedrooms. Consequently, children feel involved in the decision-making and are excited about having new rooms decorated to their taste.

The home has a school on site which children attend. Staff support children in school, which gives children consistency and continuity. As a result, even children who previously were reluctant attenders are now attending on a regular basis.

Children are encouraged to participate in activities away from the home. Children go horse riding, to a local youth club, to training at a local football club, go swimming and on trips out in the countryside, and to places of interest, shops and parks. As a result, children are making friends away from the home and developing their confidence and social interactions.

Staff have developed well-thought-out plans for children moving to the home. They are designed to go at the pace of the child and their family. Children get to see the home via video, choose colours and request things for their bedroom so that they are ready when they arrive. Following moves to the home, managers evaluate what has gone well and not so well. As a result, children settle quickly, and managers can make sure improvements are made for the next child moving to the home.

Children are helped to keep in touch with their families. Staff take children to visit, no matter the distance, and help children make regular video calls. Parents are complimentary about the home and the care given, though some said they would like to see improvements in the communication with them and to be told when there are staff changes.

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

Overall, risk assessments and behaviour plans for children provide a good level of detail to inform staff in how to support children with their behaviours, including when and when not to use physical intervention. However, for one child, staff had not included the strategy to reduce the risk of the child choking in the child's risk assessment, though the details were in the home's care plan. For others, a strategy of having plenty of people around was vague. For these children, this could mean that staff are unsure how to respond to behaviours and take preventative action.

On occasions, staff need to use physical intervention to keep children safe. Physical intervention is only used when necessary and is recorded appropriately. However, on one occasion, a child was given a debrief by the person involved in the intervention and on another occasion a staff member did not receive a debrief. This means children and staff do not always get an opportunity to reflect or raise concerns about the intervention used.

Some staff are careless in their approach to medication. This has led to children receiving incorrect doses. Managers have investigated and identified learning from these incidents. However, for some staff, the learning appears to be ineffective as they continue to make errors by not recording in a timely way. As a result, children have been put at risk of harm.

Children who use technology and access the internet are helped to understand the risks through key-work sessions. The home has security settings in place to prevent children accessing sites they should not. Staff observe children when using the internet and check devices when needed. As a result, children are helped to stay safe online.

The home's location risk assessment is regularly reviewed. However, managers have not consulted with other professionals who may have relevant information on the risks relating to the location of the home. This information is vital to ensure that any new risks posed to children are fully assessed.

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

There have been a lot of changes to the management of the home over the last few months. There is a new responsible individual and a new manager. The new managers were able to talk about their vision for the service and showed enthusiasm to provide a high-quality service. However, this is still at the early stages. Managers are beginning to implement new ways of working, including building relationships with the staff team and children and developing children's plans, to improve the quality of care given.

Staff spoken to by the inspectors are enthusiastic about the home and pride themselves in the care they provide to children. They say that they are still getting to know the management team but feel things are progressing in the right direction. All are pleased with the ongoing refurbishment and feel it has been a long time coming.

Managers' oversight of the home still needs to be improved. Despite new systems being introduced, there are still some shortfalls in the children's plans, and areas for development are not being actioned promptly. In contrast, the monitoring of children's bedrooms and bathrooms has improved and the shortfalls identified at the last inspection have been addressed. Children now have everything they need.

Staff do receive supervision. However, there are sometimes long gaps between sessions and the organisational policy about timescales for supervision is unclear. Supervision records show reflective discussions and managers challenging staff. In contrast, the home's workforce development plan does not outline the information required in guidance, which includes timescales for supervision and the ways that performance is managed. This is a missed opportunity to make sure the expectations around supervision are clear to staff.

Managers have prioritised training for staff. Staff have now undertaken specific training to meet the needs of children living at the home. While there remain some gaps for newer staff, training is planned for them. Consequently, the team has improved its knowledge and skills in caring for children.

The home's statement of purpose is out of date and in need of review. There have been significant changes to the home and staffing. The lack of prompt review means the regulator is unable to fully monitor the service.

## 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 leadership and management standard is that the registered person enables, inspires and leads a culture in relation to the children's home that—</p> <p>helps children aspire to fulfil their potential; and</p> <p>promotes their welfare.</p> <p>In particular, the standard in paragraph (1) requires the registered person to—</p> <p>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;</p> <p>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;</p> <p>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)(f)(h))</p> <p>This specifically relates to managers making sure that all children's plans are up to date, with all the relevant information and strategies, and that when audits identify shortfalls these are promptly rectified.</p>	17 July 2022
<p>The care planning standard is that children—</p> <p>receive effectively planned care in or through the children's home. (Regulation 14 (1)(a))</p> <p>This specifically relates to ensuring that plans for children provide sufficient detail to show staff working with children how to provide consistency of care and enabling children to reach their full potential.</p>	17 July 2022

This was a requirement at the last inspection and is restated.	
<p>The registered person must make arrangements for the handling, recording, safekeeping, safe administration and disposal of medicines received into the children's home.</p> <p>In particular the registered person must ensure that—</p> <p>medicine which is prescribed for a child is administered as prescribed to the child for whom it is prescribed and to no other child; and</p> <p>a record is kept of the administration of medicine to each child. (Regulation 23 (1) (2)(b)(c))</p> <p>This specifically relates to staff administering and recording medication correctly.</p>	27 May 2022

\*These requirements are subject to a compliance notice.

## Recommendations

- The registered person should ensure that personalised care meets each child's needs and promotes their welfare, taking into account the child's gender, religion, ethnicity, cultural and linguistic background, sexual identity, mental health, any disability, their assessed needs, previous experiences and any relevant plans. ('Guide to the Children's Homes Regulations, including the quality standards', page 14, paragraph 3.2) This was a recommendation at the last inspection and is restated.
- The registered person should ensure that the statement of purpose is kept under review and updated promptly when there are significant changes. ('Guide to the Children's Homes Regulations, including the quality standards', page 14, paragraph 3.5)
- The registered person should ensure that all incidents of control, discipline and restraint are subject to systems of regular scrutiny to ensure that their use is fair. Specifically, that debriefs are undertaken with all staff and children and that they have an opportunity to discuss the incident with someone not involved in the intervention. ('Guide to the Children's Homes Regulations, including the quality standards', page 46, paragraph 9.36)
- The registered person should have a workforce plan which can fulfil the workforce related requirements of regulation 16, schedule 1 (paragraphs 19 and 20) The plan should:
  - detail the necessary management and staffing structure (including any staff

commissioned to provide health and education), the experience and qualifications of staff currently working within the staffing structure and any further training required for those staff, to enable the delivery of the home's statement of purpose;

- detail the processes and agreed timescales for staff to achieve induction, probation and any core training (such as safeguarding, health and safety and mandatory qualifications);

- detail the process for managing and improving poor performance;

- detail the process and timescales for supervision of practice (see regulation 33 (4) (b)) and keep appropriate records for staff in the home. ('Guide to the Children's Homes Regulations, including the quality standards', page 53, paragraph 10.8)

- The registered person should ensure that the home is suitably located so that children are safeguarded effectively and can access services to meet needs identified in their relevant plans. Also, that the registered person should obtain information from other professionals to inform the suitability of the location of the home. ('Guide to the Children's Homes Regulations, including the quality standards', page 64, paragraph 15.1)

## 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:** 2501555

**Provision sub-type:** Residential special school

**Registered provider:** Bryn Melyn Care Limited

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

**Responsible individual:** Graham Norris

**Registered manager:** Post vacant

## Inspectors

Debbie Bond, Social Care Inspector  
Karol Keenan, Social Care Inspector

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