

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 has a school on the same site, which is open to children living at the home and day students. The inspector only inspected the social care provision on this site.

The home has a manager who registered with Ofsted in October 2022.

Inspection dates: 25, 26 and 27 April 2023

Overall experiences and progress of children and young people, taking into account	good
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How well children and young people are helped and protected	good
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The effectiveness of leaders and managers	good
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The children's home provides effective services that meet the requirements for good.

Date of last inspection: 11 May 2022

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
11/05/2022	Full	Requires improvement to be good
23/03/2022	Interim	Declined in effectiveness
28/09/2021	Full	Requires improvement to be good
25/02/2020	Interim	Sustained effectiveness

Inspection judgements

Overall experiences and progress of children and young people: good

The home has had several changes in the staff team, with a number of staff leaving to pursue different career paths. The changes in staff have had some impact on the children living there. The changes have not all been negative, with new staff bringing enthusiasm and new ideas. Some children were unsettled by familiar staff leaving. However, over time, children have formed positive relationships with the new staff and staff know the children well.

Children attend the on-site school. Those children who were reluctant attenders before moving to the home are now attending school full time. There is good multi-agency working and sharing of information between the school and the home. Communication between the school and the home has been improved by the introduction of a communication book for each child. This enables school staff and staff at the home to share information about the child's day. Plans are shared and developed jointly with school staff so that behaviour plans and communication tools are consistent in the two settings. As a result, children receive a greater consistency of care.

The home's clinical team is more involved in the children's care. They help and support at the assessment stages for suitability and undertake one-to-one therapy sessions with children. This has greatly helped children to explore their feelings.

The home environment is much improved and allows for greater independence for children. Staff have helped children to tolerate others in their space. Children and staff now sit and eat together at mealtimes and talk about their day. Staff involve children in preparing meals and snacks. This has meant that children now enjoy the social aspects of living in the home and helped them to develop skills in independence.

Staff have been proactive with children who have very limited diets. The careful introduction of new foods and textures means that one child has begun to broaden their diet and put on some weight. For other children, the foods eaten can, at times, be repetitive due to children declining what is on offer and choosing their preferred foods. At times, this can lead to some children eating processed foods and chips more often than would be liked for a well-balanced diet.

Staff help children to make choices about the activities that they want to participate in. Children who were previously reluctant to go out are now going out on trips and enjoying socialising more. Staff have supported children to join youth clubs and football clubs. Staff have also taken children on trips to the beach, theme parks, meals out, walks, and drives out into the countryside.

Staff help children to have opportunities that they have not previously experienced. For one child who was leaving to move to an adult placement, staff talked to them

about the things that they wished for. The child wanted to go on a holiday abroad, having never been on an aeroplane or abroad before. Following an agreement with the child's placing authority, staff took the child to Spain on an all-inclusive break. The holiday was a great success, which the child thoroughly enjoyed.

Children's moves to and from the home are well planned. There is a multi-agency approach and children and their families have opportunities to visit the home. As a result, most children settle quickly into the home. For children who are leaving, plans are equally as robust so that the new placement has all the information that they need. The child visits and gets to know their new home and staff team.

Some children live a long way from their family home. Staff encourage visits by families and take children to visit them. However, parents and social workers have commented that, at times, communication could be better. Managers have taken this on board and have begun improving the telephone system and making sure that important family events, such as birthdays, are acknowledged with children sending cards and calling family members.

Staff have developed children's individualised plans. However, the plans are not consistent. Some are informative and accurate, showing how staff will help children to progress. Others are less comprehensive, with targets for children being limited or not in place. As a result, not all children are having the opportunity to progress as well as they could.

Staff help children in all aspects of their care. However, on occasions, the attention to detail could be improved. Children often have growth spurts and will grow out of clothing, especially trousers. Children were seen by the inspector to be wearing trousers that were too short. Parents also told the inspector that they had witnessed children wearing trousers that were too small for them. This could inadvertently cause embarrassment to the children.

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

Incidents are well managed by staff, and physical intervention is only ever used when necessary. Incidents of physical intervention are recorded appropriately, with staff and children having an opportunity to reflect on their experience. When the manager has been involved in an intervention, another manager has reviewed the incident to ensure that the review is impartial.

When concerns are raised about staff practice, managers report to those who need to be informed and investigate them appropriately. Managers take appropriate action to address poor practice to ensure that children are kept safe.

Children have, on occasions, tried to leave the home. However, staff have been proactive in following children and returning them safely to the home. No children have been out of sight of the staff. If children were to go out of sight, there are plans in place to guide the action that staff need to take.

There has been a dramatic reduction in medication errors at the home. A new system was introduced and, since the last inspection, there has been one recording error. As a result, children have received the correct medication as prescribed by their medical practitioner.

Children are kept safe by a high number of staff working with children at any one time. Staff know children well and are able to pick up on their subtle cues. In addition, detailed plans that identify how staff should respond to behaviours also help to keep children safe. However, managers' monitoring systems did not pick up that one child's plan was not clear about who could or could not visit. The manager rectified this during the inspection so that it was clear.

Staff have developed children's risk management plans, which are reviewed and updated following incidents. However, the manager's monitoring did not pick up that, occasionally, plans are not consistent with information across documents. This could cause confusion or a lack of clarity for staff when managing situations.

The effectiveness of leaders and managers: good

Since the last inspection, managers have faced the challenges of several staff leaving and having to recruit new staff. However, managers have been proactive and recruited several new staff. The home has a diverse mix of staff, who are passionate about providing the best possible care to children.

Managers have reviewed the ethos of the home, looked at staff roles and responsibilities, and made changes that have improved the care given to children. Staff spoken to by the inspector said that initially there was some resistance, but over time they could see why the improvements were needed. Children now have more opportunities to socialise and engage in activities and clubs. Independence is promoted and children are progressing.

The consequences of having to rebuild a staff team have affected the quality of the managers' monitoring. Some children's files were not as comprehensive as they could be. Managers' monitoring had not identified if staff fully understood what was in children's plans. This could mean that staff are not consistent in their approaches.

Managers have developed the monitoring and oversight of incidents to identify patterns and trends. Individual reports are reviewed to see if things could have been done differently to reduce the risk of them happening again. Managers take this learning to the team meeting so that all staff can reflect on incidents. This enables managers to identify where staff need additional support and training to manage new or emerging behaviours.

The home's clinical team is more involved in supporting staff. They offer reflective sessions and learning opportunities. As a result, staff feel supported.

New staff have had a comprehensive induction, and all staff have undertaken a variety of training. However, the home's training matrix has not been fully updated.

Consequently, the manager was not clear if all staff had completed the home's mandatory training. This could mean that not all staff have the skills and knowledge they need to care for children at the home.

Staff who have not yet undertaken the relevant level 3 qualification are enrolled and supported to complete the qualification. However, some staff have struggled to complete this within the timescale needed. Managers have reviewed progress and put in place an action plan to help staff to achieve the qualification without further delay.

Managers have reviewed the home's statement of purpose on a number of occasions since the last inspection. However, the manager has not sent any updated versions to the regulator since June 2022. This means that the regulator does not have the most up-to-date information about the home.

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 promotes their welfare.</p> <p>In particular, the standard in paragraph (1) requires the registered person to—</p> <p>ensure that staff have the experience, qualifications and skills to meet the needs of each child;</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)(c)(f)(h))</p> <p>This is in relation to all staff having undertaken mandatory training and managers having an up-to-date monitoring system. Ensure that managers' monitoring systems of children's plans are robust, and that staff understand what are in those plans.</p>	23 June 2023
<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 ensure that staff provide consistency of care and enable children to reach their full potential.</p>	23 June 2023

This was a requirement at the last inspection and is restated.	
<p>The registered person must—</p> <p>keep the statement of purpose under review and, where appropriate, revise it; and</p> <p>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))</p>	23 June 2023
<p>For the purposes of paragraph (3)(b), an individual who works in the home in a care role has the appropriate qualification if, by the relevant date, the individual has attained—</p> <p>the Level 3 Diploma for Residential Childcare (England) (“the Level 3 Diploma”); or</p> <p>a qualification which the registered person considers to be equivalent to the Level 3 Diploma.</p> <p>The relevant date is—</p> <p>in the case of an individual who starts working in a care role in a home after 1st April 2014, the date which falls 2 years after the date on which the individual started working in a care role in a home; or</p> <p>in the case of an individual who was working in a care role in a home on 1st April 2014, 1st April 2016.</p> <p>The registered person may defer the relevant date if the individual—</p> <p>does not work, or has not worked, in a care role in a home for a prolonged period; or</p> <p>works, or has worked, in a care role in a home on a part-time basis. (Regulation 32 (4)(a)(b) (5)(a)(b) (6)(a)(b))</p> <p>This specifically relates to staff completing the relevant qualification within timescales.</p> <p>This was a requirement at the last inspection and is restated.</p>	23 June 2023

Recommendations

- The registered person should ensure that children have clothing that fits appropriately, such as trousers that are long enough, and that children are encouraged to have a varied and well-balanced diet. ('Guide to the Children's Homes Regulations, including the quality standards', page 14, paragraph 3.3)
- The registered person is responsible for ensuring that each child's day-to-day health and well-being needs are met. Specifically, ensure that monitoring systems are fully completed with guidance for staff as to what action to take and when. ('Guide to the Children's Homes Regulations, including the quality standards', page 33, paragraph 7.3)
- The registered person should ensure that staff build a positive relationships with others, such as family members. Specifically, ensure that families are informed promptly and consulted about decisions, in accordance with their relevant plans. Ensure that staff help children to celebrate significant events, such as by sending birthday cards to family members. ('Guide to the Children's Homes Regulations, including the quality standards', page 38, paragraph 8.6)

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, Greater Manchester BL1 4AG

Responsible individual: Shane Rowe

Registered manager: Ronan Franklin

Inspector

Debbie Bond, Social Care Inspector

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