

SC474543

Registered provider: Bromley Healthcare Community Interest Company

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home is operated by a healthcare provider and provides short breaks for up to 12 children at a time, aged five to 18 years.

The home's statement of purpose states that care is provided for children who have a variety of complex needs including sensory impairment, physical and/or learning disabilities and/or challenging behaviours.

The home was registered with Ofsted in 2006. The home has not had a registered manager since February 2020. The current manager started working at the home in October 2020 and has applied to register with Ofsted.

Due to COVID-19 (coronavirus), at the request of the Secretary of State, we suspended all routine inspections of social care providers on 17 March 2020.

We last visited this setting on 28 October 2020 to carry out an assurance visit. The report is published on the Ofsted website.

Inspection dates: 19 to 20 July 2021

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: 14 August 2019

Overall judgement at last inspection: requires improvement to be good

Recent inspection history

Inspection date	Inspection type	Inspection judgement
14/08/2019	Full	Requires improvement to be good
04/12/2018	Full	Good
01/08/2017	Full	Good
23/03/2017	Interim	Sustained effectiveness

Inspection judgements

Overall experiences and progress of children and young people: good

Children receive good, individualised care from staff who understand their needs very well. Children benefit from their positive experiences in the home and make good developmental and behavioural progress. Notable achievements include improved independence skills, longer concentration spans and improved personal care skills. The manager is developing an improved 'progress outcome' register.

Staff work together with parents and professionals to ensure that children's care and support is consistent during their short breaks. As a result, staff's knowledge of the children's health, social and emotional needs, alongside their cultural and dietary preferences, helps to ensure that all the children's needs are met during their short breaks.

Staff understand children's communication needs very well. Children have a voice in the home. Staff actively respond to each child's particular communication style. After their short break, children are successfully encouraged to feedback at the end of their stay with emoji choices. Staff complete a 'post stay reflection' after each child's short break. The manager reviews these reflections to help to continue her improvement drive in the home.

Children enjoy their short breaks and safely participate in a wide range of activities. These include, art, garden play and water play, alongside the home's new interactive 'magic carpet' equipment and sensory garden. A member of staff said, 'We like to offer a home-from-home experience and ensure that the children have a good visit and give the parents a well-deserved break.'

The manager has acted to improve staff communication with parents. She has recently sent parents a new information leaflet and parents have been successfully encouraged to provide day-trip suggestions to contribute to the home's summer holiday activity planner. During the challenges of the coronavirus pandemic and the home's temporary closure, staff continued to provide families with a day service, collecting children from their homes so that they could enjoy community-based activities.

Children enjoy tea visits before they stay overnight. This helps children familiarise themselves with their new environment and members of staff. However, leaders and managers do not actively engage in or contribute to children's post-18 transition plans. This is a missed opportunity to support the children to move on. The deputy manager reported that she plans to join a local authority transition project to address this shortfall.

Homely touches, such as wall art in the corridors, help to brighten the home. Leaders and managers agree that the home environment is 'tired'. Improvements

and additional maintenance are ongoing and will include the removal of the unused disabled swing, bent slide frame and exposed screws in one wall.

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

The home provides a safe physical environment for children. An electronic entry system helps to keep children safe, and children do not go missing from the home. Staff always supervise children in the community. This ensures that children are protected without limiting their experiences.

Adaptations throughout the home ensure that children can access all of the home's communal areas. Children's bedrooms are comfortable and suitably equipped and furnished to meet their social, medical and mobility needs.

The manager has adapted the staff shift pattern to take account of the children's routines. Children now benefit from seeing the same members of staff at bedtime and breakfast time the next day. This helps children to settle into their routines.

Staff know the children very well and work skilfully and compassionately to ensure that they enjoy their time at the home. Children's short breaks are arranged in advance and allocation arrangements are based on parents' requests, taking account of the children's needs, abilities and staffing ratios. Parents share their children's health and welfare updates with staff before every short break. This helps to ensure that children have a safe and enjoyable stay.

Children's risk assessments are clear and comprehensive. Risk management strategies ensure that staff are aware of the specific risks to each child and the actions they must take to minimise those risks. Enhanced safety measures include an individual mobile alarm system for staff. This helps to ensure that staff can communicate with each other if assistance is needed to help support a child in the more distant parts of the building. However, during the inspection, the inspector found that this procedure was not being consistently followed.

Staff are suitably trained in the safe administration of medication. When there have been minor errors in the administration of medication, these have not comprised children's health. Errors are addressed directly with the staff members and at team meetings. Medication policies and procedures have been updated to address concerns about out-of-date medication.

Staff rarely use restraint to manage complex behaviour. If restraint is used, the action is necessary to prevent harm or injury to children or others. However, one physical intervention record viewed at the inspection did not record the incident location, nor a debrief for the staff involved. This does not meet regulatory recording requirements.

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

Since the last inspection, the provider has appointed a new manager and deputy manager. The manager is a registered nurse, experienced health visitor and midwife and the deputy manager is a registered nurse for children with learning disabilities. A member of staff describes the manager as ambitious for the home's future development. The manager is taking action to improve the home's procedures and systematically actions the independent person's recommendations.

The fully staffed team receives a range of core and specialist training to meet the complex needs of children who stay at the home. The training matrix is comprehensive and helps leaders and managers identify when training updates are due. This ensures that staff continue to improve their knowledge and skills. However, not all staff have received training to meet the needs of children with autism spectrum disorders. The inspector was told that this training is booked for staff in the autumn.

All staff are subject to robust recruitment procedures. The provider uses National Health Service pre-employment processes. However, a second reference is not routinely sought for every applicant. Furthermore, not all of the staff have a suitable residential children's home qualification. This does not meet regulatory requirements.

All incidents involving children in the home are fully investigated. However, leaders and managers did not ensure that staff were debriefed following one incident. This limits learning and improvement in practice.

Record keeping is not sufficiently robust. Written records are not always signed or processed by the staff in accordance with the home's agreed recording systems. Although these shortfalls do not place children at risk or impact on their welfare, these mistakes and omissions compromise monitoring and review systems and do not ensure that there are sufficient audit trails.

Leaders and managers have updated the home's statement of purpose. However, the statement of purpose requires further updating. This is set as a requirement again.

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 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> <p>This requirement was made at the last inspection and is restated.</p>	1 September 2021
<p>The registered person must maintain records ("case records") for each child which—</p> <p>include the information and documents listed in Schedule 3 in relation to each child;</p> <p>are kept up to date; and</p> <p>are signed and dated by the author of each entry. (Regulation 36 (1)(a)(b)(c))</p>	1 September 2021
<p>The registered person must recruit staff using recruitment procedures that are designed to ensure children's safety.</p> <p>The registered person may only—</p> <p>employ an individual to work at the children's home; or</p> <p>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,</p> <p>if the individual satisfies the requirements in paragraph (3).</p> <p>The requirements are that—</p>	1 September 2021

<p>the individual is of integrity and good character;</p> <p>the individual has the appropriate experience, qualification and skills for the work that the individual is to perform;</p> <p>the individual is mentally and physically fit for the purposes of the work that the individual is to perform; and</p> <p>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)(a)(b)(c)(d))</p> <p>In particular, the registered person must ensure that two written references are requested for each applicant.</p>	
<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>1 September 2021</p>
<p>The registered person must ensure that—</p>	<p>1 September 2021</p>

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 (3)(a)(i)(ii)(iii)(iv)(v)(vi)(vii)(viii)(b)(i)(ii)(c))

Recommendations

- The registered person should ensure that they work with the placing authority and others to ensure that each child's transition is planned and that they help

each child to prepare for leaving both practically and emotionally. (Guide to the children's home regulations including the quality standards', page 57, paragraph 11.9)

- The registered person should ensure that they strive to make the home a nurturing and supportive environment that meets the needs of children. In particular, the registered person should remove the disabled swing, repair, or remove the slide and remove the exposed nails on a child's bedroom wall. (Guide to the children's homes regulations including the quality standards', page 15, paragraph 3.9)
- The registered person should ensure that learning from incidents is shared with all staff to improve practice. (Guide to the children's homes regulations including the quality standards', page 55, paragraph 10.24)
- The registered person should ensure that staff receive training in autism spectrum disorder. (Guide to the children's homes regulations including the quality standards', page 43, paragraph 9.12)
- The registered person should ensure that staff continually and actively assess the risks to each child and the arrangements in place to protect them. In particular, staff should consistently use the mobile personal alarm system throughout the building. (Guide to the children's homes regulations including the quality standards', page 42, paragraph 9.5)

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: SC474543

Provision sub-type: Children's home

Registered provider address: Central Court, 1 Knoll Rise, Orpington, Kent BR6 0JA

Responsible individual: Felicity Akers

Registered manager: Post vacant

Inspector

Victoria Jones, Social Care Inspector

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