



Report of the Strategic Director of Children's Service to the meeting of Corporate Parent to be held on 12 May 2022

Subject:

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Regulation 44

Summary statement:

To provide Corporate Parenting with an update on Bradford's children's homes, their Ofsted grades and the process of Regulation 44 Visits.

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Portfolio:
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Overview & Scrutiny Area:
Children's Services

1. SUMMARY

This report provides an update of Regulation 44 visits during the 2021 – 2022 monitoring period.

It also provides current information of all Ofsted Inspection Outcomes for the districts Children's Residential and respite Provisions for the 2021-2022 inspection period.

2. BACKGROUND

2.1 The Quality Standards Manager (Regulation 44) undertakes independent visits to Children's Homes in Bradford (known as Regulation 44 visits). They provide independent scrutiny of the home to quality assure the arrangements that are in place including the quality of care provided, the practice of staff and management, compliance with regulations, systems and processes and the quality of the environment. Importantly the visits need to report on how the homes are meeting the individual needs of children and young people to achieve good outcomes.

2.2 There are 2 Regulation 44 Quality Assurance Managers in Bradford. Their role sits within the Safeguarding and Reviewing Unit to ensure that their role maintains independence and autonomy from the rest of the service.

2.3 Their direct line of management is with the Service Manager for the Safeguarding and Reviewing Unit, overseen by the Head of Service and ultimately the Assistant Director – Safeguarding, Commissioning and Provider Services.

2.4 Monitoring through the Regulation 44 process highlights areas of development for each home on a month by month basis. Senior management are sighted on the outcomes of Regulation 44 visits and action plans are completed by the home manager to address areas of concern, inform change and improve outcomes for Children YP and / or the home. The information is collated and enables themes to be identified within the residential service which require response at a home level and where necessary at a strategic level.

2.5 There have been numerous changes to the Responsible Individual since spring 2021, however this now sits with the current Assistant Director who is responsible for Residential Services.

Role of the Quality Assurance Manager

2.6 Regulation 44 visits are undertaken monthly within each home. In Bradford the visit involves (amongst other things):

- a review of the paperwork
- oversight of the home (conditions and homeliness)
- discussions with staff and children/young people
- review of policies and procedures and how they are being implemented
- review of notifications that have been made to Ofsted and how they have been managed
- how the home is implementing the care plan for each child/young person

- a review of complaints and compliments.

2.7 Alongside this there is consultation with parents and other practitioners involved with the child/young person's care plan. This information is collated, written up as a Quality Assurance visit to illustrate that standards are being met as defined by the Children's Homes Regulations 2015, Quality Standards for Children's Homes and Children Act 1989.

Update on Bradford's children's homes

2.8 There are currently 12 Homes -

- 8 Residential Children's Homes (4 Mainstream, 3 Specialist BPP Provisions & 1 Children with Disabilities (CWD))
- 2 Short Break Provisions for CWD
- 1 Emergency/Short Term BPP Hub
- 1 Unregistered Residential Children's Home operating within Bradford Council.

Meadowlea – Inspection rating Good

Meadowlea is a home for up to 7 children of mixed genders with admission ages between the ages of 4 to 10 years old and is a Specialist BPP home.

The children who live at Meadowlea have a range of emotional, social and behavioural needs that can present as challenging behaviour due to their early life experiences. A significant number of children who come to live at Meadowlea have had difficult and unsustainable placements in foster care and so have come from placement breakdowns.

The care planning for children placed at Meadowlea is to prepare the children for family life.

In the last twelve months there has been an impact on staffing due to positive Covid tests, but Meadowlea has remained a stable environment for the children. There is clear leadership from the Residential Manager and there is a drive to escalate any factors with external agencies that affect care planning for the children that are placed.

Sky View – Inspection rating Requires Improvement – Declined effectiveness at interim inspection

Sky View is a home for up to 6 children and young people aged 13 -18yrs and is a mainstream home.

Sky View House has experienced a lot of staffing changes particularly in the management structure of the home, namely

- The Registered Manager transferred to Owlthorpe
- The Assistant Manager took up the position of Acting Manager supported by an Acting Assistant Manager and Acting Senior Residential Practitioner
- Recent changes saw the Acting Manager return to his substantive role and the Acting Assistant Manager commenced the role of Acting Manager supported by an Agency Assistant Manager

Whilst the current Acting Manager is very new to the role of management, they have a wealth of experience of working within Residential Services, and they are driving improvements in the area identified through Reg 44 visits and action plans.

Hollies - Inspection Rating Good

The Hollies is a home for up to 6 children and young people aged 8 - 18yrs and is a mainstream home.

The Hollies have experienced significant staffing changes within the management structure with the Registered Manager leaving the Local Authority after 10 months. A Temporary Agency Manager (currently unregistered) is in place. Any change in leadership causes a change in dynamics however communication with the staff team is positive.

The Hollies is impacted by social workers completing necessary tasks i.e. PEPs, updating Care plans but there is evidence of escalation and communication with the IRO.

Rowan House – Inspection rating Requires Improvement - declined effectiveness at interim inspection

Rowan House is a home for up to 6 children and young people aged 12 -18yrs and is a mainstream home. They are aged between 12 and 16 on admission. Rowan House are a mixed gender home, and a home that provides long term care for young people.

There has been long term sickness for the Registered Manager; the Assistant Manager effectively managed the home for an extended period until a Temporary Agency Manager (currently unregistered) was appointed.

Rowan House has been affected by the impact of matching children to the home. This ultimately led to a recent downgrade following the Ofsted inspection. The home has been informed that the occupancy numbers are to reduce to four beds.

The staff team evidences commitment and have established strong relationships with the young people that live there. There is a commitment from the leadership team in tackling any deficiencies in partnership support.

Hollybank Road – Inspection rating Good

Hollybank Road looks after up to 4 children aged 11 - 18yrs and is a specialist BPP home.

Hollybank has experienced staffing issues at Residential Practitioner level, but despite this has remained a very positive environment for the children and young people living there. Hollybank embraces the PACE model of caring which focuses on relationships.

Recently the Registered Manager has handed in their notice. A Temporary Agency Manager has been identified and started in April. This period of change will require careful management to ensure the current instability is effectively managed to move forward.

Willows Ofsted - Inspection Rating Requires Improvement

The current statement of purpose for the Willow cites:

'It is the current position that we will not be accepting any referrals to our homes until we have completed a review of our admissions process – impact risk assessments, proper consideration about matching, recognition of the home as a place of safety for young people living there and discussion with young people living in the home about any new young people moving in, a review of all homes Statement of Purpose and Function to make clear what the homes' admission criteria and process is. We anticipate that this work will be completed by the middle / end of January 2022. We will notify Ofsted when this work has been completed.

The Willows/BPP Hub is a home which currently provides care for one young person until a longer term placement which can meet his physical, emotional and developmental needs can be found.'

The Willows was a 4 bedded Specialist BPP Residential & Outreach home; however currently has a young person living there who has highly complex needs. It has taken some time for partner agencies to develop a plan that is able to support the young person effectively. There have been further complexities due to identifying an appropriate placement to enable a transition to support their long term needs.

Over the last year the Willows have had placements made that have not been within their statement of purpose. This has made it increasingly difficult for the Willows staff and ultimately led to a downgrading in their Ofsted inspection.

Alongside this there have been staffing changes at management level. There is now a Manager who operates with oversight of the Willows and Owlthorpe.

The Home evidences a clear commitment to effective multi-agency working.

Wedgewood – Ofsted Rating Requires Improvement - Improved Effectiveness at interim inspection

Wedgewood was a 6 bedded, short break service for children with severe and moderate physical disabilities aged 5 - 18yrs.

In the last twelve months Wedgewood Hall which is a part of the Wedgewood umbrella provided a permanent home for three young people with ASD and learning disabilities, following Ofsted findings at Valley View. The three young people have behavioural needs that have impacted up on their day to day living, resulting in the need for full time care support.

This has led to a lot of readjustment for Wedgewood.

Wedgewood has a stable management group and there is dedication to delivering good quality care. The leadership team do put challenge into the system when a child's care planning needs are not being met.

However, as with other homes Wedgewood has been impact by staff sickness. This is particularly difficult for Wedgewood as staff require specific training to care for the children who spend time at the home. The added complication is that Health have not been

forthcoming with the specific training required.

Clockhouse - Ofsted Rating Good

Clockhouse is a 6 bedded, short break service for children 5 to 17 years, with learning disability and physical and sensory needs. The range of disabilities extends to those with a combination of autism, complex health and learning disability.

Clockhouse has a stable management group however as with other homes has been impacted by staff sickness. They have recently had the addition of a second Assistant Manager transferred from Valley View House.

Newholme – Ofsted Rating Good - Declined Effectiveness at Interim

Newholme looks after up to 4 children aged 12 - 18yrs and is a specialist BPP provision.

Newholme has recently experienced the departure of their Registered Manager and there is the same theme around staffing issues. A Temporary Agency Manager has been appointed to commence this role.

Newholme has been affected by the impact of matching children to the home as well as having a number of children on part time education plans (one or two hours a day). This contributed to a recent downgrade following Ofsted inspection.

Owlthorpe - Ofsted Rating Good

Owlthorpe looks after up to 6 children aged 11-18yrs and is a mainstream home.

Following a difficult year in 2021 the home has relaunched with a new Manager (transferred from Sky View House). Careful matching of CYP has ensured Owlthorpe have gone from strength to strength.

Valley View – Ofsted Rating Requires improvement

Following an Ofsted inspection in 2021 Ofsted 'closed' Valley View.

In August 2021 plans were established for Valley View to care for one specific young person, via a commissioned care arrangement with Great Minds Together, who employ Mental Health Nursing Staff via CAMHS Professionals Agency.

The contract with GMT has recently ended and the notice period was served. The Local Authority liaised with CAMHS Professionals Agency to maintain continuity of care for the CYP.

The home functions with an Acting Manager, Acting Assistant Manager and an Acting Senior Family Support Behaviour Worker (SFSBW).

The arrangements in place at Valley View have resulted in a number of recommendations over the duration of visits undertaken by the Quality Assurance Manager. It is a long term and highly complex situation, due to the nature of the multifaceted needs of the young person in placement and care planning arrangements required; involving commissioning

arrangements to identify a suitable placement for the young person. This is hopefully coming to a conclusion.

The Bungalow – Ofsted unregistered

The Bungalow has been operating for over a year, with regular Quality Assurance visits since June 2021; prior to that there had been reference to The Bungalow within The Willows report as they were providing guidance.

The Bungalow is not yet registered with Ofsted. However, the Bungalow is now overseen by the Registered Manager for Valley View.

The current Statement of Purpose cites '*The Bungalow is a specific service that provides support and care for one single young person that is currently living under a Dols Order. The Bungalow is a small bespoke setting where local authority has a child focused approach alongside supporting agencies including a settled and adapted team of agency practitioners from Spire Assist Ltd.*'

There have been significant improvements for the young person placed at The Bungalow.

Key Issues arising from Regulation 44 Visits

2.9 The visits are identifying evidence of Good Practice -

- Wedgewood completed a lovely piece of work with a young person; the individual had complex needs and the evidence suggested that whilst the care at family home was emotionally warm, it did not meet her needs and as a result affected her development. Wedgewood maintained a full time placement, improving the quality of care and supporting the family to re learn how to provide effective care and ultimately this led to the young person being returned home. It was a great example of supporting and working in partnership with a family and mirroring good quality care.
- The Willows received some really positive feedback, following consultation with a partner agency. This was shared with the senior leadership team at the time as it was a thorough response, which was balanced and identified the strengths of the home.
- The Quality Assurance Managers speak regularly to children and young people placed and a number of them have developed positives relationships with staff. Engagement with children and young people by the Quality Assurance Managers is positive and supported by the homes.
- The Residential Managers, Assistant Managers and Residential staff have good communication with the Quality Assurance Managers.

2.10 There are themes that result in recommendations with the Monthly reporting

- The ease of ascertaining information which relates to the policies, procedures and care plans for the children continues to be raised within Reg 44 reports. These

issues affect the homes ability to fully meet/evidence some of the regulations as required by the Childrens Homes Regulations. These include but are not exhaustive to:

- Case note recordings need to be clearer in their record of action. Information is difficult to decipher and does not always clearly indicate the purpose of the action.
- Support Behaviour Staff not using LCS fully to record information – plan to have service specific case note headings.
- Children Social Care completing / updating / finalising the necessary paperwork. Ultimately this reflects on the home(s) as they do not have up to date and accurate information (includes care plans/placement plans/PEPs/Philomena protocols).
- Key working sessions not being planned, purposeful or undertaken within the policies and procedures of Bradford Council and aligning to the aims of the care plan.
- Consistency in use of residential documentation across the homes; homes have individualised documentation or have not updated documentation to align with a consistent approach. This fragments practice, especially as staffing is interchangeable across the homes.
- Ensuring consistency and accuracy in recording for specific issues i.e. injuries/medication.
- There have been occasions where interventions have been employed where a different approach could have been used. Also there has been some confusion in the use of the Physical Intervention form, which has led to inconsistency of recording across the Homes.
- Some homes have been identified as requiring work to be undertaken to improve the standard of the home; this has been a prevailing point for Valley View.
- Staffing has been a significant issue over the last 12 months; across all levels, from Responsible Individual through to Residential Practitioners. There has been a lot of movement due to staff retention as well as difficulties in recruitment. There is a reliance on agency staff. It is a complex issue, that has many factors impacting the stability of the workforce
- Inductions and supervisions for staff being consistent across the service; however, it is acknowledged that some homes have a high number of staff oversight. This is particularly prevalent for Wedgewood.

Key Issues arising about Regulation 44 Visits

2.11 There are themes that are relevant to the role of the Quality Assurance Manager

- Consultation with partner agencies continues to be difficult. Obtaining quality responses from IROs and social workers remains an ongoing issue. However, there has been improved consultation with other partners which has provided some interesting observations.
- Ensuring that the Reg 44 reports capture the action plans and Ofsted actions and benchmark against these as well as recommendations from the previous month's report.
- Quality Assurance Managers can have difficulties obtaining all the relevant documentation, including the most recent Statement of Purposes, accessing manager's folders and this can dilute the information recorded within the reports.
- It remains a theme for Ofsted to report that Reg 44 reports are submitted late to Ofsted, however this is not accurate information. There has only been one occasion that reports were late and this dates back to spring 2021. Reports are sent to Ofsted on time.

Actions undertaken

- The Residential service has made changes to the case note recordings to enable clarity of recording. This needs to be embedded and the Quality Assurance Managers have offered further suggestions.
- Work is being undertaken by Residential Services to review the consistency and quality of paperwork across the service.
- Residential Services have created of a Peripatetic Manager (as a 12-month post), to support Homes develop and implement Ofsted Improvement Plans, develop consistent and standardised paperwork and recording systems, support the implementation of the Homes Strategic Plan to open smaller homes; and the Service Development and Improvement Plan
- Residential Services has funding agreed to change the approach used in Physical Interventions from TEACH to a programme called TCI which is a therapeutic approach more suited to children's homes and foster carers. Training on this will start to roll out in July.
- The Registered and Assistant Managers are now using IROs as support to escalate matters when compliance in paperwork by Children Social Care and/or there are difficulties in progressing care plans. There is improved evidence of challenge from the Registered Manager when plans are not effective.
- Safeguarding & Reviewing unit ensure Social Workers and IROs are routinely reminded to respond with quality responses when consultation is requested by the Quality Assurance Managers
- The Quality Assurance Managers have reviewed the Reg 44 report and will be starting with the new form from April 2022.

- The Quality Assurance Managers and Service Manager are attending Residential Manager team meetings on a routine basis to feedback themes and discuss ways forward. Within this the Quality Assurance Managers are more than happy to be consulted on new forms and processes before they are disseminated across the service, this aspect could be better utilised.
- The Quality Assurance Managers and the Service Manager attend monthly meetings with the Responsible Individual and Service Managers for Residential Services to discuss the themes.
- There is a rolling recruitment process for residential practitioners, recruitment, retention of staff is all a priority within the residential service improvement and development plan.
- The Director of estates has visited all of the homes and there is a planned programme of works to develop the existing homes in to smaller homes and create ensuite facilities
- In response to Ofsted reporting that Reg 44 reports are late, we complete a spreadsheet to monitor the writing of reports, timeframes for sending to Registered Managers and the RI and when they are sent to Ofsted. To enable evidence based reporting, as requested by Ofsted, on how timeframes were met. We are seeking to build in delivery receipts to support evidencing that reports have been sent in.

3. OTHER CONSIDERATIONS

None

4. FINANCIAL & RESOURCE APPRAISAL

None

5. RISK MANAGEMENT AND GOVERNANCE ISSUES

None

6. LEGAL APPRAISAL

None

7. OTHER IMPLICATIONS

None

7.1 SUSTAINABILITY IMPLICATIONS

None

7.2 GREENHOUSE GAS EMISSIONS IMPACTS

None

7.3 COMMUNITY SAFETY IMPLICATIONS

None

7.4 HUMAN RIGHTS ACT

None

7.5 TRADE UNION

None

7.6 WARD IMPLICATIONS

None

**7.7 AREA COMMITTEE ACTION PLAN IMPLICATIONS
(for reports to Area Committees only)**

None

7.8 IMPLICATIONS FOR CHILDREN AND YOUNG PEOPLE

The report supports the members of the panel to discharge their Corporate Parenting Responsibility in respect of children living in our children's homes.

7.9 ISSUES ARISING FROM PRIVACY IMPACT ASSESMENT

None

8. NOT FOR PUBLICATION DOCUMENTS

None

9. OPTIONS

The report is for information only

10. RECOMMENDATIONS

The report is for information only

11. APPENDICES

None

12. BACKGROUND DOCUMENTS

N/A