

1159903

Registered provider: Holistic Approach Ltd

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

The home is operated by a private provider. It offers care for up to 5 children who may experience social and emotional difficulties and/or have learning disabilities.

At the time of this inspection, 3 children were living at the home.

The manager registered with Ofsted in June 2020.

Inspection dates: 4 and 5 February 2026

Overall experiences and progress of children and young people, taking into account	requires improvement to be good
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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: 21 August 2024

Overall judgement at last inspection: outstanding

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
21/08/2024	Full	Outstanding
10/10/2023	Full	Good
06/07/2022	Full	Good
09/06/2021	Full	Good

Inspection judgements

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

Children say they feel happy living in the home and describe positive relationships with staff. The environment is welcoming, and staff make efforts to understand children's interests and strengths. For some children, this has led to meaningful engagement that builds confidence and supports future aspirations.

Some children benefit from the stability and routine offered by the staff in the home. Those who have previously experienced disruption or unsettled placement moves are now accessing predictable care and developing trusting relationships with staff. This has helped them better understand their emotions and supported improvements in their social development.

One child's progress is limited by poor school attendance and a lack of purposeful daily structure. Although staff recognise these concerns, the support provided has not been effective in helping the child re-establish routines or re-engage with education. As a result, the child spends long periods withdrawn in their bedroom, particularly during school hours.

In contrast, another child is attending school consistently and has clear aspirations to become a bricklayer. Staff are supporting this ambition through thoughtful encouragement and by providing opportunities that align with the child's goals.

Staff know the children well and offer activities that reflect their hobbies and interests. This helps children develop a sense of identity, build resilience and learn new skills. Although staff report improvements in one child's interactions with adults, these positive changes have not yet led to improvements in the child's daily routines, independence or engagement in education.

Children benefit from regular, meaningful conversations with staff. These sessions are purposeful and tailored to each child's individual risks and support needs. Staff focus on helping children develop essential skills, such as understanding personal safety, managing emotions and making safer choices in the community. As a result of this targeted work, one child has begun to show increased awareness of how to keep themselves safe.

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

Children report feeling safe in the home and have developed positive relationships with staff. Staff are patient and nurturing, and children respond well to the stability this provides. However, despite these strong relationships, some children continue to experience gaps in daily structure and routine, which limits their overall progress.

Risk assessments are detailed and up to date, providing staff with clear guidance. Staff work with children in a sensitive manner to help them understand risk and have meaningful conversations with them to support them when they are feeling unsettled.

Responses to missing-from-home incidents are prompt and proportionate. Staff maintain contact with children until they return, and welfare checks are carried out appropriately. This demonstrates that staff understand the risks associated with missing-from-home episodes. Staff also seek to understand the reasons behind children going missing and share relevant information with safeguarding partners to support effective multi-agency practice.

Allegations are managed appropriately and include timely referrals to safeguarding professionals. Children's concerns are taken seriously and investigated thoroughly. Staff are supported during these processes, and learning from investigations is shared with the team.

Staff are not proactive in addressing the risks for one child who spends prolonged periods withdrawn in their bedroom. Staff allow them to eat in this space, and, as a result, hygiene has deteriorated. Although staff have attempted to engage the child, these efforts have not been consistent or effective in disrupting this entrenched pattern of behaviour. This situation compromises the child's well-being and does not meet expected safeguarding standards.

Recording does not always accurately reflect safeguarding concerns or staff actions. The logs sometimes minimise the significance of the child's isolation or lack of routine, which limits the manager's ability to track patterns of risk and intervene effectively. The child's persistent withdrawal has continued for many months, and there is insufficient professional curiosity or challenge around why current approaches have not resulted in change.

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

The manager's lack of oversight has resulted in a child living in the home whose disability falls outside of the conditions of the home's certificate of registration. This means that the provider is currently operating beyond their conditions of registration. This shortfall highlights a weakness in the manager's decision-making and governance arrangements, particularly in ensuring that the home operates in line with its registration and that children are only cared for in settings that can safely and appropriately meet their needs.

Staff training is generally aligned with children's needs, and it is positive that training relating to one child's complex health diagnosis has begun. However, forward planning has not been sufficiently robust. Current training does not fully equip staff to meet the child's needs, and further specialist input is required.

The manager has strengthened documentation in the home so that it is more purposeful. Team meetings now include learning, communication and child-focused discussions. Children's meetings are more robust and provide children with a meaningful voice in how the home operates.

Staff say they feel supported by the manager. Supervision arrangements have improved, although some sessions lack depth. There is now greater emphasis on reflective practice and risk assessment. Annual appraisals are carried out and provide an honest reflection of staff performance. Children's views are gathered and used to inform reviews of staff practice.

The manager understands the home's strengths and areas for development. He escalates concerns appropriately to partner agencies and recognises where greater professional curiosity or challenge is required in the staff team. He also understands the barriers to children's progress, particularly around educational engagement. However, escalation has not always been effective, as children's files do not consistently contain the most up-to-date information from the local authority.

The manager carries out regular quality of care reviews to evaluate children's experiences. However, staff do not contribute to these reviews, and their views are not reflected in the reports. This limits the manager's ability to learn from staff's experiences and to use their insight to drive improvement.

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, The 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 protection of children standard is that children are protected from harm and enabled to keep themselves safe. 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; help each child to understand how to keep safe; have the skills to identify and act upon signs that a child is at risk of harm; manage relationships between children to prevent them from harming each other; 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)(ii)(iii)(iv)(v)(vi)(vii)) In particular, the registered person should ensure that staff intervene effectively when there are concerns about the cleanliness of a child's bedroom.	30 April 2026
The leadership and management standard is that the registered person enables, inspires and leads a culture in relation to the children's home that—	30 April 2026

helps children aspire to fulfil their potential; and promotes their welfare. In particular, the standard in paragraph (1) requires the registered person to— 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. (Regulation 13 (1)(a)(b) (2)(f)) In particular, the registered person should ensure that staff assist every child in fulfilling their potential, and when progress is not being made, they should collaborate with professionals to implement necessary changes.	
The care planning standard is that children— receive effectively planned care in or through the children's home; and have a positive experience of arriving at or moving on from the home. In particular, the standard in paragraph (1) requires the registered person to ensure— that children are admitted to the home only if their needs are within the range of needs of children for whom it is intended that the home is to provide care and accommodation, as set out in the home's statement of purpose. (Regulation 14 (1)(a)(b) (2)(a))	30 April 2026
The education standard is that children make measurable progress towards achieving their educational potential and are helped to do so. In particular, the standard in paragraph (1) requires the registered person to ensure— that staff— help each child to achieve the child's education and training targets, as recorded in the child's relevant plans;	30 April 2026

support each child's learning and development, including helping the child to develop independent study skills and, where appropriate, helping the child to complete independent study; understand the barriers to learning that each child may face and take appropriate action to help the child to overcome any such barriers; help each child to understand the importance and value of education, learning, training and employment; promote opportunities for each child to learn informally; maintain regular contact with each child's education and training provider, including engaging with the provider and the placing authority to support the child's education and training and to maximise the child's achievement; raise any need for further assessment or specialist provision in relation to a child with the child's education or training provider and the child's placing authority; help a child who is excluded from school, or who is of compulsory school age but not attending school, to access educational and training support throughout the period of exclusion or non-attendance and to return to school as soon as possible; help each child who is above compulsory school age to participate in further education, training or employment and to prepare for future care, education or employment; help each child to attend education or training in accordance with the expectations in the child's relevant plans; and that each child has access to appropriate equipment, facilities and resources to support the child's learning. (Regulation 8 (1) (2)(a)(i)(ii)(iii)(iv)(v)(vi)(vii)(viii)(ix)(x)(b)) In particular, the registered person should ensure that staff are helping children achieve a routine that promotes engagement in education.	
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.	30 April 2026

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;

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))

In particular, the registered person should ensure that staff's views are included in the review.

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: 1159903

Provision sub-type: Children's home

Registered provider: Holistic Approach Ltd

Registered provider address: 99 Parkway Avenue, Sheffield S9 4WG

Responsible individual: Brian Lewis

Registered manager: Christopher Baker

Inspector

Colin Jones, Social Care Inspector

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