

1183911

Registered provider: Young Foundations Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

The home is owned by a private company. It provides care for up to 12 children who have learning disabilities.

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

The manager registered with Ofsted in March 2025.

The provider runs an independent school from a registered building adjoining the home. The inspectors only inspected the social care provision on this site.

Inspection dates: 30 September and 1 October 2025

Overall experiences and progress of children and young people, taking into account	inadequate
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How well children and young people are helped and protected	inadequate
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The effectiveness of leaders and managers	inadequate
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There are serious and/or widespread failures that mean children are not protected and their welfare is not promoted or safeguarded, and the care and experiences of children are poor.

Date of last inspection: 14 May 2024

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
14/05/2024	Full	Requires improvement to be good
09/05/2023	Full	Good
21/11/2022	Full	Good
04/05/2021	Full	Good

Inspection judgements

Overall experiences and progress of children and young people: inadequate

The inspectors saw all the children and spoke with three of them.

The serious shortfalls identified relating to the help and protection of children have negatively affected their overall outcomes and experiences in the home.

Staff do not respond to children's physical health concerns. A review of ongoing physical health concerns for one child had not taken place for seven weeks, despite a severe deterioration in the child's wellness and presentation. A further child complained of toothache for over two weeks without staff scheduling an appropriate appointment.

Children are not offered regular opportunities to discuss things that are important to them. Children are regularly asked in meetings if they know how to report if they are feeling unsafe. However, not all children attend the meetings, and recordings of conversations during these meetings are poor. When the views, wishes and feelings of the children are gathered, they are not well recorded, reviewed or responded to. There is no management oversight or feedback following the children's meetings.

The environment is not welcoming or homely. Children do not have free movement to some areas of the home, including a downstairs toilet. Certain aspects of the home and staff's daily practices convey an institutional culture. For example, televisions are kept in secure cabinets irrespective of risk assessments, and staff routinely wear lanyards and carry digital recording devices throughout the home.

The information recorded in children's documentation is poor. The language used to describe children is not kind or nurturing. Some information, such as a 'professionals contact log' for a child, was not available to all staff, limiting their insight and ability to support children's needs.

Children seek staff for reassurance. Staff were seen participating in children's outdoor play. Professionals and family members have said they feel children are well looked after, and they did not initially raise any concerns. Children did not say how they feel about living at the home.

Children's moves out of the home are well planned. Staff have developed social stories to help children understand the move. They have included photos of their new home and the staff to help prepare for any visits. There are dedicated staff who are driving this forward and making a positive difference to children.

Children are making progress with their education and are achieving their goals. There is good communication between school and the home.

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

Staff do not take action to ensure that children are protected from harm. Children are not helped to keep themselves safe. Staff do not fulfil their roles and responsibilities, which directly affects children's safety and well-being. For example, staff fell asleep while on shift, and a child was able to access the internet using staff equipment. Another child took an overdose of medication because staff did not follow their individual care plans.

When there are safeguarding concerns, staff fail to follow whistle-blowing procedures and do not highlight concerns or poor practice to the relevant people. Staff do not highlight concerns regarding the management of incidents or escalate concerns about staff's unacceptable and disrespectful behaviours towards children. It was only when senior leaders observed this practice that these concerns were brought to the manager's attention and investigated.

When children make allegations, staff do not provide the right support to children. Children are not always checked for injuries when allegations of physical harm are made. The processes for managing allegations fail to keep children updated about the outcome, provide continuous support, or validate their feelings. On one occasion, an allegation against a member of staff was made, but they worked in the home overnight without any risk assessment in place to safeguard children.

The management of medication is poor. There are multiple medication errors and concerns, including medication overdose. Medication is not consistently stored and administered in line with the children's prescriptions. When medication is refused, staff do not always record this or actively seek medical guidance. When guidance has been sought, it has not always been recorded or acted on.

The effectiveness of leaders and managers: inadequate

The manager has been unable to ensure safe and compassionate care for children. The manager is aware of many of the concerns raised. However, she has been unable to effect the necessary culture change in the home. Staff do not have the skills or abilities to meet children's needs.

Staff meetings are infrequent and poorly attended. Children's needs and wishes are not discussed, and risks to children are not reviewed. Staff do not receive annual appraisals, and staff supervision sessions are infrequent and ineffective. The induction process for newly appointed staff is poor. One new staff member did not receive an induction, and management oversight was lacking. This does not help staff understand the expectations of their role.

Staff training is not completed in line with the provider's expectations. When additional training is directed by the manager, it is not completed by the staff. Staff have not achieved the necessary diplomas within the specified time frame. The home's statement

of purpose is outdated and inaccurate. It does not reflect the care provided to children and does not accurately detail the experience and qualifications of staff.

Some areas of the home have benefited from recent redecoration, and the children's bedrooms are personalised and well decorated. However, there are several areas of the home that require attention and maintenance to bring it up to an acceptable safe standard and promote accessibility for children.

When incidents occur or allegations are made, they are not always reported to Ofsted. This reduces Ofsted's oversight and ability to ensure that appropriate actions are carried out to protect children.

Concerns regarding the leadership and management of the home have been discussed with the provider's senior leadership team. The team has submitted a plan to provide support to strengthen the leadership and management of the home and to help ensure the safety and well-being of children.

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; have the skills to identify and act upon signs that a child is at risk of harm; 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; that the home's day-to-day care is arranged and delivered so as to keep each child safe and to protect each child effectively from harm. (Regulation 12 (1) (2)(a)(i)(iii)(v)(vi)(vii)(b))	9 November 2025
*The health and well-being standard is that— the health and well-being needs of children are met; children receive advice, services, and support in relation to their health and well-being; and children are helped to lead healthy lifestyles.	9 November 2025

In particular, the standard in paragraph (1) requires the registered person to ensure— that staff help each child to— understand and develop skills to promote the child’s well-being that each child has access to such dental, medical, nursing, psychiatric and psychological advice, treatment, and other services as the child may require. (Regulation 10 (1)(a)(b)(c) (2)(a)(iv)(c))	
*The leadership and management standard is that the registered person enables, inspires, and leads a culture in relation to the children’s home that— helps children aspire to fulfil their potential; and promotes their welfare. In particular, the standard in paragraph (1) requires the registered person to— 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; ensure that staff have the experience, qualifications, and skills to meet the needs of each child; ensure that the home’s workforce provides continuity of care to each child; 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; 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)(c)(e)(f)(h))	9 November 2025
The quality and purpose of care standard is that children receive care from staff who— understand the children’s home’s overall aims and the outcomes it seeks to achieve for children;	15 December 2025

use this understanding to deliver care that meets children's needs and supports them to fulfil their potential. In particular, the standard in paragraph (1) requires the registered person to— ensure that staff— protect and promote each child's welfare; treat each child with dignity and respect; ensure that the premises used for the purposes of the home are designed and furnished so as to— meet the needs of each child. (Regulation 6 (1)(a)(b) (2)(b)(ii)(iii)(c)(i))	
The children's views, wishes and feelings standard is that children receive care from staff who— take their views, wishes and feelings into account in relation to matters affecting the children's care and welfare and their lives. In particular, the standard in paragraph (1) requires the registered person to— ensure that staff— help each child to express views, wishes and feelings; help each child to understand how the child's views, wishes and feelings have been taken into account and give the child reasons for decisions in relation to the child. (Regulation 7 (1)(c) (2)(a)(ii)(iii))	15 December 2025
The registered person must recruit staff using recruitment procedures that are designed to ensure children's safety. The registered person may only— employ an individual to work at the children's home; if the individual satisfies the requirements in paragraph (3).	15 December 2025

The requirements are that— the individual has the appropriate experience, qualification, and skills for the work that the individual is to perform. 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— the Level 3 Diploma for Residential Childcare (England) (“the Level 3 Diploma”); or a qualification which the registered person considers to be equivalent to the Level 3 Diploma. The relevant date is— 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. (Regulation 32 (1) (2)(a) (3)(b) (4)(a)(b) (5)(a))	
The registered person must notify HMCI and each other relevant person without delay if— there is any other incident relating to a child which the registered person considers to be serious. (Regulation 40 (4)(e))	15 December 2025

*These requirements are subject to a compliance notice.

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: 1183911

Provision sub-type: Children's home

Registered provider: Young Foundations Limited

Registered provider address: Alexander House, Highfield Park, Llangwyfan, Denbigh LL16 4LU

Responsible individual: Lynette Edwards

Registered manager: Carol Hudson

Inspectors

Jo Cansfield, Social Care Inspector
Rachel Moore, Social Care Inspector

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Piccadilly Gate
Store Street
Manchester
M1 2WD

T: 0300 123 1231
Textphone: 0161 618 8524
E: enquiries@ofsted.gov.uk
W: www.gov.uk/ofsted

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