

2511289

Registered provider: Cambian Childcare LTD

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This children's home is owned by a national private provider. It provides care for up to two children who may have special educational needs and/or disabilities (SEND) or physical disabilities.

At the time of the inspection, one child was living in the home.

The manager registered with Ofsted in August 2024 and was present during the inspection.

Staff in the home are referred to as adults. This is reflected in the report.

Inspection dates: 16 and 17 December 2025

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: 6 January 2025

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
06/01/2025	Full	Good
07/11/2023	Full	Good
18/08/2022	Full	Good
30/06/2021	Full	Good

Inspection judgements

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

One child has moved into the home, and two children have moved on from the home since the previous inspection. The two children that have moved on from the home made some excellent progress. They were supported to develop their physical and emotional independence well. One child with complex medical needs was supported to be able to enjoy an adventure holiday. Another child told the inspector how 'amazing' their time at the home was and how much they like the staff team.

The team are committed to the child currently living in the home, and want to provide a high standard of care. The child has only lived at the home for six weeks and the team are still getting to know the child. However, adults lack the skills and experience to meet this child's current needs. Adults have not consistently used the same Makaton signs with communicating with the child, which is confusing for them. Personal care routines lack a clear and consistent approach. The child's needs were outlined clearly before they moved in. Insufficient training was provided to ensure that the team could meet this child's complex needs adequately.

Adults have locked away or removed items from the home to keep the child safe. This means that the home is sparse and not homely. Repairs have not been made in a timely way. Managers recognise the need for improvements in this area. They advise that restrictions are temporary while the child settles into the home.

Adults understood the complex physical health needs of one child who has moved out. Clear guidance was provided to the team to ensure that the child's needs were met. Adults supported another child to take responsibility for their own health needs. They encouraged the child to make their own health appointments, for example. This has enabled the child to move on independently and continue this skill into adulthood. Referrals to health services are made quickly, enabling children to access the health care that they need.

Adults are not consistently monitoring the current child's health needs. Adults attempt to record personal care provided but gaps in the recording mean that this does not provide a clear picture of what is happening. There is no oversight of what the information means so patterns and trends are not being fully understood by the adults. This does not help the team to provide the care or support the child needs.

Moves on from the home are carefully planned and both children were supported with the changes well. Adults had close working relationships with the children's family members, which positively supported these moves. Moves into the home have also been carefully considered. The adults spent a two-week period with the current child before they moved in. However, specific training was not provided to the team so that they had the skills to support the child when they arrived.

The adults have developed creative ways to ensure that children understand their day-to-day experiences. For example, daily video messages were made by the adults for one child to capture the day's events in a meaningful way.

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

Significant incidents where adults have been hurt and property has been damaged have meant the home has been in a period of crisis. Adults do not know how to communicate with the current child. Some adults have used incorrect Makaton signs, which is causing confusion and frustration for the child. Adults have responded by removing or restricting access or items or locking rooms. Immediate risks are responded to but there is no clear plan on how to move this forward. Managers recognise this is not the care they want to provide.

The lack of monitoring and reviewing of practice means that opportunities to understand risks are missed. Indications in one record suggested the child had small bruises. It was not clear how these were caused and this was not followed up properly.

Incidents of physical interventions are for short periods and are proportionate. Management oversight focuses on what has happened for the child. Conversations with the child and adults have not taken place afterwards. No attempts have been made to understand the child's perspective by observing them or talking to them. Not everyone who should be informed of these interventions, has been informed. There are no systems to review the incidents collectively. For example, reviewing whether incidents have occurred on specific days or with particular adults. This means that limited learning is taking place to help reduce the use of physical interventions.

Investigations into concerns about adults' practice are taken seriously. Concerns are reported to the appropriate agencies. Learning is taken from these investigations and actions are put into place. Immediate actions are put into place to ensure children's safety.

Learning from the previous inspection has meant that safer systems are in place regarding recruitment of agency workers. However, there are still some areas that lack assurance. Managers were not clear on the completion of overseas police checks and verification of references.

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

The manager of the home is suitably qualified and has high aspirations for the children. Staffing has been difficult with a recent increase in the need for agency and night-time staff. This has been in response to the child's needs.

Adults did not have the skills and experience required when the current child moved in. Some of the team had previous training in Makaton but they had not used it so struggle to communicate effectively. Further training was arranged but did not take place until five weeks after the child moved in. Similarly, the team have a basic understanding of autism but bespoke training for the current child is still awaited.

The manager showed strong challenge in relation to agency recruitment. This led to changes which has improved the care to the children. Concerns about adults' practice are taken seriously. Thorough investigations take place, and the manager demonstrates a high level of curiosity about the concerns raised.

Adults spoken to reported feeling supported by each other and by managers. Managers have responded to staffing difficulties by increasing ratios and implementing night-time staff. Supervision usually takes place regularly but has not taken place consistently over the last six weeks. Managers have recently reflected on this.

Plans for children generally give clear guidance to the team and are written to the children.

There is a current lack of oversight of care and significant incidents within the home. The monitoring systems that are in place are not effective. This means that the adults do not have a complete picture of the current child's complex needs. Reflection has taken place recently, which identifies some of the shortfalls. Managers are considering what is needed to improve but clear action plans are not yet in place.

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; 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)(v)(vi)(vii)) In particular, staff need to monitor any unexplained injuries and report concerns to the child's placing authority.	31 January 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— helps children aspire to fulfil their potential; and promotes their welfare.	28 February 2026

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 work as a team where appropriate; ensure that staff have the experience, qualifications and skills to meet the needs of each child; ensure that the home has sufficient staff to provide care for 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)(b)(c)(d)(e)(f)(h)) Leaders and managers must ensure that the staff team have the skills experience to meet each child's needs and provide any specific training required. In addition, leaders and managers should review the care provided and ensure that staff have a consistent approach to basic care. Any monitoring or recording systems used require oversight to ensure that they are being completed routinely and that the information captured is utilised to improve the care of the child.	
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; use this understanding to deliver care that meets children's needs and supports them to fulfil their potential.	28 February 2026

In particular, the standard in paragraph (1) requires the registered person to— understand and apply the home’s statement of purpose; ensure that staff— understand and apply the home’s statement of purpose; provide to children living in the home the physical necessities they need in order to live there comfortably; provide to children personal items that are appropriate for their age and understanding; and make decisions about the day-to-day arrangements for each child, in accordance with the child’s relevant plans, which give the child an appropriate degree of freedom and choice. ensure that the premises used for the purposes of the home are designed and furnished so as to— meet the needs of each child; and enable each child to participate in the daily life of the home. (Regulation 6 (1)(a)(b) (2)(a)(b)(vii)(viii)(ix)(c)(i)(ii)) In particular this means that all areas of the home should be welcoming and accessible to the children. Any items that are locked away and any restrictions in place should be assessed as being necessary to protect the child with clear strategies as to how to reduce or remove such restrictions.	
The registered person must ensure that— 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;	28 February 2026

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)(iv))

Conversations with staff involved in physical interventions must take place within 48 hours. Within 5 days, attempts must be made to understand the child's perspective of the physical intervention.

Recommendations

- The registered person should ensure they maintain good employment practice. Recruitment of staff should safeguard children and minimise risks to them. The registered person should ensure that agencies complete all aspects of safer recruitment. ('Guide to the Children's Homes Regulations, including the quality standards', page 61, paragraph 13.1)
- The registered person should have systems in place so that all staff receive supervision. If the manager is not directly line-managing staff they should ensure that staff, particularly agency staff, are receiving effective and regular supervision. ('Guide

to the Children's Homes Regulations, including the quality standards', page 61, paragraph 13.2)

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: 2511289

Provision sub-type: Children's home

Registered provider: Cambian Childcare LTD

Registered provider address: 4th Floor Parkview, 82 Oxford Road, Uxbridge, England UB8 1UX

Responsible individual: Nicola McClements

Registered manager: Kathryn Field

Inspector:

Nickie Doney, 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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