

2639632

Registered provider: Bethel Children's Care Ltd

Assurance inspection

Inspected under the social care common inspection framework

Information about this children's home

This privately owned home provides care for up to 2 children who may experience social and emotional difficulties.

The registered manager has been in post since October 2025.

Inspection date: 18 March 2026

Date of last inspection: 24 November 2025

Judgement at last inspection: requires improvement to be good

Enforcement action since last inspection: none

Information about this inspection

At this inspection, the inspector evaluated:

- the care of children
- the safety of children
- the effectiveness of leaders and managers.

The inspector has looked closely at the experiences and progress of children, using the social care common inspection framework. This assurance 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'.

Findings from the inspection

We did not identify any serious or widespread concerns in relation to the care or protection of children at this assurance inspection.

Since the last inspection, one child has moved out of the home to return to live with a parent. One child currently lives at the home and has done so for almost a year, except for a short period spent living with a parent, after which the child expressed a clear wish to return to the home. This reflects the strong relationships they have with staff and the sense of security the home offers. Feedback from both the child and a parent is highly positive.

The child's family relationships are supported sensitively and in line with their wishes and care plan. Staff have supported regular family contact, including transporting the child long distances to maintain important connections. The child speaks warmly about the staff and the support from staff, while the parent said they 'couldn't ask for more' from the home, particularly the help provided around developing independence skills and communication.

The child's physical, emotional, social and educational needs are well met. Staff have supported the child's engagement in school, leading to a significant increase in their attendance from approximately 50% to over 80%. The child enjoys a varied range of activities, including creative arts and trips out. These contribute positively to their social development and enjoyment. Staff manage the child's health needs effectively, working proactively with health professionals.

The child's views are listened to and valued. Staff seek their opinions on day-to-day matters and weekly children's meetings take place. Records of these meetings are child-friendly and include visual prompts to support understanding. The child is confident that staff will take any concerns seriously and understands how to make a complaint if needed.

Children are kept safe. Staff know the child well and respond appropriately when they are distressed. Care plans, risk assessments and behaviour support plans are routinely updated, detailed and personalised. There have been no incidents of restraint and no missing-from-home incidents since the last inspection. The home has begun to embed a therapeutic approach to care.

The home provides a comfortable and well-maintained environment. It is spacious for the number of children it is registered to care for, and communal areas are clean, tidy and presented to a good standard.

Staffing levels have improved following the appointment of a deputy manager, which has increased the registered manager's capacity to oversee the home. The use of agency staff has reduced, and a formal induction process is now in place for agency

staff. Regular agency staff also receive supervision and access to training. This improves the practice of agency staff and support consistent care.

Staff receive regular supervision, and the records demonstrate reflective and supportive practice. All staff have completed required training. Feedback from staff is positive, they describe feeling well supported by the manager and are confident in their roles.

Partnership working is effective. Feedback from the child's school and the local authority social worker is positive, highlighting strong communication and the proactive support provided.

Management oversight has improved. Several forms, documents and audit tools have been revised and now include routine managerial review. Records and reports are generally well written and of good quality.

The fire risk assessment from last year identified several actions, some of which remain outstanding. This means that leaders and managers have not yet ensured that all fire safety risks have been fully addressed.

Key-work sessions are used well to provide support to the child, and these are recorded consistently. Targets and goals are identified, however they are not always aligned to the child's assessed needs, and progress is not consistently monitored or reviewed. One child has refused medical appointments, and although staff encouraged the child to attend there was no evidence of structured follow-up support to improve engagement.

Staff conduct is appropriate and there have been no allegations or practice concerns since the last inspection. Previous allegations were investigated and notifications have now been made to the appropriate agencies. However, the records of investigations do not contain sufficient detail or analysis.

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 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— ensure that staff have the experience, qualifications and skills to meet the needs of 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)(c)(f)(h)) In particular, ensure that records of investigations contain sufficient detail and/or analysis.	1 May 2026
If the Regulatory Reform (Fire Safety) Order 2005(30) applies to the home— the registered person must ensure that the requirements of that Order and any regulations made under it, except for article 23 (duties of employees), are complied with in respect of the home. (Regulation 25 (2)(b)) Ensure that all actions raised in the fire risk assessment are completed and evidence is in place to demonstrate this.	1 May 2026

This requirement is restated.	
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Recommendation

- The registered person should ensure that outcomes identified and progress made by children in building relationships and achieving socially acceptable behaviours can be recorded and measured. In particular, when an area of support is identified, work should be done with that child to support them ('Guide to Children's Homes Regulations, including the quality standards', page 38, paragraph 8.4)

Children's home details

Unique reference number: 2639632

Provision sub-type: Children's home

Registered provider: Bethel Children's Care Ltd

Responsible individual: Natalie Adom

Registered manager: Yolanda Feldman

Inspector

Daniel Rankin, Social Care Inspector

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