

2682141

Registered provider: Oaktree Childcare Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home is owned and managed by a private provider. It can provide care for up to 2 children who may have social and emotional difficulties and/or learning disabilities.

The manager registered with Ofsted in January 2026.

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

Inspection dates: 8 and 9 April 2026

Overall experiences and progress of children and young people, taking into account	good
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How well children and young people are helped and protected	good
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The effectiveness of leaders and managers	requires improvement to be good
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The children's home provides effective services that meet the requirements for good.

Date of last inspection: 23 June 2025

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
23/06/2025	Full	Requires improvement to be good
13/11/2024	Full	Requires improvement to be good
12/04/2023	Full	Good

Summary of findings

The child is happy and beginning to settle despite only living in the home for a short time. Interactions between the staff and the child demonstrate that they are beginning to form positive relationships.

There has been one serious allegation made against staff but the response has been thorough and timely, with a high level of communication with other agencies.

The members of the staff team feel positive about working in the home and talk about the child with care and respect. Practice in the home is of a good standard but there are a number of shortfalls in recording and the monitoring of systems.

Inspection judgements

Overall experiences and progress of children and young people: good

Staff work hard to build positive relationships with children. They have taken time and care to gain a good understanding of the child's individual needs. One social worker said that they believed the team 'are working hard to establish a relationship with the child and helping them feel supported and safe.'

Staff support the child to have meaningful time with their family, which is especially important to the child and their family. This has included reconnecting with past carers to help the child to have a feeling of stability and belonging. One family member said that the staff have been helpful and friendly and share information well.

Staff support the child to lead a healthy lifestyle. The child is registered with health services and encouraged to attend appointments. Staff have meaningful discussions with the child about healthy choices in respect of diet, health and substance use.

Staff support children's emotional and mental health and work alongside specialist workers. A mental health support worker from child and adolescent mental health services described the care from staff as 'exceptional', highlighting the team's trauma-responsive approach and ability to build meaningful, attuned relationships that support children's progress.

The child experienced a lengthy period out of education before moving in. The manager has quickly prioritised this and is collaborating with external professionals to find a solution that works best for the child. While educational provision is being arranged, the child has daily education and activities in line with their interests. The manager ensures that educational review meetings are held and that any plans for education are the best fit for the child.

The child is provided with a positive home environment that feels like a family home. Staff involve the child in changes to the home to help them feel included. However, the child's bedroom is untidy and there is no clear plan as to how this is going to be supported and improved.

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

Risks for the child are known and are understood by staff. Risk assessments are detailed, outlining all known risks and include guidance for staff to follow. Practice is supported by detailed information from the child's placing authority. Staff understand thresholds for sharing information with relevant professionals and attend regular meetings with external professionals to support the child's care.

Staff support children to understand their feelings and responses, with a clear focus on reparational work. This includes supporting the child to reflect on the impact of their choices on others and take accountability for their actions in a trauma-informed way.

Staff use appropriate de-escalation techniques when the child is struggling to regulate their emotions. Strategies are informed by staff knowledge and understanding of the child and their past experiences. Physical intervention is only used as a last resort.

The child is offered a variety of direct work that is linked to their wishes, feelings and individual plans. When the child has made requests that need additional authorisation, these have been shared with the relevant agency in a timely fashion. The records of discussions are written in a child-friendly way, showing care and thought for the child.

There are robust recruitment measures in place to ensure that only safe people work in the home.

There has been one incident when staff have not known that the child had left the home. Staff lacked professional curiosity and did not check the child's bedroom in the morning. New safeguarding measures were implemented immediately by the manager and have been effective in preventing further incidents.

There is a swift and thorough response to allegations, with appropriate safeguarding measures taken. However, on one occasion a child made a complaint which was not appropriately followed up by the manager. This meant the child was not given any opportunity for independent support.

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

The registered manager has not had sufficient oversight of all care practices in the home. His monitoring and auditing systems have not identified the shortfalls raised. This means that they are not currently effective and embedded into practice. The manager is well involved in the day-to-day care of the child, including completing direct work. This limits the time available for oversight over wider practices in the home.

Staff are not always given an opportunity to reflect on their practice and identify any lessons learned after being involved in a restraint. Although children are spoken to following incidents of being held by staff, these conversations are not always completed within regulatory timescales or by a person not involved in the hold. This limits the opportunity for the child to make a complaint should they wish to do so. In addition, recordings of physical interventions by staff are not always completed within regulatory timescales.

The quality of the child's records is inconsistent and records do not always reflect the actions taken by staff. This is a missed opportunity to capture the progress and experiences of the child.

Although staff describe benefiting from regular informal discussions, they do not receive regular one-to-one supervision sessions. This limits their opportunity to discuss their development needs, reflect on their care of the children and identify any shortfalls and learning.

Following a move that was earlier than planned for one child, the manager completed a reflective session with staff. This provided staff with a safe space to share and reflect on their practice and how they had been impacted by the situation while being encouraged and supported to maintain empathy with the child.

The manager and staff advocate for the best interests of the child, including escalating their concerns when they feel the child's needs are not being met effectively. They use their knowledge of the child to ensure that appropriate action is taken.

Staff describe positive support from the manager and say that the manager is available for advice and guidance when needed. Team meetings are held monthly and used to offer staff a reflective space to discuss their practice and experiences. Staff are provided with opportunities to reflect on their care of the child and to consider any areas of development to improve practice.

Leaders and managers are child-focused, with a clear vision for the care they want to provide. They are realistic about the areas for development. The registered manager has high aspirations for children, with a strong focus on providing consistency and stability.

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 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— 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; demonstrate that practice in the home is informed and improved by taking into account and acting on— feedback on the experiences of children, including complaints received; and use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13 (1)(a)(b) (2)(f)(g)(ii)(h)) Specifically, the registered person must ensure that they have suitable oversight of the day-to-day management of the home. They should ensure that staff recognise when children make allegations and that these are appropriately acted on. In addition, the registered person must implement an effective monitoring system to ensure that staff receive supervision sessions and the opportunity to reflect after incidents.	8 May 2026
The registered person must ensure that—	8 May 2026

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; 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)(1)(i)(ii)(iii)(iv)(vii)(viii)(b)(i)(ii)(c)) Specifically, the registered person must ensure that physical interventions are correctly recorded and that children are spoken to by a member of staff independent from the incident, to allow them the opportunity to raise concerns if they need to.	
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;	8 May 2026

In particular, the standard in paragraph (1) requires the registered person to—

ensure that staff—

protect and promote each child's welfare;

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) (2)(b)(ii)(c)(i))

The registered person should ensure that there is support and an ongoing plan for the child in keeping their bedroom clean and tidy.

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: 2682141

Provision sub-type: Children's home

Registered provider: Oaktree Childcare Limited

Registered provider address: Ground Floor, Seneca House, Links Point, Amy Johnson Way, Blackpool, Lancashire FY4 2FF

Responsible individual: Jacqueline Titterington

Registered manager: Luke Harris

Inspectors

Rebecca Robson, Social Care Inspector

Leanne Carr, 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
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