2707907

Registered provider: Cambian Childcare LTD

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home is privately owned. It provides care for up to 5 children who experience mental health difficulties and may not be able to live in the community without support.

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

The manager registered with Ofsted in February 2025. There is a separately registered school on site.

The inspectors only inspected the social care provision.

Inspection dates: 18 and 19 May 2026

Overall experiences and progress of children and young people, taking into account	**requires improvement to be good**
How well children and young people are helped and protected	requires improvement to be good
The effectiveness of leaders and managers	requires improvement to be good

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: 8 September 2025

Overall judgement at last inspection: requires improvement to be good

Enforcement action since last inspection: compliance notices under regulation 12 and 13 and restriction of accommodation

Recent inspection history

Inspection date	Inspection type	Inspection judgement
08/09/2025	Full	Requires improvement to be good
07/05/2024	Full	Good
27/06/2023	Full	Good

Summary of findings

The child living at the home says that they feel happy and safe. However, some shortfalls in the areas of care planning, safeguarding and leadership and management mean the child does not receive consistently safe care. Leaders and managers did not identify, and therefore act on, an allegation by a child that they were hurt during a restraint.

Leadership and management arrangements have been strengthened with improved systems of monitoring. However, actions identified by the leadership team have yet to be embedded.

Inspection judgements

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

An assurance visit took place on 2 March 2026. At that visit, serious and widespread concerns were identified. Two compliance notices were served and a restriction of accommodation imposed. A monitoring visit took place on 20 April 2026. At this visit, leaders had not met the compliance notices and these were repeated. The restriction of accommodation remained in place. This meant that no children could move into the home while the restriction was in place. This full inspection examined the steps that managers had taken to meet the compliance notices and monitored the restriction of accommodation as well as reviewing the care and support provided to the child.

At the time of this inspection, one child was living at the home. Since the last inspection, one child has moved out. The child living at the home took part in the inspection in a way that felt comfortable for them. The restriction of accommodation has been complied with and no children have moved in.

The child says that they feel safe living in the home and that they enjoy being there. However, the child is making limited progress. They have very limited school attendance. There is no evidence to demonstrate how staff are supporting the child to reintegrate back into school. There is also limited evidence to demonstrate how staff engage the child in planned or unplanned learning opportunities. This limits the child's educational attainment and does not boost motivation.

Staff have had training in the therapeutic model used by the home. However, it is not clear how staff integrate this into their day-to-day care of the child. Care plans do not provide staff with instructions on how to integrate the model into their care practice. Daily records are task-led and do not describe how staff interact with the child. The new psychologist has ideas on how to promote trauma-informed practice. However, these ideas are in their infancy and are not yet embedded. Consequently, staff are not yet delivering the therapeutic care described in the statement of purpose.

Leaders and managers have not yet developed appropriate methods to demonstrate how the child is making progress and how staff are helping them to do this. Care plans are complicated and comprise of different documents. Some of these documents are kept in different locations. For example, one set of plans is held by a psychologist. This means that there is not a coherent and coordinated set of instructions for staff on how best to meet the child's needs, and staff cannot articulate the systems used to measure the child's progress.

The child said that they enjoy living at the home and talked about several activities that they are given access to. Staff were observed to be interested in the child and wanted to interact with them. The manager asked the child if they wanted a hug, which the child accepted. This means that the child feels comfortable among staff.

Staff acknowledge the child's strengths. The child is a talented artist and poet. They use their poems to explain their thoughts and feelings. Staff have praised the child for their talents and are exploring how to publish the poems. This helps to raise the child's self-esteem.

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

Leaders and managers are aware that there are gaps in the skills and understanding that staff and the manager have in relation to identifying safeguarding matters. To mitigate risk, senior managers have increased their presence in the home and have oversight of all incident reports.

Since the last inspection, 3 allegations have been made against staff. Two of these have been dealt with appropriately. However, a team leader, the manager and the responsible individual did not identify a clear allegation that the child had made about a restraint that had taken place. The child had said that their arm 'really hurt' after the restraint took place. As staff and managers did not identify the allegation, this was not reported to safeguarding partners and no medical attention was sought for the child. This allegation was identified 10 days later through an audit carried out by a director. As soon as this was identified appropriate actions were taken. However, this demonstrates that there remain gaps in managers and staff's understanding of what constitutes safeguarding concerns and what action they need to take. No one has apologised to the child for not responding to them promptly in respect of their concern. This does not provide the child with the message that they are believed and taken seriously.

Incident reporting from staff lacks consistency and does not always provide a clear account of events. Some reports do not contain sufficient detail to enable a full understanding of what has occurred. In one incident report, the child hurt their hands on the fence. There is no detail of how this was followed up or how staff acknowledged this with the child. Managers have identified this and have requested further information. However, incidents are not consistently, clearly and accurately documented.

Staff practice does not reflect the child's care plan. For example, the care plan says that staff check the child's mobile phone on an ad hoc basis and that these checks are recorded in a specific book. However, staff do not check the child's phone and the book to record these checks in does not exist. The manager advised that there is no risk presented by the child's access to their phone, but it is not clear how the manager has reached this decision. There is a lack of curiosity about how the child interacts with their phone and how this affects their mental health.

Several high-level reviews have taken place into concerns that were identified at the last inspection. These have been carried out by leaders who do not have line management responsibilities in the home. Each review has highlighted actions required to improve safeguarding and reporting in the home. Most of the reviews are newly completed and, as yet, the actions have not been taken. Leaders and managers are aware that these actions need to be followed up promptly.

Leaders and managers have not ensured that children's individual risk assessments are clear and easily understood by staff. These risk assessments are overly wordy and complicated. Some important information from incident reports has not been translated into instructions for staff. For example, the child has repeatedly commented that they find changes to plans overwhelming and difficult. The child has also said that they hear voices in their head. The child sometimes struggles to allow staff to apply first aid and, in response, staff have provided the child with their own first-aid kit. This information about the child's needs and how to help the child has not been incorporated into documents. Furthermore, arrangements for checking when the first-aid kit is used and when it may need restocking are unclear. This means that there is no guidance for staff on how to minimise the child's overwhelming thoughts and feelings.

The child told inspectors that they feel safe. They have a high risk of harming themself. When they do so, staff respond to help the child. Staff understand the strategies to keep the child safe specified in the child's deprivation of liberty court order. They are aware of when they may need to use the permitted restrictions.

Leaders and managers ensure that medication is managed and dispensed appropriately. New protocols have been written to explain the different types of dispensing. The on-site nurse has been involved with sharing instructions with the team. There have been no medication errors since the last inspection.

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

Senior managers are aware of the continued shortfalls in the home. They are taking steps to reduce the likelihood of these from continuing, such as devising systems to improve monitoring. However, these have yet to be fully embedded.

Leaders and managers are committed to making improvements. However, gaps in monitoring and oversight continue. To understand what is needed, several high-level critical reviews into incidents have taken place. These have been carried out by the

director and another senior manager. Leaders and managers are aware that the outcomes of these reviews have yet to be embedded into practice.

Staff have been provided with training and workshops. However, there is no oversight from managers on the effectiveness of these. In one workshop, a written exercise took place involving safeguarding questions. Some responses from staff demonstrate a lack of knowledge. However, this has not been followed up. This undermines staff's opportunities to improve their knowledge and the potential positive impact of the training.

Staff safeguarding supervisions are not used as spaces to discuss individual safeguarding issues with staff. The manager did not use staff supervision to address one staff's failure to identify a clear allegation made by a child. This does not help staff to understand their roles and responsibilities or identify allegations in the future. The manager has not recognised what safeguarding supervisions are, and staff are not being given individualised guidance to protect children from harm.

Staff say that they enjoy working at the home. One staff member said that working in the home is not as stressful as it used to be and that communication has improved.

Senior leaders are supporting the manager's professional development with a framework of learning to increase her knowledge and skills. The manager is reflective and keen to deliver a higher quality of care to children. The quality assurance manager is providing day-to-day support to the manager and provides an extra layer of oversight to all incidents. This adds more strength to the monitoring systems in the home.

Leaders and managers have met the steps stated in both compliance notices. Following this inspection, the restriction of accommodation has been lifted.

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— 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; 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)(f)(h)) In particular, ensure that managers are skilled to provide effective oversight of all incidents. Ensure managers take prompt action when staff do not fulfil their responsibilities. This requirement is restated.	15 July 2026
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—	15 July 2026

that staff— 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 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)(iii)(v)(vi)(b)) In particular, ensure that all staff are able to identify an allegation and take appropriate action when required. Ensure that when children say they have been hurt during an incident, that staff acknowledge this and respond to the child appropriately and seek medical advice. Ensure that risk assessments provide staff with instructions on how to respond to specific mental health issues. Ensure that staff consistently produce accurate and detailed records. This requirement is restated.	
A responsible individual must— have the capacity, experience and skills to supervise the management of the home, or the homes, in respect of which the responsible individual is nominated. (Regulation 26 (7)(b)) This requirement is restated.	15 July 2026
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 July 2026

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— understand and apply the home's statement of purpose; ensure that staff— understand and apply the home's statement of purpose; protect and promote each child's welfare; treat each child with dignity and respect; provide personalised care that meets each child's needs, as recorded in the child's relevant plans, taking account of the child's background. (Regulation 6 (1)(a)(b) (2)(a)(b)(i)(ii)(iii)(iv)) In particular, ensure that staff deliver the care described in the statement of purpose. Ensure that staff understand and embody trauma-informed working and relevant therapeutic models. This requirement is restated.	
The care planning standard is that children— receive effectively planned care in or through the children's home; In particular, the standard in paragraph (1) requires the registered person to ensure— that each child's relevant plans are followed. (Regulation 14 (1)(a) (2)(c)) In particular, ensure that care plans contain clear and relevant information. Ensure that care plans demonstrate children's goals, how staff will help children to meet these and that progress can be clearly demonstrated.	15 July 2026

This requirement is restated.	

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: 2707907

Provision sub-type: Children's home

Registered provider: Cambian Childcare LTD

Registered provider address: Caretech, Parkview, 82 Oxford Road, Uxbridge UB8 1UX

Responsible individual: Post vacant

Registered manager: Samantha Cornelius

Inspectors

Hannah Phillips, Social Care Inspector
Sallie Bloomfield, Social Care Inspector

The Office for Standards in Education, Children's Services and Skills (Ofsted) regulates and inspects to achieve excellence in the care of children and young people, and in education and skills for learners of all ages. It regulates and inspects childcare and children's social care, and inspects the Children and Family Court Advisory and Support Service (Cafcass), schools, colleges, initial teacher training, further education and skills, adult and community learning, and education and training in prisons and other secure establishments. It assesses council children's services, and inspects services for looked after children, safeguarding and child protection.

If you would like a copy of this document in a different format, such as large print or Braille, please telephone 0300 123 1231, or email enquiries@ofsted.gov.uk.

You may reuse this information (not including logos) free of charge in any format or medium, under the terms of the Open Government Licence. To view this licence, visit www.nationalarchives.gov.uk/doc/open-government-licence, write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk.

This publication is available at http://www.gov.uk/government/organisations/ofsted.

Interested in our work? You can subscribe to our monthly newsletter for more information and updates: http://eepurl.com/iTrDn.

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

© Crown copyright 2026