

2729820

Registered provider: TS Children Services Ltd

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home registered with Ofsted in January 2024 and is operated by a private company. It provides care for up to three children who may experience social and emotional difficulties.

There has been no registered manager in post since March 2025. A new manager was appointed on 1 July 2025 and has applied to register with Ofsted. At the time of the inspection, the manager was not on duty. The inspection was supported by an interim manager, who has been in post for three weeks. The responsible individual was appointed in February 2026.

Two children were living at the home at the time of this inspection. Both children spoke with the inspectors and shared their views and experiences of living at the home.

Inspection dates: 5 and 6 May 2026

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 widespread failures that mean children and young people are not protected or their welfare is not promoted or safeguarded and the care and experiences of children and young people are poor, and they are not making progress.

Date of last inspection: 15 April 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
15/04/2025	Full	Requires improvement to be good
07/08/2024	Full	Inadequate
08/04/2024	Full	Inadequate

Summary of findings

Children are not safe in this home. Staff lack the necessary skills, experience and knowledge to meet the needs of the children in their care. Care is not provided by a stable, consistent team. A high turnover of staff prevents children from forming secure and trusting relationships. This undermines the continuity and quality of care that children receive. There are serious failures in safeguarding practice, and risk management arrangements are ineffective. These factors mean that children's experiences are significantly compromised, and their progress is hindered. The overall quality of children's care falls well below expected standards.

Inspection judgements

Overall experiences and progress of children and young people: inadequate

Children experience unsafe, poor care. Since the last inspection 2 children lived at the home for a short period of time and had to move on quickly because staff were unable to keep them safe. Following a serious incident, a child left the home with no notice. Leaders do not know where this child moved on to. Because of this poor practice, children do not experience stability, and their progress and safety are compromised due to these unplanned endings.

Children do not experience consistent or stable care due to numerous changes in the staff and leadership team. High staff turnover prevents children from developing secure and trusting relationships with the adults who care for them. As a result, children lack a sense of security, which limits their progress and overall wellbeing.

Children's health needs are not consistently met. One child has a poor diet, and staff are not doing enough to support the child to make healthier choices. This compromises the child's health and wellbeing.

Despite the challenges, children are making some progress from their starting points in education. Both children enjoy learning and one child has recently returned to school following a prolonged absence.

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

Children are not safe in this home. A child reported feeling frightened of some staff and they said that they want to leave the home.

The safeguarding culture in the home is poor and safeguarding practice is inadequate. Staff do not understand or follow safeguarding procedures, placing children at significant risk of harm. Poor decision-making has resulted in unsafe staffing arrangements. During a recent serious incident, both children became distressed and one child was hurt by staff. The staff present at the time failed to recognise or

challenge unsafe practice or follow safeguarding escalation procedures. This poor response negatively impacted the children's welfare and undermined their sense of safety. Investigations into this incident are ongoing.

Since September 2025, there have been at least four occasions where children have been harmed by or have made allegations about harm caused by staff. Leaders have not taken timely action to safeguard children, ensure that there is clarity for staff about acceptable physical intervention practice, or challenge partner agencies when their responses have been delayed. Leaders have also failed to demonstrate professional curiosity to ensure that allegations made by children are fully explored. Consequently, outcomes of these allegations remain unclear, and opportunities to learn from them and safeguard children are missed. This has left children at continued risk of harm.

Staff are ill-equipped to respond appropriately to safeguard children and safety planning is poor. Risks identified at the time children move into the home are not always incorporated into children's risk management plans, and children's records are not updated following incidents. In addition, known risks, including children experiencing seizures, are not assessed or reflected in plans to help staff provide safe support to children.

Staff do not have the necessary skills, knowledge or experience to keep children safe. A child known to be at risk of ligature has not been adequately safeguarded. Some staff do not know the child well and lack awareness of this risk or how to manage it. The child's bedroom contains multiple potential ligature risks and leaders have failed to ensure that specialist advice they have been provided with is followed to mitigate these risks. While some action was taken during the inspection to increase safety, it remains a poorly managed risk.

The quality of staff record-keeping is poor. Children's records, including those relating to physical interventions, are not consistently completed as required. In addition, records do not always provide a full and accurate account of incidents, including when children have been hurt by staff. As a result, leaders are not aware of all incidents, and children's allegations arising from some incidents are not promptly addressed. Consequently, children are not protected, and staff practice goes unchecked and unchallenged.

Children's rights are poorly respected. Staff restrict children's access to an area of their home, and this is not reviewed to ensure if this restriction can be removed or adapted. Cutlery is also locked away, which reflects a blanket approach to risk management, with insufficient regard to children's individual needs.

The effectiveness of leaders and managers: inadequate

Leaders' oversight of the home and practice is persistently ineffective. Children have been harmed or have alleged harm by staff on several occasions, and leaders continually fail to ensure that children receive good-quality care. Leaders do not learn

from incidents, particularly when children move on due to staff being unable to keep them safe. Frequent leadership changes have further eroded effective oversight and direction, limiting the home's capacity to address long-standing shortfalls, including poor staff conduct. Since the home opened, children's care has been consistently below the required standards, resulting in limited progress in nearly all areas for children who have lived in the home. Leaders continually demonstrate a failure to learn and an inability to make necessary changes to ensure children's safety, security, positive outcomes and progress.

There is a poor practice culture in the home. Poor staff practice goes unnoticed and unchallenged by leaders. In addition, a social worker and a child's family member report that communication is poor, and they lack confidence in the ability of leaders to keep children safe, meet their needs and ensure safe care through staff practice.

Recording systems are ineffective, hard to navigate and disorganised. Children's records are dispersed across multiple documents. Not only has this had a detrimental impact on leaders' oversight, but it has also impacted on the safety of children, the quality of care, and the accuracy and completeness of records. Notably, records for two children who have moved on from the home were unavailable during the inspection as leaders did not know where they were. This serious failure in record-keeping indicates that children's recorded experiences are not valued.

Although staff report that they enjoy their roles, the support they receive from leaders is insufficient. Staff do not have regular, or meaningful reflective supervision and are not provided with relevant opportunities for learning, development and reflection. Furthermore, most newly recruited staff have not received an induction. The failure to ensure that staff are equipped with the necessary skills and knowledge compromises children's safety and wellbeing.

Leaders do not ensure that external partners, including placing authorities and Ofsted, are notified about all serious incidents occurring in the home. This weakens external oversight of children's experiences and their safety. In contrast, incidents that do not meet the threshold for notification have been shared with Ofsted. This inconsistency reflects leaders' and staff's lack of understanding of regulatory requirements. Leaders have also failed to ensure that the home's statement of purpose is accurate and up to date.

Due to the serious and widespread failures found during this inspection Ofsted suspended the home's registration.

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; 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; that the premises used for the purposes of the home are designed, furnished and maintained so as to protect each child from avoidable hazards to the child's health; and that the effectiveness of the home's child protection policies is monitored regularly. (Regulation 12 (1) (2)(a)(i)(iii)(v)(vi)(vii)(b)(d)(e)) The registered person must ensure that all staff understand, their roles and responsibilities in safeguarding children. This includes identifying, reporting and escalating concerns in line with procedures. The registered person must also ensure that all risks are assessed and that children's plans reflect these risks. The	26 June 2026

registered person must also ensure that staff follow children's plans in practice. Staff must also have the necessary skills, experience and knowledge to keep children safe, understand the risks they face, and take proactive action to reduce risks. In addition, the home environment must be safe for children to keep them safe in line with their individual needs.	
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; and 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'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)(e)(f)(h)) The registered person must ensure that there is effective oversight of the home and of the care provided to children. This includes ensuring that staff have the appropriate skills, knowledge, and experience to meet each child's individual needs, and that children	26 June 2026

receive care from staff who understand and can respond to those needs effectively. In addition, monitoring systems must be robust and effective in identifying shortfalls in staff practice. Where concerns are identified, leaders must take prompt and appropriate action to address these shortfalls to ensure positive outcomes for children. This requirement was made at the last inspection and is restated.	
In meeting the quality standards, the registered person must, and must ensure that staff— seek to involve each child’s placing authority effectively in the child’s care, in accordance with the child’s relevant plans; if the registered person considers, or staff consider, a placing authority’s or a relevant person’s performance or response to be inadequate in relation to their role, challenge the placing authority or the relevant person to seek to ensure that each child’s needs are met in accordance with the child’s relevant plans; and seek to develop and maintain effective professional relationships with such persons, bodies or organisations as the registered person considers appropriate having regard to the range of needs of children for whom it is intended that the children’s home is to provide care and accommodation. (Regulation (5) (a)(c)(d)) The registered person must ensure that effective working relationships are developed and maintained with children’s social workers. They must also demonstrate appropriate professional challenge where responses from safeguarding partners are delayed, ensuring that children are safeguarded and their welfare is consistently prioritised.	26 June 2026
The care planning standard is that children— receive effectively planned care in or through the children’s home; and have a positive experience of arriving at or moving on from the home. In particular, the standard in paragraph (1) requires the registered person to ensure—	26 June 2026

plan for, and help, each child to prepare to leave the home or to move into adult care in a way that is consistent with arrangements agreed with the child's placing authority;

that, subject to regulation 22 (contact and access to communications), contact between each child and the child's parents, relatives and friends, is promoted in accordance with the child's relevant plans. (Regulation 14 (1)(a)(b) (2)(iii)(d))

The registered person must ensure that when children move on from the home, this is a positive and well-planned experience for them, with appropriate preparation and support.

In addition, the registered person must ensure that relationships with individuals who are important to the child are promoted and supported.

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.

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

that staff help each child to—

achieve the health and well-being outcomes that are recorded in the child's relevant plans;

understand the child's health and well-being needs and the options that are available in relation to the child's health and well-being, in a way that is appropriate to the child's age and understanding;

understand and develop skills to promote the child's well-being.

(Regulation 10 (1) (a)(b)(c) (2)(a)(i)(ii)(iv))

The registered person must ensure that children are supported to eat healthy and nutritious food. In addition, specialist advice must be followed to promote the health and wellbeing of children.

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The registered person must ensure that— children can access all appropriate areas of the children’s home’s premises; and any limitation placed on a child’s privacy or access to any area of the home’s premises— is intended to safeguard each child accommodated in the home; is necessary and proportionate; is kept under review and, if necessary, revised; and allows children as much freedom as is possible when balanced against the need to protect them and keep them safe. (Regulation 21 (b)(c)(i)(ii)(iii)(iv))	26 June 2026
The registered person must— ensure that each employee completes an appropriate induction; The registered person must ensure that all employees— undertake appropriate continuing professional development; receive practice-related supervision by a person with appropriate experience. (Regulation 33 (1)(a) (4)(a)(b))	26 June 2026
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; a description of the measure and its duration; details of any methods used or steps taken to avoid the need to use the measure;	26 June 2026

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))	
The registered person must maintain records ("case records") for each child which— include the information and documents listed in Schedule 3 in relation to each child; are kept up to date; and Case records must be kept— in cases not falling within sub-paragraph (a), for 75 years from the child's date of birth; securely in the children's home during the period when the child to whom the case records relate is accommodated there; and in a secure place after the child has ceased to be accommodated in the home. (Regulation 36 (1)(a)(b) (2(b)(c)(d))	26 June 2026
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 (e))	26 June 2026

The registered person must compile in relation to the children's home a statement ("the statement of purpose") which covers the matters listed in Schedule 1.

The registered person must—

keep the statement of purpose under review and, where appropriate, revise it; and

notify HMCI of any revisions and send HMCI a copy of the revised statement within 28 days of the revision.

Subject to paragraph (6), the registered person must ensure that the home is at all times conducted in a manner which is consistent with its statement of purpose. (Regulation 16 (1) (3)(a)(b) (5))

The registered person must ensure that the home is always conducted in line with its statement of purpose. The statement of purpose must contain up-to-date and accurate information regarding the experience and qualifications of all staff working in the home.

26 June 2026

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: 2729820

Provision sub-type: Children's home

Registered provider: TS Children Services Ltd

Registered provider address: Suite F3, Deansgate Offices, 62–70 Tettenhall Road, Wolverhampton WV1 4TH

Responsible individual: Ashley Smith

Registered manager: Post vacant

Inspector

Amy Richards, Social Care Inspector
Hayley Booth, Social Care Inspector

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