

2732719

Registered provider: Westmorland and Furness Council

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home is owned and managed by a local authority. It provides care for up to four children who experience social and emotional difficulties.

The home and manager registered with Ofsted on 1 April 2023.

At the time of this inspection, three children were living at the home.

Inspection dates: 16 and 17 September 2025

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	good
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The children's home provides effective services that meet the requirements for good.

Date of last inspection: 11 June 2025

Overall judgement at last inspection: Inadequate

Enforcement action since last inspection:

This home was judged inadequate at the full inspection on 11 and 12 June 2025. Serious concerns were identified in relation to safeguarding practices.

Following the inspection, a compliance notice was issued under Section 22A of the Care Standards Act. This was issued under regulation 12, the protection of children standard.

A monitoring visit carried out on the 5 August 2025 found that all areas of compliance had been addressed by the provider.

Recent inspection history

Inspection date	Inspection type	Inspection judgement
11/06/2025	Full	Inadequate
26/11/2024	Full	Good
24/10/2023	Full	Good

Inspection judgements

Overall experiences and progress of children and young people: good

Transitions for children moving into the home are well planned. Managers work with professionals to amend plans with children's evolving needs in mind. This ensures that children are kept safe. Staff are working hard to understand children's behaviours and needs. Children have started to develop trusting relationships with staff and are seeking reassurance.

Two of the children living in the home are in full time education. One child has made significant progress recently, completing exams and securing a place at college. Staff are working with professionals to understand another child's anxieties around education. Multi-disciplinary meetings take place to consider the barriers for the child and how to ensure that their education needs are met. The child has an education planner in place, however, this does not demonstrate the structured learning objectives or outcomes involved. The lack of formal learning impacts on the child's routine and socialisation.

Children's health needs are well met. There is structured support in place around one child's poor sleep hygiene. Improvements have been made because of the clear guidance and expectations in place for staff to work to. Managers have used analysis of the child's background and behaviours to support staff understanding. This has helped to address anxieties for the child. There is ongoing involvement for staff to develop their understanding and support for another child's developmental needs following a referral to specialist support.

Children are actively engaging in activities which reflect their interests. This includes one to one wild camping trips with a member of staff, touring football grounds and all children getting involved in learning how to play golf. There was also a well-planned summer holiday for all the children with visual plans to support children's understanding and routines.

Children are supported safely to spend time with people who are important to them. One child's social worker commended the team's collaborative approach to progress the child's time spent with family to become more natural.

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

Children enjoy living in the home and feel safe to express themselves. Staff support children with alternative strategies to manage their feelings. Children have shown increased maturity in making positive choices and setting good examples to their younger peers.

Risk assessments and safety planning are robust. Plans are up to date and are easy to understand. They clearly explain the level of risk for children and provide clear strategies for staff. Managers and staff are developing their understanding of a child who is new to

their care and work is ongoing to ensure that their care of the child is consistent. There are further meetings planned to consider the most effective strategies to support the child with input from the emotional health and wellbeing team.

There has been a significant reduction in children going missing from the home. One child was able to explain the triggers for their behaviour. They explained how staff are supporting them to ensure that their wishes and feelings are being heard and that they understand their rights.

Physical restraint has not been used in the home until recently. The measure was used as a last resort to prevent a child from harming themselves and others. Records of the incident did not clearly explain the lead up to the use of the measure. Follow up discussions with staff and the child were not carried out effectively which demonstrates that the manager's review was not robust. The manager has plans in place to work with the staff team in an upcoming development day to learn from this and improve practice.

Consequences for children's behaviours are used to positive effect. The managers review of measures is effective and children's feedback is considered.

The effectiveness of leaders and managers: good

The manager has well developed relationships with the children in her care and advocates well for them. She escalates concerns to other professionals and agencies effectively, highlighting the impact on children.

The manager has developed further in her role. Her oversight of the home is reflective and detailed. Managers have carried out good quality analysis and research around how staff can support improvements with a child's poor sleep hygiene.

There is a stable and experienced staff team in place. Staff feel well supported by managers and are confident to share their views about the home. The team is well trained in areas to support children's specific needs such as bereavement and loss and neurodiversity.

Professionals were complimentary about the team's communication and collaborative approach. This was highlighted around the progression of one child's family time arrangements and with education planning. One child's social worker raised how they had not been informed about an incident which took place the day before their visit to the home. The child then shared this information themselves before staff were able to.

Staff meetings and supervisions take place regularly. The quality of recordings varies significantly. When issues around the care of children are raised, recordings demonstrate little in the way of how staff are supported to consider resolutions. The manager sought feedback from children, colleagues and professionals for staff appraisals however it is not evident that this has been discussed in the recordings.

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, 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 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; take part in activities, and attend any appointments, for the purpose of meeting the child's health and well-being needs; and understand and develop skills to promote the child's well-being; that each child is registered as a patient with a general medical practitioner and a registered dental practitioner; and that each child has access to such dental, medical, nursing, psychiatric and psychological advice, treatment and other services as the child may require. (Regulation 10 (1)(a)(b)(c) (2)(i)(ii)(iii)(iv))	31 January 2026

The registered person must ensure that staff understand how to support children to engage in specific physical exercises to improve their speech and language therapy outcomes.	
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; 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 ensure that records of incidents provide a full description of the measures used, including the transitions between measures.	30 November 2025

Debriefs with staff and discussions with children must not be carried out by any person involved in the incident.

Any child who has been restrained should be given the opportunity to express their feelings about their experience of the restraint as soon as is practicable, ideally within 24 hours of the restraint incident, taking the age of the child and the circumstances of the restraint into account. In some cases children may need longer to work through their feelings, so a record that the child has talked about their feelings should be made no longer than 5 days after the incident of restraint.

Managers and staff must review the use of control, discipline and restraint to identify effective practice and respond promptly where any issues or trends of concern emerge. The review should provide the opportunity for amending practice to ensure it meets the needs of each child.

Recommendations

- The registered person should ensure that children are supported to regain their confidence in education and be engaged in suitable structured activities. The objectives and outcomes of activities should be recorded to demonstrate the child's learning. ('Guide to the Children's Homes Regulations, including the quality standards', page 28, paragraph 5.15)
- The registered person should ensure that they work with children's social workers, keeping them informed in a timely way about any incidents involving the child. ('Guide to the Children's Homes Regulations, including the quality standards', page 11, paragraph 2.5)
- The registered person should ensure that annual appraisals of staff take into account, where reasonable and practical, the views of other professionals who have worked with the staff member over the year and children in the home's care. ('Guide to Children's Homes Regulations, including the quality standards', page 61, paragraph 13.5)
- The registered person should maintain good employment practice by ensuring that records of supervisions, team meetings and appraisals are of consistent quality and detail, particularly where this relates to the care of children. ('Guide to the Children's Homes Regulations, including the quality standards', page 61, paragraph 13.1)

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: 2732719

Provision sub-type: Children's home

Registered provider address: Westmorland and Furness Council, Town Hall, Duke Street, Barrow in Furness, Cumbria LA14 2LD

Responsible individual: Elizabeth Curtis

Registered manager: Catherine Jones

Inspector

Andrea Foreman, Social Care Inspector

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