

2753006

Registered provider: Northridge Care Group Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

The home is owned and managed by a private provider. It provides care for up to 2 children who may experience social and emotional difficulties and/or special educational needs and/or disabilities (SEND)

The manager has applied to register with Ofsted. At the time of this inspection, 2 children were living at the home and were spoken to by the inspector.

Inspection dates: 10 and 11 March 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	good
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The children's home provides effective services that meet the requirements for good.

Date of last inspection: 2 July 2024

Overall judgement at last inspection: outstanding

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
02/07/2024	Full	Outstanding

Inspection judgements

Overall experiences and progress of children and young people: good

Children have excellent relationships with core staff who know them well. Interactions between them are genuine and meaningful. Staff describe 'loving' the children and speak about them with genuine care and affection. Children describe staff to be 'like family.'

Children take part in a wide range of activities with staff both inside and outside of the home. Children are encouraged to join they enjoy and try new experiences. Children talk about 'doing loads' with staff and broadening their childhood experiences. Staff take photos of the children enjoying activities and include these in their memory books.

Education provision is variable. One child attends school full time and is making excellent progress. Their Head Teacher spoke proudly about the child's academic and personal achievements since living at the home. For another child, online education is in place while a suitable education setting is identified to meet their needs. Staff encourage physical activity and educational trips to support the child's education.

Children are in good health and there are no unmet health needs. Staff manage medication safely, with robust systems for storage and administration. Children are taken to regular routine health appointments. When concerns arise for children's emotional health, staff make effective use of the in-house therapy team. This includes one to one sessions directly with children, as well as support for staff on strategies that work best for the individual child.

When children are new to the home, staff welcome them with care and sensitivity. They adopt a nurturing approach and understand the impact of significant change. Where possible, children are provided the opportunity to meet staff beforehand and get to know them. Staff prepare children's bedrooms with items they like to help them settle quickly. When children move on from the home, staff help to prepare them for the move. One child moved to supported accommodation and describes how staff helped them 'set up' and settle into their new home. Staff stay connected with the child and are part of their lifelong links. However, the child expressed disappointment that senior managers did not say goodbye. This does not support children to feel respected and valued.

When concerns for children online arise, staff respond appropriately. They complete necessary monitoring of children's devices. However, one child does not fully understand why particular apps are being monitored. Additionally, these checks take place without the child present. This does not ensure that children's privacy and dignity are respected.

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

Staff have the necessary skills, knowledge and understanding they need to help keep children safe. Detailed information from placing authorities informs staff practice. Staff undertake direct work with children to help them to develop their knowledge and understanding of how to keep themselves safe. Staff work alongside external agencies

and the in-house clinical team to develop and review strategies that staff use to help keep children safe. Risk assessments are detailed with guidance for staff to follow.

Children's behaviour is well managed by staff using rewards and incentives. Children respond positively to praise and behavioural incidents are rare. Consequences are rarely used; when implemented, they are proportionate and appropriate to the behaviour displayed. There has been one occasion where a child has been physically held by staff as a last resort to prevent them from harming themselves.

Staff respond quickly to concerns linked to self-harm. They remove any items that children could use to harm themselves and talk to children about their feelings. Children receive timely support from the in-house therapist, who spends time with children exploring their thoughts and feelings. This approach helps to maintain a safe environment while work is completed with children to understand their emotions.

Staff complete a wide range of direct work with children. This helps to educate children about risk and learn necessary life skills that they will need in later life. Work is tailored to the individual needs of each child and delivered using creative methods to help children to understand the topic and how it relates to them.

There has been one incident where a child left the home under the influence of substances. Staff did not take all possible action to prevent this. In addition, two-bedroom searches related to concerns about substance use were not completed in a timely manner. Although the child did not come to significant harm, these shortfalls had the potential to place them at risk. The manager has addressed these issues and there have been no further incidents of this nature.

The effectiveness of leaders and managers: good

Since the last inspection, the registered manager left her position, and a new interim manager is now in post. He is child centred and has a good understanding of children's needs and their history. The manager knows the strengths and areas of development for the home.

Multi-agency working is effective. Professionals and family members say that they are happy with the care provided to children and describe excellent communication from the manager and staff. One foster carer said, 'The staff are amazing, they know [name of child] so well and you can tell they are so fond of [name of child].' One social worker describes the home and staff as 'really family oriented.'

The manager and staff advocate on children's behalf to ensure that their views are heard and acted on by decision makers. The manager escalates his concerns when he feels children's needs are not being met effectively. Children describe the manager to be approachable and that 'he gets things sorted.' This ensures that children's views and wishes are heard and valued when decisions are being made about their care.

Staff attend a range of training that helps them to carry out their roles and responsibilities in caring for and safeguarding children. Bespoke training and workshops are provided to reflect the specific needs of the children living in the home.

Staff benefit from regular, good-quality supervision and team meetings. These provide opportunities to discuss the care of children, reflect on practice, and address any areas of shortfall.

Staff report variable experiences of support and presence from leaders and managers. Staff say that the manager is supportive and approachable, however, his presence at the home is unstructured. Staff also report a lack of support and visibility from the responsible individual. The home's care director is aware of these concerns and has plans in place to address these shortfalls.

Complaints are acknowledged and managed appropriately by the manager. Records show clear actions taken in response to concerns. However, in one complaint, although the manager acted promptly, the incident was not treated as an allegation. As a result, it was not referred to the local authority designated officer in line with safeguarding procedures. The manager has since reflected on his decision-making, and steps are being taken to address this shortfall.

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 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; 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. (Regulation 12 (1) (2)(a)(v)(vi)(vii)) The registered person must ensure that staff take appropriate action when children use substances to ensure their safety and wellbeing. The registered person must ensure that any required searches of children's bedrooms are carried out without delay. The registered person must ensure that all required safeguarding professionals are promptly notified of concerns in line with safeguarding procedures.	10 April 2026
The quality and purpose of care standard is that children receive care from staff who—	10 April 2026

understand the children's home's overall aims and the outcomes it seeks to achieve for children;

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—

ensure that staff—

protect and promote each child's welfare; and

treat each child with dignity and respect.

(Regulation 6 (1)(a)(b) (2)(b)(ii)(iii))

In particular, the registered person must ensure that staff protect children's privacy and dignity when carrying out any necessary monitoring of children's devices. This includes ensuring that staff complete this monitoring in the child's presence.

In particular, the registered person must ensure that children feel valued and respected. This includes when children are moving on from the home.

Recommendations

- The registered person should ensure that those with a leadership and/or management role are visible and accessible to staff and able to deliver their leadership and/or management responsibilities. This includes ensuring that staff views are listened to and acted upon by leaders and managers. ('Guide to the Children's Homes Regulations, including the quality standards,' page 52, paragraph 10.7)

Information about this inspection

The inspector has 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: 2753006

Provision sub-type: Children's home

Registered provider: Northridge Care Group Limited

Registered provider address: Richard House, 9 Winckley Square, Preston, Lancashire PR1 3HP

Responsible individual: Paula Normanton

Registered manager: post vacant

Inspector

Leanne Carr, Social Care Inspector

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