

2781999

Registered provider: Enable Living Solutions Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home is owned by a private provider and is registered to provide care for two children with social and/or emotional difficulties and learning disabilities.

The home and manager registered in February 2025. This was the home's first inspection. The manager holds a level 5 qualification in leadership and management. The manager was not present at the time of the visit.

No children were living in the home at the time of the inspection. The child who previously lived in the home chose not to take part in the visit.

Inspection dates: 15 and 16 September 2025

Overall experiences and progress of children and young people, taking into account	requires improvement to be good
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How well children and young people are helped and protected	requires improvement to be good
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The effectiveness of leaders and managers	inadequate
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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: not previously inspected

Overall judgement at last inspection: not applicable

Enforcement action since last inspection: not applicable

Inspection judgements

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

Since the home was registered, one child has moved into and out of the home. Staff did not fully understand the child's complex needs when they arrived. This affected the quality of care provided to the child and their experience of living in the home.

The child moved into the home in an unplanned way, which lacked consideration for their individual needs. There was insufficient thought given to how the move might affect the child emotionally. This lack of planning contributed to serious incidents. These included multiple police involvements and an overnight detention for the child.

The ending of the child's time at the home was poorly managed and lacked a child-centred approach. The child was not given the opportunity for closure, such as saying goodbye to staff they had formed relationships with. Feedback from professionals indicated that the process was confusing and reactive, with little regard for the emotional impact on the child.

Despite these concerns, staff demonstrated strengths in promoting family relationships for the child. The child was supported to spend meaningful time with family members who were important to them. Staff advocated for this time, ensuring the child's voice was heard and their wishes respected.

Staff supported the child's education well. They ensured consistency by taking the child a considerable distance to school and working closely with school staff. This helped maintain some stability in the child's daily routine at a time of significant change and disruption.

Staff supported the child to engage in their personal interests, including sports and leisure activities. The child was encouraged to attend local football training, and plans were made for the child to watch the national team play. In addition, staff supported the child's enjoyment of swimming, visiting the local indoor water park regularly.

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

Behaviour management strategies are overly reliant on negative consequences, with limited use of positive reinforcement. This reactive approach did not support the child to understand expectations or develop positive behaviours. As a result, opportunities to build a nurturing and supportive environment were missed. Some staff lack confidence, which led to an over-reliance on police intervention during challenging situations.

Physical interventions have occurred frequently. These were generally proportionate and used as a last resort. Leaders and managers routinely spoke to staff to following

incidents. However, they did not consistently ensure that post-incident reflection led to meaningful learning. For example, in one case, the rationale for restraining the child in their bedroom was not sufficiently explored. Debriefs with the child were not consistently adapted to their individual needs, limiting their effectiveness and missing opportunities to promote emotional development and resilience.

There have been three allegations made within the home. On each occasion, external safeguarding procedures were appropriately followed, and information was shared with relevant professionals. However, internal safeguarding policies were not consistently adhered to. In one case, there was no written record of an allegation, which is contrary to the home's own procedures. Additionally, restorative work between staff and the child was not undertaken following serious allegations. While no harm was caused to the child, the absence of restorative practice undermines efforts to rebuild trust and promote emotional safety.

Leaders and staff have taken some positive steps to improve risk management strategies. A safety plan had been developed in collaboration with the child, which reflected their known triggers and warning signs. While the strategies were not always effective in de-escalating situations, the plan provided staff with clear guidance on how best to support the child. This demonstrates a commitment to promoting safer responses to challenging behaviour.

Recruitment processes are robust and consistently follow safer recruitment practices. Only suitably vetted and qualified individuals are employed.

The effectiveness of leaders and managers: inadequate

The registered manager does not consistently lead and manage the home in line with its stated ethos and nurturing approach. On one occasion the manager responded in a punitive manner to the child while they were in police custody. This response demonstrates a lack of understanding of the child's emotional needs and anxieties and the principles of trauma-informed care.

There has been a lack of effective collaboration between the registered manager and senior leaders. For example, the manager made the decision to admit the child to the home without consulting the responsible individual. This lack of communication and oversight undermines the robustness of placement planning and compromises the quality of decision-making. Senior leaders have recognised this shortfall and ensured learning has taken place to improve the process moving forward.

Staff have completed a range of mandatory training. However, the registered manager did not ensure that specific learning and development opportunities targeted to meet the individual needs of the child were provided in a timely manner. As a result, staff were not equipped with the necessary knowledge and skills to provide effective care. Although some specialist training was provided later, this reactive approach does not

reflect proactive leadership or a commitment to ensuring staff are fully prepared to support the child from the outset.

When staff have been outside of timescales for completing their qualifications, the manager has not implemented clear or timely plans to ensure they meet the required standards as quickly as possible. This lack of oversight risks delaying staff development and may impact the quality of care provided.

The registered manager has not ensured compliance with regulation when completing a review of the quality of care. The report lacks meaningful evaluation, fails to identify key areas for improvement and does not consider the views of the child or other relevant people. This limits the home's capacity to drive continuous improvement and to ensure that care consistently meets the individual needs of children.

Staffing in the home has remained stable despite ongoing challenges. This supported the child in forming some trusted relationships with familiar adults. Staff report feeling well supported by the manager and speak positively about the team culture.

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— use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13 (1)(a)(b) (2)(h)) This specifically relates to the manager's responsibility to ensure that effective systems are in place to promote learning and reflection following incidents involving children. Additionally, it is important that any follow-up work with children is completed in a way that aligns with their individual needs.	28 October 2025
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. (Regulation 13 (1)(a)(b) (2)(a))	28 October 2025

This specifically relates to the registered manager's duty to ensure that care is delivered in accordance with the home's stated aims as outlined in its statement of purpose. This also relates to ensuring that behaviour management approaches are non-punitive and aligned with best practice.	
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; 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— 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)(iv)) This specifically relates to the registered manager's duty to ensure that children's individual needs are clearly understood and that staff possess the necessary skills and knowledge to meet those needs effectively.	28 October 2025
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— that arrangements are in place to—	28 October 2025

ensure the effective induction of each child into the home; manage and review the placement of each child in the home; and 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. (Regulation 14 (1)(a)(b) (2)(b)(i)(ii)(iii)) This specifically relates to the registered manager's responsibility to ensure that any children moving into and out of the home have positive experiences and are supported by effective planning and preparation, taking into account children's individual needs.	
The registered person must complete a review of the quality of care provided for children ("a quality of care review") at least once every 6 months. In order to complete a quality of care review the registered person must establish and maintain a system for monitoring, reviewing and evaluating— the quality of care provided for children; the feedback and opinions of children about the children's home, its facilities and the quality of care they receive in it; and any actions that the registered person considers necessary in order to improve or maintain the quality of care provided for children. After completing a quality of care review, the registered person must produce a written report about the quality of care review and the actions which the registered person intends to take as a result of the quality of care review ("the quality of care review report"). The registered person must— supply to HMCI a copy of the quality of care review report within 28 days of the date on which the quality of care review is completed; and	28 October 2025

make a copy of the quality of care review report available on request to a placing authority, if the placing authority is not the parent of a child accommodated in the home. The system referred to in paragraph (2) must provide for ascertaining and considering the opinions of children, their parents, placing authorities and staff. (Regulation 45 (1) (2)(a)(b)(c) (3) (4)(a)(b) (5)) This relates specifically to the registered manager's responsibility to ensure the report includes meaningful evaluation and clearly identifies key areas for improvement. Additionally, the report should incorporate feedback from children and other relevant individuals to reflect the quality of care being provided.	
For the purposes of paragraph (3)(b), an individual who works in the home in a care role has the appropriate qualification if, by the relevant date, the individual has attained— the Level 3 Diploma for Residential Childcare (England) ("the Level 3 Diploma"); or a qualification which the registered person considers to be equivalent to the Level 3 Diploma. The relevant date is— in the case of an individual who starts working in a care role in a home after 1st April 2014, the date which falls 2 years after the date on which the individual started working in a care role in a home; or in the case of an individual who was working in a care role in a home on 1st April 2014, 1st April 2016. The registered person may defer the relevant date if the individual— does not work, or has not worked, in a care role in a home for a prolonged period; or works, or has worked, in a care role in a home on a part-time basis. (Regulation 32 (4)(a)(b) (5)(a)(b) (6)(a)(b))	28 October 2025

This specifically pertains to the responsibility of the registered manager to ensure that robust plans are in place to support staff in completing their level 3 diploma in residential childcare, particularly at the point of employment where it is known that they are outside the required regulatory timescales.	
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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: 2781999

Provision sub-type: Children's home

Registered provider: Enable Living Solutions Limited

Registered provider address: 6 Ebbw Vale Road, Irthlingborough, Wellingborough
NN9 5PG

Responsible individual: Gareth Dawson

Registered manager: Philip Allcock

Inspector

Carl Wilton, 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
W: www.gov.uk/ofsted

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