

SC035477

Registered provider: Lancashire County 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 three children who may experience social and emotional difficulties.

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

The manager registered with Ofsted in June 2018.

Inspection dates: 18 and 19 November 2025

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: 25 February 2025

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
25/02/2025	Full	Good
19/03/2024	Full	Good
23/03/2023	Full	Good
22/03/2022	Full	Good

Inspection judgements

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

Children report having mixed experiences of living at the home. Two children informed the inspector that they do not feel that their views are listened to or acted on. This limits their ability to contribute meaningfully to decisions made about their care. Both children stated that they have raised complaints that have not been responded to, leaving them feeling that their concerns are not taken seriously. Managers report that they respond to children's concerns verbally; however, this approach does not ensure that children fully understand the decisions made. Furthermore, it does not provide children with the opportunity to challenge decisions through the formal complaints process.

Staff support children to develop healthy routines and make positive life choices. They ensure that children attend routine health appointments, which promotes their health. However, staff do not consistently administer children's medication in line with prescribed instructions. Medication records are incomplete and do not provide an accurate account of when medication has been administered, nor do they record the actions taken when children refuse to take prescribed medication. These shortfalls in practice have not been identified or addressed by managers. As a result, some children's health needs are not being met, and unsafe staff practice has continued.

Staff support children to develop a positive attitude towards learning. When children do not access education in line with their individual plans, staff work with education professionals to resolve this quickly. Staff support children to be ambitious for their future. For example, staff support children to visit colleges and have helped one child to apply for employment.

Staff work proactively to prevent children from experiencing unplanned endings to their time at the home. When one child moved out, a member of staff provided support in their new home for two weeks. This intervention helped the child to settle and ensured that they had the reassurance of a familiar adult during the transition.

Two children have pets and staff provide appropriate support to ensure that they are cared for responsibly. This enables the children to retain pets they had prior to moving into the home and promotes the development of age-appropriate responsibilities.

Children engage in hobbies and activities that reflect their individual interests, which enhances their self-confidence and builds on their talents. In addition, staff nurture children's relationships with their families and connected persons. This helps children to maintain important relationships and strengthens their support networks for the future.

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

Staff respond appropriately to immediate risks to children. However, safeguarding practice aimed at reducing individual risks is inconsistent. While risks for some children reduce as a result of living at the home, their plans do not always provide staff with clear guidance on how to keep them safe. For example, staff are uncertain about when they should carry out searches of one child's bedroom. In addition, changes to children's care are sometimes made without corresponding updates to their plans. As a result, staff do not fully understand the reasons for these changes, which undermines the effectiveness of safeguarding practice.

When staff search children's bedrooms, these are not always conducted sensitively or with the child's knowledge. Furthermore, staff do not consistently record when bedroom searches take place or whether any items have been removed. This lack of recording and communication does not help children to understand the decisions made about their care.

Managers and staff make significant effort to manage risks between children at the home. This includes multi-agency planning, the identification of safety plans, and, when required, deploying additional staff. Despite these measures, some children have still been exposed to frightening behaviour, which has negatively impacted their experiences of living at the home.

Staff have important conversations with children to help them understand and manage risks. These discussions support children to develop strategies to manage difficult feelings safely, and for some children, this reduces incidents of risk-taking. However, the records of these conversations vary in quality. As a result, children's views and how well children have understood these important conversations is not always clear.

Children who go missing from home experience a coordinated response from staff. On their return, children are offered the opportunity to speak with an independent person. This helps ensure that children are located quickly and that staff understand the reasons for them going missing. Staff rarely hold children, and when they do, it is only as a last resort when necessary to keep them safe. Children are given the opportunity to share their views, which helps to ensure that practice in this area remains safe.

Staff support children to take manageable risks in line with their stage of development, such as using public transport and cooking. This enables children to develop important life skills and build their independence. One social worker reported that staff have been proactive in helping one child to identify and understand their emotions. As a result, the child now shares their worries with staff, which has reduced their risk-taking behaviour and led to a decrease in incidents of self-injury.

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

The registered manager has been absent from the home due to unforeseen circumstances and interim management arrangements are in place. Managers have worked hard to minimise the impact of these changes on staff and the care provided to children.

The quality of management oversight of the care provided to children is inconsistent. At times, there have been gaps in managerial curiosity, resulting in missed opportunities to prevent future incidents. For example, the manager did not explore how one child obtained a screwdriver from the staff office, which subsequently led to an incident in the home. In addition, shortfalls in staff recording have not been identified by managers. These include out-of-date information in children's plans and errors in medication records.

Managers know the children well and have worked hard to establish relationships built on trust. During the inspection, children were observed seeking out staff and managers to talk about their day. Children presented as relaxed and comfortable in their interactions. Managers roles model the positive relationships that staff are expected to develop with children, reinforcing a culture of care and trust within the home.

Staff report that they enjoy working at the home and feel well supported by the management team. Managers ensure that there are a sufficient number of staff to meet the needs of the children. Induction arrangements are effective, and staff have access to a range of training and learning opportunities. This enables them to develop the knowledge and skills required to meet children's needs. Staff also benefit from regular supervision and team meetings, which provide opportunities for reflection and professional development.

Feedback from professionals is overwhelmingly positive. They report that managers share regular updates about children and contribute effectively to multi-agency planning meetings. This collaborative approach creates a strong team around the child and ensures that evolving risks are quickly identified and understood by the wider multi-agency team.

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 children's views, wishes, and feelings standard is that children receive care from staff who— take their views, wishes and feelings into account in relation to matters affecting the children's care and welfare and their lives. In particular, the standard in paragraph (1) requires the registered person to— ensure that staff— help each child to express views, wishes and feelings; help each child to understand how the child's views, wishes and feelings have been taken into account and give the child reasons for decisions in relation to the child; regularly consult children, and seek their feedback, about the quality of the home's care; keep the children's guide and the home's complaints procedure under review and seek children's comments before revising either document. (Regulation 7 (1)(c) (2)(a)(ii)(iii)(iv)(c)) In particular, the registered person must ensure that children's views about their care are routinely sought and that children are supported to understand how their views have been acted on. The registered person must ensure that the complaints procedure is kept under review. Children's complaints must be recorded, and children must be informed of the outcome of their complaint.	2 January 2026
The protection of children standard is that children are protected from harm and enabled to keep themselves safe.	2 January 2026

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; 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)(i)(b)) In particular, the registered person must ensure that children’s plans contain clear strategies for staff to follow to reduce risks to children. The registered person must ensure that staff understand and act in accordance with children’s risk management plans.	
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; ensure that staff work as a team where appropriate; ensure that the home’s workforce provides continuity of care to each child; 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)(e)(h)) In particular, the registered person must identify and address any shortfalls in staff practice and record-keeping.	2 January 2026

The registered person must ensure that there are systems in place to monitor and review management arrangements so that these remain safe and effective for children.	
The registered person must make arrangements for the handling, recording, safekeeping, safe administration, and disposal of medicines received into the children's home. In particular the registered person must ensure that— medicine which is prescribed for a child is administered as prescribed to the child for whom it is prescribed and to no other child; and a record is kept of the administration of medicine to each child. (Regulation 23 (1) (2)(b)(c)) In particular, the registered person must ensure that staff administer children's medication as prescribed and maintain accurate records of medication which has been administered. The registered person must ensure that if children refuse to take prescribed medication, staff adhere to the medication policy and individual children's plans.	5 December 2025

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: SC035477

Provision sub-type: Children's home

Registered provider address: Lancashire County Council, PO Box 100, Preston PR1 0LD

Responsible individual: Emma McCracken

Registered manager: Jonathan Sewell

Inspector

Sally Griffiths, Social Care Inspector

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