

# SC448209

Registered provider: Amberleigh Care Limited

Full inspection

Inspected under the social care common inspection framework

#### Information about this children's home

This home is operated by a private company and provides specialist therapeutic care for up to 13 boys.

The manager registered with Ofsted in April 2020 and is suitably qualified.

The provider also has a school on the same site, which provides education for children living at the home. The inspectors only inspected the social care provision on this site.

Inspection dates: 21 and 22 July 2025

Overall experiences and progress of good children and young people, taking into account

How well children and young people are good

helped and protected

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

good

Date of last inspection: 4 June 2024

The effectiveness of leaders and managers

**Overall judgement at last inspection:** good

**Enforcement action since last inspection:** none

Inspection report for children's home: SC448209

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# **Recent inspection history**

Inspection date	Inspection type	Inspection judgement
04/06/2024	Full	Good
24/10/2023	Full	Good
09/11/2022	Full	Outstanding
22/02/2022	Full	Good



## **Inspection judgements**

#### Overall experiences and progress of children and young people: good

At the time of this visit, 12 children were living at the home. All were seen by the inspectors.

Children benefit from a nurturing and committed team of staff who have high aspirations for children's well-being and development. Relationships between staff and children are positive. Staff show children appropriate care and affection, and this contributes to a warm and supportive environment. Children say that they enjoy living at the home and that they value the opportunities and experiences available to them.

Children make progress across all areas of their lives. This progress is supported by effective multi-agency collaboration. The integration of education, care and therapeutic services is a key strength of this home. Professionals across disciplines maintain clear communication regarding children's needs, achievements and any emerging concerns. This ensures a cohesive and responsive approach to children's care.

Education is embedded into children's care and their daily routines. Teaching staff engage with children each morning to discuss the day ahead, reinforcing the importance of learning. Children who were previously reluctant to engage with education are now attending regularly and expressing aspirations for their future.

Therapeutic input for children is well integrated and impactful. Children consistently access weekly sessions, and feedback from social workers indicates that these contribute meaningfully to behavioural and emotional changes in children.

Staff are proactive in encouraging children to participate in a range of activities both in the home and the wider community. While some children are engaged in specific interests, such as rugby or attending a youth club, there is scope to broaden opportunities for others, particularly through groups that promote individual socialisation and skill development.

Children are actively involved in decisions about their care. They are empowered to chair meetings and make requests, which staff listen to and act on. This demonstrates a culture of respect and inclusion.

Where appropriate, children are supported to spend time with and reintegrate with their families. This process is carefully assessed to ensure safety and suitability, allowing children to spend time at home in a structured and supported manner.

Staff do not fully test out children's independence skills and safety in preparation for children moving on from the home. This does not ensure that children moving to semi-independent or independent living are always as well prepared as they could be.



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

Staff have a clear awareness and understanding of risks to children and take appropriate action to reduce any potential harm. Risk management plans are detailed and regularly reviewed, and staff work in line with these, ensuring that their responses remain effective.

Staff work collaboratively with education and therapy professionals to develop individualised programmes that support children in understanding their past experiences. These programmes also help children to learn about healthy relationships, acceptable behaviours and the risks associated with their vulnerabilities. As a result, children are increasingly able to manage their emotions and make safer choices.

Children are generally well behaved and show respect towards others. When disputes arise, staff intervene promptly and effectively to de-escalate situations. There are no concerns about bullying, and children report feeling safe.

Some children display self-harming behaviours. Staff manage this sensitively, working closely with therapeutic services to help children develop safer coping strategies. This has led to a reduction in incidents over time.

Staff use physical intervention only when necessary to keep children safe. Following any incident, staff support children to reflect on what happened and why. Managers monitor patterns and trends in behaviour and use this analysis to inform practice. This has led to improved support for children during trigger times and a reduction in the need to use physical intervention to keep children safe.

The manager takes allegations and concerns seriously. These are reported promptly to those who need to know and investigated thoroughly. Where appropriate, external agencies such as the police and local area safeguarding teams are involved, ensuring a robust safeguarding response.

On occasions, medication errors have occurred due to human error. These incidents have not resulted in harm to children. Medical advice is sought when needed and additional staff training put in place. Lessons learned exercises following these incidents have led to improved practice.

Some children have complex health needs requiring regular medication and monitoring. While staff are attentive to these needs, there are shortfalls in the recording of fluid intake for one child with a specific medical requirement. This poses a potential risk to the child's health.

Staff are recruited safely, including those from overseas. However, while right to work checks are completed, there is scope to be more proactive in following up on pending decisions in renewals of working visas.



#### The effectiveness of leaders and managers: good

The home is led by a strong and experienced leadership team that demonstrates a clear understanding of the service and the individual needs of the children. Leaders are committed to continuous improvement and actively seek ways to enhance the quality of care and the experiences of children.

Managers are confident in advocating for children and appropriately challenge placing authorities when decisions appear not to be in children's best interests.

Staff feel positive about working at the home. They report feeling well supported, valued and listened to. Leaders are described as approachable and always available. This contributes to a positive team culture and high morale.

Staff retention is good, with minimal turnover. This provides children with stability and consistency in their care, which supports the development of secure and trusting relationships.

Staff benefit from a comprehensive training programme. Training is tailored to meet the specific needs of individual children and includes learning about specialist approaches. Staff demonstrate a good understanding of the home's model of care and can articulate how this positively impacts children's outcomes.

The manager has implemented effective monitoring systems, including regular observations of staff practice. Feedback is provided to support staff development. However, this could be improved by identifying specific areas for improvement, enabling progress to be tracked over time.

Feedback from families and professionals is positive. They report noticeable improvements in children's physical and emotional well-being and describe staff as being collaborative and professional partners in care planning.



# 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 health and well-being standard is that—	5 September 2025
the health and well-being needs of children are met.	
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. (Regulation 10 (1)(a) (2)(a)(i))	
In particular, ensure that clear records are made when needed of what children drink each day and that this is monitored to ensure they are drinking enough fluids each day as per medical guidance.	

#### Recommendations

- The registered person should ensure that they maintain good employment practice. They must ensure that recruitment of staff safeguards children and minimises potential risks to them. Specifically, they should be proactive in checking staff have a right to work after their current visa has expired. ('Guide to the Children's Homes Regulations, including the quality standards', page 61, paragraph 13.1)
- The registered person should ensure that children are offered a wide range of activities both inside and outside of the home (where appropriate) and are encouraged to participate in those activities. Staff should support children to take part in school trips, out-of-school and other clubs, volunteering and leisure activities. Specifically, opportunities for children to socialise and make friends with others that they do not live with should be encouraged. ('Guide to the Children's Homes Regulations, including the quality standards', page 31, paragraph 6.5)
- The registered person should ensure that staff support children to be aware of and manage their own safety both inside and outside the home to the extent that any good parent would. Staff should help children to understand how to protect

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themselves, feel protected and be protected from significant harm. This specifically relates to testing out learning for those children leaving the home to move to more independent living. ('Guide to the Children's Homes Regulations, including the quality standards', page 43, paragraph 9.9)

## 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:** SC448209

**Provision sub-type:** Residential special school

Registered provider: Amberleigh Care Limited

Registered provider address: Golfa Hall, Golfa, Welshpool, Powys SY21 9AF

Responsible individual: Kevin Gallagher

Registered manager: Simon Roberts

# **Inspectors**

Debbie Bond, Social Care Inspector Nick Bennison, His Majesty's Inspector

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