

2869136

Registered provider: The Beeches UK Limited

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This home is privately run and provides care for one child who experiences social and emotional difficulties and/or has learning disabilities.

The manager registered with Ofsted when the home opened in April 2026.

Inspection dates: 7 and 8 July 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	requires improvement to be good
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The children's home provides effective services that meet the requirements for good.

Date of last inspection: not previously inspected

Overall judgement at last inspection: not applicable

Enforcement action since last inspection: not applicable

Summary of findings

Children are supported by staff who understand their needs and are aware of any risks. There are positive relationships between children and staff. Children take part in enjoyable activities and are supported to maintain relationships with important people in their lives.

There are some concerns about restraint practice not always being proportionate, however, generally incidents are managed well by staff using de-escalation skills. There is management oversight, however, this oversight does not demonstrate sufficient curiosity.

Inspection judgements

Overall experiences and progress of children and young people: good

At the time of this inspection, there was one child living at the home. The child was spoken to. Since the home was registered, one child has moved out and one child has moved in. The child now at the home is positive about the support that they receive from staff and the activities on offer. There are positive relationships between the child and staff.

Staff support the child's emotional wellbeing. Support from external mental health professionals has been sought. The child has suffered recent bereavements and specialist counsellors have been contacted to provide support at the child's pace. The company's therapist provides guidance to the manager about how to best work with the child.

Staff encourage education. The child has improved their engagement with education. The child accesses online learning and staff sit with them to encourage participation. Staff support the child to take part in educational activities during school hours. Staff speak to the child about education and took them to visit a potential school, despite the child initially being reluctant to do this. The strong relationships between the staff and the child supported the child to feel confident enough to visit.

Staff support the child to maintain their social networks. The child has regular contact with family and friends who are important to them. Staff support the child to continue to attend a Scout group which they have attended since they were younger. The child also enjoys regular activities such as go-karting and going for drives. This shows that staff support the child's interests and established support networks.

Key-work sessions have been held with the child about their actions and the impact they have on others. It is accepted by the manager that there have been some concerns about the child's behaviour outside the home. Managers and staff have identified the triggers for the child and are supporting them with these.

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

Staff use de-escalation techniques during incidents which are in line with the model of care used at the home. This means that children are supported to manage their emotions and behaviours in consistent ways. The number of incidents is reducing. The child's social worker said that the child is safe, and their risks and incidents have reduced since living at the home.

Missing-from-home incidents are managed well. The child has not gone missing from this home, despite this being a past risk for them. When missing-from-home incidents have occurred, staff search the local area to try and locate the child. Staff liaise with relevant professionals and family members during the missing episode.

Staff did not seek medical attention when a child took an overdose from their inhaler. The child did not return the inhaler as expected and took extra doses of this medication. The staff used physical restraint to take the inhaler from the child. No medical advice was sought regarding this. The child was reported missing shortly after this incident and the police were informed about the inhaler use. However, the incident record and management oversight do not explain why medical advice was not sought.

Children do not experience lengthy use of physical restraint. When physical restraint or guides are used, it is for the minimum time necessary. However, the records of these physical interventions do not always make it clear whether its use was proportionate and the least restrictive option. In one incident when a child was on the floor, they sat up and then a guide was used. This implies that an unrecognised restraint method was used. This practice was not identified by managers.

When children receive consequences, the manager does not review if the consequence was effective. Therefore, staff could be repeating ineffective actions. It is not always clear how long consequences are in place for. This means it is not possible to fully determine if each consequence is proportionate.

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

The manager knows children well and is clearly proud of their successes and wants the best for them. However, there is a lack of curiosity at times to ensure all incidents are fully explored and learning is identified.

Following a concern being raised about a staff member, a referral to the local authority designated officer was made appropriately. An investigation was undertaken by a manager from the company. However, this investigation lacked curiosity and did not provide clarity about the situation and whether an unrecognised hold had been used. This concern has not been fully explored and addressed.

Management oversight is provided following incidents. However, this oversight does not always fully explore the incident. In one incident, the child left the home and was followed by a staff member. The child's behaviour management plan states the child should always have 2 members of staff with them. The manager did not identify that this plan was not followed. Although the manager did speak to the staff involved about maintaining the correct supervision levels, this is not included in the oversight of the incident.

Managers have not ensured that staff have the relevant training to meet the needs of the children. One child is at risk of exploitation, and the staff have not completed training on exploitation. Staff have not had training on conditions which the children have been diagnosed with, or grief and bereavement training. This means that staff may not have the appropriate knowledge to understand how to best work with the children living at the home.

Some staff have moved from other homes in the company. The manager was not aware that these staff had not had a recent appraisal. The manager does not have access to their previous appraisals. This means that the manager and staff may not know their strengths and areas for development.

Staff spoken to are positive about their roles and said that they feel supported. Supervision sessions take place regularly and include discussions about children and the staff member's wellbeing. Team meetings take place regularly to support the team to work with the child consistently.

A complaint was received by a neighbour about antisocial behaviour. The neighbour raised concerns with the manager, Ofsted and the council. The manager made efforts to explore the concerns and talk to the neighbour. A meeting has been held with the council about the concerns. Managers are proactively requesting police speak to the child about the concerns, to help them understand the seriousness of their actions.

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— ensure that staff have the experience, qualifications and skills to meet the needs of each child; understand the impact that the quality of care provided in the home is having on the progress and experiences of each child and use this understanding to inform the development of the quality of care provided in the home; and use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13 (1)(a)(b) (2)(c)(f)(h)) In particular, ensure that staff have relevant training for children's diagnoses and risks and that leaders and managers are curious when carrying out management oversight and investigations.	21 August 2026
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—	21 August 2026

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 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)(v)(vi)(b)) In particular, ensure staff follow children's risk assessments and seek medical attention when required.	
Restraint in relation to a child must be necessary and proportionate. (Regulation 20 (2)) In particular, ensure that physical intervention is proportionate when it is used and that management oversight explores the proportionality of other less restrictive options.	14 August 2026

Recommendations

- The registered person should ensure that records of consequences used state how long they were in place for and that they are evaluated to ensure they were effective. ('Guide to the Children's Homes Regulations, including the quality standards', page 46, paragraph 9.38)
- The registered person should ensure that all staff have their performance and fitness to carry out their role formally appraised at least once annually. ('Guide to the Children's Homes Regulations, including the quality standards', page 61, paragraph 13.5)

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: 2869136

Provision sub-type: Children's home

Registered provider: The Beeches UK Limited

Registered provider address: SBCH House, 212 Ballards Lane, London N3 2LX

Responsible individual: Jane Twaite

Registered manager: Katie Peters

Inspector

Leanne Lyon, 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
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